

Kitchen Planning Guide

The *details* will be determining factors for how well your new kitchen reflects your personality and needs. Take time to print out this planning guide and answer the questions as thoroughly as possible.

Please complete the following questionnaire and simply fax directly to our designers or bring to your initial consultation.

Household & Lifestyle

1. Number of Household Members: ____

2. Number and approximate ages of household members:
 __ Infants __ Young children __ Teens
 __ 20 to 30 yrs __ 31 to 40 yrs __ 41 to 50 yrs
 __ 51 to 60 yrs __ 61 to 70 yrs __ 70+

3. If your household has young children, will they be using the kitchen frequently? __ Yes __ No

4. 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+ yrs

5. Where do you eat meals?
 __ Kitchen __ Dining Room __ Other: _____

6. Where will you eat after you remodel/build?
 __ Kitchen __ Dining Room __ Other: _____

7. Do you require a kitchen table or would you be willing to explore other options?
 __ A kitchen table is required
 __ A kitchen table is preferred but I'm open to other options
 __ A kitchen table is not necessary

8. What other activities will take place in your new kitchen?
 __ Laundry __ Homework __ Watching TV
 __ Bill paying __ Sewing __ Computer Center
 __ Other: _____ __ Other: _____

9. After you remodel/build, will you entertain frequently? __ Yes __ No
 If Yes...
 Is your entertainment style __ formal or __ informal?
 Do you have __ large or __ small gatherings?
 Do your guests help you in the kitchen when you entertain? __ Yes __ No

10. How do you shop?
 __ For the week __ Buy in bulk and freeze
 __ For each meal __ Buy non-perishable items in bulk

11. 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
 Bring Meals Home Baking
- 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? If so, please list:
 No Yes: _____
- 7. Who is the secondary cook? _____
- 8. Do the primary and secondary cook prepare meals together? Yes No
- 9. Is the secondary cook left handed or right handed?
- 10. How tall is the secondary cook? _____
- 11. What are the secondary cook's responsibilities?
 Preparing side dishes Assist in preparing main course Clean up
- 12. Does the secondary cook have any physical limitations? If so, please list:
 No Yes: _____

Design & 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)?
 Absolutely not I would consider it
- 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

8. Will you be keeping your existing appliances or purchasing new?

Dishwasher: Existing New

Refrigerator: Existing New

Range: Existing New

Oven: Existing New

Cooktop: Existing New

Microwave: Existing New

Other: _____

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

Contemporary Formal Country Traditional

10. Do you have a "wish list" of items you would like to be included in your new kitchen? If so, please list them below:

Time & 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 included in your contract? Yes No

4. Have you established a budget for this project? Yes No

If Yes...

Cabinetry Budget \$ _____

Appliance Budget \$ _____

Countertop Budget \$ _____

General

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

New Home Address: _____

Builder (if applicable): _____ Phone: _____

Architect (if applicable): _____ Phone: _____

Interior Designer (if applicable): _____ Phone: _____