TULALIP DATA SERVICES – GIS
Phone: (360)716-5157 • Fax: (360) 651-3107 • Email: gis@tulliptribes-nsn.gov
7411 Tulalip Bay Dr, Tulalip, WA 98271

PROJECT REQUEST FORM

Request Date: _____

1. Applicant Information:

   First Name _____ Last Name_____

   Organization Name _____

   Department _____

   Phone Number _____ Fax Number _____

   E-mail _____

2. Description of project:

   _____

   _____

   _____

   _____

   _____

   _____

   _____

3. Expected deliverables: _____

   _____

   _____

   _____

   _____

   _____

4. Expected deadline: _____

Signature _____ Requested Date _____

*Please do not write anything in the box below. TDS Use only

Project release request is: _____ Approved _____ Not Approved

Reason (if not approved): _____

_____

_____

_____

TDS manager who authorized the project:

Name _____ Position _____

Signature _____ Date _____

Notification method of project status

- o By email
- o By letter
- o By phone

Date notified: _____ Notified by: _____
(Print name)

Priority (circle one): High Medium Low

Delegated group(s):

Note: