



# WESTPORT, CONNECTICUT

Department of Public Works

## TOWN OF WESTPORT MAP REQUEST FORM

Date:

Name:

Address:

City/Town:

State:

Zip:

E-mail address:

Department:

Specify Request, including street address of property:

Request Deadline:

Urgent?

No. of Copies:

The Town of Westport will not be held accountable for the information depicted on your map. In the event a survey is needed the requested map is not considered to have the "Accuracy of a Class A-2 survey" and therefore should not be substituted for a survey. If you are not affiliated with the town (as an employee) and your map request becomes tedious and requires time to complete, your "Map Request" will be upgraded to a "Project Request" and at such time you will be asked to reimburse the town for the time and resources spent on the aforementioned task.