

Service Request Form

(Please return completed request forms to Aida Angelescu via email – aangelescu@ph.lacounty.gov – or fax)

To ensure the timely processing of your request, please fill out every item in this form (enter “N/A” for items that are not applicable). For instructions in completing this form, please see page 2.

Requestor Information

1. **Name:** _____
2. **Job Title:** _____
3. **Program/Office or Agency/Institution:** _____
4. **Address:** _____
5. **Telephone:** _____
6. **Fax:** _____
7. **Email Address:** _____
8. **Supervisor/Advisor:** _____
 - a. **Job Title:** _____
 - b. **Telephone:** _____
 - c. **Email Address:** _____

Requested Service Details

9. **Intended Purpose of Request:** _____
10. **Service(s) Requested:** _____
11. **Map(s) Title:** _____
12. **Geographic Area:** _____
13. **Features to Include:** _____
14. **Health/Demographic Data to Add:** _____
15. **File Type(s):** _____
16. **Product Dimensions:** _____

Timeframe

Please allow for a minimum **turnaround time of 2 weeks**. Time needed may vary depending on the nature and complexity of the request.

17. **Request Date:** _____
18. **Needed By:** _____
19. **Rush Request Justification:**
(if needed sooner than 2 weeks) _____

By checking this box and initialing the field below, I have read the attached terms and conditions of use. The product provided to me will not be sold, released, or used for any purpose other than what I have stated on this form.

Initial: _____

Instructions for Completing Request Form:

- Item 1-2.** Enter your full name and job title. Enter “student” in Item 2 if your request is for a class/research project.
- Item 3.** If employed by the County of Los Angeles, enter the name of your office or program. If employed by an agency or institute other than the County of Los Angeles, enter the name of your employer. If a student, enter the name of the school, college, or university you attend.
- Item 4-7.** Enter your contact information for us to communicate with you during the service request process.
- Item 8.** Enter your supervisor, advisor, or teacher’s name and his/her work contact information (Items 8 a-c).
- Item 9.** Enter the purpose of your GIS service request and how the product we provide will be used.
- Item 10** Enter the particular GIS service you would like for us to provide. The Epidemiology Unit provides the following GIS services:
- a) address locating (geocoding)
 - b) mapping of public health data* for public health investigation, research, policy, education, or strategic planning purposes
- Item 11.** Enter the title name(s) to be displayed on your requested thematic map(s), if applicable.
- Item 12.** Enter the geographic area of interest for your requested thematic map or geocoding services. The types of geographies available for request include: Los Angeles County, Service Planning Area (SPA), Health District (HD), Supervisorial District, and City/Community (2000 Census-Based). For example, if you want a map of childhood obesity prevalence in Los Angeles County, you would write “Los Angeles County” in Item 12.
- Item 13.** Enter the features to be included in your requested thematic map such as political boundaries (e.g. SPA, HD, Supervisorial District, or City/Community boundaries), major freeways, institutions (e.g. hospitals, schools), elevation relief, etc. For example, for a map of childhood obesity prevalence in Los Angeles County, you would write “SPA” in Item 13 if you would like SPA boundaries displayed on your map.
- Item 14.** Enter the type of health or demographic data and the geographic aggregation to be displayed on your requested thematic map. For example, if you want childhood obesity prevalence by health district to be displayed on your map of Los Angeles County, you would write “Childhood Obesity Prevalence – HD” in Item 14.
- Item 15.** Enter the file type you want us to provide for your request. We provide GIS service products in electronic (PDF or JPEG) and/or paper format.
- Item 16.** Enter the size or dimensions for your requested product. If you request the following file types:
- a) electronic format (JPEG) – enter the resolution
 - b) paper format – enter the dimensions (e.g. 8.5” x 11”) and map orientation (landscape or portrait)
- Item 17.** Enter the date you will email or fax your completed request form.
- Item 18.** Enter the latest possible date for us to provide you the requested GIS service product.
- Item 19.** Enter justification only if you urgently need the requested GIS service product sooner than 2 weeks.

* The Epidemiology Unit maintains only a portion of the public health data governed by the Los Angeles County Department of Public Health. For data outside public health, we recommend you contact the respective agency responsible for the information of interest. If you do not have public health data and agreement with the responsible agency/program that maintains the data, please attempt to do so before submitting this request. In some instances, we may be able to assist, especially if the program is within the Department of Public Health or the County of Los Angeles. Do keep in mind that acquiring data and agreement from the respective agency/program takes additional time. We make no guarantees of successful acquisition of data and agreement, should our assistance be requested.

Terms and Conditions of Use

By using these data, you signify your agreement to comply with the following requirements:

- 1) I agree not to sell, assign, release or otherwise transfer the products, files, or any portion thereof
- 2) I agree not to attempt to learn the identity of any person included in the data or maps, and will not combine this data with other data for the purpose of matching records to identify individuals
- 3) I acknowledge that the supplied Geographic Information Systems (GIS) data and/or product is a current and true copy, and a matter of public record. The supplied data, maps, or information derived therefrom is provided "as is" without warranty of any kind, either express or implied, including, but not limited to, the implied warranties of merchantability, fitness for a particular purpose, or non-infringement of intellectual property. The County makes no representations or warranties about the accuracy, reliability, completeness or timeliness of the supplied GIS data or product. In no event shall the County nor its agents, officers, employees or representatives be liable for any direct, indirect, incidental, special, exemplary, or consequential damages (including, but not limited to, procurement of substitute goods or services, loss of use, data, or profits, or business interruption) however caused and on any theory of liability, whether in contract, strict liability, or tort (including negligence or otherwise) arising in any way or form out of the use of the supplied GIS data, or information derived therefrom, even if advised of the possibility of such damage. These limitations will apply notwithstanding the failure of any essential purpose of any limited remedy.