

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

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME Wentworth

DATE 7/20/15

DATE OF LAST SOIL TEST _____

FIELD PH _____

OTHER SOIL TEST RECOMMENDATIONS

SITE CONDITIONS:

Soil Type Field Compaction: Yes ~~X~~ No X
 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
 Amount/Application 1/2" Time of Day of Application PM

VISUAL CHARACTERISTICS OF TURF

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

PESTS DICOT WEEDS

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

Identify "Others" by name if possible _____

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

Insects (I) _____

Disease _____

Recommended Remedial Actions and Timing

Comments

Torn up from aerifier