

**WAUPACA COUNTY INFORMATION SYSTEMS
SUBSCRIPTION ACCESS SYSTEM
TERMS OF USE AGREEMENT**

This agreement made and entered into this _____ day of _____, in the year _____, by and between the Waupaca County Information Systems and _____ (“firm”),
phone number _____, fax number _____, and street address _____.
Email address _____.

1. Waupaca County Information Systems agrees to furnish online access to geographic and land information and services through the Waupaca County Information Systems land information web site. The information* and services available at this site come from a variety of data custodians and county offices and are made available only by subscription.

2. The information is not to be construed as true and complete. It is a representation of the public record or county databases and information systems, and is subject to error, omission and future modification or enhancements. Firm shall receive notice of computer problems that may affect access to this web site in a timely manner

3. The firm agrees to maintain the confidentiality of personally identifiable information found on this site. Specifically, names of persons or property owner names may not be re-distributed, republished or disclosed to non-users of the site.

4. The firm agrees to refrain from selling copies of this information. Copies of individual reports or documents may be provided to certain agency customers if such copies are used in the course of the firm’s normal business and if the source of the information is provided to the recipient (either verbally or in writing). Any such copy must protect the confidentiality of individuals mentioned in the information copied unless the copy is for the person identified in the record as verified through a photo ID. Waupaca County remains the custodian of all records contained on the system and any open records requests for such information must be referred to Waupaca County.

*Information means and data or information contained on this site, including but not limited to data, maps, images and reports.

FIRM CONTACTS:

Please provide the names, phone and fax numbers, and email addresses for two staff persons who will serve as a point of contact.

FIRM:	_____
NAME:	_____
PHONE:	_____
FAX:	_____
EMAIL:	_____

SYSTEM USERS:

Please provide the names of any additional staff who will use the Waupaca County Information Systems land information web site.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

To be completed by Waupaca County

FIRM LOG-IN:

ASSIGNED BY/DATE:

BILLING BY/DATE: