Rev. September 22, 2015

JOB NO:

SURVEY REQUEST

(Must Submit Form in Color)

Date: **EA No.:**

Project Name:

County : SCL **Route:** **PM** **To**

TO: **Survey Dispatch Coordinator**

Project #/Phase

☐ **Surveys Attn:** **Thomas Finnegan (286-4953)** **Sub Object / Activity / Sub Activity:**

☐ **Photogrammetry Attn:** **Juan Barahona (286-4952)**

Survey Group 0770 must be funded before we can commence any Survey work.

District Priority: **ASC Mapping # :**

Surveys Due Date (by requester)**:** **Milestone Date:**

Data Provided To Surveys:

☐ R/W Map ☐ As Builts ☐ Alignment Traverse ☐ Typical X-Sect ☐ .csv file

☐ Control: ☐ Photos ☐ Vicinity Map ☐ .TSS File ☐ Record Maps

Purpose of Project:

Survey Requirements: (attach separate sheet if necessary)

Limits of Work: (attach separate sheet if necessaary)

Do you want this job merged with an existing survey, if so, which?

Survey Deliverables: ☐ Civil 3D ☐ Microstation

KNOWN HAZARDOUS MATERIALS: ☐ **Yes** ☐ No

If Yes, provide documentation

Environmental Engineer approval by:

Requester/Contact Person Phone No.

Project Engineer Phone No.

Branch:

Senior Engineer Phone No.

Senior Engineer Signature

Hydraulics Dept approval by: Phone No.

Project Manager: Phone No.

UNITS: ☐ US SURVEY FT ☐ METRIC

DATUM:

HORIZONTAL	**VERTICAL**	**EPOCH**
☐ NAD 83	☐ NAVD 88	☐ 1991.35
☐ NAD 27	☐ NGVD 29	☐ 2010.00
☐ LOCAL	☐ LOCAL	☐ 2014.55
		☐ Other

Zone:

Field Office :

Survey Area Supervisor Signature Date

Request will not be accepted without original color copy, sufficient data to complete survey, and required signatures