

EMAIL



# CUSTOMER LAKE MANAGEMENT REPORT

CALL 800.432.4302 FOR SERVICE

Customer: BOBCAT TRAIL CDD

Account Number: 033970

Technician: Scott L.

Date: 6-6-18 Time: 7:30 AM

## WORK PERFORMED

METHOD USED: <b>B</b> (Boat) <b>T</b> (Truck) <b>S</b> (Backpack Sprayer) <b>U</b> (Utility Vehicle)										
<b>SITE ID</b>	9	14	10	8	6	1	4	2	3	
Method Used	U	—————							A	
Treated Algae										
Treated Cyanobacteria										
Treated Submersed Weeds	X	—————							A	
Treated Grasses/Brush										
Treated Floating Weeds										
Treated Mosquitoes and/or Midges										
Lake Dye										
Site Inspection										
<b>WETLAND/UPLAND</b>										
Spot Spraying										
Physical weed removal										
<b>CARP PROGRAM</b>										
Carp Observed										
Barriers Inspected										
RESTRICTION TYPE(S) DO NOT: <b>I</b> (Irrigate) <b>F</b> (Fish) <b>S</b> (Swim) <b>O</b> (Other):										
Restriction # of days	0	—————							A	
Restriction Type										

## GENERAL OBSERVATIONS OF THE WATER

<b>WATER CLARITY</b> <input checked="" type="checkbox"/> All <1', 1', 2', 3', 4', >4'	2'	—————	A
<b>WATER FLOW</b> <input checked="" type="checkbox"/> All N (None) S (Slight) V (Visible)	N	—————	A
<b>WATER LEVEL</b> <input checked="" type="checkbox"/> All H (High) <input checked="" type="checkbox"/> Normal L (Low)	N	—————	A

## GENERAL FIELD OBSERVATIONS

BENEFICIAL PLANTS			FISH/WILDLIFE			BIRDS		
<input checked="" type="checkbox"/> Arrowhead	<input type="checkbox"/> Chara	<input type="checkbox"/> Lily	<input type="checkbox"/> Bass	<input checked="" type="checkbox"/> Alligator	<input type="checkbox"/> Anhinga	<input checked="" type="checkbox"/> Gallinules	<input type="checkbox"/> Coots	<input type="checkbox"/> Herons
<input checked="" type="checkbox"/> Bacopa	<input type="checkbox"/> Cordgrass	<input type="checkbox"/> Naiad	<input type="checkbox"/> Bream	<input type="checkbox"/> Otter	<input type="checkbox"/> Cormorant	<input type="checkbox"/> Ibis	<input type="checkbox"/> Egrets	<input type="checkbox"/> Osprey
<input type="checkbox"/> Blue Flag Iris	<input type="checkbox"/> Golden Canna	<input checked="" type="checkbox"/> Pickerelweed	<input type="checkbox"/> Catfish	<input type="checkbox"/> Snakes				
<input checked="" type="checkbox"/> Bulrush	<input checked="" type="checkbox"/> Gulf Spikerush	<input type="checkbox"/> Soft Rush	<input checked="" type="checkbox"/> Gambusia	<input checked="" type="checkbox"/> Turtles				
<input type="checkbox"/> Other _____								

## CONCERNS FOR FOLLOW-UP

<input type="checkbox"/> Recurring or excessive algae	Lake # _____	<input type="checkbox"/> <b>Water Quality Assessment Recommended</b> Persistent problems may indicate an underlying water quality issue that current treatments will not correct. A laboratory assessment is recommended to determine the cause(s) and plan the best corrective actions. <b>Please call 800-432-4302 for more information.</b>
<input type="checkbox"/> Persistent invasive weeds	Lake # _____	
<input type="checkbox"/> Fish/wildlife issues	Lake # _____	
<input type="checkbox"/> Low water clarity	Lake # _____	
<input type="checkbox"/> Bad Odors	Lake # _____	



# CUSTOMER LAKE MANAGEMENT REPORT

CALL 800.432.4302 FOR SERVICE

Customer: Bobcat Trail CDD

Account Number: 000 339 70

Technician: MARIO K.

Date: 7/13/18 Time: 8:30 AM

## WORK PERFORMED

METHOD USED: **B** (Boat) **T** (Truck) **S** (Backpack Sprayer) **U** (Utility Vehicle)

SITE ID	12	13	14	15	16	18	20	21												
Method Used	U →																			
Treated Algae	X		X			X														
Treated Cyanobacteria																				
Treated Submersed Weeds																				
Treated Grasses/Brush	X →																			
Treated Floating Weeds																				
Treated Mosquitoes and/or Midges																				
Lake Dye																				
Site Inspection																				
<b>WETLAND/UPLAND</b>																				
Spot Spraying																				
Physical weed removal																				
<b>CARP PROGRAM</b>																				
Carp Observed																				
Barriers Inspected																				
<b>RESTRICTION TYPE(S) DO NOT: I (Irrigate) F (Fish) S (Swim) O (Other):</b>																				
Restriction # of days	∅ →																			
Restriction Type																				

