Mr. Paul's Custom Cabinets

Kitchen Planning Questionnaire

Name:		
Address	::	
Phone:	(home)	
	(cell)	
	(other)	

Family and Lifestyle:

1.	Family members:				
2.	How long do you plan on living in the home you are remodeling/building?				
	1 to 5 yrs 6 to 10 yrs 6 to 20 yrs 20+ yrs				
3.	Where does your family eat most meals?				
	Kitchen Dining Room Other:				
4.	Do you require a kitchen table or would you be willing to explore other options if a design could be improved?				
	Required Preferred, but open to other options Not necessary				
5.	What other activities will take place in your new kitchen?				
	Homework Watching TV Computer Center Other:				

Design and Style:

1.	What are your color preferences for your new kitchen? ———————————————————————————————————					
2.						
3.	Have you created a scrapbook of notes, photos, and ideas that you would like to use in your new kitchen?					
4.	If a design could be greatly improved, would you be willing to make structural changes? (i.e. moving windows, doors, and walls)					
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? If yes, how many separate bins do you need for sorting items?					
8.	Will you be keeping your existing appliances? Dishwasher: Existing New					
	Refrigerator: Existing New Size					
	Oven/Range: Existing New Size					
	Microwave:ExistingNewSize					
9.	What is your style preference for your new kitchen? Contemporary Formal Country Traditional					

Time and Budget:

1.	When would	vou like to	begin v	vour project	?

- 2. When would you like your project completed: _____
- 3. If you are building, is the kitchen in your contract? _____
- 4. Do you have a budget for this project? \$ _____