

Family and Lifestyle:

1. Number of family members:

2. Number and approximate ages of family members:

Children

Age Sex

Age Sex

Age Sex

Age Sex

Adults

Age Sex

Age Sex

Age Sex

Age Sex

3. How long do you plan on living in the home you are remodeling/building?

1 to 5 yrs 6 to 10 yrs 11 to 20 yrs

20+

4. Where does your family eat its meals?

Kitchen Dining Room Other:

5. Where will your family eat after you remodel/build?

Kitchen Dining Room Other:

6. Do you require a kitchen table or would you be willing to explore other options if a design could be improved?

A kitchen table is required

Preferred but open to other options

Not necessary

7. What other activities will take place in your new kitchen?

Laundry Homework Watching TV Paying Bills Sewing

Computer Center Other:

8. After your remodel/build will you entertain frequently?

Yes No

If Yes... What is your entertainment style? formal informal

Do you have large or small gatherings? large or small

Do your guests help you in the kitchen when you entertain? Yes No

9. How do you shop?

For the week

For each meal

Buy non-perishable items in bulk

Buy in bulk and freeze

If you buy in bulk, do you require storage in the kitchen for all or most of these items?

Yes No

Cooking Style:

1. Who is the primary cook?

2. Is the primary cook left handed or right handed?

3. How tall is the primary cook?

4. What is the primary cook's cooking style?

Gourmet Meals Family Meals Quick & Simple Meals

Baking Bringing Meals Home

5. What does the primary cook prefer?

No one else in the kitchen while preparing meals.

A helper in the kitchen when preparing meals.

Family or friends visiting during meal preparation.

6. Does the primary cook have any physical limitations?

Yes No

What type?

7. Is there a secondary cook? Yes No

8. If there is a secondary cook, which are they

left handed or right handed?

9. How tall is the secondary cook?

10. Do the secondary and primary cook prepare meals together?

Yes No

11. What are the secondary cook's responsibilities?

Preparing side dishes Clean up Assist in preparing main course

12. Does the secondary cook have any physical limitations?

Yes No What type?

Design and Style:

1. What are your color preferences for your new kitchen?

2. Are there colors you would not want in your new kitchen?

3. Have you created a scrapbook of notes, photos, and ideas that you would like to use in your new kitchen? Yes No

4. If a design could be greatly improved, would you be willing to make structural changes? (i.e. moving windows, doors, and walls) Yes No

5. What do you like about your current kitchen?

6. What do you dislike about your current kitchen?

7. Do you require a recycling center in your kitchen? Yes No

If Yes... How many items do you need to sort?

8. Will you be keeping your existing appliances?

Dishwasher: existing new

Refrigerator: existing new

Oven/Range: existing new

Microwave: existing new

9. What is your style preference for your new kitchen?

contemporary formal country traditional

Time and Budget:

1. When would you like to begin your project?

2. When would you like your project completed?

3. If you are building, is the kitchen in your contract?

Yes No

4. Do you have a budget for this project?

Yes: \$

No

General Information:

1. Name:

2. Address:

3. City/ State/ Zip:

4. Home Phone:

5. Work Phone:

6. Fax:

7. New Home Address:

8. City/ State/ Zip:

9. Builder Name (if applicable):

10. Contact Name:

11. Phone:

12. Fax:

13. Architect Name (if applicable):

14. Contact Name:

15. Phone:

16. Fax:

17. Interior Designer Name (if applicable):

18. Contact Name:

19. Phone:

20. Fax: