



Request for data from the Irish National Seabed Survey

Name _____
Affiliation _____
Address _____

Contact details:

Phone _____ Mobile _____
Fax _____ e-mail _____

Please tick

Research

Commercial

If research complete this section

Title of Research _____

Name of Supervisor _____

Description of Research (Maximum 300 words, please attach description to this form)

Time Frame for completion of study _____

Data required:

Area (please give coordinates and attach a map)

Please tick which zone the data is required from

Zone 1 Zone 2 Zone 3
Water depth <50m 50-200m >200m

Data format required _____

Data type

Bathymetric Backscatter Gravity Magnetics

Subbottom data Other

If Other please specify _____

Product to be completed _____

Signature of Applicant

Signature of Supervisor (for research)

Date: _____

Date: _____

Note: There is a fee of €50 for the first hour and €67 for each additional hour required to collate data. A digital agreement will have to be signed prior to the release of any data.