

# New Kitchen Planner



Use this planner to begin your design process. Complete as many of the questions as you can. Feel free to contact us with any questions you may have.

## Dealer Info

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Website: \_\_\_\_\_

## Designer Info

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_



TOM ESPOSITO ASSOCIATES

**LBDDesigns**



# Client Information

- 1. How long have you lived at the address where you want a new kitchen? \_\_\_\_\_
- 2. Is this your primary home?     Yes     No
- 3. When was the house built? \_\_\_\_\_    How old is the existing kitchen? \_\_\_\_\_
- 4. When would you like to start the project? \_\_\_\_\_
- 5. When would you like the project to be completed? \_\_\_\_\_
- 6. Most budgets are 8-12% of the home's value. What is your home's approximate value? \_\_\_\_\_
- 7. What budget range have you established for your project? \_\_\_\_\_
- 8. What do you dislike about your present kitchen? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 9. What do you like about your present kitchen? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Kitchen Information

- 1. How many household members?    Adults \_\_\_\_\_    Teens \_\_\_\_\_    Children \_\_\_\_\_  
Special needs? \_\_\_\_\_     Pets? What types? \_\_\_\_\_
- 2. Who is the primary cook? \_\_\_\_\_     Left Handed     Right Handed
- 3. How many other household members cook? \_\_\_\_\_  
Do they have any cooking hobbies? \_\_\_\_\_
- 4. How does the family use the kitchen?     Daily heat-and-serve meals     Daily full-course meals  
 Weekend quantity cooking     Weekend family meals     Other \_\_\_\_\_
- 5. Any current or anticipated accessibility needs? \_\_\_\_\_  
Do you plan to age-in-place? \_\_\_\_\_

## Kitchen Information continued

6. Is the kitchen a socializing space. \_\_\_\_\_

7. How would you like the new kitchen to relate to other adjacent rooms? \_\_\_\_\_

Family Room     Home Office     Dining Room     TV Room     Other

8. What is your kitchen dining preference?     Island     Separate Table:     New     Existing

Table-height (30" high) dining counter     Counter-height (36" high) dining counter

Bar-height (42" high) dining counter    How many seated diners? \_\_\_\_\_

9. Do you do any specialty cooking?     Gourmet     Canning     Ethnic

10. How often do you entertain?    Formally? \_\_\_\_\_    Informally? \_\_\_\_\_

11. Which statement(s) fit you best?

I like to be the only one in the kitchen with my guests in a separate room.

I like to be the only cook in the kitchen with my guests close by in a family room that opens into the kitchen.

I like my guests to be in the kitchen visiting with me while I cook.

I like my guests to help with meal preparation in the kitchen.

I like my guests to help with clean up after the meal.

My events are catered.     They use my kitchen to prepare food.     They don't use my kitchen.

12. What secondary activities will take place in your kitchen?     Computer     Laundry     TV/Radio

Eating     Desk     Wet Bar     Growing Plants     Sewing     Pet Feeding

Hobbies     Study     Other \_\_\_\_\_

13. How often do you shop for food?     Weekly     Bi-Weekly     Daily     Do you buy in bulk?

14. What type of cabinet interior storage are you interested in?     Lazy Susan (base)     Lazy Susan (wall)

Roll-outs     Pantry     Towel Bar     Toe Kick Step Stool     Sink Tilt-out     Tray Dividers

Roll-out Trash     Recycle Bins     Cutlery Dividers     Spice     Beverage Center

Cutting Board     Glass Doors     Bookcases     Other \_\_\_\_\_

**Kitchen Information** continued

15. What small, electrical appliances do you use in your kitchen? Do you store them on the counter ( C )

or stowed ( S ) away?    Blender \_\_\_\_\_    Electric Fry Pan \_\_\_\_\_    Wok \_\_\_\_\_    Can Opener \_\_\_\_\_  
Food Processor \_\_\_\_\_    Mixer \_\_\_\_\_    Slow Cooker \_\_\_\_\_    Pressure Cooker \_\_\_\_\_    Toaster \_\_\_\_\_  
Griddle \_\_\_\_\_    Coffee Maker \_\_\_\_\_    Espresso Machine \_\_\_\_\_    Foreman Grill \_\_\_\_\_    Rotisserie \_\_\_\_\_  
Other \_\_\_\_\_

16. Have you considered relocating or changing windows or doors in the new plan?     Yes     No

17. Do you need separate bins for trash/recycling?     Trash     Recycling

**Design Information**

1. How will your new kitchen feel?     Sleek and Contemporary     Warm and Cozy Country  
 Traditional     Open and Airy     Strictly Functional     Formal     Family Retreat  
 Personal Design Statement     Other \_\_\_\_\_

