



Change Request

Form 4: Municipal Attestation

An ordinance or resolution from the municipality can be used in lieu of this form

As per the BCGIS map, with Map ID: _____ the municipality attests the following: *(Mark 'N/A' if no mapping changes required)*

If no mapping changes occurred only condition one applies

1. The requested change has been reviewed with all **the primary and secondary Emergency Response Agencies affected.**
2. The map reflects **authoritative, real-world emergency service areas.**

Authorized by the following Municipal Officials *(use as many as needed)*

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

Name / Title: _____

Signature: _____ Date: _____

*Submit this page and any related ordinance or Resolutions to:
BCGIS and BCDES for implementation*