

LANDSCAPE/EXTERIOR SERVICE REQUEST - VILLAGE RESPONSIBILITY

NAME: _____	DATE: _____
ADDRESS: _____	<input type="checkbox"/> HOMEOWNER
PHONE NO: _____	<input type="checkbox"/> REPORTING PARTY

LOCATION OF WORK REQUESTED: FRONT SIDE REAR

WORK REQUESTED: ONE ITEM ONLY PER GREEN SHEET

ANIMALS: GOPHERS _____ BEES: _____

SOD/SEED: or RE-SEED WEEDS: REMOVE

SPRINKLERS: BROKEN AREA DRY WET REQUIRE ADJUSTMENT

SHRUBS: TRIM REMOVE REPLACE

**Note that these items will normally be done at the time the shrub crew is in your Village
Please do not duplicate your request.**

TREES: TRIM REMOVE REPLACE ROOTS: REMOVE

CONCRETE ROOF STUCCO EXTERIOR WOOD TRIM

PRESSURE WASH TRASH VAULT:

DESCRIBE PROBLEM: _____

FOR LVA OFFICE USE ONLY:

W/O NUMBER _____ WORK COMPLETED BY: _____

H/O NOTIFIED BY: DOOR HANGER IN PERSON DATE _____

ACTION TAKEN: _____

MATERIALS USED: _____

LABOR: _____ WORK TO COMPLETED: _____

DO NOT DETACH (OFFICE USE ONLY)