

City of Long Beach
Department of Parks, Recreation and Marine
Soccer/Football Field Inspection Form

Complete this form and FAX or Email it the Athletic Field Permit Coordinator
 Attention: Gabriel Cruz (562) 570-3109 - Gabriel.Cruz@longbeach.gov

Date: ____ / ____ / ____ Your Name: _____
 League: _____ Daytime Contact Number: _____
 Park: _____ Field #: _____

Please inspect the following areas of each field used and specify the maintenance attention needed.	
Goal Mouth/End Zone	Comments:
Condition of turf	
Condition of goal posts	
Free of foreign objects	
Puddles following irrigation	
Other	
Field	Comments:
Condition of turf	
Exposed sprinkler head(s)	
Free of foreign objects	
Puddles following irrigation	
Uneven Surfaces	
Other	
Sidelines	Comments:
Condition of turf	
Free of foreign objects	
Sports Lighting	Comments:
Lamps out (please specify location)	
Other	
Overhead	Comments:
Lines, cords or tethered devices	
Other	Comments:
Equipment storage	
Public Restrooms (please include number)	

Addressed by: _____ _____ / ____ / ____
 City Representative Date