

KITCHEN QUESTIONNAIRE



 Truly Custom
Homes

Kitchen Questionnaire

FAMILY AND LIFESTYLE

1. Number of Family Members: ___
2. Number and approximate ages of family 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+ yrs
3. If your family has young children, will they be using the kitchen? ___ Yes ___ No
4. How long do you plan on living in the home you are building/remodeling?
___ 1 to 5 yrs ___ 6 to 10 yrs ___ 11 to 20 yr ___ 20+ yrs
5. Where does your family eat its meals?
___ Kitchen ___ Dining Room ___ Other: _____
6. Where will your family eat after the remodel?
___ Kitchen ___ Dining Room ___ Other: _____
7. Do you require a kitchen table or would you be willing to explore other options?
___ A table is required
___ A table is preferred but open to other options
___ A table is not necessary
8. What other activities will take place in your kitchen?
___ Laundry ___ Homework ___ Watching TV ___ Paying Bills ___ Sewing
___ Computer Center ___ Other: _____ ___ Other: _____
9. After you remodel will you entertain frequently? ___ Yes ___ No
If Yes,
What is your entertainment style? ___ Formal ___ Informal
Do you have ___ large or ___ small gatherings?
Do your guests help 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

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? _____

3. What is the primary cook's cooking style?
 Gourmet meals Family Meals Quick & Simple Meals
 Bring home meals Baking
4. What does the primary cook prefer?
 No one else in the kitchen when preparing meals
 A helper in the kitchen when preparing meals
 Family and friends in the kitchen when preparing meals
5. Does the primary cook have any physical limitations? _____
6. Who is the secondary cook? _____
7. Do the secondary cook and primary cook prepare meals together? Yes No
8. Is the secondary cook left handed or right handed?
9. How tall is the secondary cook? _____
10. What are the secondary cooks responsibilities?
 Preparing side dishes Clean Up Assist in preparing main dishes
11. Does the secondary cook have any physical limitations? _____

DESIGN AND STYLE

1. What are your color preferences for your new kitchen?

2. Are there colors that you don't 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 walls, 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. Will you be keeping your existing appliances?
 Dishwasher: existing new
 Refrigerator: existing new
 Oven/Range: existing new
8. What is your style preference for your new kitchen?
 Contemporary Country Formal Traditional
9. What type of storage do you prefer?
 shelves sliding shelves drawers speciality

10. What kinds of items do you need storage for?
- tableware glassware stemware utensils cutlery
 silverware blender barware fine china dry food
 canned food spices canned beverages coffee maker toaster
 mixer cookbooks food processors pottery wine
 mops/brooms recycling bins cleaning supplies linens
11. What type of wood species do you prefer?
- Alder Birch Cherry Heartwood Maple
 Hickory Maple Pine Oak
12. Or, would you prefer a non-wood species? MDF Laminate Green Core
13. What style of cabinet has your interest? Traditional (framed) European (frameless)
14. What style of cabinet door do you prefer?
- flat panel raised panel recessed panel shaker bead board arched
15. What kind of countertop would you like?
- natural stone quartz solid surface laminate
16. What is your hardware preference? knobs pulls
17. What type of sink would you prefer?
- single bowl double bowl triple bowl round bowl farmhouse
18. What type of material would you like to use?
- stainless steel cast iron integral enamel acrylic
19. Do you want a garbage disposal? Yes No
20. How would you like your sink mounted? top mounted under mounted integrated
21. Will you be cooking with gas or electric?
22. What type of oven/range will you be getting?
- cooktop with separate oven slide-in/drop-in freestanding
23. Will you be wanting a wall oven? If so, which type?
- single oven double oven convection microwave/oven combo
24. Where would you like your microwave?
- over-the-range on the counter on a cart or shelf built-in
25. Are you interested in new flooring? If yes, what do you prefer?
- laminate vinyl ceramic tile hardwood
26. What are your lighting needs?
- recessed spots pendent track
 ceiling mounted wall mounted under-cabinet

TIME AND BUDGET

1. When would you like to begin your project?

2. When would you like your project completed?

3. If you are building, is your kitchen in the contract? Yes No
4. Do you have a budget for this project?
 Yes \$ _____ No

GENERAL

1. Name: _____
2. Address: _____
3. City: _____ State: Zip: _____
4. Home Phone: _____ Work Phone: _____ Cell Phone: _____
5. Fax : _____ Email: _____
6. New Home Address: _____
7. City: _____ State: Zip: _____
8. Builder Name: (if applicable) _____
9. Contact Name: _____
10. Phone: _____ Fax: _____
11. Architect Name: (if applicable) _____
12. Contact Name: _____
13. Phone: _____ Fax: _____





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