

Niece Kitchens - Kitchen Questionnaire

In our effort to provide you the kitchen of your dreams, we asked that you take five minutes to fill out the following questionnaire. In addition to our showroom or in-home consultation, this questionnaire will enable us to design your kitchen space to meet your needs and specifications. Please email, fax or bring this questionnaire into our showroom at your convenience. You can reach us (office) 609-397-4032 (fax) 609-397-2269 or (email) bschibel@niecelumber.com

General

Name: _____ Email Address: _____

Home Address: _____ Phone: _____

Did a friend, family member, neighbor, designer or builder refer you to Niece Kitchens (Y/N)

If yes, who? _____

How many are in your household? Adults _____ Children _____

Who cooks in your family? _____

How often do you entertain? _____

When entertaining, is it formal or casual? _____

Where do you serve your daily meals?

Breakfast _____

Lunch _____

Dinner _____

Table Seating and/or an island? _____

Style and Tastes

Is your style Contemporary, Traditional or Transitional?

What wood species do you prefer?

Are you interested in stains, paints or combinations?

Is there a preference between a full overlay or inset style of cabinetry?

If an island, do you plan on having seating (Y/N). If yes, how much seating is desired?

Do you want a sink built into your island (Y/N)?

Do you want a sink built into your countertop (Y/N)?

Would you like multiple level countertop surfaces?

Do you plan to incorporate any glass doors into your cabinetry?

Do you plan to incorporate open shelves?

Do you plan on having a TV in your kitchen (Y/N)? If yes, will this be a flat panel (Y/N). If yes, what size?

Do you have any unusual storage spaces (Y/N) If yes, what size?

Other comments on tastes and style?

Appliances and Sink Equipment

Refrigerator type : French Side by Side, Top Freezer, Bottom Freezer, Built In, or Wood Panel? Please circle.

Dishwasher Type : Stainless front or wood paneled? Please circle.

Oven: Single or Double? Please circle.

Cooktop: Gas and Electric? Please circle.

If a free standing range is desired, is it a residential or commercial look? Please circle.

Ventilation: Hood, Decorative Hood Enclosure, or Downdraft? Please circle.

Microwave: Over the stove, built in cabinetry, or left on countertop? Please circle.

Sink: Single, Double or 1/3rd, 2/3rd? Farm sink, Stainless, Soapstone, other? Please circle.

Countertops/Backsplash

What kind of countertop do you prefer? Laminate, Granite, Wood, Soapstone, Corian or Quartz? Please circle.

What style of Backsplash do you prefer? Tiled, beaded wood, same material as counters or painted? Please circle.

Wrap-Up

Do you have budget? Minimum _____ Maximum _____

Will this be your primary residence (Y/N) and for how long?

When do you want your project to start?

Is there a deadline? _____

What don't you like about your existing kitchen space?

Misc. comments

In addition to this questionnaire, we suggest you gather magazine clippings, pictures of your friend's kitchens, online images, brochures, etc. of any cabinetry, countertop or appliance ideas you like. Keep this in a folder or binder and bring them with you when choosing your options.

We do not offer installation so we encourage you to review our installer list. This listing is to be used as a reference. These builders are long time customers of Niece Lumber and Niece Kitchens but in no way are they employed by Niece Lumber. We encourage you to contact them to obtain remodeling guidance and an estimate on installation.