



New Client Questionnaire

We want to get to know you!

Please take a few moments to complete the information requested below. Feel free to be as brief or verbose as you would like. Involve your entire household and have fun telling us about your wants and needs. We would like to take full advantage of the time we share together, and your input is essential. Thank you for your time and cooperation!

All information will be kept confidential.

Contact Information

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

How would you like to be contacted (check all that apply)?

- Home Phone Work Phone Cell Phone Email

Design Project & Investment

It is up to you to establish the priorities, investment, and timeline. We make every effort to work quickly, effectively, appropriately, and within a spending plan.

What kind of enhancements are you considering (check all that apply)?

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Furniture | <input type="checkbox"/> Flooring | <input type="checkbox"/> Reupholstery | <input type="checkbox"/> Remodel Kitchen |
| <input type="checkbox"/> Window Treatments | <input type="checkbox"/> Remodel Bathroom | <input type="checkbox"/> Artwork, Mirrors | <input type="checkbox"/> Appliances |
| <input type="checkbox"/> Interior Paint | <input type="checkbox"/> Accents | <input type="checkbox"/> Plumbing Fixtures | <input type="checkbox"/> Exterior Paint |
| <input type="checkbox"/> Space Planning | <input type="checkbox"/> Wallpaper | <input type="checkbox"/> Lighting | <input type="checkbox"/> Organization |

What is your preferred time frame for having this project complete (special dates, events)?

Are you planning to complete this project at once or in phases?

Please list the rooms you would like to work on, and indicate how each room is used. Number the rooms in order of priority.

What is the budget for the project?

Household Information

House square footage: _____

Age of house: _____ # Bedrooms: _____ # Bedrooms: _____

How long have you lived in your home and how long do you plan to live there?

Family Details

Please list your family members and their ages:

Name:

Age:

<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
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Do any family members have any special work, study, or space needs?

Will your rooms need to serve different functions in the future for any family members (i.e. college, retirement, new baby)?

Do you have any pets? Are they allowed on the furniture? In the entire house?

Lifestyle

Do you entertain? How often? What type of entertaining (i.e. movies, meals, play dates)? Do you currently have room for this or do you need to reallocate space for this purpose? If so, what do you need in order to make entertaining easier?

What are your eating habits (i.e. eat on the run, sit down with the family, in front of the tv)? Do you have a designated eating area or does space need to be reallocated to accomidate your eating habits?

Do any family members cook? If so, who? Do multiple people cook at once?

What type of cooking facilities are required?

In general, are you more formal or casual?

Write a list of your family's regular activities and indicate where in the house these activities take place. Does the space work for your activities? This will help us understand how your family uses the space and how well it is working.

Do any household members work from home? If so, are there any special requirements or requests for this?

Your Home

What is the current style of your home?

What do you like most about your home? What do you like least?

What style would you like to see in your space?

Do you have any furnishings or accessories that you would like to keep and integrate into the new design? Anything that must go?

Do you have any collections or travel souvenirs? Do you want them on display?

Your Taste

What do you consider your style (check all that apply)?

If you are not sure, we will figure it out!

- | | | | |
|------------------------------------|--|--|------------------------------------|
| <input type="radio"/> Contemporary | <input type="radio"/> Rustic / Farmhouse | <input type="radio"/> Bohemian | <input type="radio"/> Mid-Century |
| <input type="radio"/> Traditional | <input type="radio"/> Industrial | <input type="radio"/> Coastal | <input type="radio"/> Scandinavian |
| <input type="radio"/> Modern | <input type="radio"/> Hollywood Regency | <input type="radio"/> Cottage Style | <input type="radio"/> Minimalist |
| <input type="radio"/> Transitional | <input type="radio"/> Art Deco | <input type="radio"/> Eclectic / Collected | <input type="radio"/> Asian |

Describe your style!

What mood do you want to create overall (check all that apply)?

- | | | | |
|--|---------------------------------------|---------------------------------------|---------------------------------------|
| <input type="radio"/> Elegant / Formal | <input type="radio"/> Sophisticated | <input type="radio"/> Warm / Cozy | <input type="radio"/> Romantic |
| <input type="radio"/> Casual / Relaxed | <input type="radio"/> Lively / Bright | <input type="radio"/> Cool | <input type="radio"/> Minimal |
| <input type="radio"/> Contemporary | <input type="radio"/> Welcoming | <input type="radio"/> Spacious | <input type="radio"/> Curated |
| <input type="radio"/> Family-Friendly | <input type="radio"/> Bohemian | <input type="radio"/> Soothing / Calm | <input type="radio"/> Retro / Vintage |
| <input type="radio"/> Fun / Happy | <input type="radio"/> Glamorous | <input type="radio"/> Fresh / Clean | <input type="radio"/> Quirky / Unique |

Color Preferences (check all that apply):

