


2016 Community Report Card on the State of Maintenance in Oakland Parks

		2016 LOVE YOUR PARKS DAY SURVEY																
<ul style="list-style-type: none"> ● Assign a letter grade (A= excellent, F = failing) to each numbered item (or N/A-Not Applicable). ● Priority Question: Circle only one number that corresponds to the item in each category that would be your first priority to fix. 																		
GREENERY																		
GRASS & GROUND COVER																		
	1. Is the grass mowed?	A	B	C	D	F	N/A											
	2. Is the grass edged?	A	B	C	D	F	N/A											
	3. Is the grass/ground cover free of animal/bird droppings?	A	B	C	D	F	N/A											
	4. Is the ground cover/grass free of bare spots?	A	B	C	D	F	N/A											
FLOWERS & SHRUBS (No flowers or shrubs? Choose N/A)																		
	5. Are the planted areas free of weeds?	A	B	C	D	F	N/A											
	6. Condition of shrubs and/or flowers	A	B	C	D	F	N/A											
	7. Are shrubs pruned?	A	B	C	D	F	N/A											
TREES																		
	8. Condition of trees (any dead branches, etc.?)	A	B	C	D	F	N/A											
	9. Are trees pruned?	A	B	C	D	F	N/A											
<i>First priority to fix in this category? Circle one →</i>										1	2	3	4	5	6	7	8	9
RESTROOMS <u>Freestanding Only</u> (not in Rec Centers, NOT porta-potties) No restroom?--circle N/A for all.																		
	1. Accessibility of restroom: (open=A, locked=F, one open, one locked=C)	A	B	C	D	F	N/A											
	2. Are toilets clean & working?	A	B	C	D	F	N/A											
	3. Are sinks clean & working?	A	B	C	D	F	N/A											
	4. Availability of trash receptacles	A	B	C	D	F	N/A											
	5. Cleanliness of restroom	A	B	C	D	F	N/A											
	6. Are doors on stalls & do locks work?	A	B	C	D	F	N/A											
	7. Availability of supplies (soap, paper towels, toilet paper)	A	B	C	D	F	N/A											
	8. Are restrooms free of odor?	A	B	C	D	F	N/A											
<i>First priority to fix in this category? Circle one →</i>										1	2	3	4	5	6	7	8	N/A
HARDSCAPE, FURNITURE, SIGNAGE																		
	1. Condition of fencing or gates	A	B	C	D	F	N/A											
	2. Condition of benches/seating areas	A	B	C	D	F	N/A											
	3. Condition of walkways	A	B	C	D	F	N/A											
	4. Condition of park signs	A	B	C	D	F	N/A											
<i>First priority to fix in this category? Circle one →</i>										1	2	3	4	N/A				

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GOPHER HOLES AND MOUNDS (A=no holes/mounds, F=lots of holes/mounds, No turf/grass-choose N/A)							
1. Is the grass, turf free of gopher holes & mounds?	A	B	C	D	F	N/A	
OUTDOOR SPORTS AREAS							
1. Condition of turf/grass (sports fields only)	A	B	C	D	F	N/A	
2. Condition of court (tennis or basketball) surfacing	A	B	C	D	F	N/A	
3. Condition/existence of netting (tennis or basketball)	A	B	C	D	F	N/A	
4. Condition of court lines (tennis or basketball)	A	B	C	D	F	N/A	
5. Condition of bleachers	A	B	C	D	F	N/A	
6. Availability of trash receptacles	A	B	C	D	F	N/A	
<i>First priority to fix in this category? Circle one →</i>	1	2	3	4	5	6	N/A
OUTDOOR CHILDREN'S PLAY AREAS							
1. Availability of trash receptacles	A	B	C	D	F	N/A	
2. Cleanliness of sand or fibar	A	B	C	D	F	N/A	
3. Condition of play equipment	A	B	C	D	F	N/A	
4. Condition of safety padding under play structures	A	B	C	D	F	N/A	
5. Condition of seating for parents	A	B	C	D	F	N/A	
<i>First priority to fix in this category? Circle one →</i>	1	2	3	4	5	N/A	
PICNIC AREAS (Picnic areas are designated by picnic tables with benches)							
1. Availability of trash receptacles in the picnic area	A	B	C	D	F	N/A	
2. Condition of barbecue grills (no grills? N/A)	A	B	C	D	F	N/A	
3. Condition of picnic benches & tables	A	B	C	D	F	N/A	
<i>First priority to fix in this category? Circle one →</i>	1	2	3	N/A			
GRAFFITI							
1. Does there appear to be a serious problem of graffiti in this park?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		Somewhat		
2. If you answered yes where is the graffiti? (check one or more)							
<input type="checkbox"/> Children's play equipment <input type="checkbox"/> Picnic tables/benches <input type="checkbox"/> Restrooms <input type="checkbox"/> Sports courts <input type="checkbox"/> Signs <input type="checkbox"/> Walls & fences							
WATER FOUNTAINS/FEATURES							
1. Are all water fountains/features in this park working? (No water fountains/features -check N/A)	<input type="checkbox"/> Yes		<input type="checkbox"/> No		<input type="checkbox"/> N/A		
2. If you answered NO check the areas below where they are not working.							
<input type="checkbox"/> Children's play areas <input type="checkbox"/> Picnic Areas <input type="checkbox"/> Restrooms <input type="checkbox"/> Sports Fields or Courts							
HOMELESS ENCAMPMENTS							
1. Is there evidence of homeless people living in this park?	<input type="checkbox"/> Yes			<input type="checkbox"/> No			
PLEASE GIVE THIS PARK/AREA AN OVERALL RATING.							
	A	B	C	D	F		