

**EXHIBIT A  
GENERAL INSPECTION REPORT  
APRIL 15TH, JULY 15TH, OCTOBER 15TH (Circle One)**

**TURF MAINTENANCE (INCLUSIVE OF EDGING)**

Overall Appearance: \_\_\_\_\_

Maintenance Needs: \_\_\_\_\_

Immediate Deficiencies: \_\_\_\_\_

**WEED CONTROL (BEDS AND CRACKS/CREVICES)**

Overall Appearance: \_\_\_\_\_

Maintenance Needs: \_\_\_\_\_

Immediate Deficiencies: \_\_\_\_\_

**PESTS/DISEASES**

Overall Appearance: \_\_\_\_\_

Maintenance Needs: \_\_\_\_\_

Immediate Deficiencies: \_\_\_\_\_

Overall Appearance: \_\_\_\_\_

Maintenance Needs: \_\_\_\_\_

Immediate Deficiencies: \_\_\_\_\_

**Submission of these reports is mandatory**