



A Natural Choice!™

Client Questionnaire:

Client _____

Spouse / Partner _____

Street Address _____

City, State, Zip _____

Home Phone _____

Daytime Phone _____

Cell _____

Email address _____

Cell _____

Email address _____

Date _____

GENERAL INFORMATION

Family at home - ages _____

any special access needed? _____

pets _____

How long have you lived in your home? _____

How old is this house? _____

How long do you plan to live in this home? _____

Any plans for additions or renovations? (Paint, drive resurfaced, shutters, drive expansion, etc.)

How serious? _____

How soon? _____

What style do you feel the interior of your home most closely reflects? _____

How about the exterior of the house (not the landscape)? _____

Describe the style would you *like* the landscape to express: _____

Main purpose of this installation (screening, aesthetic, function)

What is your favorite season?

Spring

Summer

Fall

Winter

When are you in the yard & gardens? _____

(evenings, mornings, weekends only, not at all) _____

Would you like to include low voltage lighting? _____

(curb appeal, security & evening usage of garden space)

Do you have/would you like irrigation? _____

Describe your **Current** landscape maintenance program: _____

By owner: hours each week (not including mowing) _____

how many big weekends - heavy work _____

Most favorite gardening task: _____

Least favorite gardening task: _____

Maintained by landscape contractor: _____

description of services provided: _____

Describe your **Ideal** maintenance commitment: _____

| | | | |
|--|-----------------|----------------|--------------|
| Are you interested in additional services? | mowing | spring cleanup | fall cleanup |
| annual / seasonal plantings pruning | garden services | leaf removal | snow removal |

AREAS TO BE DESIGNED

TOTAL YARD - Master Plan

| | | | |
|--|-------------|----------------|----------------------|
| FRONT YARD | very formal | semi formal | casual & comfortable |
| walk (width, surface, mail/paper carrier access) | _____ | | |
| landing / porch (width, risers, surface) | _____ | | |
| gathering area | _____ | | |
| art, furniture, seasonal deco, water feature | _____ | | |
| driveway (width, pedestrian path) | _____ | | |
| driveway games | _____ | | |
| Bball | bikes | boards - ramps | chalk |
| parking (off street, walk to connect) | _____ | | |
| retaining - stone work | _____ | mail box | _____ |
| fencing | _____ | light post | _____ |
| other | _____ | | |

| | | | |
|---|-------------|-------------|----------------------|
| SIDE YARDS | very formal | semi formal | casual & comfortable |
| service (trash cans, recycling) | _____ | | |
| screening (privacy, eyesores) | _____ | | |
| access (mower path, truck or boat access) | _____ | | |
| retaining / stone work | _____ | fencing | _____ |
| pet area | _____ | other | _____ |

| | | | |
|--------------------------------|---------------------------|-------------|--------------------------------|
| REAR | very formal | semi formal | casual & comfortable |
| screening | (privacy, eyesores) _____ | | |
| living spaces: | | | |
| entertaining | how formal | _____ | how many _____ |
| | how often | _____ | approx size of areas _____ |
| patios and/or decking | | | |
| preferred surfaces types _____ | | | |
| structures | retaining / stone work | _____ | trellis _____ |
| | seat walls | _____ | gazebo _____ |
| | arbor | _____ | play set _____ |
| grill | type of grill | _____ | surface area - buffets? _____ |
| | how often | _____ | year round _____ |
| furniture | dining | _____ | how many chairs _____ |
| | benches | _____ | gliders/swings _____ |
| | hammock | _____ | |
| garden areas | | | vegetables _____ |
| | herbs | _____ | cutting _____ |
| | window boxes | _____ | containers _____ |
| games | ball | _____ | other _____ |
| | play set | _____ | sand box _____ |
| water feature _____ | | | |
| | pond | _____ | size _____ plants / fish _____ |
| | fountain | _____ | size _____ |
| pool | | _____ | size _____ |
| spa | | _____ | size _____ |
| fencing | | _____ | pet area _____ |

Importance of:

| | |
|----------------|-------|
| Color Sequence | _____ |
| Fragrance | _____ |
| Butterflies | _____ |
| Birds | _____ |
| Native Plants | _____ |

Any Allergies? _____

Annuals _____ how many flats: _____

color scheme - same every year? _____

Bulbs _____

Favorite plants & colors _____

Disliked plants & colors _____

What types of wildlife are in the neighborhood? _____
(rabbits, deer, opossum, raccoons, squirrels, neighborhood dogs?) _____

Are there any problem areas in the yard? (wet areas, drainage issues, stumps, leech or septic) _____

Are there any restrictions or easements? _____

Does your design need to be approved by the city, community or any other entity? _____
address & phone _____

Available budget _____

Will the installation be phased? _____
first priority _____ budget _____
second _____ budget _____

Copy of plans from builder included _____

Plat or Survey Included _____

Photos from magazines & books included _____

Questions, Comments: