

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

**TURF MANAGEMENT SCOUTING REPORT**

**FIELD NAME** Black Point

**DATE** 5/2/14

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

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

**OTHER SOIL TEST RECOMMENDATIONS**

**SITE CONDITIONS:**

Soil Type Atlatz      Compaction: Yes X No \_\_\_\_\_  
Drainage: Dry \_\_\_\_\_ 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	<u>Fair</u>	Poor
<b>Density</b>	Low	<u>High</u>	Combination
<b>Smoothness (SM)</b>	<u>Good</u>	Poor	
<b>Turf Surface (TS)</b>	Smooth	Clumps	Combination
<b>Holes/Divots (H)</b>	<u>None</u>	Few	Many
<b>Bare Areas (B)</b>	<u>None</u>	Few	Many

**PESTS DICOT WEEDS**

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