

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

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME Black Point **DATE** 10/31/14
DATE OF LAST SOIL TEST _____ **FIELD PH** _____
OTHER SOIL TEST RECOMMENDATIONS _____

SITE CONDITIONS: Soil Type Field 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 _____ Duration per Application _____
 Amount/Application _____ Time of Day of Application _____

VISUAL CHARACTERISTICS OF TURF

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

PESTS DICOT WEEDS

| | | | |
|------------------------|------|-----|------|
| Dandelions (DL) | None | Few | Many |
| Plantain (PL) | None | 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 Many ___

Insects (I) _____

Disease _____

Recommended Remedial Actions and Timing _____

Comments Looks good. Field continues to improve.
Some wear from football.