



**Sudbury Kitchens**  
**DESIGN SURVEY**

Name(s): \_\_\_\_\_

Home Tel.: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

How did you hear about Sudbury Kitchens? \_\_\_\_\_

Desired completion date of project: \_\_\_\_\_

Do you have a budget in mind? \_\_\_\_\_

How many people prepare meals at the same time? \_\_\_\_\_

- Left handed
- Right handed

How do you use your kitchen?

- Formal entertainment
- Casual entertainment
- Major holidays

Do you use your kitchen for more than just meal preparation?

- Computer space
- Craft projects
- Laundry
- Bill paying
- Studying
- Baking
- Canning
- Other (please specify)

What would you like to improve upon with your new kitchen?

- |                                   |                                   |  |
|-----------------------------------|-----------------------------------|--|
| <input type="checkbox"/> Style    | <input type="checkbox"/> Counters | <input type="checkbox"/> Flooring                |
| <input type="checkbox"/> Layout   | <input type="checkbox"/> Seating  | <input type="checkbox"/> Doors                   |
| <input type="checkbox"/> Storage  | <input type="checkbox"/> Lighting | <input type="checkbox"/> Windows                 |
| <input type="checkbox"/> Cabinets | <input type="checkbox"/> Outlets  | <input type="checkbox"/> Location of appliances. |

**Describe your new kitchen**

If you have any pictures that show your style preference, please share them with us. If not, we have books and magazines you may review to assist in defining your tastes.

You may not be in a position to answer many of the questions below at this point. Do not be alarmed. The design process is one of discovery. This survey gives you an idea of the kind of decisions that you will be making as your new kitchen evolves. Complete the survey as best you can.

**Size of Kitchen:**

- Use existing space
- Increase size (please specify) \_\_\_\_\_
- Relocate kitchen (please specify) \_\_\_\_\_
- Island (new or existing?)
- Butler's Pantry (new or existing?) \_\_\_\_\_

**Relocation:** Would you consider relocating any of the following to create a better design?

- |                                       |                                    |                                  |
|---------------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Range     | <input type="checkbox"/> Heat    |
| <input type="checkbox"/> Sink         | <input type="checkbox"/> Oven      | <input type="checkbox"/> Doors   |
| <input type="checkbox"/> Dishwasher   | <input type="checkbox"/> Microwave | <input type="checkbox"/> Windows |

**New Windows:**

- |                                     |                                      |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Casement   | <input type="checkbox"/> Double hung |
| <input type="checkbox"/> Bay or Bow | <input type="checkbox"/> Skylights   |

**New Doors:**

- |   |   |                                  |
|---|---|----------------------------------|
| <input type="checkbox"/> Standard entry | <input type="checkbox"/> Panel              | <input type="checkbox"/> Sliding |
| <input type="checkbox"/> Flush          | <input type="checkbox"/> 1/2 Glass exterior | <input type="checkbox"/> French  |
|   | <input type="checkbox"/> Bifold             | <input type="checkbox"/> Pocket  |

**Dining:**

- |  |                                |                 |
|--|--------------------------------|-----------------|
| <input type="checkbox"/> Eat-in Kitchen                                    | Size of table (if known) _____ | How many? _____ |
| <input type="checkbox"/> Island  | Bar or counter height _____    | How many? _____ |
| <input type="checkbox"/> Peninsula   | Bar or counter height _____    | How many? _____ |
| <input type="checkbox"/> Would love to have seating but don't think I can. |                                |                 |
| <input type="checkbox"/> I don't want any seating.                         |                                |                 |

**Counter Material:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Granite        | <input type="checkbox"/> Butcher block  | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Quartz Product | <input type="checkbox"/> Specialty Wood | _____   |
| <input type="checkbox"/> Corian         | <input type="checkbox"/> Concrete       |   |
| <input type="checkbox"/> Soapstone      | <input type="checkbox"/> Glass          |   |

**Backsplash Material:**

- |                                  |                                    |   |
|----------------------------------|------------------------------------|---|
| <input type="checkbox"/> Tile    | <input type="checkbox"/> Glass     | <input type="checkbox"/> Separate 4" backsplash |
| <input type="checkbox"/> Granite | <input type="checkbox"/> Metal     | <input type="checkbox"/> Coved 4" backsplash    |
| <input type="checkbox"/> Marble  | <input type="checkbox"/> Tile cove | <input type="checkbox"/> Other _____            |

## Kitchen Details

### Style Preference (check any that may apply):

- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> European Contemporary     | <input type="checkbox"/> Country           | <input type="checkbox"/> Traditional  |
| <input type="checkbox"/> Mid-century Modern        | <input type="checkbox"/> Shaker or Mission | <input type="checkbox"/> Transitional |
| <input type="checkbox"/> Hotel/Industrial-inspired | <input type="checkbox"/> Asian-influenced  |                                       |

### Cabinets:

#### Style:

- Framed
- Frameless

#### Species:

- Cherry
- White Birch
- Red Birch
- Maple
- Oak
- Ash
- Mahogany
- Walnut

#### Finish:

- Painted
- Painted with a glaze
- Antique/distressed
- Stained
- Stained with a glaze

