Company Name, Address, Email

MIDTOWN CABINETS

5333 S. MINGO RD.

SUITE E

TULSA, OK 74146 918-749-7034

Designer:_____

Kitchen Design Survey Form

Date:
Name:
Residence:
Jobsite Address:

Client 1:
Home Phone:
Work Phone:
Cell Phone:
Email:

Client 2:
Home Phone:
Work Phone:
Cell Phone:
Email:

Appointment
Schedule:
Call When Ready:
Times Available:
Directions:

Allied Professional
Name:
Firm:
Address:
Office Phone:
Cell Phone:
Email:

Notes:

General Client Information

1.***How long do you intend to own the jobsite residence?*** _____

2. *What do you dislike most about your present kitchen?* _____

_____

_____

3..*What do you like most about your present kitchen?* _____

_____

_____

4. *Sustainable design ideas important to your family:*

_____

☐ Use of "Green" Products ☐ General products made from recycled materials: ☐ Cabinets ☐ Counters ☐ Floors ☐ Building Materials

☐ Special water conservation products: ☐ Wood products supplied by environmentally responsible manufacturers

☐ Energy efficient appliances: ☐ Sustainable design details incorporated into the plan:

☐ Energy efficient lighting systems: ☐ Areas for recycling waste incorporated into the plan:

5. When was the house built? _____ **How old is the present kitchen?** _____

6. *How many household members* ***live in the home?***

Name	Age	Handed	Height	Physical Limitations/Mobility Aids
		☐ R L ☐		
		☐ R L ☐		
		☐ R L ☐		
		☐ R L ☐		
		☐ R L ☐		
		☐ R L ☐		

7.Personal information about the kitchen*:*

What type of cooking is done in the home? _____

Who is the main cook? _____

Do you share or rotate cooks? _____

Who does most of the cleanup? _____

Are there any specialty appliances needed? _____

8. *How does the family use the kitchen for meals at home?* _____

☐ daily heat & serve meals ☐ daily "from scratch" meals ☐ daily "bring in" meals ☐ weekend "quantity" cooking

☐ weekend family meals ☐ ethnic or specialty cooking (please specify)

_____

_____

What type of foods is the family cooking? _____

_____

9. *What type of seating would you like?* _____

☐ separate table- ☐ counter ☐ number of seated diners _____

☐ 30" counter height ☐ 36" counter height ☐ 42" counter height

***10.** Do you have any furniture **or items you would like to consider in the design of the** kitchen?* _____

_____

11. *Do you entertain frequently?* _____

_____

_____

12.*What other activities will take place in your kitchen?*

☐ Computer Usage: ☐ Hobbies: ☐ Medicine Center / Use ☐ Children Playing

☐ Eating: ☐ Laundry ☐ Message Center ☐ Study/Homework

☐ Growing Plants: ☐ Liquor/Wine Storage ☐ Planning Desk ☐ TV /Radio/Media/CD

13. *What is your cycle for shopping for food*?

☐ Daily ☐ Twice Weekly ☐ Weekly ☐ Bi-weekly ☐ Monthly

***14.** Style of Home (Exterior):* _____

15. Is the home historic? ☐ Yes ☐ No What time period? _____

Are there historic covenants or restrictions affecting the home? _____

_____

16. *Is the home part of a Homeowner's Association?* ☐ Yes ☐ No

Is there Homeowner's Association covenants or restrictions affecting the home? ☐ Yes ☐ No _____

_____

17. *Style of Home (Interior)* _____

Colors: _____

Materials: _____

Furniture: _____

Accessories: _____

Other: _____

Cabinetry	Source					
Key: KS= Kitchen Specialist	Use Existing	Furnished by		Installed by	
O= Owner OA= Owners Agent	☐ Yes ☐ No	KS ☐	O/OA ☐	KS ☐	O/OA ☐

Construction	Base	Wall	Tall	Island
Framed	☐	☐	☐	☐
Frameless	☐	☐	☐	☐
Cabinet Style				
Full Overlay	☐	☐	☐	☐
Partial Overlay	☐	☐	☐	☐
Lip	☐	☐	☐	☐
Inset	☐	☐	☐	☐
Hardware				
Knob	☐	☐	☐	☐
Pull	☐	☐	☐	☐
Finger Pull	☐	☐	☐	☐

