

Order form 0.6 m black & white

Cartosat-2S PAN data

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GAF Geospatial GmbH
Branch Neustrelitz
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Germany
Phone: +49 3981 4883-977
Fax: +49 3981 4883-920
E-mail: data@gaf.de
www.gaf.de

Billing Address

Contact person	_____
Organisation ¹	_____
Street	_____
Postal code / City	_____
Country	_____
Phone	_____
Fax	_____
E-mail	_____
VAT no.	_____
Your order reference	_____
GAF reference	_____

Shipping Address (☐ same as billing address)

Contact person	_____
Organisation ¹	_____
Street	_____
Postal code / City	_____
Country	_____
Phone	_____
Fax	_____
E-mail	_____

End User's Address (☐ same as billing address)

Contact person	_____
Organisation ¹	_____
Street	_____
Postal code / City	_____
Country	_____
Phone	_____
Fax	_____
E-mail	_____

¹ Please indicate legal name in your national language, including form of organisation.

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Your order reference: _____

Product Type

System corrected	Map projection:	Universal Transverse Mercator WGS 84
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Format:	GeoTIFF + RPC (Ortho Kit)
Resampling method:	Cubic Convolution Nearest Neighbour

Ortho corrected ²	Map projection:	Universal Transverse Mercator WGS 84
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Format:	GeoTIFF
Resampling method:	Cubic Convolution Nearest Neighbour

Shipment

FTP, with zip compression

² If unavailable, customer has to supply ground control information and DEM in suitable quality.

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Scene Definition

Scene	Acquisition Date (yyyy-mm-dd)	Target point or rectangle (lat/lon in DD or name of shapefile ³)

Remarks

End User License Agreement

The end user accepts the GAF End User License Agreement:

Single User License

(https://euro-maps.gaf.de/wp-content/uploads/GAF_EULA_single_user_EN_v1.5_20260702.pdf)

Multi User License

(https://euro-maps.gaf.de/wp-content/uploads/GAF_EULA_multi_user_EN_v1.5_20260702.pdf)

(Signature)

³ Please send (compressed) ESRI shapefile(s) to data@gaf.de.