

# Cabinetry Design Solutions

Room: Home Office

## Design Questionnaire

### GENERAL PROJECT INFORMATION

Is your project new construction or a remodel?  New Construction  Remodel

Do you have a contractor for your project?  Yes  No

If yes, who is your contractor? \_\_\_\_\_

What rooms does the project include?

- |   |   |
|---|---|
| <input type="checkbox"/> Kitchen              | <input type="checkbox"/> Powder Room          |
| <input type="checkbox"/> Master Bath          | <input type="checkbox"/> Family Room          |
| <input type="checkbox"/> Other Baths (list #) | <input type="checkbox"/> Utility/Laundry Room |
| <input type="checkbox"/> Summer Kitchen       | <input type="checkbox"/> Home Office          |
| <input type="checkbox"/> Other                | _____   |
| <input type="checkbox"/> Other                | _____   |

If the design can be greatly improved would you be willing to make changes to the structure?

Absolutely Not  I would consider it

How many people in the family (please note how many in each age category)

- |                                    |   |                                    |
|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Infants   | <input type="checkbox"/> Young children | <input type="checkbox"/> Teens     |
| <input type="checkbox"/> 20-30 yrs | <input type="checkbox"/> 31-40 yrs      | <input type="checkbox"/> 41-50 yrs |
| <input type="checkbox"/> 51-60 yrs | <input type="checkbox"/> 61-70 yrs      | <input type="checkbox"/> 70+ yrs   |

Are there pets in the house?(please note how many in each category)

- Dogs Breed(s) \_\_\_\_\_
- Cats \_\_\_\_\_
- Other \_\_\_\_\_

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

1-5 yrs  6-10 yrs  11-20 yrs  20+ yrs

Do any family members have physical limitations?  Yes  No

If yes, please list: \_\_\_\_\_

### DESIGN & STYLE

What style would you use to describe your tastes? (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Sleek/Contemporary | <input type="checkbox"/> Country        |
| <input type="checkbox"/> Traditional        | <input type="checkbox"/> French Country |
| <input type="checkbox"/> Transitional       | <input type="checkbox"/> Mission        |
| <input type="checkbox"/> Shaker             | <input type="checkbox"/> Mediterranean  |
| <input type="checkbox"/> Other              | _____                                   |

What colors do you like? \_\_\_\_\_

What colors do you dislike? \_\_\_\_\_

Do you have notes, photos, and ideas of styles and details you would like to incorporate in your project?

Yes  No

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**TIME & BUDGET**

When would you like to begin your project? \_\_\_\_\_

When would you like your project completed? \_\_\_\_\_

What is the budget for your project? \_\_\_\_\_

If this is a remodel, it should include demolition, electrical, plumbing, HVAC, drywall, painting, flooring, cabinetry, appliances, countertop, and backsplash.

For new construction, this is the cabinetry allowance from your builder.

**HOME OFFICE**

Do you have a summer kitchen currently? Yes \_\_\_ No \_\_\_ If yes, what do you like about it? \_\_\_\_\_

What do you dislike about your current Home Office? \_\_\_\_\_

What tasks will take place in your new Home Office? \_\_\_\_\_

What type computer will you have?

- Desktop       Laptop
- Other \_\_\_\_\_

What size monitor will you have? \_\_\_\_\_ Flat Screen?  Yes  No  
Make \_\_\_\_\_ Model \_\_\_\_\_

What components do you want?

- Keyboard       Video Game       Subwoofer
- Mouse       Speakers
- Other \_\_\_\_\_
- Other \_\_\_\_\_

What storage requirements do you have?

- CDs      How many? \_\_\_\_\_       Files      How much? \_\_\_\_\_ LF
- DVDs      How many? \_\_\_\_\_
- Games      How many? \_\_\_\_\_
- Books      How many? \_\_\_\_\_
- Other \_\_\_\_\_
- Other \_\_\_\_\_

What type of finish do you prefer for the cabinetry?

- Stained Wood       with Glaze      Type of Wood \_\_\_\_\_
- Painted Wood       with Glaze
- Laminate
- Laquer       High Gloss       Matte
- Other \_\_\_\_\_

What type of countertop do you prefer?

- Granite       Solid Surface
- Wood
- Other \_\_\_\_\_