### Accessories:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Appliance garage     | <input type="checkbox"/> Lift-up mixer shelf    | <input type="checkbox"/> Tambour (roll-up)  |
| <input type="checkbox"/> Broom closet         | <input type="checkbox"/> Open shelving          | <input type="checkbox"/> Tilt-out soap tray |
| <input type="checkbox"/> Bookshelf            | <input type="checkbox"/> Pantry                 | <input type="checkbox"/> Tray dividers      |
| <input type="checkbox"/> Canned goods storage | <input type="checkbox"/> Pull out spice cabinet | <input type="checkbox"/> Wine bins          |
| <input type="checkbox"/> Cutlery divider      | <input type="checkbox"/> Pull out waste bins    | <input type="checkbox"/> Wine glass storage |
| <input type="checkbox"/> Glass doors          | <input type="checkbox"/> Recycling bins         | <input type="checkbox"/> Other _____        |
| <input type="checkbox"/> Lazy Susans          | <input type="checkbox"/> Spice rack             |   |

### Lighting and Electric:

- |   |  |                                      |
|---|--|--------------------------------------|
| <input type="checkbox"/> Upgrade electric service | <input type="checkbox"/> Recessed lighting       | <input type="checkbox"/> Pendants    |
| <input type="checkbox"/> Lighting                 | <input type="checkbox"/> Under cabinet lighting  | <input type="checkbox"/> Chandeliers |
| <input type="checkbox"/> Outlets                  | <input type="checkbox"/> General ceiling fixture | <input type="checkbox"/> Other _____ |

### Floor Covering:

- |                                       |                                       |  |
|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> New          | <input type="checkbox"/> Material     | <input type="checkbox"/> Laminate            |
| <input type="checkbox"/> Use existing | <input type="checkbox"/> Bamboo       | <input type="checkbox"/> Marble or Limestone |
|                                       | <input type="checkbox"/> Ceramic Tile | <input type="checkbox"/> Vinyl               |
|                                       | <input type="checkbox"/> Cork         | <input type="checkbox"/> Wood                |
|                                       | <input type="checkbox"/> Granite      | Other _____                                  |

### Sinks:

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

Depth: \_\_\_\_\_

Number: \_\_\_\_\_

#### Type:

- single
- 1 1/2 bowl
- double
- triple
- drain board

#### Material:

- stainless steel
- porcelain
- Corian
- Soapstone
- Other \_\_\_\_\_

**Faucet:**

Type:

- single lever
- two handles
- separate spray
- integral pull out spray
- soap dispenser
- high spout

Material:

- chrome
- brass
- stainless
- other \_\_\_\_\_

**Appliances**

**Range/Oven/Cooktop:**

- Natural Gas (please note whether there is gas to the house currently)
- Propane (please note whether there is gas to the house currently)
- Electric
- Dual Fuel
- New
- Existing

Range/Cooktop:

- Cooktop
- Range
- Other: \_\_\_\_\_
- Size: \_\_\_\_\_
- Make (if known) \_\_\_\_\_
- Model (if known) \_\_\_\_\_

Oven:

- One oven
- Double oven
- Size: \_\_\_\_\_
- Make (if known) \_\_\_\_\_
- Model (if known) \_\_\_\_\_

Cooking accessories:

- Grill
- Steamer
- Wok
- Micro/convection combo
- Warming drawers

**Exhaust:**

- |                                   |   |  |
|-----------------------------------|---|--|
| <input type="checkbox"/> New      | <input type="checkbox"/> Downdraft      | <input type="checkbox"/> Under Cabinet Venting |
| <input type="checkbox"/> Existing | <input type="checkbox"/> Wood Hood      | <input type="checkbox"/> Microwave Hood        |
|                                   | <input type="checkbox"/> Stainless Hood | <input type="checkbox"/> Other _____           |

**Microwave oven:**

- |                                      |   |  |
|--------------------------------------|---|--|
| <input type="checkbox"/> New         | <input type="checkbox"/> Use on Countertop  | <input type="checkbox"/> Combined with built in oven |
| <input type="checkbox"/> Existing    | <input type="checkbox"/> Build into Cabinet | <input type="checkbox"/> Venting over range/cooktop  |
| <input type="checkbox"/> Size: _____ | <input type="checkbox"/> Microwave Drawer   |  |

**Refrigeration (check all that apply):**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> New                      | <input type="checkbox"/> Top/bottom freezer | <input type="checkbox"/> Panels to match cabinetry |
| <input type="checkbox"/> Existing                 | <input type="checkbox"/> Side-by-side       | <input type="checkbox"/> Ice maker                 |
| <input type="checkbox"/> Size _____               | <input type="checkbox"/> Built-in           | <input type="checkbox"/> Wine cooler               |
| <input type="checkbox"/> French door refrigerator | <input type="checkbox"/> Freestanding       | <input type="checkbox"/> Refrigerated drawers      |

**Separate freezer:**

- New  
 Existing  
Size: \_\_\_\_\_

**Dishwasher:**

- |   |  |
|---|--|
| <input type="checkbox"/> New                | <input type="checkbox"/> Panel to match cabinets |
| <input type="checkbox"/> Existing           |  |
| <input type="checkbox"/> Size: _____        |  |
| <input type="checkbox"/> Dishwasher Drawers |  |

**Compactor:**

- New  
 Existing  
 None  
 Panel to match cabinets

**Garbage disposal:**

- New  
 Existing  
 None

What type of heat do you currently have? \_\_\_\_\_

Ceiling height? \_\_\_\_\_ ft. \_\_\_\_\_ in.

Other (e.g. Instant hot water, pot filler, built-in coffee maker):

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**Comments:**

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