## GENERAL OBSERVATIONS OF THE WATER

<b>WATER CLARITY</b> <input checked="" type="checkbox"/> All <1', 1', 2', 3', 4', >4'	I	— II →																		
<b>WATER FLOW</b> <input checked="" type="checkbox"/> All N(None) S(Slight) V(Visible)	N	— II →																		
<b>WATER LEVEL</b> <input checked="" type="checkbox"/> All H(High) N(Normal) L(Low)	N	— II →																		

## GENERAL FIELD OBSERVATIONS

BENEFICIAL PLANTS			FISH/WILDLIFE			BIRDS							
<input type="checkbox"/> Arrowhead	<input type="checkbox"/> Chara	<input type="checkbox"/> Lily	<input type="checkbox"/> Bass	<input checked="" type="checkbox"/> Alligator	<input type="checkbox"/> Anhinga	<input type="checkbox"/> Gallinules	<input type="checkbox"/> Blue Flag Iris	<input type="checkbox"/> Cordgrass	<input type="checkbox"/> Naiad	<input type="checkbox"/> Bream	<input type="checkbox"/> Otter	<input type="checkbox"/> Coots	<input type="checkbox"/> Herons
<input checked="" type="checkbox"/> Bacopa	<input type="checkbox"/> Golden Canna	<input checked="" type="checkbox"/> Pickerelweed	<input type="checkbox"/> Catfish	<input type="checkbox"/> Snakes	<input checked="" type="checkbox"/> Cormorant	<input type="checkbox"/> Ibis	<input type="checkbox"/> Bulrush	<input checked="" type="checkbox"/> Gulf Spikerush	<input type="checkbox"/> Soft Rush	<input checked="" type="checkbox"/> Gambusia	<input checked="" type="checkbox"/> Turtles	<input checked="" type="checkbox"/> Egrets	<input type="checkbox"/> Osprey
<input type="checkbox"/> Other													

## CONCERNS FOR FOLLOW-UP

<input type="checkbox"/> Recurring or excessive algae	Lake # _____	<input type="checkbox"/> <b>Water Quality Assessment Recommended</b>
<input type="checkbox"/> Persistent invasive weeds	Lake # _____	Persistent problems may indicate an underlying water quality issue that current treatments will not correct. A laboratory assessment is recommended to determine the cause(s) and plan the best corrective actions. <b>Please call 800-432-4302 for more information.</b>
<input type="checkbox"/> Fish/wildlife issues	Lake # _____	
<input type="checkbox"/> Low water clarity	Lake # _____	
<input checked="" type="checkbox"/> Bad Odors	Lake # _____	



# CUSTOMER LAKE MANAGEMENT REPORT

CALL 800.432.4302 FOR SERVICE

Customer: Bobcat trail CDD.

Account Number: 00033970

Technician: Marlon C.

Date: 7-19-18 Time: 8:00AM

## WORK PERFORMED

METHOD USED: <b>B</b> (Boat) <b>T</b> (Truck) <b>S</b> (Backpack Sprayer) <b>U</b> (Utility Vehicle)											
SITE ID	2	3	6	7	8	11					
Method Used	U	→				U					
Treated Algae											
Treated Cyanobacteria											
Treated Submersed Weeds											
Treated Grasses/Brush	U	→				U					
Treated Floating Weeds											
Treated Mosquitoes and/or Midges											
Lake Dye											
Site Inspection											
WETLAND/UPLAND	U										
Spot Spraying											
Physical weed removal											
CARP PROGRAM											
Carp Observed											
Barriers Inspected											
RESTRICTION TYPE(S) DO NOT: <b>I</b> (Irrigate) <b>F</b> (Fish) <b>S</b> (Swim) <b>O</b> (Other):											
Restriction # of days	0	→				U					
Restriction Type											

## GENERAL OBSERVATIONS OF THE WATER

WATER CLARITY <input checked="" type="checkbox"/> All <1', 1', 2', 3', 4', >4'	U	→				U					
WATER FLOW <input checked="" type="checkbox"/> All N(None) S(Slight) V(Visible)	N	→				U					
WATER LEVEL <input checked="" type="checkbox"/> All H(High) N(Normal) L(Low)	N	→				U					

## GENERAL FIELD OBSERVATIONS

BENEFICIAL PLANTS			FISH/WILDLIFE			BIRDS		
<input type="checkbox"/> Arrowhead	<input type="checkbox"/> Chara	<input checked="" type="checkbox"/> Lily	<input checked="" type="checkbox"/> Bass	<input type="checkbox"/> Alligator	<input type="checkbox"/> Anhinga	<input type="checkbox"/> Gallinules		
<input checked="" type="checkbox"/> Bacopa	<input checked="" type="checkbox"/> Cordgrass	<input type="checkbox"/> Naiad	<input type="checkbox"/> Bream	<input type="checkbox"/> Otter	<input type="checkbox"/> Coots	<input checked="" type="checkbox"/> Herons		
<input type="checkbox"/> Blue Flag Iris	<input type="checkbox"/> Golden Canna	<input checked="" type="checkbox"/> Pickerelweed	<input type="checkbox"/> Catfish	<input checked="" type="checkbox"/> Snakes	<input type="checkbox"/> Cormorant	<input type="checkbox"/> Ibis		
<input checked="" type="checkbox"/> Bulrush	<input type="checkbox"/> Gulf Spikerush	<input type="checkbox"/> Soft Rush	<input type="checkbox"/> Gambusia	<input checked="" type="checkbox"/> Turtles	<input type="checkbox"/> Egrets	<input type="checkbox"/> Osprey		
<input type="checkbox"/> Other _____								

