

**GROWER'S
OVERHEAD IRRIGATION CHECKLIST**

NURSERY:

FIELD LOCATION:

Date:

EVERY DAY

- ___ 1. Amount applied is appropriate for container size and plant species
 ___ application rate in in/hr
 ___ time the system ran

- ___ 2. Moisture content of substrate before watering.

- ___ 3. Visually check sprinkler rotation, overlap, fogging or other malfunctioning.

- ___ 4. Rain gauge to check if the system ran.

Briefly describe any problems with the irrigation system including any repairs or changes.
