

LANDSCAPE INSPECTION AFFIDAVIT

(To be submitted in conformance with Code Section 309.C)

City File No: _____ **Project:** _____

Inspected by: _____
 (Individual) (Firm)

Dates of Inspection: _____

Plant Material: (Check One)	<u>Date Inspected</u>	<u>Yes</u>	<u>No</u>	<u>Not Verified</u>
1. Condition of plant material (Healthy; meets Colorado Nursery Act and American Standards of Nursery Stock Standards)	_____	_____	_____	_____
2. Installation is in conformance with Appendix H, Planting Details, of Landscape Policy Manual		_____	_____	_____
3. All plant material installed as specified by species		_____	_____	_____
4. All plant material installed as specified by size		_____	_____	_____
5. All plant material installed as specified by quantity		_____	_____	_____
6. Location of all plant material is correct		_____	_____	_____

Landscape Elements:

1. **Specified soil amendment field verified (Receipt Attached):** _____
Date
2. Compacted soil in vehicle lot planting areas tilled or replaced to a depth of 30 inches _____
3. Berms installed at height and slope specified _____
4. Areas of slope protection installed as specified _____
5. Reclamation & erosion control measures installed as specified _____
6. Grading and drainage intent followed as specified _____
7. Landscape components (internal walks, screening walls / fences, retaining walls, trash enclosures, etc.) Installed as specified _____
8. Mulch installed at depth and type specified _____
 - A. Organic mulch (i.e. wood mulch) _____
 - B. Inorganic mulch (i.e. rock) _____
9. Ground plane seeding installed as specified and to meet City Standards * _____
10. **Provide attachments (graphics or explanation) for reasonable but noteworthy changes to the approved plan.**

I hereby certify that this project was inspected within the limits of customary access for compliance with the approved landscape plan on file in City Planning, and under my Direct Supervision. I am qualified to submit this landscape inspection affidavit based on the qualification listed below:

Licensed Landscape Architect: _____ Licensed No. _____
Designer of Record

State Agency Phone No. (_____) _____

 Name (PRINT) Signature Date

* Note: Seeding must be established or financially assured prior to issuance of a Certificate of Occupancy. Establishment must meet the (6"x 6") gap criteria, be healthy - primarily turf with low weed content (80% Turf to 20% Weeds, or better), with irrigation installed and operating properly.