

# VIRGINIA KITCHENS

your marketplace for cabinets & design

## Kitchen Planning Questionnaire

Instructions: Fill out form using the tab key to move between fields. Save file. Email back to [designer@virginia-kitchens.com](mailto:designer@virginia-kitchens.com) or bring to your design appointment. Call us at 703-373-1979 with any questions.

### Family and Lifestyle

1. Number of family members: \_\_\_\_\_
2. Does a member of your family require accessibility for the elderly or disabled?  
 Yes       No
3. If your family has young children, will they be using the kitchen frequently?  
 Yes       No
4. How long do you plan on living in the home you are remodeling / building?  
 1 to 5 yrs       6 to 10 yrs       11 to 20 yrs       20+ yrs
5. Where does your family eat its meals?  
 Kitchen       Dining Room       Other \_\_\_\_\_
6. Do you require a kitchen table or would you be willing to explore other options if a design could be improved?  
 A kitchen table is required  
 A kitchen table is preferred, but we are open to other options  
 A kitchen table is not necessary
7. What other activities will take place in your new kitchen?  
 Laundry       Homework       Watching TV       Paying bills  
 Sewing       Computer Center       Entertaining       Other \_\_\_\_\_
8. After your remodel/build, will you entertain frequently?  
 Yes       No  
If so, what is your entertainment style?  
 Formal       Informal  
What size gatherings do you have?  
 Large       Small  
Do your guests help you in the kitchen when you entertain?  
 Yes       No

Do your guests gather around in the kitchen while you are cooking?

Yes             No

9. How do you shop?

For the week    Buy in bulk and freeze

For each meal    Buy non-perishable items in bulk

If you buy in bulk, do you require storage in the kitchen for all or most of these items?

Yes             No

### Design and Style

10. Have you created a collection of notes, photos, and ideas that you would like to use in your new kitchen?  Yes    No

11. How large is your house?

>1000 SF             1000-2000 SF     2000-3000 SF     3000-4000 SF

4000-5000 SF     5000+ SF

12. How long have you lived in this house? \_\_\_\_\_

13. What year was your house built? \_\_\_\_\_

14. What are your color preferences for your new kitchen? \_\_\_\_\_

15. Are there any colors you would not want in your kitchen? \_\_\_\_\_

16. If a design could be greatly improved, would you be willing to make structural changes? (ie. moving windows, doors, and walls)  Absolutely not    I would consider it

17. Would you like your kitchen to relate in some way to adjacent rooms?

\_\_\_\_\_

18. What do you like about your current kitchen?

\_\_\_\_\_

19. What do you dislike about your current kitchen?

\_\_\_\_\_

20. Do you have any specific storage needs?

\_\_\_\_\_

Rollouts             Lazy Susan             Vertical Dividers             Pantry  
 Tilt Out             Spices             Cookbooks             Towel Bar  
 Wastebasket    Cutting Boards    Cookie Sheets             Pots/Pans

21. Do you require a recycling center in your kitchen?  Yes  No

If yes, how many items do you need to sort? \_\_\_\_\_

22. Is there any specific baking or cooking need you would like us to design for?

\_\_\_\_\_

23. Will you be keeping your existing appliances?

Dishwasher  Existing  New

Refrigerator  Existing  New

Oven/Range  Existing  New

Cooktop  Existing  New

Microwave  Existing  New

Other: \_\_\_\_\_  Existing  New

24. What is your style preference for your new kitchen?

Sleek/Contemporary  Formal  Country  Traditional

Eclectic  Casual Family Gathering  Other \_\_\_\_\_

25. Are you familiar with any wood species or finishes you imagine in your new kitchen?

Wood Species \_\_\_\_\_ Finish \_\_\_\_\_ Door Style \_\_\_\_\_

26. Is there a countertop material you are ready to proceed with? Are you familiar with the advantages and disadvantages of the different materials on the market?

Material \_\_\_\_\_ Edge Treatment \_\_\_\_\_

Backsplash Height \_\_\_\_\_

27. Are you interested in a unique tile backsplash? Would you like a focal point behind the range/cooktop or sink? \_\_\_\_\_

28. Would you like glass cabinets for display?  Yes  No

29. What flooring material will you be using in the new space?

Wood  Tile  Cork  Other \_\_\_\_\_

30. Are there any changes to the lighting you would like to integrate into the new plan?

\_\_\_\_\_

Cooking Style

31. Is the cooking in your kitchen usually a  solo or  team effort?

If a team, are duties  shared or  divided?

Is there a primary person who does most of the cooking?  Yes  No

32. What is the main cooking style?

Gourmet  Family meals  Quick and simple

Take out  Baking

33. Do any of the persons cooking have physical limitations?  Yes  No

34. Do the persons cooking prefer things  taller or  shorter?

Time and Budget

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

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

37. If you are building, is the kitchen in your contract?  Yes  No

38. Do you have a budget for this project?  Yes \$\_\_\_\_\_  No

39. How did you learn about our firm? \_\_\_\_\_

General

40. Name \_\_\_\_\_

41. Address \_\_\_\_\_

42. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

43. Home Phone \_\_\_\_\_

44. Work Phone (1) \_\_\_\_\_ Work Phone (2) \_\_\_\_\_

45. Cell Phone (1) \_\_\_\_\_ Cell Phone (2) \_\_\_\_\_

46. Fax \_\_\_\_\_

47. E-mail \_\_\_\_\_