Map/Data Request Form

All requests are subject to Emery Co	ounty Commission approval.	
Mail completed request form to:		
	Emery County IT Department P.O. Box 907 Castle Dale, UT 84513	
Or send by fax (435) 381-2614		
Name		
Organization		
Address		
City	State	Zip
Phone	Fax	
Email		

-	Map/Data Request Form						
EMERY				Office Use Only			
COUNTY	Department Approval		Date:				
IT DEPARTMENT	Commission Approval			——— Fee:			
			xisting Map R				
		Descr	iption	equest	Size	QTY	
Name	,		-				
Department/Organization	:						
Date Requested							
Due Date							
	Nev	w Map Requ	lest				
Description:	Ne	w map nequ	1031				
•					Size:	1	
					QTY:		
Reason for map:							
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		k					
		Data Reques	st				
Layer	Name			Format			
	<u> </u>						
Standard Map Sizes (in inches	Mans can be	printed on Plair	n, Glossy, and Clear	media A \$10.00 ch	arge will apply w	hen data is	
8½ x 11 11 x 17 24 x 36		54" map sizes a	re also available.	burned on a	a CD.	on data is	

USER AGREEMENT

,20,	is made between the County of Emery and	
created by the raphical representations of the representation of t	COUNTY in the course of COUNTY sentations and format thereof constitutes an ERY COUNTY and is made available for the use or resale of the information is prohibited sen the USER and the COUNTY. Information is requests for custom programs and	1
y affecting th	ne individuals identified in this informatio	n
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