2. What colors do you like? \_\_\_\_\_

3. What colors are you considering for your kitchen? \_\_\_\_\_

4. What are color preferences of other family members? \_\_\_\_\_

5. Have you made a sketch or collected pictures of ideas for your new kitchen?     Yes     No

6. Design notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Project Specifications

## 1. CABINETRY

Wood:  Paint  Stain Species \_\_\_\_\_

Decorative Laminate  Metal  Acrylic

Other \_\_\_\_\_

Exterior Color/Finish \_\_\_\_\_ Interior Color/Finish \_\_\_\_\_

## 2. COUNTERTOPS

Quartz  Granite  Marble  Laminate  Solid Surface  Butcher Block

Other \_\_\_\_\_

Edge Treatment: \_\_\_\_\_

Backsplash: Height \_\_\_\_\_ Material \_\_\_\_\_

## 3. FASCIA/SOFFIT area above cabinetry

Open  Flush  Extended  Recessed  Stained Wood  Painted  Lighted

Other \_\_\_\_\_

## 4. LIGHTING

Source: \_\_\_\_\_

Incandescent  Fluorescent  Halogen  LED  Other \_\_\_\_\_

Location:  Cooking  Sink  Desk  Soffit  General Ceiling  Table

Island/Peninsula  Under Wall Cabinets  Mixing Area  Window  Pantry

Other \_\_\_\_\_

Type:  Suspended  Recessed  Track  Surface Mounted

Other \_\_\_\_\_

# Project Specifications continued

## 5. APPLIANCES

**RANGE:** Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

- Gas     Electric     Microwave     Convection     Drop-In     Slide-In     Eye Level  
 Free-Standing     Self Cleaning     Continuous Cleaning

**COOKTOP:** Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

- Gas     Electric     Enamel Steel     Conventional Coil     Ceramic     Solid Disk  
 Stainless Steel     Halogen     Induction    Color: \_\_\_\_\_

Accessories: \_\_\_\_\_

**OVEN:** Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

- Gas     Electric     Single     Double     Self Cleaning     Continuous Cleaning  
 Microwave     Microwave/Convection     Convection    Other: \_\_\_\_\_

**HOOD:** Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

- Decorative     Standard     Wood     Metal    Other Material: \_\_\_\_\_  
 Vented     Ductless    New Ductwork Need: \_\_\_\_\_ CFM \_\_\_\_\_

Duct Termination: \_\_\_\_\_ Ability to Run Ductwork: \_\_\_\_\_

**WARMING DRAWER:**     Single     Double

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**INDOOR GRILL:**     Single     Double     Combo     Gas     Electric

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**MICROWAVE:** Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

- Built-In     Free Standing     Micro Hood     Base Pull-out     Trim Kit    Other: \_\_\_\_\_

# Project Specifications continued

## 5. APPLIANCES CONTINUED

**REFRIGERATOR:**  Side-by-side  Top Freezer  Bottom Freezer  Right Hinge  Left Hinge  
 Reversible  Ice Maker  Built-In  Under Counter  Front Panel  Trim Kit

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**FREEZER:**  Upright  Chest  Front Panel  Trim Kit

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**DISHWASHER:**  Front Panel  Conv. Kit  Trim Kit  Existing Plumbing  Left /  Right of Sink

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**FOOD WASTE DISPOSAL:**  Batch Feed  Continuous Feed

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**TRASH COMPACTOR:**  Left Hinge  Right Hinge  Pull-out  Front Panel  Trim Kit

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**BUILT-IN CAN OPENER:**  Under Cabinet  In Wall

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**BUILT-IN TOASTER:**  Under Cabinet  In Wall

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**BUILT-IN MIXING CENTER:**  Under Cabinet  In Counter

Model #: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**TELEPHONE/INTERCOM:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

**INCLUDED IN YOUR KITCHEN:**  Television  DVR  Radio  Phone Charging

**WASHER:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

**DRYER:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

# Project Specifications continued

## 6. FIXTURES AND FITTINGS

**SINK #1:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

Bowl(s):  Single  Double  Triple  Small/Large Drain Board:  Right  Left  None

Material:  Stainless Steel  Copper  Porcelain-Enameled Cast Iron  Fireclay

Solid Surface  Stone  Composite  Acrylic  Other: \_\_\_\_\_

Undermount  Drop In  Dual Mount  Apron/Farm Number of Holes: \_\_\_\_\_

**SINK #2:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

Bowl(s):  Single  Double  Triple  Small/Large Drain Board:  Right  Left  None

Material:  Stainless Steel  Copper  Porcelain-Enameled Cast Iron  Fireclay

Solid Surface  Stone  Composite  Acrylic  Other: \_\_\_\_\_

Undermount  Drop In  Dual Mount  Apron/Farm Number of Holes: \_\_\_\_\_

**FAUCETS:** Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

1 Handle  2 Handle  Spray  Lotion Dispenser  Water Purifier

Other: \_\_\_\_\_

**INSTANT HOT WATER:**  In Sink  In Counter

Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**CHILLED WATER:**  In Sink  In Counter

Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_

**LOTION DISPENSER:**  In Sink  In Counter

Model Number: \_\_\_\_\_ Manufacturer: \_\_\_\_\_ Size: \_\_\_\_\_



# Project Specifications continued

## 7. WINDOWS

Casing:  Match Existing. Finish: \_\_\_\_\_  Replace All. Finish: \_\_\_\_\_

Size: \_\_\_\_\_ Profile: \_\_\_\_\_

Window: Size: \_\_\_\_\_ Finish: \_\_\_\_\_

Slider  Bow  Casement  Bay  Double Hung  Support  Skylight  Roof

Other: \_\_\_\_\_

Exterior Wall Patch: \_\_\_\_\_ Sink Vent Relocation: \_\_\_\_\_

Pass-through Surfacing: \_\_\_\_\_

New Window Size: \_\_\_\_\_ Screen: \_\_\_\_\_

New Window Size: \_\_\_\_\_ Screen: \_\_\_\_\_

New Window Size: \_\_\_\_\_ Screen: \_\_\_\_\_

New Window Size: \_\_\_\_\_ Screen: \_\_\_\_\_

## 8. DOORS

Casing:  Match Existing. Finish: \_\_\_\_\_  Replace All. Finish: \_\_\_\_\_

Size: \_\_\_\_\_ Profile: \_\_\_\_\_

Doors:

Solid Core Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Steel Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Hollow Core Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Bi-fold Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Pocket Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Accordion Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Other Size: \_\_\_\_\_ Screen: \_\_\_\_\_ Hinge Left or Right: \_\_\_\_\_

Exterior Wall Patch: \_\_\_\_\_ Interior Wall/Floor Patch: \_\_\_\_\_

Hardware: Finish: \_\_\_\_\_  Passage  Knob  Privacy  Lever

# Project Specifications continued

## 9. FLOORING

**PREPARATION:** Removal: \_\_\_\_\_ Leveling/Shimming: \_\_\_\_\_  
Subfloor Material: \_\_\_\_\_ Underlayment:  Plywood  Particleboard  
Baseboard: \_\_\_\_\_ Transition Treatment: \_\_\_\_\_  
**FLOOR COVERING:**  Wood  Carpet  Vinyl  Stone  
 Tile: Size: \_\_\_\_\_ Grout: \_\_\_\_\_  
Baseboard: \_\_\_\_\_ Transition Treatment: \_\_\_\_\_

## 10. DECORATIVE SURFACES

**WALL COVERING:**  Tile  Wood  Wallpaper  Mirror  Paint  
Other: \_\_\_\_\_  
**WALL PREPARATION:**  Clean  Patch  Remove Existing  New Plaster/Drywall  
Other: \_\_\_\_\_  
**CEILING COVERING:**  Paint  Wallpaper  Suspended  Vaulted  Skylights  
Other: \_\_\_\_\_  
**CEILING PREPARATION:**  Clean  Patch  Plywood  Staples/Glued  Remove Existing  
 New Plaster/Drywall Other: \_\_\_\_\_  
**WINDOW TREATMENT:**  Blinds  Fabric  Shutters Other: \_\_\_\_\_

## 11. CARPENTRY

Demolition: \_\_\_\_\_  
Trash Removal: \_\_\_\_\_  
Structural Changes: \_\_\_\_\_  
Installation: \_\_\_\_\_  
**MISCELLANEOUS INFORMATION:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Existing Construction Details

## 1. CONSTRUCTION

Construction of House:  Single Story  Multi Story  Style of House

Room Above or Below Kitchen: \_\_\_\_\_

Condition and Covering Of: Walls: \_\_\_\_\_

Floors: \_\_\_\_\_

Ceilings: \_\_\_\_\_ Fascia/Soffit: \_\_\_\_\_

Squareness of Corners: \_\_\_\_\_ Parallel Walls to Within 3/4": \_\_\_\_\_

Construction of Floor:  Slab  Frame

Floor Joists:  Parallel to Longest Wall  Perpendciular to Longest Wall Joist Height: \_\_\_\_\_

Exterior:  Brick  Aluminum  Stucco  Wood  Vinyl  Other: \_\_\_\_\_

Interior:  Drywall  Lath & Plaster  Wood  Stone/Brick

Windows:  Sliders  Double Hung  Skylights  Casement  Greenhouse

Change or Relocate?: Windows:  Yes  No Doors:  Yes  No Walls:  Yes  No

Sewage System:  City Service  Spetic System  Other: \_\_\_\_\_

Roof Material: \_\_\_\_\_ Age: \_\_\_\_\_

Heating/cooling System(s): \_\_\_\_\_ Age: \_\_\_\_\_

## 2. ACCESS

Are doors and passageways large enough to move cabinetry and appliances?

Kitchen:  Yes  No Basement:  Yes  No Crawl Space:  Yes  No Attic:  Yes  No

Material Storage Area: \_\_\_\_\_ Trash Collection Area: \_\_\_\_\_

## 3. PLUMBING

Location of Existing Vent Stack \_\_\_\_\_ Type of Trap \_\_\_\_\_

## 4. ELECTRICAL

GFCI Existing:  Yes  No

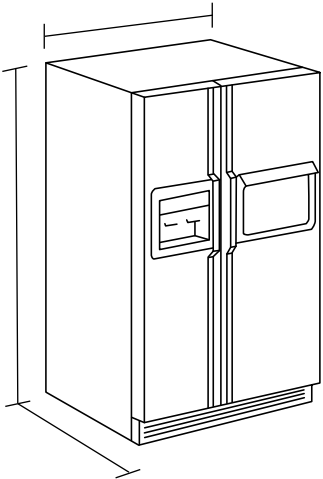
New Wiring Access:  Difficult  Average  Easy

Electrical Service Capacity: \_\_\_\_\_ No. of Circuits Available: 120V \_\_\_\_\_ 240V \_\_\_\_\_

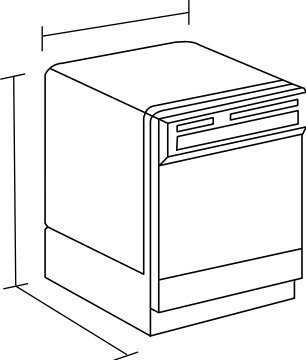
## 5. OTHER INFORMATION \_\_\_\_\_

\_\_\_\_\_

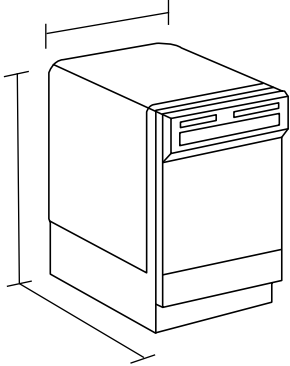
# Dimensions of Existing Appliances



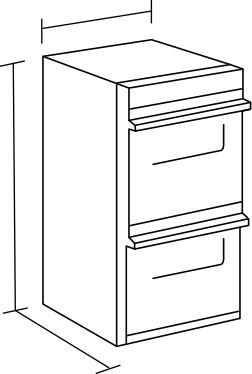
Refrigerator



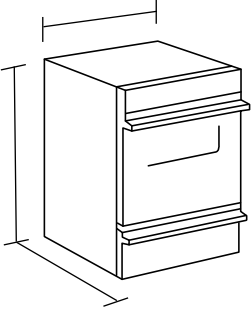
Dishwasher



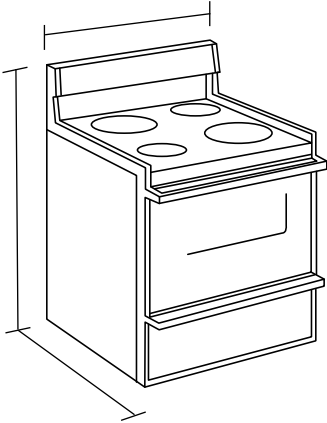
Compactor



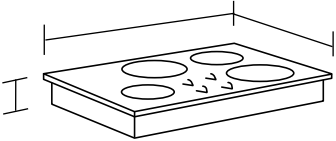
Double Oven



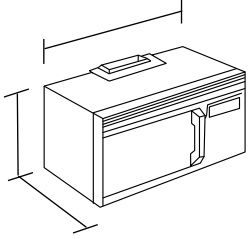
Single Oven



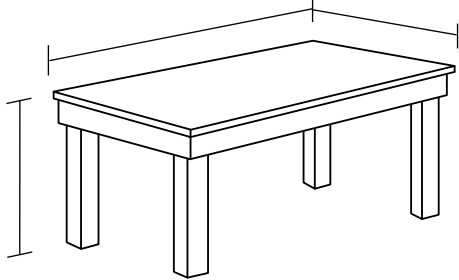
Range



Cooktop



Microwave



Table

# Existing Wall Elevation Dimensioning

### WINDOWS

No.	A	B	C	D	E	F	G	H	I
1									
2									
3									
4									

### REGISTER OR FAN

No.	A	B	C	D	E	F	G
1							
2							

### BASEBOARD HEAT

No.	A	B	C	D
1				
2				

### DOORS

No.	A	B	C	D	E	F	G
1							
2							
3							

### RADIATOR

No.	A	B	C	D	E
1					
2					

Your Kitchen Floor Plan

Scale: 1/2" = One Foot