Face Material	Base	Wall	Tall	Island
Wood-Species _____	☐	☐	☐	☐
Laminate	☐	☐	☐	☐
Paint	☐	☐	☐	☐
Acrylic	☐	☐	☐	☐
Metal	☐	☐	☐	☐
Other _____	☐	☐	☐	☐
Door Style:				
Color and Finish:				

Design Information

Special Details:

Soffit / Fascia

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	KS ☐	O/OA ☐	KS ☐	O/OA ☐

Fascia / Soffit Construction	Fascia / Soffit Materials
☐ Open ☐ Extended ☐ Flush ☐ Recessed ☐ Remove ☐ To Ceiling	☐ Wallpaper ☐ Wood ☐ Display Rail ☐ Paint ☐ Lighted ☐ Cornice
Other_____	Other_____

Countertops

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	KS ☐	O/OA ☐	KS ☐	O/OA ☐

Material	Kitchen	Island	Other
Ceramic Tile			
Size			
Grout			
Concrete	☐	☐	
Engineered Stone (quartz)	☐	☐	
Granite	☐	☐	
Limestone	☐	☐	
Marble	☐	☐	
Plastic Laminate	☐	☐	
Stainless Steel	☐	☐	
Soapstone	☐	☐	
Solid Surface	☐	☐	
Wood	☐	☐	
Other_____	☐	☐	
Other_____	☐	☐	
Other_____	☐	☐	

Edge Treatment	Kitchen	Island	Other
Thickness	☐	☐	
Shape:	☐	☐	
Bevel	☐	☐	
Ogee	☐	☐	
Bull Nose			
Full	☐	☐	
½ Full	☐	☐	
Square	☐	☐	
Eased	☐	☐	
Contrast Color	☐	☐	
Other	☐	☐	
Backsplash			
Match to Counter	☐	☐	
Full Height	☐	☐	
Endsplash 4" High	☐	☐	
Color or Pattern:			
Details:			

Sink

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Material	Sink #1	Sink #2	Sink #3
Composite	☐	☐	☐
Enamel / Cast Iron	☐	☐	☐
Porcelain / Steel	☐	☐	☐
Stainless Steel	☐	☐	☐
Solid Surface	☐	☐	☐
Other_____	☐	☐	☐
Other_____	☐	☐	☐
Number of Bowls	**Sink #1**	**Sink #2**	**Sink #3**
One	☐	☐	☐
Two	☐	☐	☐
Same Size	☐	☐	☐
Large / Small	☐	☐	☐
Three	☐	☐	☐
Color	**Sink #1**	**Sink #2**	**Sink #3**
Details:_____			

Mounting	Sink #1	Sink #2	Sink #3
Self-Rimming	☐	☐	☐
Under-Mount	☐	☐	☐
Integral	☐	☐	☐
Counter Section	☐	☐	☐
Apron	☐	☐	☐
Other_____	☐	☐	☐
Special Features	**Sink #1**	**Sink #2**	**Sink #3**
Drainboard L	☐	☐	☐
Drainboard R	☐	☐	☐
Strainer	☐	☐	☐
Accessories	☐	☐	☐
1 Type	☐	☐	☐
2 Finish	☐	☐	☐
3	☐	☐	☐
4	☐	☐	☐
5	☐	☐	☐

Faucet

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Material	Sink #1	Sink #2	Sink #3
Brass	☐	☐	☐
Chrome	☐	☐	☐
Epoxy-Color	☐	☐	☐
Gold	☐	☐	☐
Brushed Nickel	☐	☐	☐
Pewter	☐	☐	☐
Stainless Steel	☐	☐	☐
Other_____	☐	☐	☐
Other Bowl	☐	☐	☐
Other Size	☐	☐	☐
Other_____	☐	☐	☐
Other_____	☐	☐	☐

