



kitchen design survey

Please take a few minutes to complete this survey so that we can get a better idea of how your kitchen is used, how you would like your new kitchen to be used, and what your family's needs are.

Client: _____

Your Family:

List who is living at home, including children's ages.

Who does the cooking in your family? If more than one person, list percentages.

1. ____ % _____ right or left handed.

2. ____ % _____ right or left handed.

How many people are often cooking together?

1 2 3 or _____

What type or style of cooking do you like to do?:

- prepared foods.
- fresh meats
- fresh fruits, vegetables
- canned foods
- frozen foods
- sauces
- casseroles
- roasting
- broiling
- BBQ'ing
- bag lunches
- home-baked bread
- pastries
- recipe development
- homemade pasta
- wok cooking
- soups, stews
- Other: _____

What happens in your home at breakfast?

During the week: _____

On weekends: _____

If you are coffee and/or tea drinkers, check items that need to be accessible:

- teas - number of different types _____
- ground coffee - number of different types _____
- whole beans - number of different types _____
- coffee grinder
- coffee filters
- electric coffee maker: ____wide, ____deep, ____high
- espresso machine

Entertaining:

Approximately how frequently do you entertain or hope to entertain? _____

What is the typical number you invite? _____

Are your parties informal, kitchen-centered affairs? _____

When you entertain, who does the cooking? _____

Do you usually serve wine or cocktails in advance? Yes No

If so, where would you like this to be? _____

Do you usually serve hors d'oeuvres? Yes No

If so, where would you like this to be? _____

Do you serve holiday meals to a large family? Yes No

If so, how many usually attend? _____

List specific needs for entertaining that are not now accommodated: _____

Kitchen Usage:

Will you need a desk? Yes No If so, check which of the following you would like:

- small message area. generous work area.
- file drawer(s) letter legal
- phone, answering machine.
- personal computer printer fax machine
- bulletin board chalk board
- cookbook storage
- children's backpacks homework area

Would you like a bar area in the kitchen? Yes No

If so, is a sink important? Yes No

Do you wish to display glassware behind glass doors in bar area? Yes No

Will the laundry area adjoin or be an integrated part of the kitchen? Yes No

If so, would you like to use your existing washing machine/dryer? Yes No

Is your dryer gas or electric? Gas Electric

Would the ironing also be done here? Yes No

Would you like to include an ironing board built into the wall? Yes No

Would you like a laundry sink? Yes No

Should a table area be included in the kitchen? Yes No

If so, do you have a table you wish to use? Yes No Size _____

How many people would you usually like to seat? _____

Do you expect a comfortable seating area to adjoin the kitchen? Yes No

Do you anticipate including a television? Yes No

Should it be seen by the cook? Yes No

Will small children be playing in the kitchen? Yes No

List children's items you would like to store: _____

Storage Needs:

How frequently do you shop for groceries? _____

Do you plan to have an auxiliary refrigerator? (such as in the garage) Yes No

Approximately how many cans do you usually store? 1, 2, 3, 4 dozen or more. _____

Do you store a great quantity of frozen items? Yes No

How much flour do you usually keep on hand? Do you have a favorite way for storing flour? _____

Do you store several types? Yes No

Circle any of the following you store in the refrigerator: bread, coffee, flour.

Estimate the quantities you have of the following:

____ sauce pans with lids. ____ skillet(s). ____ omelet or crepe pans. ____ stock pots.
____ medium size casseroles. ____ large size casseroles. ____ bread pans. ____ colanders.
____ pie pans. ____ muffin tins. ____ cooling racks. ____ woks.

Which small appliances do you want to have accessible? What is your preferred way to store them?

	wide	deep	high	on counter	hidden
<input type="radio"/> mixer	_____	_____	_____	_____	_____
<input type="radio"/> food processor	_____	_____	_____	_____	_____
<input type="radio"/> toaster	_____	_____	_____	_____	_____
<input type="radio"/> coffeemaker	_____	_____	_____	_____	_____
<input type="radio"/> espresso machine	_____	_____	_____	_____	_____
<input type="radio"/> blender	_____	_____	_____	_____	_____
<input type="radio"/> hand blender	_____	_____	_____	_____	_____
<input type="radio"/> sorbet machine	_____	_____	_____	_____	_____
<input type="radio"/> pasta machine	_____	_____	_____	_____	_____
<input type="radio"/> waffle iron	_____	_____	_____	_____	_____
<input type="radio"/> breadmaking machine	_____	_____	_____	_____	_____
<input type="radio"/> other _____	_____	_____	_____	_____	_____

Do you have a preferred way to store knives? _____. Explain: _____

Describe the quantity of spices you need accessible: ____ few (1-10), ____ moderate (10-20), ____ many (20+)

Have you found a method that you prefer to store them? Yes No _____

How many sets of everyday dishes will you be storing in the kitchen? _____

Would you like these behind glass doors? Yes No

Do you separate garbage into recycling materials? Yes No glass aluminum paper other _____

Do you combine all recyclables? Yes No

Do you have standard curb-size bins: Yes No If so, list number and dimensions: _____

What cleaning items would you like to have in the kitchen?

broom dust pan dust buster cleaning solvents

vacuum: ____ wide ____ deep ____ high

List other items you need to store: _____

Specialized Items:

Optional items:

- | | | | |
|---------------------------|--------------------------|-----------------------------|---------------------------------------|
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | instant hot water faucet |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | water filter system. |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | compactator |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | second sink in the kitchen |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | automatic icemaker in refrigerator |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | refrigerator door ice/water dispenser |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | microwave oven |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | microwave/convection oven |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | convection/conventional oven |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | double rather than single oven |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | warming lights |

Preferences:

Indicate if you would like to include the following features in your kitchen:

- | | | | |
|---------------------------|--------------------------|-----------------------------|-------------------------------|
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | gas cooktop |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | broiler on cooktop |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | electric cooktop |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | large single sink. |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | double offset sink |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | stainless steel sink |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | cast iron enamel sink |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | side-by-side refrigerator |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | lower freezer on refrigerator |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | open shelving |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | pot rack |
| <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Maybe | other items: _____ |

EXISTING ITEMS

List any appliances or items you hope to reuse in your new kitchen:

EXISTING PROBLEMS

List problems or complaints you have about your existing kitchen:

ANTICIPATION

List several adjectives you would like to describe your new kitchen:
