# Certificate of Completion

## A. Project Information

Date

Project Name

Project Street Address, City and Zip

Parcel or Lot Number(s) (if available)

Applicant Name

Applicant Job Title

Applicant Company Name

Phone Number

Email Address

Street Address, City and Zip

Property Owner Name

Phone Number

Email Address

Street Address, City and Zip

**Property Owner:**

“I/we certify that I/we have received copies of all the documents within the Landscape Documentation Package and the Certificate of the Completion and that it is our responsibility to see that the project is maintained in accordance with the Landscape and Irrigation Maintenance Schedule.”

Property Owner Date

## B. Certificate of Installation

*To be signed by the signer of the Landscape Design Plan or the Irrigation Design Plan or by the licensed landscape contractor*

“I/we certify that based upon periodic site observations, the work has been completed in accordance with the ordinance and that the landscape planting and irrigation installation conform with the criteria and specifications of the approved Landscape Documentation Package. As-built drawings have been provided to document any major modifications of the approved Landscape Documentation Package. Significant changes made during construction comply with the ordinance.”

Contractor/Professional Signature

Date

Print Name

License Number

## C. Irrigation Scheduling

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APPLICANT** | **ITEM** | **REVIEWER** | | **NOTES** |
| PASS | FAIL |  |
| ⬜ | 1. Irrigation scheduling is regulated by automatic irrigation controller | ⬜ | ⬜ |  |
| ⬜ | 2. Overhead irrigation is scheduled between 8 p.m. and 10 a.m. | ⬜ | ⬜ |  |
| ⬜ | 3. Settings for the irrigation controller for each station include the following: | ⬜ | ⬜ |  |
| ⬜ | a. Irrigation days | ⬜ | ⬜ |  |
| ⬜ | b. Run times | ⬜ | ⬜ |  |
| ⬜ | c. Number of cycle starts per watering event to avoid run off | ⬜ | ⬜ |  |
| ⬜ | d. Amount of applied water on a monthly basis | ⬜ | ⬜ |  |

## D. Schedule of Landscape and Irrigation Maintenance

| **APPLICANT** | **ITEM** | **REVIEWER** | | **NOTES** |
| --- | --- | --- | --- | --- |
| PASS | FAIL |  |
| ⬜ | 1. Attach schedule of maintenance for the landscape and irrigation system per ordinance to ensure water efficiency. The attached schedule of landscape maintenance includes: | ⬜ | ⬜ |  |
| ⬜ | a. Routine inspection, auditing, adjusting and repair of the irrigation system | ⬜ | ⬜ |  |
| ⬜ | b. Aerating and dethatching turf areas | ⬜ | ⬜ |  |
| ⬜ | c. Topdressing planting areas with compost as needed | ⬜ | ⬜ |  |
| ⬜ | d. Replenishing mulch | ⬜ | ⬜ |  |
| ⬜ | e. Pruning and weeding | ⬜ | ⬜ |  |
| ⬜ | f. Routine inspection, auditing, adjusting and repair of the irrigation system | ⬜ | ⬜ |  |
|  | *(Bay-Friendly Landscape maintenance manual used for the site would satisfy this requirement)* |  |  |  |
| ⬜ | 2. Attach landscape irrigation audit report | ⬜ | ⬜ |  |
| ⬜ | 3. Attach landscape irrigation audit checklist | ⬜ | ⬜ |  |
| ⬜ | 4. The irrigation audit was conducted by a third-party certified Irrigation Auditor professional who is not a part of the design team | ⬜ | ⬜ |  |
| ⬜ | 5. Irrigation items identified for repair in the audit are fixed | ⬜ | ⬜ |  |
| ⬜ | 6. In large project or projects with multiple landscape installations (i.e. production home developments) an auditing rate of 1 in 7 lots or 15% is conducted | ⬜ | ⬜ |  |

**Complete the following sections ONLY if project has submitted the Landscape Documentation Package.**

## E. Irrigation Audit Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APPLICANT** | **ITEM** | **REVIEWER** | | **NOTES** |
| PASS | FAIL |  |
| ⬜ | 1. Audit completed | ⬜ | ⬜ |  |
| ⬜ | 2. Any recommended repairs have been completed | ⬜ | ⬜ |  |
| ⬜ | 3. The Irrigation Audit Report includes: | ⬜ | ⬜ |  |
| ⬜ | a. Inspection for leaks | ⬜ | ⬜ |  |
| ⬜ | b. System tune-up | ⬜ | ⬜ |  |
| ⬜ | c. Reporting overspray or run off | ⬜ | ⬜ |  |
| ⬜ | d. An irrigation schedule including configuring controller with application rate, soil types, plant factors, slope, exposure and other factors needed to increase water efficiency | ⬜ | ⬜ |  |

## F. Soil Management Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APPLICANT** | **ITEM** | **REVIEWER** | | **NOTES** |
| PASS | FAIL |  |
| ⬜ | 1. Attach soil analysis report of the soil in planting areas from a soil lab if not previously submitted with the Landscape Documentation Package per ordinance. | ⬜ | ⬜ |  |
| ⬜ | 2. The soil sample follows laboratory protocol and includes: | ⬜ | ⬜ |  |
| ⬜ | a. Soil texture | ⬜ | ⬜ |  |
| ⬜ | b. Infiltration rate | ⬜ | ⬜ |  |
| ⬜ | c. pH | ⬜ | ⬜ |  |
| ⬜ | d. Total soluble salts | ⬜ | ⬜ |  |
| ⬜ | e. Sodium | ⬜ | ⬜ |  |
| ⬜ | f. Percent organic matter | ⬜ | ⬜ |  |
| ⬜ | g. Amendment recommendations | ⬜ | ⬜ |  |
| ⬜ | 3. Attach document(s) showing that soil analysis report recommendations were used to amend the planting soil, such as delivery tags and receipts for compost and mulch. | ⬜ | ⬜ |  |

## G. Landscape Diversion Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APPLICANT** | **ITEM** | **REVIEWER** | | **NOTES** |
| PASS | FAIL |  |
| ⬜ | 1. Attach a construction waste management report for the project that shows at least 50% diversion of construction and demolition debris and 100% diversion of excavated soil and land clearing debris through recycling or reuse. Building debris can be used in calculations. | ⬜ | ⬜ |  |
| ⬜ | 2. Confirm that diversion facilities where collected construction waste material was taken are identified in the waste management report. | ⬜ | ⬜ |  |

## H. Additional Modifications

Applicant: If major modifications were made in construction from the submitted plans, attach record drawings (as-builts)

* No major modifications
* Record drawings (as-builts) attached