

THIS PAGE MUST BE INCLUDED WITH ANY ALTERNATE PROPOSAL(S) NOTED CLEARLY

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME M.S.

DATE 9/25/12

DATE OF LAST SOIL TEST _____

FIELD PH _____

OTHER SOIL TEST RECOMMENDATIONS _____

SITE CONDITIONS:

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

IRRIGATION:

Yes No _____
If Yes, Type of Irrigation System _____
Frequency 1x Duration per Application 30
Amount/Application 1/2" Time of Day of Application PM

VISUAL CHARACTERISTICS OF TURF

Color (C)	Good <u>4</u>	Fair	Poor
Density	Low	High	<u>Combination</u>
Smoothness (SM)	Good <u>0</u>	Poor	
Turf Surface (TS)	Smooth	Clumps	<u>Combination</u>
Holes/Divots (H)	None	<u>Few</u>	Many
Bare Areas (B)	None	<u>Few</u>	Many

Good density

PESTS DICOT WEEDS

Dandelions (DL)	None	<u>Few</u>	Many
Plantain (PL)	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.

Clover: None _____ Some Many _____

Insects (I) _____

Disease _____

Recommended Remedial Actions and Timing _____

Comments Grubs have stopped feeding, but some still alive after Dylox treatment. Grass is re-rooting. Aerated + over seed today