

BUILDING PLAN DESIGN
SINGLE-FAMILY RESIDENTIAL

Please provide the information that is being requested below. The information provided will be used to determine a starting point toward developing a Contract Proposal and the initial Design draft.

CLIENT'S NAME: _____ OCCUPATION: _____

CURRENT / MAILING ADDRESS: _____

PROP. BLDG. / SITE ADDRESS: _____

MAIN PHONE: _____ ALT. PHONE: _____ MAIN EMAIL: _____

1. Design Criteria

- a. Which style would you like to use as the "basis" for your home's exterior design?
 - _____ Addition to existing home (match exterior).
 - _____ Renovation to exist. home (exist. exterior).

b. What is the main "driver" that controls the development path for your project? (CHOOSE ONE)

- COST
 - _____ Minimal Budget
 - _____ Unrestricted Budget
- PERSONAL DESIRE
 - _____ Growing Family
 - _____ Retirement-Downsizing
 - _____ Upgrade-Dream Home
- SPECIAL NEEDS

Please Explain: _____

c. Approximately how many square feet of living space do you expect? _____

d. Approximately how many square feet of covered patio or porch space do you expect? _____

e. Is there an attached garage required in this design? If so, how many cars are to fit? _____

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g. Please indicate how many stories do you desire (NOTE: 35' overall max. height). _____

_____ One-Story Flat _____ Two-Story _____ Conditioned Attic _____ Basement

2. Design Requirements / Desires

a. Bedrooms: Types and Number, Average Sizes, Other features. _____

b. Bathrooms: Types and Number, Average Sizes, Other features. _____

CLIENT QUESTIONNAIRE

c. Living Rooms: Types and Number, Average Sizes, Other features. _____

d. Kitchen & Dining Rooms: Types and Number, Average Sizes, Other features. _____

e. Porches & Patios: Types and Number, Average Sizes, Other features. _____

f. General / Special Requirements: _____

g. Special Features / Amenities: _____

h. Other Comments / Notes: _____

CLIENT'S SIGNATURE

DATE

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DATE

NOTE: PLEASE RETURN FILLED-OUT QUESTIONNAIRE BY EMAIL TO DESIGNER
PDMSOLUTIONS.US@GMAIL.COM