

# Kitchen Remodel Workbook

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*This is a tool we use in our design process with our Kitchen remodel clients. It helps to narrow down design styles, and gives us a better idea of what is necessary for your new kitchen.*

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## Part I: You and the project

### Section A: The Big Picture

When do you want to complete this project? \_\_\_\_\_

Do you want your plans prepared by a/an:

- architect  builder/contractor  interior designer  space planner  cabinet planner  yourself  
 other \_\_\_\_\_

What is your overall estimated budget for this project?

- \$12,000-\$30,000     \$30,000-\$45,000     \$45,000-\$60,000     \$60,000-\$80,000  
 \$80,000-\$100,000     \$100,000 and above

Do you want your kitchen to have:

- more room     less room     less upkeep     updated features  
 better layout/flow     more natural light  
 other \_\_\_\_\_

How long do you plan on staying in the remodeled or new house? (This should help you figure out the breakdown of price per year.) \_\_\_\_\_

How many members are in your family?    \_\_\_\_\_ adults    \_\_\_\_\_ children    \_\_\_\_\_ extended family

What are the ages and sexes of the family members? \_\_\_\_\_

Include extended time visitors, i.e. children in college, grandchildren staying the summer, relatives staying for holidays.

Are you planning to enlarge your family?     Yes     No

Number of children \_\_\_\_\_

Does your family have special needs?

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> dietary restrictions      | <input type="checkbox"/> religious               | <input type="checkbox"/> medical                        | <input type="checkbox"/> diabetic          |
| <input type="checkbox"/> allergic                  | <input type="checkbox"/> mobility                | <input type="checkbox"/> memory-impaired                | <input type="checkbox"/> safety (children) |
| <input type="checkbox"/> security (valuables)      | <input type="checkbox"/> ramps instead of stairs | <input type="checkbox"/> non-barrier shower             | <input type="checkbox"/> storage visible   |
| <input type="checkbox"/> appliances that lock      | <input type="checkbox"/> lockable knife storage  | <input type="checkbox"/> seated usage of kitchen        |  |
| <input type="checkbox"/> live-in help living space |  | <input type="checkbox"/> dedicated arts and crafts room |  |
| <input type="checkbox"/> home schooling space      |  | <input type="checkbox"/> home office space              |  |

Specific information: \_\_\_\_\_

What type(s) of pets do you have, if any? \_\_\_\_\_

Where do they eat? \_\_\_\_\_

Sleep? Spend their time? \_\_\_\_\_

Do you buy pet food in bulk?  Yes  No

If yes, what type do you buy?  dry  canned

## Section B: Personal Design Details

Prioritize the following options:

(1) very important (2) important (3) not important:

\_\_\_\_\_ function of space

\_\_\_\_\_ number of cooks

\_\_\_\_\_ look of space

\_\_\_\_\_ materials made in USA

\_\_\_\_\_ budget flexibility

\_\_\_\_\_ traffic flow through space

\_\_\_\_\_ separate space for each cook

\_\_\_\_\_ function and look of appliances

\_\_\_\_\_ brand name of materials

\_\_\_\_\_ timeframe of project

## Part II: Kitchen

### Section A: The Big Picture

Do you think your kitchen needs:  a simple cosmetic makeover  a complete renovation

Have you ever gone through the process of designing a custom kitchen?  Yes  No

Have you or anyone else made a sketch of your ideas for the kitchen?  Yes  No

Are you or your spouse inclined to do any of the installation work?  Yes  No

If so, what portion? \_\_\_\_\_

Would you like the kitchen floor plan to have:

traffic redirected through a different layout

more efficient storage

more efficient space planning

convenient transport between the kitchen and dining room

Do you want to:

change doors or windows

add an island

have a separate dining table in the kitchen

change size of space

consider a room addition

What do you like about your present kitchen? \_\_\_\_\_

What do you not like about your present kitchen? \_\_\_\_\_

What three words describe your dream kitchen? \_\_\_\_\_

What type of design would you like your new kitchen to have?

