

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

**TURF MANAGEMENT SCOUTING REPORT**

FIELD NAME MS

DATE 9/26/14

DATE OF LAST SOIL TEST \_\_\_\_\_

FIELD PH \_\_\_\_\_

OTHER SOIL TEST RECOMMENDATIONS \_\_\_\_\_

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

IRRIGATION: Yes X No \_\_\_  
If Yes, Type of Irrigation System \_\_\_\_\_  
Frequency 2x Duration per Application 30 min  
Amount/Application 1/2" Time of Day of Application PM

**VISUAL CHARACTERISTICS OF TURF**

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

**PESTS DICOT WEEDS**

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

Identify "Others" by name if possible \_\_\_\_\_

Weedgrass (WD): None \_\_\_ Some (X) Many \_\_\_ (X) Crabgrass, Witchgrass, Barnyard Grass, etc.  
Clover: None \_\_\_ Some \_\_\_ Many \_\_\_

Insects (I) \_\_\_\_\_

Disease \_\_\_\_\_

Recommended Remedial Actions and Timing

\_\_\_\_\_

Comments Crabgrass dying. Will be seed it from seed & Aerify.