



LANDSCAPE ASSESSMENT DISTRICT INSPECTION CHECKLIST

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LOCATION/DIST #: <i>#44 AMERICAN PACIFIC HOMES</i>	DATE: <i>6-1-16</i>
	FOLLOWUP DATE:
Contractor: <i>KAMERO LANDSCAPING</i>	Inspector: <i>W. SMITH</i>
	Contractor Representative:

CHECK ISSUE(S) IF UNSATISFACTORY, NOTE LOCATION, NUMBER IF MULTIPLE AND NOTE BELOW, AND ANY HISTORY OF NON-COMPLIANCE. WRITE "NA" WHERE APPLICABLE. INDICATE "OK" ON FOLLOWUP.

	LOCATION(S):	HISTORY:	FOLLOWUP/STATUS:
IRRIGATION:			
<u>BREAKS/LEAKS</u>			
<u>POOR COVERAGE</u>			
<u>TOO WET</u>			
<u>TOO DRY</u>			
WEEDS:			
<u>PLANTERS</u>			
<u>MEDIANS</u>			
<u>TURF</u>	<i>BROADLEAF</i>		<i>ONGOING</i>
<u>HARDSCAPE</u>			
SHRUBERY:			
<u>HEDGE TRIM/SHAPE</u>			
<u>DEAD MATERIAL</u>	<i>ON MEDIAN</i>		
<u>POOR HEALTH</u>			
IVY:			
<u>TRIM</u>			
<u>POOR HEALTH</u>			
<u>DETACHMENT</u>			
TREES:			
<u>PRUNING</u>			
<u>POOR HEALTH/DEAD</u>			
<u>STAKES</u>			
TURF:			
<u>MOW/EDGE</u>			
<u>POOR HEALTH</u>			
<u>OTHER</u>			

LANDSCAPE ASSESSMENT DISTRICT INSPECTION CHECKLIST

LOCATION/DIST: <i>441 AMERICAN PACIFIC BLVD</i>	DATE: <i>6-1-16</i>
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LOCATION(S): _____ HISTORY: _____ FOLLOWUP/STATUS: _____

GROUND COVER/PLANT BEDS:

- OVERGROWN
- DEAD MATERIAL *ON MEDIAN*
- POOR HEALTH

PEST(S):

- GOPHERS *MULTIPLE*
- INSECT
- OTHER

RESTROOM(S):

- NOT CLEANED *NA*
- FAULTY PLUMBING
- FAULTY LIGHTING

WALKWAYS/PATHS:

- OBSTRUCTION/TRIP
- FIBER COVERAGE
- DOG BAGS
- FOUNTAINS
- EXERCISE STATIONS
- FAULTY LIGHTING

VANDALISM:

- GRAFFITI *ON SIDEWALK*
- DAMAGED/MISSING ITEMS
- TRASH *ON MEDIAN*
- EXCESSIVE LEAF LITTER
- UNLISTED HAZARD/ITEM
- OTHER

INSPECTOR'S SIGNATURE: <i>[Signature]</i>	DATE: <i>6-1-16</i>	I HAVE ATTENDED THIS INSPECTION WALKTHROUGH. CONTRACTOR/CONTRACTOR REPRESENTATIVE'S SIGNATURE: <i>[Signature]</i>
REVIEW ADMINISTRATOR'S SIGNATURE:	DATE:	