Style / Features	Sink #1	Sink #2	Sink #3
One Handl ☐ L R ☐	☐	☐	☐
Two-Handles	☐	☐	☐
Bridge Type	☐	☐	☐
Pot Filler	☐	☐	☐
Goose Neck	☐	☐	☐
Pull-out Spray	☐	☐	☐
Automatic Operation	☐	☐	☐
Other Features	**Sink #1**	**Sink #2**	**Sink#3**
Separate Spray	☐	☐	☐
Instant Hot	☐	☐	☐
Water Filter	☐	☐	☐
Dishwasher Air Gap	☐	☐	☐

Dispensers

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Type	Sink #1	Sink #2	Sink #3
Dish Detergent	☐	☐	☐
Hand Lotion	☐	☐	☐

Type	Sink #1	Sink #2	Sink #3
Hand Soap	☐	☐	☐

Lighting Systems

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

General			
☐ LED	☐ Halogen	☐ Fluorescent	☐ Xenon
Decorative			
☐ LED	☐ Halogen	☐ Fluorescent	☐ Xenon
Under Cabinet			
☐ LED	☐ Halogen	☐ Fluorescent	☐ Xenon

Ambient			
☐ Cove	☐ Recessed	☐ Pendant	☐ Surface mtd.
☐ Track	☐ LED	☐ Halogen	☐ Fluorescent
Other_____			
Other_____			
Other_____			

Appliance & Fixture Specifications - Option 1
(Option 1 to be used by design professionals who select specific appliances for the client.)

Size	Color	Item / Description	Manufacturer	Model #	Notes
Surface Cooking			Configuration: P=Professional CT=Cooktop (controls on top) RT=Range Top (controls on front) Style: DI = Drop-in FS=Freestanding SI = Slide-in		
		Range_____ Config._____ Fuel_____			
		Cooktop_____ Config._____ Fuel_____			
		Rangetop_____ Config._____ Fuel_____			
Surface Ventilation		☐ Remote Blower ☐ Interior Blower ☐ Recirculate ☐ CFM ☐ Height ☐ Transition			
		Hood: ☐ Wall Mounted ☐ Island			
		Duct Cover: _____			
		Hood Liner and/or Blower:_____			
		Down Draft:_____			
		Micro Combo:_____			
Oven Cooking					
		Oven ☐ Single_____ ☐ Double_____			
		☐ Oven / Microwave Combo			
		Warming Drawer_____ Quantity:_____			
Microwave and Specialty Ovens		Configuration: CT= Countertop BI= Built-In OTR= Over The Range			
		Microwave_____ Confiig._____			
		Trim Kit:_____			
		Other:_____			
Refrigeration		Configuration: SxS= Side-by-Side UCDR= Undercounter Drawers UCD= Undercounter Door L/R TF= Top Freezer BF=Bottom Freezer Style: Free Standing BI= Built-In (Standard) IN=Built-In (Integrated) AR=All Refrigerator AF=All Freezer			
		Refrig. Config _____ Style:_____			
		Refrig. Config _____ Style:_____			
		Refrig. Config _____ Style:_____			
		Front Panel_____			
Dishwasher / Compactor		Style: ST= Standard IN= Integrated SI= Semi-Integrated DR=Drawer			
		Dishwasher_____ Style_____			
		Compactor_____ Style_____			
		Front Panel_____			
Water Products		Configuration: S= Single D=Double BL= Big and Little Style: UM= Undermount TM= Top Mount IN= Intergral AP= Apron C=Counter Section			
		Sink #1 Config_____ Style_____			
		Faucet:_____			
		Sink #2 Config_____ Style_____			
		Faucet:_____			
		Sink #3 Config_____ Style_____			
		Faucet:_____			
		Sink Accessories:_____			
		Instant Hot:_____			
		Water Filter:_____			
		Garbage Disposer_____ Quantity_____			
Miscellaneous		(Laundry, BBQ / Outdoor Equip, Intercom, Vacuum, Espresso, Ironing Center, Water Softener, Warranty, **Icemaker,** etc.)			

End Appliance & Fixture Specifications - Option 1

Appliance & Fixture Specifications - Option 2

(Option 2 is used by designers who gather all generic appliance info., rather than specifying specific appliances.)

