

# Lawn Maintenance Report

Association Name \_\_\_\_\_

Date of Last Mowing \_\_\_\_\_

Contractor \_\_\_\_\_

Date of Inspection \_\_\_\_\_

Inspected By \_\_\_\_\_

**Lawn Appearance**

- Excellent
- Average
- Poor

**Sidewalk Edging**

- Excellent
- Average
- Poor

**Trimming**

- Excellent
- Average
- Poor

**Berm Appearance**

- Excellent
- Average
- Poor

Were all areas cleared/blown off?

- Yes
- No

Area not cleaned \_\_\_\_\_

Were there any clumps of grass left on the lawn?

- Yes
- No

Overall Appearance of Lawn

- Excellent
- Average
- Poor

Complainants \_\_\_\_\_

Action Taken \_\_\_\_\_

Comments \_\_\_\_\_



**C R A N B R O O K**

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