

**Data Request Form**

Please return completed forms to the Epidemiology Unit via email – [epi@ph.lacounty.gov](mailto:epi@ph.lacounty.gov) – or fax (attention to Dr. Alex Ho)

Please **fill out every item in this form** (enter “N/A” for items that are not applicable).

Incomplete forms may result in delays in processing your request. For instructions in completing this form, please refer to page 2. \* Indicates required field.

**REQUESTOR INFORMATION**

1. **Name: \*** \_\_\_\_\_ 2. **Job Title: \*** \_\_\_\_\_

3. **Office or Organization: \*** \_\_\_\_\_

4. **Address: \*** \_\_\_\_\_

5. **Telephone: \*** \_\_\_\_\_ 6. **Email: \*** \_\_\_\_\_

7. **Supervisor/Advisor: \*** \_\_\_\_\_

**DATA REQUEST DETAILS**

8. **Intended Use: \*** \_\_\_\_\_

9. **Data Type: \*** \_\_\_\_\_

10. **Request Details: \*** \_\_\_\_\_

11. **Time Period: \*** \_\_\_\_\_ 12. **File Type: \*** \_\_\_\_\_

**TIMEFRAME FOR REQUEST**

Please allow for a **minimum turnaround time of 2 weeks**.

Time needed to complete request may vary depending on the nature and complexity of the request.

13. **Request Date: \*** \_\_\_\_\_ 14. **Needed By: \*** \_\_\_\_\_

15. **Rush Request**  
**Justification** (required if  
sooner than 2 weeks) \_\_\_\_\_

\* By checking this box and initialing the field below, I have read the attached terms and conditions of use. The product provided to me will not be sold, released, or used for any purposes other than what I have stated on this form.

Initial: \*

### Instructions for Completing this Request Form:

- Item 1-2.** Enter your full name and job title. Enter “student” if your request is for a class/research project.
- Item 3.** For County of Los Angeles employee, enter the name of your office or program. If employed by an organization other than the County of Los Angeles, enter the name of your employer. If a student, enter the name of the school, college, or university you attend.
- Item 4-6.** Enter the contact information you would like for us to communicate with during the request process.
- Item 7.** Enter your supervisor, advisor, or teacher’s name.
- Item 8.** Enter the purpose of your data request and how the data we provide will be used.
- Item 9.** Select the particular type data you would like for us to provide (e.g. population estimates).
- Item 10.** Enter the demographic and geographic categories to include in your data request. The types of categories available for request include: gender, race/ethnicity, age group, Los Angeles County, Service Planning Area (SPA), Health District (HD), or City/Community (2010 Census-based). Availability of data categories varies among public health datasets.
- Item 11.** Select or enter the year(s) of data you would like to request. Select “most current” for the most current data available.
- Item 12.** Select the file type you want us to provide for your request. We generally provide data products in electronic format (PDF or Excel).
- Item 13.** Enter the date you will email or fax your completed request form.
- Item 14.** Enter the latest possible date for us to provide you the requested data.
- Item 15.** Enter justification only if you urgently need the requested data sooner than 2 weeks.

### TERMS AND CONDITIONS OF USE

By using these data, you signify your agreement to comply with the following requirements:

- 1) I agree not to sell, assign, release, or otherwise transfer the files, or any portion thereof.
- 2) I acknowledge that the County of Los Angeles assumes no responsibility for conclusions drawn from any analysis of the data that is provided to the applicant.
- 3) I acknowledge that the supplied data, or information derived therefrom, is provided “as is” without warranty of any kind, either express or implied, including, but not limited to, the implied warranties of merchantability, fitness for a particular purpose, or non-infringement of intellectual property. The County of Los Angeles makes no representations or warranties about the accuracy, reliability, completeness or timeliness of the supplied data or product. In no event shall the County be held liable for damages arising from errors, omissions, or use of this information.
- 4) I acknowledge, in all reports or presentations based on these data, the original source of the data and the Office of Health Assessment and Epidemiology.