

KITCHEN PLANNING QUESTIONNAIRE

GENERAL INFORMATION

1. How long have you lived at the residence?

2. When was the house built?_____ How old is the present kitchen?_____
3. When would you like to start the project?

4. When would you like the project to be completed?

5. Do you have a specific builder/contractor or other subcontractor/specialist with whom you would like to work?

Contractor:

Name: _____

Firm: _____

Address: _____

Phone: _____

Cell Phone: _____

Fax: _____

Email: _____

Interior Designer or Architect:

Name: _____

Firm: _____

Address: _____

Phone: _____

Cell Phone: _____

Fax: _____

Email: _____

6. What portion of the project, if any, will be your responsibility?

7. Do you require installation services?

8. What family members will share in the final decision-making process?

KITCHEN QUESTIONS

1. How many household members?

_____ Adults _____ Teens _____ Children
_____ Pets What types: _____

2. Are you planning on enlarging your family while living here? _____

3. Who is the primary cook? _____

Is the primary cook left-handed _____ or right-handed? _____

How tall is the primary cook? _____

Does the primary cook have any physical limitations? _____

4. How many other household members cook? _____

Who are they? _____

Do they have a cooking hobby? _____ or assist the primary cook with
a specific task? _____

Is the secondary cook(s) right-handed? _____ or left-handed? _____

How tall is the secondary cook(s)? _____

Is a specialized cooking center required for the secondary cook(s)? _____

Does he/she have any physical limitations? _____

5. How does the family use the kitchen? _____

Meals: _____ Daily heat & serve _____ Daily full course "from scratch"

_____ Weekend quantity cooking _____ Weekend family meals

Other _____

6. Is the kitchen a socializing place? _____

7. How would you like the new kitchen to relate to adjacent rooms?

8. What are your kitchen and dining requests? _____

_____ Separate table _____ New _____ Existing

_____ Size _____ Leaf extension

_____ Number of seated diners

_____ Peninsula or Island seating

9. Do you do any specialty cooking? _____ Gourmet _____ Canning

_____ Ethnic _____ Kosher

10. Do you cook in bulk for freezing? _____ and/or leftovers? _____

11. Do you require any of the following design features?

Open storage _____

Wall cabinets to ceiling _____ Soffits _____ Open above cabinets

Glass doors _____ Overhead storage _____

Island peninsula _____ New windows _____

Table near window _____ Access to exterior _____

Addition _____

Remove walls _____

12. Do you entertain frequently? _____ Formally _____ Informally _____

13. Designing the kitchen so that it supports your living and entertainment style is part of the process. Tell us which statement fits you the best:

_____ I like to be the only one in the kitchen with my guests in a separate space that is away from the kitchen.

_____ I like to be the only cook in the kitchen, with my guests close by in a family room space that opens onto the kitchen.

_____ I like my guests to be sitting in the kitchen visiting me while I cook.

_____ I like my guests to help me in the kitchen in meal preparation.

_____ I like my guests to help in the cleanup process after the meal.

_____ I retain caterers who prepare meals for entertaining.

_____ The caterers come to the home to serve and cleanup.

_____ I stop by the caterers and pick up the food.

_____ I stop at the take-out restaurant and bring the meal home.

14. Do you have any of the following specific needs in your kitchen?

_____ Computer

_____ Laundry

_____ TV/Radio

_____ Eating

_____ Planning desk

_____ Wet bar

_____ Ironing board

_____ Growing plants

_____ Wine storage

_____ Message board

_____ Hobbies

_____ Study

_____ Phone area

_____ Other

_____ Other

15. Do you like to purchase food products in bulk? _____

16. Storage requirements (check all that apply):

_____ Baking equipment _____ Paper products _____ Spices

_____ Boxed goods

_____ Paper towels

_____ Tables/Appointments

_____ Pet food

_____ Canned goods

_____ Cleaning supplies

_____ Linens

_____ Pots & pans

_____ Wrapping materials

_____ Dishes

_____ Recycling

_____ Leftover containers

____ Glassware _____ Serving trays _____ Cleaning products
____ Silver _____ Cutting board _____ Other
____ Liquor _____ Non-refrigerated fruits/vegetables
____ Laundry/ Iron _____ Specialty cooking vessels (Wok etc.)

