



**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:

Interior Designer or Architect:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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:

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## **MATERIALS SELECTION GUIDE**

### CABINETRY #1

Cabinet finish:  Wood  Painted  Stainless steel  
 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  
 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.