- sleek/contemporary     warm and cozy     American country     Italianate country  
 open and airy     French country     traditional     strictly functional  
 American formal     family retreat (coastal)     transitional (clean design with some detail)

What colors are you considering for your new kitchen? \_\_\_\_\_

Plan for current cabinetry:

- replace     reface     paint     reduce height  
 add cabinets     reduce number of cabinets     increase height

preferred color \_\_\_\_\_

preferred style \_\_\_\_\_

Plan for current appliances:

- replace     reface preferred color preferred style

Plan for current countertops:

- replace     reface preferred color preferred style

Would you add these specialized accessories for storage to your cabinetry?

- |   |   |
|---|---|
| <input type="checkbox"/> lazy Susan                                     | <input type="checkbox"/> ironing board                        |
| <input type="checkbox"/> rollout shelves                                | <input type="checkbox"/> towel bar                            |
| <input type="checkbox"/> pantry with rollout shelves                    | <input type="checkbox"/> pantry with swinging shelves         |
| <input type="checkbox"/> toe-kick step stool                            | <input type="checkbox"/> pantry with can racks on doors       |
| <input type="checkbox"/> tilt-out sponge tray                           | <input type="checkbox"/> recycling/waste bins                 |
| <input type="checkbox"/> vertical dividers for trays and cutting boards | <input type="checkbox"/> pullout table for two                |
| <input type="checkbox"/> utensil slots(fixed)                           | <input type="checkbox"/> utensil slots (adjustable)           |
| <input type="checkbox"/> knife storage in drawer                        | <input type="checkbox"/> knife storage in block on countertop |
| <input type="checkbox"/> knife storage on wall magnet                   | <input type="checkbox"/> liquor storage                       |
| <input type="checkbox"/> locked storage                                 | <input type="checkbox"/> tarnish-resistant silver storage     |
| <input type="checkbox"/> child locks                                    | <input type="checkbox"/> security locks                       |
| <input type="checkbox"/> other _____                                    |   |

## Section B: Appliances and Fixtures

Do you plan on having:

- gas     propane-fed gas     electric     gas and electric

How many of the following do you want?

- |                                |                                 |
|--------------------------------|---------------------------------|
| _____ food disposal            | _____ dishwasher                |
| _____ trash compactor          | _____ warming drawer            |
| _____ cooktop                  | _____ range                     |
| _____ under-counter oven       | _____ wall oven (single/double) |
| _____ traditional cooking oven | _____ convection cooking oven   |
| _____ halogen cooking oven     | _____ other oven                |
| _____ updraft hood             | _____ downdraft hood            |
| _____ microwave vent hood      | _____ steamer                   |
| _____ fryer                    | _____ wok burner                |
| _____ griddle                  | _____ grill                     |

If you plan on a new refrigerator, what kind do you want?

- built-in       built-in look       slide in  
 integrated/hidden       integrated/ hidden drawer base

If you plan on a new microwave, what kind do you want?

- above the stove-top  
 built-in cabinet (base/wall/space-saver)  
 sitting on countertop

Is your ventilation

- adequate       noisy       ugly       nonexistent

Do you want an overhead vent hood?

- Yes       No

What style and quantity of sink(s) do you prefer:

- single       double       triple basin       above counter  
 below counter       farm house       super sized

Minimum depth of bowl(s) \_\_\_\_\_ minimum width of bowl(s) \_\_\_\_\_ minimum height of bowl(s) \_\_\_\_\_

What gadgets do you want?

- built-in stereo       under-cabinet TV       hidden TV  
 Internet connection       DSL       cable hook-up       intercom  
 other \_\_\_\_\_

### Section C: Household Habits

How often do you shop for groceries?

- weekly       biweekly       daily       monthly

Does the cook want to be isolated from the family?

