

EXHIBIT B

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME High School

DATE 5/17/13

DATE OF LAST SOIL TEST _____

FIELD PH _____

OTHER SOIL TEST RECOMMENDATIONS _____

SITE CONDITIONS:

Soil Type Field Compaction: Yes ___ No ___
 Drainage: Dry X Often Wet (W) ___ Low Spots (L) ___
 Light: All Sun X Some Shade (S) ___ Trees Present (T) ___

IRRIGATION:

Yes ___ No X
 If Yes, Type of Irrigation System _____
 Frequency _____ Duration per Application _____
 Amount/Application _____ Time of Day of Application _____

VISUAL CHARACTERISTICS OF TURF

Color (C)	<u>Good</u>	Fair	Poor
Density	Low	<u>High</u>	Combination
Smoothness (SM)	<u>Good</u>	Poor	
Turf Surface (TS)	<u>Smooth</u>	Clumps	Combination
Holes/Divots (H)	None	<u>Few</u>	Many
Bare Areas (B)	None	<u>Few</u>	Many

POA yellow

PESTS DICOT WEEDS

Dandelions (DL)	None	<u>Few</u>	Many
Plantain (PL)	None	<u>Few</u>	Many
Clover (CL)	None	<u>Few</u>	Many
Knotweed (KN)	None	Few	Many
Other (O)			Many

Identify "Others" by name if possible _____

Weedgrass (WD): None ___ Some ___ Many ___ Crabgrass, Witchgrass, Barnyard Grass, etc.

Insects (I) _____

Disease _____

Comments (Field Problems) I field could use boost