

THE CITY OF WALTHAM, MASSACHUSETTS AND REQUESTING PARTY MAP REQUEST FORM

Requestor Information	n:					
Name:		Phone:		Date:	Date:	
Organization/Company:						
Address:						
Data Baguastadi						
Data Requested: Map Type	Area of Interest		Format		Time (for internal use only)	
map Typo	7 11 0 4 01		Tomac		Time (for internal dec city)	
Total Cost:						
Charges are based on a	an hourly	rate of \$40.00.				
Restriction of Liability	/ :					
liability or responsibilit Information System dat and have no legal bear feature, property line, of this information be acc	ty for the a providering on e correction on the correction of the	ne accuracy, co ed herein. The da either the true sh al representation d by a reference epresentations a	mpleteness, or ata do not take ape, size, locat . The City of Verto its source a	r usefulne the place tion, or ex Valtham re and the C	d, nor assume any legal ess of the Geographic of a professional survey istence of a geographic equests that any use of ity of Waltham's caveat information. Any use of	
Signature				of Waltha internal us	m Representative se only)	
Print Name						

Please return the completed form to: Eric Rizzo, GIS Administrator, IT Department 21 Lexington Street Waltham, MA 02452 Phone: (781)314-3006

Fax: (781) 314-3535