Please take a few minutes to answer the following questions. Doing so will greatly assist me in helping you create a design specifically tailored to your individual tastes and preferences, while also ensuring that you receive the greatest value from your consultation.



Name:\*  Date:\* 

Address:\* 

Email:\* 

\*If a question does not apply or you have no opinion, you may leave it blank.

1. What room / area are you interested in working on? Mark all that apply\*

 Kitchen  Family Room  Dining Room

 Formal Living Room  Master Bedroom  Playroom

 Guest Bedroom  Child’s Bedroom  Sunroom

 Foyer  Guest Bathroom  Bar Area

 Half Bathroom  Finished Basement  Study

Other:



2. How would you describe the style of your dream room(s)? Check all that apply:\*

 Formal  Informal / Casual  Global  Coastal

 Traditional  Transitional  Asian Zen  Contemporary

 Eclectic  Modern Farmhouse  Modern  Rustic

 French Country  Country  Shabby Chic  Scandanavian

 Bohemian Mid-Century Modern  Industrial  Vintage / Antique

Other:



3. Who most often uses this room or rooms? Check all that apply:\*

 Adults 25-60  Children  Infants  Pets

 Adults 60+  Teens  Mixed Group Special Needs (please describe)

Other:



4. What elements in the room would you like me to work on? Check all that apply:\*

 Flooring Wall Paint / Wallcovering  Furniture  Artwork

 Lighting  Window Treatments  Built-Ins  Cabinets  Accessories  Plumbing Fixtures  Specialty Wall Treatments

Other:



5. Do you have or can you acquire or draw a plan, blueprint, diagram, or sketch of your area?\*

Yes No

Photos?:

Yes No

6. How would you describe the light conditions of the area that you are interested in designing/redesigning?\*

 Lots of natural light  Minimal natural light  No light

 Artificial light (Incandescent - lamps, overhead lighting, etc.)

 Artificial light (Fluorescent - lamps, overhead lighting, etc.)

Other:

 

7. What is your single favorite color?(Many times this will be the color you wear most often)\*



a. What colors/color combinations would you like to include in your room?\*



b. Are there any colors to avoid?\*



8. Is there any specific existing furniture, accessories, or other items that you would like to include in your room? (please list):\*



9. Are there any specific new furniture, accessories, or other items that you would like to add to your room? (please list):\*



10. What don’t you like currently about this room (what is non-functional, un-inviting, unattractive, something you’d like to change). Please be as specific as possible.



12. Do you have a Pinterest board you’ve created for this room or area to give me an idea of your likes / dislikes?\* Yes No

13. Do you have any utilities or obstacles to work around in this room?\* Yes No

14. Are there any special needs or requirements for this room? If so, please list them below.\*

Yes No



15. To help you achieve your design goals within your desired budget range, please check the box below that best matches what you would like to budget for your project. This information will help me to better focus on your specific needs during the consultation and design process.\*

 $500 to $1000  $1000 to $5000  $5000 to $10,000

 $10,000 to $15,000  $15,000 to $30,000  $30,000 to $50,000

 $50,000 to $100,000  $100,000 +

Other:



16. Do you have any other notes or comments you would like to add?\*





Thank you for taking the time to fill this out! Having this information will help me deliver your dream interior! I look forward to working with you!

Sincerely,

Laurie Doughman