

**Willowbend Landscape Maintenance Agreement
Do Not Service Request**

Homeowner: _____ Phone: _____

Address: _____ Email: _____

I would like to be placed and/or remain on the **1-year list** to decline the following services provided by our landscape contractor. I agree to continually maintain my property in accordance with the Willowbend landscape requirements*. I understand **this request is good for (1) calendar year only.**

I would like to **decline** the following services provided by our HOA landscape contractor:

DO NOT: *Trim any shrubs* _____. *Trim small ornamental trees* _____.
Spray weed killer on plant beds _____. *Fertilize my shrubs and plants* _____.

***Summary of Landscape Requirements**

(All fertilization/spraying must adhere to the FL Coop. Extension Service Guidelines & current Sarasota County Regulations.)

1. Front yard - shrubs will be no higher than halfway up windows
2. Side yards - maintain clear access areas to neighboring homes & for emergency ingress/egress
3. Remove weeds/grass in driveways & all paved areas. Keep mulch off walkways & driveway.
4. Maintain plant beds: remove weeds, grass, vines & dead shrubs (After ACR approved).
5. Keep trees limbed to 7' & branches/shrubs maintained at least 2' from structures/lanais.
6. Insure any pest infestation does not spread beyond your property.
7. Fertilize all shrubs, trees, palms following above guidelines.
8. Debris from maintenance **MUST BE REMOVED THE SAME DAY.**
9. Insure all storm damage including but not limited to fallen trees, branches, excess debris are cleaned up & placed curbside for pick up.

IMPORTANT: If your property **does not maintain appropriate standards** you will be given a warning. You will have **14 days to correct** the situation or **the current landscape maintenance provider will resume contracted services** and you will be removed from the Do Not Service List. This **Do Not Service Agreement** must be resubmitted to the Property Management Company the **September of each calendar year.**

Homeowners Signature: _____ . Date _____

Send or email to: Sentry Management
5969 Cattleridge Blvd. Ste. 203
Sarasota, FL 34232

*jbuckmaster@sentrymgt.com