



PROPERTY AUDIT

Property Name: _____ Date: _____
 Audit Conducted by: _____ Time: _____

1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Outstanding

1	2	3	4	5		Notes:
					Turf Condition	
						Dense and thick- no thin or bare areas
						Relatively weed-free
						Uniform, dark green color
						Winter damaged turf repaired
						No apparent insect or disease problems
					Mowing Quality	
						Sticks and trash removed prior to mowing
						Grass clippings blown out of beds and off tree rings
						Mowed at an appropriate height
						Mowed in most efficient manner
						Straight mowing lines
						Tire marks or ruts repaired promptly
						No obvious scalping or low trimming
						Tree rings undisturbed or repaired
						Curbs blown clean after mowing
					Weeding & Bed Care	
						Flower beds weed free
						Mulch beds relatively weed free
						Debris removed from shrubs or beds
					Flower Displays	
						Selection and arrangement of plantings
						Condition of plantings
						Maintenance of plantings
					Edging	
						Sidewalks edged recently- no overgrowth
						Curbs edged recently- no overgrowth
						Distinct bed lines maintained
					Trees & Shrubs	
						Dead plants removed
						Dead material pruned out
						Pruned in an appropriate manner & form
						Pruning required now
						Pruned off buildings & signs; elevated off walks/drives
						Suckers removed
						Tree stakes secure and tight- none broken
						No apparent insect or disease problems
					Vegetation Control	
						Aggregate and paved areas relatively weed free
						Fencelines and building perimeters treated
					Irrigation	
						No obvious over- or under-watering
						Flower beds receiving adequate water
					High-Profile Areas	
						Building entrances
						Property entrances
						Flower beds
						Sign beds

Recommendations:
