Mapping / GIS / Records Request

Complete the entire form (two pages) and submit to Facilities Information Services (gisbis@purdue.edu) for approval and processing.

Acceptance of Understanding

Signing this document implies that you have read, understand and agree to the following:

• It is understood that the content may or may not contain sensitive information and discretion will be used.
• The only people authorized to use this information are the requester and any individuals specifically involved with the identified use.
• Any use of this information other than that described above must be approved by the Physical Facilities representatives in writing prior to use.
• This information is not to be circulated to anyone without prior written communication with the appropriate Physical Facilities representatives.
• Upon disposal, data must be destroyed so that it may not be used again.

Request Information

Physical Facilities building, mapping, GIS information and/or archival records are being given to you for the use described below.

The requested information will be used for (list the project, description of work, date range):

________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________

I am requesting the following information/data (list all data needed for this project):

________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________

Deliverables requested (list all formats, sizes, outputs, delivery methods and options being requested):

________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________

Date and time needed by: ________________________________________________

Once the request is reviewed and approved, it can take up to five business days to fulfill the request depending on the detail requested.

Name: ________________________________________________ Phone: (_____) _____.______ FAX: (_____) _____.______

Email: _______________________________________________________________________________________________________

Best time to contact you with questions: ____________________________________________________________________________

Preferred method of contact for any questions (circle all that apply) PHONE EMAIL FAX IN-PERSON

Physical Facilities Authorization Signature: ___________________________ Date Requested: ___ / ___ / ___
(Project Manager, Senior Director, Group Manager or Administration)

Outside of Physical Facilities Use Acceptance Signature: ___________________________ Date Requested: ___ / ___ / ___
(A/E Firm, Contractor, Purdue Faculty, Purdue Staff or Purdue Administration)
Draw box(s) around area(s) of interest (Attach other maps/documents as necessary to describe area in more detail):