Rockingham County Map Request Form

Use this form to request standard maps. Please allow 4-6 full working days for map requests.

Name of Requester:	Date Submitted:
Phone# of Requester:	Email:
Address:	City:
State:	
Area of Interest/Description (PIN or parcel number, address, street)	
Map Features Available (Check feature desired)	
□Roads □Address Points □Ponds/Creeks □Property/Parcel Lines □Aerial Photography	
□Contour Lines (2, 4, 10, 20, 100) □City Limits □County Boundary □Zoning Districts	
□Soil Types □Tax Fire Districts □ETJ □Building Footprints	
Map Size	
$\Box 11x17 = \$4$ $\Box 24x18 = \$10$ $\Box 24x36 = \$15$ $\Box 36x48 = \$40$	
Payment Method (Payment in advance is required) Indicate if you would like the map mailed to you or i ☐ Mailed ☐ Pick up	f you will pick up in person)

- CHECK made out to "Rockingham County GIS Dept"
- CASH