- | | | | |
|------------------------------|-------------------------------|-----------------------------------|--------------------------------------|
| <input type="radio"/> Whites | <input type="radio"/> Oranges | <input type="radio"/> Bright | <input type="radio"/> Cool Colors |
| <input type="radio"/> Blacks | <input type="radio"/> Yellows | <input type="radio"/> Bold | <input type="radio"/> Warm Colors |
| <input type="radio"/> Grays | <input type="radio"/> Greens | <input type="radio"/> Pastels | <input type="radio"/> |
| <input type="radio"/> Beiges | <input type="radio"/> Blues | <input type="radio"/> Earth Tones | <input type="radio"/> High Contrast |
| <input type="radio"/> Tans | <input type="radio"/> Purples | <input type="radio"/> Jewel Tones | <input type="radio"/> Monochromatic |
| <input type="radio"/> Reds | <input type="radio"/> Pinks | <input type="radio"/> Neutrals | <input type="radio"/> Lots of Color! |

What color combinations do you love?

What color combinations do you hate?

Is there a piece of furniture, artwork, or public space that truly inspires you?

Does everyone in the house have the same design taste? If not, are they similar or polar opposites? If they are very different, have you figured out how you are going to reconcile the differences in order to make design decisions?

Preference of Patterns / Textures (check all that apply):

- | | | | |
|------------------------------------|--|-----------------------------------|--|
| <input type="radio"/> Stripes | <input type="radio"/> Plaid | <input type="radio"/> Leather | <input type="radio"/> Small-Scale Pattern |
| <input type="radio"/> Animal Print | <input type="radio"/> Southwest / Tribal | <input type="radio"/> Snakeskin | <input type="radio"/> Large-Scale Pattern |
| <input type="radio"/> Ikat | <input type="radio"/> Moroccan | <input type="radio"/> Houndstooth | <input type="radio"/> Bold |
| <input type="radio"/> Floral | <input type="radio"/> Chevron | <input type="radio"/> Organic | <input type="radio"/> Subtle |
| <input type="radio"/> Tropical | <input type="radio"/> Chinoiserie | <input type="radio"/> Geometric | <input type="radio"/> Solid / Texture Only |

Preference of Flooring Types (check all that apply):

- | | | | |
|--------------------------------|------------------------------|--------------------------------|-------------------------------------|
| <input type="radio"/> Hardwood | <input type="radio"/> Carpet | <input type="radio"/> Laminate | <input type="radio"/> Natural Stone |
| <input type="radio"/> Concrete | <input type="radio"/> Tile | <input type="radio"/> Cork | <input type="radio"/> Bamboo |

Preference of Rug Types/Patterns (check all that apply):

- | | | | |
|---------------------------------|--|-------------------------------------|-----------------------------------|
| <input type="radio"/> Solid | <input type="radio"/> Borders | <input type="radio"/> Hides/Leather | <input type="radio"/> Subtle |
| <input type="radio"/> Floral | <input type="radio"/> Animal Print | <input type="radio"/> Natural Fiber | <input type="radio"/> Colorful |
| <input type="radio"/> Geometric | <input type="radio"/> Oriental | <input type="radio"/> Stain-Proof | <input type="radio"/> Traditional |
| <input type="radio"/> Organic | <input type="radio"/> Southwest / Tribal | <input type="radio"/> Shag/Plush | <input type="radio"/> Modern |

Which of the following do you require of window treatments (check all that apply)?

- | | | | |
|-------------------------------|-------------------------------------|---------------------------------|---------------------------------------|
| <input type="radio"/> Privacy | <input type="radio"/> Light Control | <input type="radio"/> Black Out | <input type="radio"/> Decorative Only |
|-------------------------------|-------------------------------------|---------------------------------|---------------------------------------|

Preference of Window Treatments (check all that apply):

- | | | | |
|-------------------------------------|---------------------------------------|--|--------------------------------|
| <input type="radio"/> Blinds | <input type="radio"/> Vertical Blinds | <input type="radio"/> Drapery/Valances | <input type="radio"/> Sheers |
| <input type="radio"/> Roller Shades | <input type="radio"/> Roman Shades | <input type="radio"/> Honeycomb Shades | <input type="radio"/> Shutters |

List any additional information you have concerning your window treatments:

Preference of artwork subject matter (check all that apply):

- | | | | |
|--|---|---------------------------------------|----------------------------------|
| <input type="radio"/> Landscape | <input type="radio"/> Portrait | <input type="radio"/> Floral | <input type="radio"/> Collage |
| <input type="radio"/> Abstract | <input type="radio"/> Still Life | <input type="radio"/> Animals | <input type="radio"/> Geometric |
| <input type="radio"/> Family Photography | <input type="radio"/> Color Photography | <input type="radio"/> B&W Photography | <input type="radio"/> Typography |

Do you have any pieces of art you want to use in the design?

Where do you shop for home furnishings and accessories?

Do you shop online? Which online stores do you frequently purchase from?

Miscellaneous

Have you worked with a designer or decorator before?

If so, how was the experience?

What else would you like us to know? Any additional design goals, notes, visions, feelings, comments, or questions?

Thank you so much for your input! We look forward to working with you.

You can email this questionnaire to:
hello@erikadale.com