- Yes       No

Who will be cooking or helping with preparation in the kitchen?

- husband       wife       children       in-laws  
 hired chef

Do any of the household cooks have any physical limitations?

- Yes       No

Will any of the cooking or food preparation require special kitchen appliances?

- gourmet       canning       frying       candy making  
 baking       ethnic       in-home catering company  
 other \_\_\_\_\_

Are the primary cooks

- right-handed or  left-handed

What are their heights? \_\_\_\_\_

Do you enjoy spending a lot of time in the kitchen?  Yes  No

How does the family use the kitchen?

- |  |   |
|--|---|
| <input type="checkbox"/> daily heat- and-serve meals | <input type="checkbox"/> daily full course        |
| <input type="checkbox"/> meals from scratch          | <input type="checkbox"/> weekend quantity cooking |
| <input type="checkbox"/> weekend family meals        | <input type="checkbox"/> hobby, cooking/baking    |
| <input type="checkbox"/> homework                    | <input type="checkbox"/> reading                  |
| <input type="checkbox"/> games                       | <input type="checkbox"/> relaxing                 |
| <input type="checkbox"/> plating food for serving    |   |

How many people eat

_____ at family daily meals	_____ dinner parties (seated)
_____ dinner parties (buffet)	_____ family holiday dinners (seated)
_____ family holiday dinners(buffet)	_____ large parties(buffet)

What type of eating area do you want?

- |   |   |
|---|---|
| <input type="checkbox"/> table (round/rectangle/square/hexagonal/octagonal) | <input type="checkbox"/> banquet or booth         |
| <input type="checkbox"/> bench  | <input type="checkbox"/> raised bar (42-inch AFF) |
| <input type="checkbox"/> attached table (28- to 30-inch AFF)                | <input type="checkbox"/> bar (36-inch AFF)        |
| <input type="checkbox"/> counter height                                     |   |
| <input type="checkbox"/> lower bar (28- to 30-inch AFF)                     |   |
| <input type="checkbox"/> other _____  |   |

What small hand appliances do you use in the kitchen?

- |   |                                      |   |  |
|---|--------------------------------------|---|--|
| <input type="checkbox"/> food processor | <input type="checkbox"/> hand mixer  | <input type="checkbox"/> blender              | <input type="checkbox"/> bread machine |
| <input type="checkbox"/> electric mixer | <input type="checkbox"/> nut chopper | <input type="checkbox"/> coffee maker/grinder |  |
| <input type="checkbox"/> other _____    |                                      |   |  |

How often do you entertain? \_\_\_\_\_

How many do you entertain at a time? \_\_\_\_\_

What type of entertaining do you do?

- |   |                                   |                                 |   |
|---|-----------------------------------|---------------------------------|---|
| <input type="checkbox"/> cocktail party | <input type="checkbox"/> barbecue | <input type="checkbox"/> buffet | <input type="checkbox"/> sit-down dinners |
| <input type="checkbox"/> other _____    |                                   |                                 |   |

#### Section D: Storage Preferences

Do you store wine?  Yes  No

How many bottles of:

_____ red	_____ white	_____ investment collection
_____ single bottles	_____ cases	_____ open cabinet/small wine cooler/ large wine cooler/wine cellar

Would you like a recycle sorting station in the:

- kitchen       utility room       garage       basement  
 outside

Do you use the kitchen as a home office to:

- sort coupons       prepare shopping lists and recipes       pay bills  
 homework       store games for children

Would a file drawer be advantageous?

- Yes       No

Do you want a space for

- bulletin board       artwork wall       memo/chalkboard       calendar space  
 other \_\_\_\_\_

Approximately how many cookbooks do you have? \_\_\_\_\_

Do you prefer to have books visible or behind closed doors? \_\_\_\_\_

Would you like to have some kind of file system for incoming and outgoing mail?

- Yes       No

Do you have anything to be displayed for decorative purposes such as pottery, china, baskets, etc.?