## CONCERNS FOR FOLLOW-UP

<input type="checkbox"/> Recurring or excessive algae	Lake # _____	<input type="checkbox"/> Water Quality Assessment Recommended
<input type="checkbox"/> Persistent invasive weeds	Lake # _____	Persistent problems may indicate an underlying water quality issue that current treatments will not correct. A laboratory assessment is recommended to determine the cause(s) and plan the best corrective actions. <b>Please call 800-432-4302 for more information.</b>
<input type="checkbox"/> Fish/wildlife issues	Lake # _____	
<input type="checkbox"/> Low water clarity	Lake # _____	
<input type="checkbox"/> Bad Odors	Lake # _____	

Customer: Bobcat Trail CDD

Account Number: 000 339 70

Technician: MARIO K.

Date: 7/26/18 Time: 10:00 AM

### WORK PERFORMED

METHOD USED: **B** (Boat) **T** (Truck) **S** (Backpack Sprayer) **U** (Utility Vehicle)

SITE ID	1	4	5	9	10	17	18	19											
Method Used	U	→																	
Treated Algae					X	X	X	X											
Treated Cyanobacteria																			
Treated Submersed Weeds																			
Treated Grasses/Brush	X	→																	
Treated Floating Weeds																			
Treated Mosquitoes and/or Midges																			
Lake Dye																			
Site Inspection																			
<b>WETLAND/UPLAND</b>																			
Spot Spraying																			
Physical weed removal																			
<b>CARP PROGRAM</b>																			
Carp Observed																			
Barriers Inspected																			
RESTRICTION TYPE(S) DO NOT: <b>I</b> (Irrigate) <b>F</b> (Fish) <b>S</b> (Swim) <b>O</b> (Other):																			
Restriction # of days	0	→																	
Restriction Type																			

### GENERAL OBSERVATIONS OF THE WATER

WATER CLARITY <input checked="" type="checkbox"/> All <1', 1', 2', 3', 4', >4'	1	-11	→																
WATER FLOW <input checked="" type="checkbox"/> All N(None) S(Slight) V(Visible)	N	-11	→																
WATER LEVEL <input checked="" type="checkbox"/> All H(High) N(Normal) L(Low)	N	-11	→																

### GENERAL FIELD OBSERVATIONS

BENEFICIAL PLANTS			FISH/WILDLIFE			BIRDS							
<input type="checkbox"/> Arrowhead	<input checked="" type="checkbox"/> Chara	<input type="checkbox"/> Lily	<input type="checkbox"/> Bass	<input checked="" type="checkbox"/> Alligator	<input type="checkbox"/> Anhinga	<input type="checkbox"/> Gallinules	<input type="checkbox"/> Bacopa	<input type="checkbox"/> Cordgrass	<input type="checkbox"/> Naiad	<input type="checkbox"/> Bream	<input type="checkbox"/> Otter	<input type="checkbox"/> Coots	<input type="checkbox"/> Herons
<input type="checkbox"/> Blue Flag Iris	<input type="checkbox"/> Golden Canna	<input checked="" type="checkbox"/> Pickerelweed	<input type="checkbox"/> Catfish	<input type="checkbox"/> Snakes	<input checked="" type="checkbox"/> Cormorant	<input type="checkbox"/> Ibis	<input checked="" type="checkbox"/> Bulrush	<input checked="" type="checkbox"/> Gulf Spikerush	<input type="checkbox"/> Soft Rush	<input checked="" type="checkbox"/> Gambusia	<input checked="" type="checkbox"/> Turtles	<input checked="" type="checkbox"/> Egrets	<input type="checkbox"/> Osprey
<input type="checkbox"/> Other _____													

### CONCERNS FOR FOLLOW-UP

<input type="checkbox"/> Recurring or excessive algae	Lake # _____	<input type="checkbox"/> Water Quality Assessment Recommended
<input type="checkbox"/> Persistent invasive weeds	Lake # _____	Persistent problems may indicate an underlying water quality issue that current treatments will not correct. A laboratory assessment is recommended to determine the cause(s) and plan the best corrective actions. <b>Please call 800-432-4302 for more information.</b>
<input type="checkbox"/> Fish/wildlife issues	Lake # _____	
<input type="checkbox"/> Low water clarity	Lake # _____	
<input type="checkbox"/> Bad Odors	Lake # _____	