Range

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

☐ New ☐ Existing Finish:_____ Size:_____

Fuel

☐ Electricity ☐ Natural Gas
☐ Propane

Type

☐ Free-Standing ☐ Drop-In ☐ Slide-In
☐ Integrated ☐ Professional Style

Electric Surface Units

☐ Conventional Coil ☐ Solid Disk (Electric Hob) ☐ Sealed Glass Ceramic
☐ Magnetic Induction ☐ Halogen Unit ☐ Thermostatic Controlled Unit
☐ Dual Size Unit

Gas Surface Units

☐ Open-Air (Conventional) ☐ Sealed ☐ High BTU

Surface Controls

☐ Electronic ☐ Conventional Knob

Other Cooking Surface Features

☐ Griddle ☐ Grill

Oven Features

☐ Electric Oven ☐ Gas Oven ☐ Broiler
☐ Convection Oven ☐ Pyrolytic (Self-Cleaning) ☐ Other_____

Controls: Conventional Knob Electronic

Other Range Features

Cooktop / Range Top

Use Existing	Furnished by	Installed by
Yes No	KS O/OA	KS O/OA

New Existing Finish:_____ Size:_____

Fuel

☐ Electricity ☐ Natural Gas
☐ Propane

Type

☐ Free-Standing ☐ Drop-In ☐ Slide-In
☐ Integrated ☐ Professional Style

Electric Surface Units

☐ Conventional Coil ☐ Solid Disk (Electric Hob) ☐ Sealed Glass Ceramic
☐ Magnetic Induction ☐ Halogen Unit ☐ Thermostatic Controlled Unit
☐ Dual Size Unit

Gas Surface Units

☐ Open-Air (Conventional) ☐ Sealed ☐ High BTU

Surface Controls

☐ Electronic ☐ Conventional Knob ☐ Griddle ☐ Grill

Other Cooking Surface Features

Ventilation System

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Updraft / Canopy

☐ Exhaust ☐ Recirculating

Hood

☐ Match to Cooktop ☐ Match to Cabinetry
☐ Custom Design ☐ Slim Line / Telescoping

Downdraft / Proximity

☐ Surface Mount ☐ Pop-Up (Behind Cooktop) ☐ Pop-Up (Next to Cooktop)

Ventilation System Installation

☐ New Ductwork Needed ☐ Duct Termination
☐ Space to Run Ductwork

Ovens

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Conventional

☐ New ☐ Existing Finish:_____ Size:_____

Configuration

☐ Single ☐ Double ☐ Combo Micro / Oven
Under-Counter Installation Wall Installation

☐ High-Speed Cooking ☐ Convection Cooking-Gas ☐ Steam Cooking
Convection Cooking-elective ☐ Pyrolytic (Self-Cleaning)

Controls: ☐ Conventional Knob ☐ Electronic

Other Features

Microwave Oven

Use Existing	Furnished by	Installed by
☐ Yes ☐ No	KS ☐ O/OA ☐	KS ☐ O/OA ☐

Microwave Oven

☐ New ☐ Existing Finish:_____ Size:_____

Installation

☐ Free-Standing ☐ Boxed/Built-In ☐ Integrated

Configuration

☐ Microwave-Ventilation Combo ☐ Professional Style
☐ Microwave-Convection Cooking ☐ Microwave-Light Cooking

Features

☐ Browning Element ☐ Turntable

Refrigerator / Freezer

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	☐ KS	☐ O/OA	☐ KS	☐ O/OA

Type	#1	#2	#3
Single Door Refrigerator			
Single Door Freezer			
Refrigerator / Freezer:			
Side by Side			
Top Mount			
Bottom Mount			
Undercounter			
Modular Units:			
Refrigerator Drawers			
Freezer Drawers			
Freezer:			
Upright			
Chest			
Installation	#1	#2	#3
Free-Standing			
Boxed-In			
Integrated			
Under-Counter			
Decorative Panels			

Features	#1	#2	#3
Ice Maker			
Ice Dispenser (Door)			
Mini-Door Access			
Water Disp. (Outside)			
LCD Screen			

Other Features	#1	#2	#3

Other Cooling Appliances

☐ Ice Maker ☐ Wine Storage

Dishwasher

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	☐ KS	☐ O/OA	☐ KS	☐ O/OA

Type	#1	#2
Door		
Drawers		
Installation	#1	#2
Built-In		
Integrated with Decorative Panel to Match Cabinets		
Stainless Steel		
Color Front		

