



LAKE COUNTY  
FLORIDA

**To** \_\_\_\_\_ **From: Public Works Road Operations**

**Fax:** \_\_\_\_\_ **Phone :** (352) 343-6439

**Phone:** \_\_\_\_\_ **Pages:** 1

**Re: Sod Installation** \_\_\_\_\_

**REQUEST FOR SOD INSTALLED**

**Install Date Requested:** \_\_\_\_\_ **Road Segment #** 3-0500A-44/45 3-4260-01

**Delivery address:** Bay Rd & Old 441

**Section:** 26 **Town:** 19 **Range:** 26

**Directions to Delivery Point:** \_\_\_\_\_

**Type of sod:** Bahia **Quantity :** 2,800 sq ft

**Notes: Start / stop points marked with paint. Please notify within a day or so prior to installation, so we can make sure the area is ready.**

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

**County Representative:** \_\_\_\_\_

**Date:** \_\_\_\_\_

S.L.

<b>Work completed and OK to Pay, Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>	
<b>Invoice #</b>	
<b>Inspected by :</b>	<b>Date:</b>

# Request Details Report

Request Number                      Associated Work Order                      Observed Date/Time  
MA3-12806-R                      MA3-21378-WO                      12/10/14 9:45:A

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## ***Citizen Information***

Name \_\_\_\_\_ Phone \_\_\_\_\_ Ext. \_\_\_\_\_  
Address \_\_\_\_\_ Alternate Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

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## Organization

Requestor Lake County Public Works  
Contact Daubert, Tim

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## ***Issue and Location***

Activity	Issue	Drainage
Address Number	Map Page	SEC    TWN    RNG
DRN Swale/Ditch Cleaning		
Address Number 1029		
Route Bay Rd (4260)		
Intersect Route Old 441 (0500A)		

## Details

Business owner @ 1029 Bay Rd is having stormwater from Old 441 run into his parking lot.

## Notes

## History

1/7/2015      Contract sod installation requested.                      Lee, Steven

Resolution \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Request Response Date 12/10/2014 \_\_\_\_\_

Date \_\_\_\_\_

Time Arrived \_\_\_\_\_

Time Departed \_\_\_\_\_