17. Specialized storage requirements:

____ Bottles _____ Dishes (non standard size) _____ Spices
____ Bread board _____ Display items _____ Wine
____ Bread box _____ Fresh vegetables _____ Lids
____ Cookbooks _____ Plastic _____ Other
____ Cutlery _____ Soft drink cans _____ Other

18. What type of cabinet interior storage are you interested in?

____ Lazy Susan _____ Roll-outs _____ Vertical dividers
____ Drawer ironing board _____ Towel bar _____ Pantry
____ Toe-kick step stool _____ Tilt out sink tray
____ Recycling/Waste bins _____ Drawer head _____ Other

19. What small specialty electrical appliances do you use in your kitchen?

____ Blender _____ Espresso/Cappuccino _____ Toaster oven
____ Can opener _____ Food processor _____ Waffle maker
____ Crock pot _____ Griddle _____ Wok
____ Coffee maker _____ Grinder _____ Electric fry pan
____ Pasta machine _____ Electric knife _____ Toaster
____ Other (explain) _____

20. Do you plan on sorting recyclable trash? _____

21. If yes, would you like a recycling station in your kitchen or in a adjacent area? _____

Sorting into: ___ Plastic ___ Paper ___ Glass ___ Compact refuse

NOTES:

MATERIALS SELECTION GUIDE

CABINETRY #1

Cabinet finish: Wood Painted Stainless steel
 Piano finish Lacquer Decorative laminate

Door style: _____

Drawer style: _____

Species and finishes: Primary color _____ Secondary/accent color _____

Hardware: Style #1 _____ Style #2 _____

CABINETRY #2

Cabinet finish: Wood Painted Stainless steel
 Piano finish Lacquer Decorative laminate

Door style: _____

Drawer style: _____

Species and finishes: Primary color _____ Secondary/accent color _____

Hardware: Style #1 _____ Style #2 _____

COUNTERTOP (Primary)

Location: _____

Material: Wood Marble Granite (thickness)
 Tile Glass Solid surfacing
 Soap stone Stainless steel Other

Color: _____

COUNTERTOP (Secondary)

Location: _____

Material: _____ Wood _____ Marble _____ Granite (thickness)

_____ Tile _____ Glass _____ Solid surfacing

_____ Soap stone _____ Stainless steel _____ Other

Color: _____

APPLIANCES

PRODUCT	MODEL	FINISH	OTHER NOTES	NEW OR EXISTING?
Refrigerator #1	_____	_____	_____	_____
Refrigerator #2	_____	_____	_____	_____
Wine storage	_____	_____	_____	_____
Dishwasher #1	_____	_____	_____	_____
Dishwasher #2	_____	_____	_____	_____
Trash compactor	_____	_____	_____	_____
Microwave #1	_____	_____	_____	_____
Microwave #2	_____	_____	_____	_____
Oven #1	_____	_____	_____	_____
Oven #2	_____	_____	_____	_____
Cooktop	_____	_____	_____	_____
Range	_____	_____	_____	_____
Ventilation Sys.	_____	_____	_____	_____
Warming drawer	_____	_____	_____	_____
Disposal #1	_____	_____	_____	_____
Disposal #2	_____	_____	_____	_____
Washing machine	_____	_____	_____	_____
Dryer	_____	_____	_____	_____
Television	_____	_____	_____	_____
Radio	_____	_____	_____	_____
Computer	_____	_____	_____	_____

FIXTURES

PRODUCTS	MODEL / STYLE	FINISH	OTHER NOTES
SINK #1	_____	_____	_____
SINK #2	_____	_____	_____
SINK #3	_____	_____	_____
FAUCET #1	_____	_____	_____
FAUCET #2	_____	_____	_____
FAUCET #3	_____	_____	_____
SOAP DISPENSER#1	_____	_____	_____
SOAP DISPENSER#2	_____	_____	_____
FILTRATION SYSTEM#1	_____	_____	_____
FILTRATION SYSTEM#2	_____	_____	_____
WATER DISPENSER #1	_____	_____	_____
WATER DISPENSER #2	_____	_____	_____
OTHER	_____	_____	_____

BACK SPLASH

PRODUCT	MATERIAL	LOCATION
PRIMARY	_____	_____
SECONDARY	_____	_____
OTHER	_____	_____

Indicate preferences in Back Splash material; ceramic tile, tumbled marble, 4" granite, 4" solid surface, full height granite or solid surface, wood, beadboard, stainless steel or other.