

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

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME Black Point

DATE 6/20/13

DATE OF LAST SOIL TEST _____

FIELD PH _____

OTHER SOIL TEST RECOMMENDATIONS

SITE CONDITIONS:

Soil Type Field Compaction: Yes No _____
Drainage: Yes 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 2x Duration per Application 30
Amount/Application 1/2 in Time of Day of Application ft

VISUAL CHARACTERISTICS OF TURF

Color (C)	Good <u>0</u>	Fair <u>1</u>	Poor
Density	Low	High <u>1</u>	Combination
Smoothness (SM)	Good <u>0</u>	Poor	
Turf Surface (TS)	Smooth	Clumps <u>0</u>	Combination
Holes/Divots (H)	None	Few <u>0</u>	Many
Bare Areas (B)	None	Few <u>0</u>	Many

PESTS DICOT WEEDS

Dandelions (DL)	None <u>0</u>	Few	Many
Plantain (PL)	None <u>0</u>	Few	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 0 _____ Many _____

Insects (I) _____

Disease _____

Recommended Remedial Actions and Timing

Comments Continues to improve. Goals Good.