

# Lawn and Turf Problems Form

Client Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Lawn Background

### Turfgrass Type

- Perennial Ryegrass
- Kentucky Bluegrass
- Fine Fescue
- Don't know

Mixture types: \_\_\_\_\_

Other: \_\_\_\_\_

### Age

- Established: 5-10 yrs old
- Young: 1 to 5 yrs old
- New: Less than 1 yr old

### Source

- Started from seed
- Started from sod
- Don't know

Do pets or other animals have access to your lawn?  Yes  No

## Problem

When did you notice the problem? \_\_\_\_\_

Ever had this problem before?  No  Yes If yes, when? \_\_\_\_\_

Please describe how the problem first appeared and then check all that apply:

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### Affected Area Description:

- |  |   |
|--|---|
| <input type="checkbox"/> Circular spots  | <input type="checkbox"/> Grass is thin                                  |
| <input type="checkbox"/> Irregular spots                                       | <input type="checkbox"/> Grass is yellow                                |
| <input type="checkbox"/> Rings, green in the center                            | <input type="checkbox"/> Grass is brown, dead, and/or dry               |
| <input type="checkbox"/> Streaks in rectangular areas                          | <input type="checkbox"/> Rusty powder on grass                          |
| <input type="checkbox"/> Size of spots or affected area 1 to 2 ft. in diameter | <input type="checkbox"/> White powdery coating on grass                 |
| <input type="checkbox"/> Size of spots or affected area 2 to 3 ft. in diameter | <input type="checkbox"/> Weeds  |
| <input type="checkbox"/> Large areas of lawn affected                          | <input type="checkbox"/> Grassy weeds                                   |
| <input type="checkbox"/> Grass is lumpy  | <input type="checkbox"/> Grass blades are loose and come up easily      |
| <input type="checkbox"/> Grass is spongy                                       | <input type="checkbox"/> Turf can be rolled back; grubs/insects present |

Other: \_\_\_\_\_

### Affected Area Location:

- |   |   |
|---|---|
| <input type="checkbox"/> Full sun               | <input type="checkbox"/> Primarily next to driveway, walk, or pathway |
| <input type="checkbox"/> Full shade             | <input type="checkbox"/> On flat area                                 |
| <input type="checkbox"/> Just in the front lawn | <input type="checkbox"/> On slope                                     |
| <input type="checkbox"/> Just in the back lawn  | <input type="checkbox"/> High traffic area                            |
| <input type="checkbox"/> All over lawn          | <input type="checkbox"/> Over septic drain/leach field                |

Other: \_\_\_\_\_

Please fill out next page

## Lawn Care

### Irrigation:

#### Irrigation System

- automatic overhead
- automatic drip
- hose and sprinkler
- combination: \_\_\_\_\_

\_\_\_\_\_

#### Frequency of Watering

- every day
- every other day
- once a week
- as needed

Other: \_\_\_\_\_

#### Length (per cycle)

- 10 to 15 minutes
- 30 minutes

Other: \_\_\_\_\_

Time of day: \_\_\_\_\_

### Mowing:

#### Frequency

- once a week
- less than once a week
- mow as needed
- returning/mulching clippings

#### Height

- greater than 2 ½ "
- at 2 ½ "
- less than 1 ½ "

Other: \_\_\_\_\_

### Fertilization:

#### Fertilizer Type

- 16-16-16 (starter fertilizer)
- 21-0-0 (ammonium sulfate)
- 3-1-2
- quick release
- slow release
- lawn care service

Other: \_\_\_\_\_

#### When Applied

- 4x per year (list months) \_\_\_\_\_
- 3x per year (list months) \_\_\_\_\_
- 2x per year (list months) \_\_\_\_\_
- once a year (when?) \_\_\_\_\_

Other: \_\_\_\_\_

Amount fertilizer applied (lb/1000 sq ft)

\_\_\_\_\_

### Insecticides? Fungicides:

What was applied? \_\_\_\_\_ When? \_\_\_\_\_ How often? \_\_\_\_\_

Other chemicals applied to turf or to nearby plants in the last year (include type and rate):

\_\_\_\_\_

\_\_\_\_\_

Do you use a separate sprayer when applying weed-killers and insecticides/fungicides?  Y  N

### Lawn Care Service Used?

Mowing  Fertilizing  Weed Control  Core  Aerating

### Aerating/Power Raking:

Has your lawn been aerated or aerified?  N  Y When? \_\_\_\_\_

If you remove thatch, how was it removed? \_\_\_\_\_

How often? \_\_\_\_\_

Have you used wetting agents on your lawn? \_\_\_\_\_

Notes: \_\_\_\_\_