

AIR POLLUTION CONTROL DISTRICT



GROW MORE MOW LESS

CUSTOMER SURVEY



Name _____ Date _____

Address _____ Zip Code _____

Email _____ Neighborhood _____

Would you like to receive periodic emails with local air quality information? Yes ____ No ____

Name and location of retailer: _____

What size area are you planting? _____ x _____ feet

How much of this area was turfgrass? _____ percent

How much time (weekly) does it take you to mow your yard? _____

How much time (weekly) does it take you to otherwise maintain your yard? _____

How did you learn about the Grow More Mow Less program? _____

Why did you decide to Grow More and Mow Less?

- To save time and hassle
- To save money
- To help the environment
- Other _____

To be filled out at store:

What discount did you receive? _____

What plants did you buy? _____

Comments: _____