GIS MAP REQUEST FORM



To aid our staff in processing your request please complete the form below in its entirety. A minimum of 7 business days is required for all requests. Attach any map that is similar to your request and any spreadsheets to be used in the production of your map. Visit MAP GALLERY at https://www.fresno.gov/darm/planning-development/maps/ for downloadable pdf maps.

(Please I	Print Name)	Map Title:	
•			
Date of Request:		Map Size:	
Request Due:		\ J1	es are 8.5" x 11", 11" x 17", 20" x 6", 30" x 42", and 36" x 48")
(Minimum of 7 bus	iness days from date of request)	, -	· ,· · · , · · · · · · ,
Purpose of Map (Describe the	e manner in which the map	will be used):	
-			
Map Content (Describe in de	tail what you want to see on	the map and the geogr	aphic boundary):
<u>-</u>			
Data Layers (Select from the	list below the data layers yo	ou want on the map):	
☐ Address Numbers	☐ City Limits	☐ Major Street Nam	es
☐ Aerial Photo	Code Enforcement	☐ Parcels	☐ Streets
☐ CDGB Eligibility Tracts	Inspection Areas	☐ Parks	☐ State Routes
☐ Census Block Group	Council Districts	☐ Planning Boundar	y
☐ Census Tracts	☐ Development Areas	☐ Planned Land Use	e Zip Codes
☐ Circulation Element	☐ Existing Land Use	☐ Rail Roads	☐ Zoning
☐ City Annexations	☐ Housing Target Areas	☐ Schools	Other
Other Data Layers (Describe	other layers if you selected	"Other" above. A list of	of other available data
layers can be found at https://w	ww.fresno.gov/darm/planni	ngdevelopment/maps/)	:
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	FOR INTERNA	L USE ONLY	
Request Assigned to:		Date Assigned:	
Project Number:		Date Completed:	