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Kitchen Planning Questionnaire

The Kitchen Planning Questionnaire is geared to provide information Design Tec will use to design a kitchen ideally suited to the needs of your home & family. We invite you to print out the form, fill in the blanks & have it when we visit with you in your home. It's a great way to get started.

Personal Information:

Name:			
Address:			
City:	State:	Zip:	
Home Phone:		Cell Phone:	
Email:			

General Information:

- How long have you lived at your residence? ______
- How long do you plan on staying there? _____
- What year was the house built? _____ How old is the present kitchen? _____

- What budget range have you established for your kitchen project? ______

Family and Lifestyle:

- Number of family member
- Where does your family eat its meals?
 - □ Kitchen
 - □ Dining Room
 - □ Other: _____
- What other activities will take place in your new kitchen? □ Laundry

□ Homework	
□ Watching TV	
Paying Bills Source and a second se	
 Sewing Computer Center 	
□ Other:	
Do you entertain frequently?	
Design & Style:	
 Have you created a scrapbook of notes, photos and kitchen? 	
 What colors do you like? Dislike? 	
 If a design could be greatly improved, would you b 	e willing to make structural changes?
 What do you like about your current kitchen? 	
 What do you dislike about your current kitchen? 	
Kitchen Specific:	
• Would you like your cabinets full height to the ceili	ing?
• Would you like your cabinets to have varied height	
 What type of interior cabinet storage items are you 	
□ Lazy Susan □ Vertical Dividers	
Recycling/Waste Bins Roll –outs Wino Packs	□ Cuttery □ Spice Racks
 Bread Box Wine Racks Other 	
• What type of Countertop Materials are you conside	ering?
- What time of Declarplach Material are seen as it	rin -2
 What type of Backsplash Material are you consider 	ing?
 What type of Flooring are you considering? 	
Have you looked into appliance yet? If y	/es, what brands/sizes?
Other details you wish to provide not addressed in t	his questionnaire