- Yes       No

Describe \_\_\_\_\_

Do you buy food/soft drinks in bulk?

- Yes       No

How do you store fresh foods?

- refrigerator       baskets in cabinet       cellar storage other

#### Section D: Storage Preferences

How do you store bread?

- refrigerator       freezer       countertop       bread drawer

How do you store linens?

- hanging       folded

How much space do you require for linens? \_\_\_\_\_

Do you want a space for a fire extinguisher in the kitchen?

- Yes       No

Do you require a separate utility cabinet for brooms, mops and cleaning supplies?

- Yes       No

Do you require storage for a vacuum cleaner?

- Yes       No

What type of lighting do you prefer?

- |  |                                  |  |  |
|--|----------------------------------|--|--|
| <input type="checkbox"/> overhead  | <input type="checkbox"/> windows | <input type="checkbox"/> skylight      | <input type="checkbox"/> under cabinet |
| <input type="checkbox"/> toe kick  | <input type="checkbox"/> pendant | <input type="checkbox"/> recessed      | <input type="checkbox"/> task          |
| <input type="checkbox"/> decorative                                      | <input type="checkbox"/> soffit  | <input type="checkbox"/> artwork spots | <input type="checkbox"/> incandescent  |
| <input type="checkbox"/> halogen   | <input type="checkbox"/> xenon   | <input type="checkbox"/> ceiling fan   | <input type="checkbox"/> chandelier    |
| <input type="checkbox"/> lighting for reading, needlework, special tasks |                                  |  |  |
| <input type="checkbox"/> other _____                                     |                                  |  |  |

Do you want a raised or vaulted ceiling?

- Yes     No

Do you want to use some architectural details?

- |                                      |  |   |                                 |
|--------------------------------------|--|---|---------------------------------|
| <input type="checkbox"/> plasters    | <input type="checkbox"/> wainscot                | <input type="checkbox"/> crown molding    | <input type="checkbox"/> arches |
| <input type="checkbox"/> keys        | <input type="checkbox"/> cabinets like furniture | <input type="checkbox"/> feet on cabinets |                                 |
| <input type="checkbox"/> other _____ |  |   |                                 |

If you're replacing the flooring, what type of material are you considering?

- |                                       |                                       |   |                                 |
|---------------------------------------|---------------------------------------|---|---------------------------------|
| <input type="checkbox"/> vinyl        | <input type="checkbox"/> ceramic tile | <input type="checkbox"/> wood             | <input type="checkbox"/> carpet |
| <input type="checkbox"/> radiant heat | <input type="checkbox"/> cork         | <input type="checkbox"/> stained concrete |                                 |
| <input type="checkbox"/> other _____  |                                       |   |                                 |

How does your family treat the cabinets and countertops?

- rough     gentle

Would you like to have more countertop space around your:

- |                                      |                                    |                               |                                       |
|--------------------------------------|------------------------------------|-------------------------------|---------------------------------------|
| <input type="checkbox"/> cooktop     | <input type="checkbox"/> wall oven | <input type="checkbox"/> sink | <input type="checkbox"/> refrigerator |
| <input type="checkbox"/> other _____ |                                    |                               |                                       |

Have you thought about a larger primary meal preparation area (36" minimum)?

- Yes     No

What type of countertops would you prefer?

- Materials:
- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> laminate        | <input type="checkbox"/> solid surface   | <input type="checkbox"/> ceramic-tile |
| <input type="checkbox"/> stainless steel | <input type="checkbox"/> granite         | <input type="checkbox"/> marble       |
| <input type="checkbox"/> limestone       | <input type="checkbox"/> stone composite | <input type="checkbox"/> glass        |
| <input type="checkbox"/> lava stone      | <input type="checkbox"/> wood            | <input type="checkbox"/> concrete     |
| <input type="checkbox"/> other _____     |  |                                       |