

# INTERIOR DESIGN CLIENT QUESTIONNAIRE



BOBBIE LEE DESIGN

NAME:  DATE:

PREFERRED CONTACT INFO:

## *background information*

WHAT IS YOUR CURRENT INTERIOR DESIGN CHALLENGE?

HOW WOULD YOU DESCRIBE THE STYLE OF YOUR HOME/SPACE AS OF RIGHT NOW? (STYLE OF FURNITURE, LAYOUT, COLOURS, ETC.)

HOW DO YOU WANT YOUR HOME/SPACE TO "FEEL"? (WARM, COZY, GLAMOROUS, FUN, AIRY, ETC.)

## *visual style*

CLASSIC	①②③④⑤⑥⑦⑧⑨⑩	MODERN
MATURE	①②③④⑤⑥⑦⑧⑨⑩	YOUTHFUL
SIMPLE	①②③④⑤⑥⑦⑧⑨⑩	COMPLEX
FEMININE	①②③④⑤⑥⑦⑧⑨⑩	MASCULINE
ABSTRACT	①②③④⑤⑥⑦⑧⑨⑩	LITERAL
SERIOUS	①②③④⑤⑥⑦⑧⑨⑩	PLAYFUL
ECONOMICAL	①②③④⑤⑥⑦⑧⑨⑩	LUXURIOUS

WHAT IS YOUR FAVOURITE PIECE IN YOUR HOME? DO YOU HAVE, OR WANT TO HAVE ANY COLLECTIONS?

DO YOU KNOW THE NAMES OF YOUR CURRENT WALL AND TRIM COLOURS?

WHAT COLOURS DO YOU LIKE/DISLIKE?

WHAT BRAND OF PAINT (IF ANY) DO YOU PREFER?

WHAT PATTERNS DO YOU LIKE/DISLIKE?

WHAT TYPE OR STYLE OF ARTWORK DO YOU HAVE IN YOUR HOME NOW?

# *project information*

TYPE OF HOME (BUNGALOW, TOWNHOUSE, APARTMENT, ETC.)

DO YOU HAVE ANY EXISTING FLOOR-PLANS?

DO YOU HAVE ANY ONGOING OR PLANNED RENOVATIONS? (INCLUDING CHANGE OF FLOORING, TILES, ETC.)

DO YOU HAVE ANY INSPIRATION IMAGES? (PINTEREST, GOOGLE IMAGES, HOUZZ IMAGES, SCREENSHOTS, ETC.)

ARE YOU PLANNING ON REPLACING OR BUYING NEW FURNITURE?

WHAT IS YOUR DESIRED PROJECT TIME-FRAME? (START/END DATE OR IDEAL DATE RANGE)

# *additional questions and notes*

DO YOU OR YOUR FAMILY HAVE ANY SPECIAL NEEDS OR REQUIREMENTS?

WHAT ARE SOME OF YOU AND YOUR FAMILY'S HOBBIES/PASSIONS? (TRAVELING, READING, COOKING, PAINTING, ETC.)

OTHER NOTES YOU WISH TO ADD

ANY COOL IDEAS? SKETCH THEM OUT