



**Washington State
Department of Transportation**

GeoMetrix Survey and Mapping
1655 South 2nd Avenue
Tumwater, WA 98504-7384
(360) 709-5533

Request for Geographic Services

Invoice Number _____

Date Request Received _____

Region Order Number _____

Project Title			Region/Agency	
State Route	Control Section	Mile Post From:	To:	
Ordered By	Title		Phone Number	
For Project Information, Contact			Phone Number	

Work Order		Work Operation	Control Section	Organization Code
Project	Group			

Photography Scale: _____

New (Requires DOT Form 350-148) Old - Use existing photography Request Planning Assistance

Field Control

Horizontal & Vertical Control Furnished By: Region GeoMetrix Survey and Mapping (Survey)

Photo Premarking & Control Furnished By: _____ Region GeoMetrix Survey and Mapping (Survey)

State Plane Coordinates: State Plane No. State Plane So. Horizontal datum _____ Vertical datum _____

Establish GPS Monumentation Yes No Data Accuracy Specifications: _____

Comments _____

Data Collection

In Metric U.S. Survey Feet Data Accuracy Specifications: _____

For Digital Ortho Photo (DTM only) Planimetry Topography (For Contours, X-Section, Area Volume)

Data Collection Limits (Show on one of the following)

Photo Map U.S.G.S. Quad R/W Plan Other _____

Distance Left _____ Right _____ of Centerline

Other _____

Features to be Collected: (Subject to limitations of visibility at photo scale. For further information/assistance contact GeoMetrix Survey and Mapping)

Collect all natural, man made, and digital elevation data in area to be mapped.

Selective data collection. Specify: _____

Products

CADD File Ortho Photo Other _____

Output Data To: Server CD ROM DVD Other _____

Special Instructions (or contact GeoMetrix Survey and Mapping)

Other Services Requested