

## Brief Sheet

Name: .....  
Address: .....  
  
City: .....  
Postcode: .....  
Phone: .....  
Date: .....

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### GENERAL CLIENT INFORMATION

1. How long have you lived at this house? .....Yrs
2. When was the house built? ..... How old is the present kitchen? ..... Yrs
3. When would you like to start the project? .....
4. Do you plan on retaining an interior designer or architect to assist you in the kitchen planning?
  - a. Yes ..... No .....
  - b. Do you have a specific builder/contractor or other subcontractor/specialist with whom you would like to work with? Yes ..... No .....
5. What budget range have you established for your kitchen project? .....
6. What do you dislike most about your present kitchen? .....
7. What do you like about your present kitchen .....
8. When would you like the project completed? .....

### SPECIFIC KITCHEN QUESTIONS

1. How many household members? (and approximate ages)  
..... Adults ..... Teens ..... Children ..... Other  
..... Pets What types? .....
2. Who is the primary cook? .....
3. Is the primary cook left-handed? ..... or right-handed? .....
4. How tall is the primary cook? .....
5. Does the primary cook have any physical limitations? .....
6. 4. How many other household members cook? .....
7. Who are they? .....Adult .....Child  
  
Do they have a cooking hobby (eg Baking)? ..... Yes ..... No and/or assist the  
primary cook with a specific task ..... Yes ..... No
8. Is a specialised cooking center required ..... Yes ..... No
9. Do they have physical limitations? ..... Yes ..... No
10. How does the family use the kitchen?  
Daily Heat & Serve Meals ..... Daily Full-Course, "From Scratch" Meals .....  
Weekend Quantity Cooking ..... Weekend Family Meals ..... Other .....
11. Is the kitchen a socialising space? ..... Yes ..... No

12. Will the kitchen be used for:

- a. Dining area
- b. Family Room
- c. TV Viewing
- d. Home Office

12. What time of day is the kitchen used most frequently? ..... AM ..... PM

13. What are your kitchen and dining area requests?

Separate Table..... Breakfast Bar .....

14. Number of Seated Diners? .....

15. Do you do any specialty cooking? Gourmet ..... Baking ..... Ethnic .....

16. Do you entertain frequently? Formally ..... Informally .....

### **SPECIFIC KITCHEN QUESTIONS (cont'd)**

18. Designing the kitchen so that it supports your entertainment style is part of the planning 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 with 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 all meals for entertaining

Entrees ..... Desserts ..... Other

19. What secondary activities will take place in your kitchen?

Computer ..... Laundry ..... TV/Radio ..... Eating ..... Desk/PC

Growing Plants ..... Sewing ..... Hobbies ..... Study ..... Other

What is your cycle of shopping for food?

Weekly ..... Bi-weekly ..... Daily

20. What types of products/materials do you purchase at the grocery store?

Predominantly fresh food purchased for a specific meal ..... Yes ..... No

Predominantly frozen foods purchased for stock ..... Yes ..... No

Traditional pantry boxed/package/canned goods purchased for stock:

(1) Types of canned goods:

Condiments ..... Fruits ..... Soft Drinks ..... Vegetables

(2) Cleaning products stocked in bulk .....

(3) Paper products stocked in bulk .....

(4) Other boxed/package food items stocked in bulk .....

(5) Other .....

## SPECIFIC KITCHEN QUESTIONS (cont'd)

21. Where do you presently store:

Baking Equipment ..... Non-Refrigerated .....Spices  
Boxed Goods Fruits/Vegs. ....Table Settings  
Canned Goods ..... Paper Products ..... Linens  
Cleaning Supplies .....Pet Food ..... Wrapping Materials  
Dishes ..... Pots & Pans.....Leftover Containers  
Glassware ..... Recycle Containers ..... Other  
Laundry/Iron ..... Specialty Cooking ..... Equipment Vessels (Wok, etc.)

22. What type of specialised storage is desired?

Bottles ..... Dishes ..... Plastic Bread Board .....  
Display Items ..... Soft Drinks .....Bread Box .....Glassware .....  
Spice..... Cookbook.....Vegetables .....Cutlery .....  
Linen..... Wine.....Other .....Other ..... Other

23. What type of cabinet interior storage are you interested in?

Magic Corner .....Pull out Pantry ..... Crockery Dividers..... Recycling/Waste Bins  
Cutlery Tray ..... Spice rack..... Other

24. What small specialty electrical appliances do you use in your kitchen?

Blender .....Elec. Fry Pan .....Wok..... Mixer .....  
Food Processor ..... Crock Pot ..... Griddle .....Coffee MachinE.....  
Toaster ..... Other.....

25. Have you considered relocating or changing the windows or doors in the new plan?

Yes ..... No .....

26. How do you plan on sorting recyclable rubbish in your new kitchen?

Sorting Into: ..... Plastic ..... Compact refuse..... Paper .....  
Trash ..... Glass .....

27. Would you like a sorting station in the:

- a. kitchen
- b. utility room
- c. garage
- d. basement