## LANDSCAPE ASSESSMENT DISTRICT INSPECTION CHECKLIST



LOCATION/ DISTRICT NUMBER:	DATE: 12-13-16				
#44 AMERICAN PACIFIC Ham	FOLLOW UP DATE: /-(8-17				
CONTRACTOR:	INSPECTOR: W SMITTS				
KAUEKO LANDSCAPING	CONTRACTOR REP: 760M6RE2				
CHECK ISSUE(S) IF UNSATISFACTORY, NOTE LOCATION, NUMBER I APPLICABLE. INDICATE "OK" ON FOLLOWUP.	F MULTIPLE AND NOTE BELOW, AND ANY HISTORY OF NON-COMPLIANCE. WRITE"NA" WHERE				
Locations	<u>History</u> <u>Follow-up/Status</u>				
IRRIGATION:					
Breaks/Leaks					
Poor Coverage					
Too Wet					
Too Dry					
WEEDS:					
Planters					
Medians					
Turf					
Hardscapes					
SHRUBBERY:					
Hedge Trim/Shape					
Dead Material					
Poor Health					
IVY:					
Trim					
Poor Health					
Detachment					
TREES:					
Pruning					
Poor Health/Dead					
Stalks					

LOCATION/DISTRICT NUMBER:	DATE:
# 44 AMERICAN PACIFIC HOMES	12-13-16

	Locatio	<u>ons</u>		<u>History</u>		Follow-up/Status
GROUND COVER/ PLANT BEDS:		All the state of t				
Overgrown						
Dead						
Poor Health						
PESTS:					c (11 (2'(11)) )	6
Gopher				VATE - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
Insect						
Other						
RESTROOMS: 1//3						
Not Clean						
Faulty Plumbing						
Faulty Electrical						
WALKWAYS/PATHS:	-					
Obstruction/Trip						
Fiber Coverage						
Dog Bags					11 70	
Fountains						
Exercise Stations						
Faulty Lighting						
			1			
VANDALISM:						
Graffiti						
Missing/Damaged items						
MISC:						
Trash	Prof. \$195,000 person 20 person — \$1960/00		toy of All-synakoria desiration is essenti			
Excessive Leaf Litter						
Hazardous Item						
Other						
Turf Fertilizer Due (6x Pe	r Yr)	October Aearification Due				May Aerification Due
Spring Broad Leaf Turf		Fall Broad Leaf Turf Pesticide			October Dethatch Due	
Pesticide Application Due	9	Application			7	
Shrub & Ground Cover		Palm Fertili:	zer Due (3	3x Per Yr)		
Fertilizers Due (3x Per Yr						
INICRECTORS CLONIATION	1					
INSPECTORS SIGNATURE:	16	DATE:	3-16	I HAVE AT	ENDED	THIS INSPECTION WALKTHROUGH
REVIEW ADMINISTRATORS SIGNATURE: DATE: CONTRACTOR/REPRESENTATIVE SIGNATURE:						PRESENTATIVE SIGNATURE: