



BATHROOM PLANNING GUIDE

Answer these questions to give yourself and us an idea of what exactly you are looking for in a bathroom remodel.

FAMILY AND LIFESTYLE

1. Number of family members: _____
2. Number and approximate ages of family members:
Infants: _____ Young Children: _____ Teens: _____ 20 to 30 yrs: _____ 31 to 40 yrs: _____
41 to 50 yrs: _____ 51 to 60 yrs: _____ 61 to 70 yrs: _____ 70+: _____
3. What is the main use of the room? Family Bath: _____ Guest Bath: _____ Master Bath: _____
Powder Room: _____ Jack & Jill: _____ Other: _____
4. Is this bathroom for a: House: _____ Condo: _____ Other: _____
5. Who is the user of the bathroom? _____
6. How tall is the tallest user of the bath? _____ The Shortest? _____
7. Do you need additional storage space? _____
8. Does any family member have any physical limitations? _____
9. Do you currently need additional lighting? Yes: _____ No: _____
10. Are the current electrical outlets protected with ground fault? Yes: _____ No: _____
11. Is the bathroom comfortable and warm enough? Yes: _____ No: _____

STYLE AND DESIGN

1. What are your color preferences? _____
2. What type of feeling would you like your new bathroom to have?
Traditional: _____ Sleek & Contemporary: _____ Warm & Cozy: _____ Country: _____ Open & Airy: _____
Mix of Old & New: _____ Formal: _____ Strictly Functional: _____ Personal Design Statement: _____
3. What are your wood preferences? _____
4. Do you prefer laminates? Yes: _____ No: _____
5. Do you prefer fiberglass tub/shower units or cast iron? _____
6. Do you prefer ceramic tile wall surrounds, multi-piece fiberglass surrounds or solid surface surround material? _____

FIXTURES

1. Which fixtures will you be replacing or adding? Tub/Shower: _____ Shower Only: _____
Bath/Shower Doors: _____ Whirlpool Tub: _____ Tub Only: _____ Lavatory Double Bowl: _____ Grab Bars: _____
Commode: _____ Lavatory Single: _____ Ventilation: _____ Bidet: _____ Other: _____
2. Would you like the shower area and tub: Seperate: _____ Combined: _____
3. Do you have a preference for the size of your new bath tub? Yes: _____ No: _____
4. What type of fixtures do you want in your new bathroom? White: _____ Almond/Bisque: _____ Black: _____
Other Color: _____ Vintage: _____ Other: _____
5. What safety features are you interested in? (ie non-slip floor, grab bars, bench seat in shower, temperature controlled faucet, safety glass on doors)? _____
6. Do you want his/hers facilities? Yes: _____ No: _____
7. Do you have a preference for the height of your countertops? Standard: _____ Counter Height: _____

STORAGE SYSTEMS

1. Should a linen closet be considered in your new bathroom? Yes: _____ No: _____
2. Outside a linen closet, do you want a lot of storage area for personal items? Yes: _____ No: _____
3. Do you want an "appliance garage" for commonly used items such as hairdryers and curling irons?
Yes: _____ No: _____
4. What features would help you keep your cabinet storage system well-organized? _____

5. What spot would be convenient for soaps and shampoos in your shower and/or tub area? _____
6. How many towel bars would you like? _____
7. Would you like your towels stored in your bathroom? Yes:____ No:____

MECHANICAL ELEMENTS

1. What type of ventilation system are you considering? _____

2. What type and placement of lighting fixtures would you require for tasks such as shaving, make-up application, reading, etc? _____

Time Management and Budget

1. When would you like to begin your project? _____
2. When would you like your project completed? _____
3. What budget range have you established for your project? _____
4. If this is new construction is the bathroom in your contract as an allowance? Yes:____ No:____
If yes, what is that allowance:_____
5. Is this a: New Construction:____ Basic Replacement:____ Recover:____ Some Remodeling
Heavy Remodeling:____ Other:_____
6. Do you have or are you working with a: Contractor:____ Interior Designer:____ Architect:____
If yes, please list their names and numbers _____
7. How did you hear about us? Past Customer:____ Yellow Pages:____ Web Site:____
Television:____ Radio:____ Referred By:_____
8. What do you like about your current bathroom? _____

9. What do you dislike about your current bathroom? _____

10. Before we remodel your bathroom, decide if the following items are necessary items or items you would like?

Lighting Fixtures	Need	Want
Heat Lamp	Need	Want
Toilets	Need	Want
Bidet	Need	Want
Sink(s)	Need	Want
Vanity	Need	Want
Flooring	Need	Want
Heated Flooring	Need	Want
Countertop(s)	Need	Want
Wall Covering	Need	Want
Shower/Bath Wall Coverings	Need	Want
Heated Towel Rack(s)	Need	Want
Whirlpool Tub	Need	Want
Whirlpool Tub with TV	Need	Want
Telephone	Need	Want
Sitting area/Chair	Need	Want
Exercise Area	Need	Want
Lighted Make-Up Mirror	Need	Want
Full-Length Mirror	Need	Want

