

FULTON COUNTY PLANNING DEPARTMENT GPS REQUEST FORM

CONTACT PERSON : _____ DATE: _____

DEPT./ORGANIZATION : _____

ADDRESS : _____

PHONE : _____

FAX : _____

E-MAIL : _____

I. BACKGROUND/PURPOSE: _____

II. DATA/ITEMS TO COLLECT:

<u>Item Type</u>	<u>Information About Data/Items</u>	<u>Digital Image/ Picture of Data/Item</u>
(i.e. Fire Hydrant)	(condition, color, manufacturer)	
1. _____	_____	___ Yes ___ No
2. _____	_____	___ Yes ___ No
3. _____	_____	___ Yes ___ No
4. _____	_____	___ Yes ___ No
5. _____	_____	___ Yes ___ No
6. _____	_____	___ Yes ___ No

III. GIS MAP REQUEST:

Yes ___ No ___

If yes, please fill out attached "Fulton County Planning Department Map Request Form".

For Planning Department Use Only

ESTIMATED # OF HOURS: _____

TOTAL ESTIMATED COST OF DATA COLLECTED (BASED ON \$20/HOUR): _____

Signature Line: _____