Interior Finish	#1	#2
Plastic		
Stainless		
Dishwasher Features	#1	#2
Adjustable Shelves		
Flatware Trays		
Multiple Racks		
Special Cycles		
Stem Storage		

Other Clean-Up Appliances

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	☐ KS	☐ O/OA	☐ KS	☐ O/OA

Type	#1	#2	#3
Disposer:			
Batch Feed			
Continuous Feed			

Type	#1	#2	#3
Trash Compactor			

Other Appliances

Use Existing	Furnished by		Installed by	
☐ Yes ☐ No	☐ KS	☐ O/OA	☐ KS	☐ O/OA

Type:

☐ Built –In Small Appliances	☐ Computer	☐ Intercom	☐ VCR / DVD	☐ Warming Drawer	☐ Washer / Dryer
☐ Radio	☐ Telephone	☐ Television	☐ Other:_____	☐ Other:_____	☐ Other:_____

End of Appliance & Fixture Specifications - Option 2

Flooring

Use Existing ☐ Yes ☐ No

Furnished by: ☐ KS ☐ O/OA

Installed by: ☐ KS ☐ O/OA

Floor Preparation

- ☐ Removal:
- ☐ Leveling:
- ☐ Shim:
- ☐ Subfloor Material:
- ☐ Underlayment:
- ☐ Baseboard Under Trim:
- ☐ Transition Treatment

Floor Covering

Material

☐ Bamboo	☐ Carpet	☐ Ceramic Tile	☐ Cork
☐ Laminate	☐ Linoleum	☐ Vinyl-Sheet	☐ Vinyl-Tile
☐ Wood	☐ Wood-Engineered	☐ Stone	☐ Other:

Color or Pattern:

Describe:

Windows

Check all that apply.

Slider = S Casement = C Double-Hung = DH Skylight = SL Bow = BO Bay = BA
Vinyl = V Aluminum = A Aluminum Clad = AC Wood = W Glass Block = GB

Use Existing ☐ Yes ☐ No

Furnished by: ☐ KS ☐ O/OA

Installed by: ☐ KS ☐ O/OA

Interior Wall Patch: Exterior Wall Patch: Sink Vent Relocation:

Window #	Configuration	Size	Screen **or Relocate**
			Screen: ☐ Yes ☐ No
			Screen: ☐ Yes ☐ No
			Screen: ☐ Yes ☐ No
			Screen: ☐ Yes ☐ No
			Screen: ☐ Yes ☐ No
Can windows be relocated?			Relocate ☐ Yes ☐ No

Doors

Check all that apply.

Bi-Fold = BF Slider = S Pocket = P French = F Swing = SW
Solid Core = SC Steel = ST Hollow Core = HC

Use Existing ☐ Yes ☐ No

Furnished by: ☐ KS ☐ O/OA

Installed by: ☐ KS ☐ O/OA

Door #	Configuration	Hinge	Size	Screen **or Relocate**
		☐ L ☐ R		Screen: ☐ Yes ☐ No
		☐ L ☐ R		Screen: ☐ Yes ☐ No
		☐ L ☐ R		Screen: ☐ Yes ☐ No
		☐ L ☐ R		Screen: ☐ Yes ☐ No
		☐ L ☐ R		Screen: ☐ Yes ☐ No
		☐ L ☐ R		Screen: ☐ Yes ☐ No
Can doors be relocated?				Relocate ☐ Yes ☐ No

Hardware Finish: ☐ Passage ☐ Privacy ☐ Knob ☐ Lever

(Note: Door hinging determined as you face door and open toward you.)

Surfaces

Use Existing ☐ Yes ☐ No

Furnished by: ☐ KS ☐ O/OA

Installed by: ☐ KS ☐ O/OA

Wall Preparation	☐ New Plaster/Drywall	☐ Clean	☐ Patch Exist	☐ Remove Exist. Covering:
Wall Finish	☐ Paint	☐ Wallpaper	☐ Tile	☐ Other:
Ceiling Finish	☐ Paint	☐ Wallpaper	☐ Suspended	☐ Vaulted ☐ Other:
Ceiling Preparation	☐ New Plaster/Drywall	☐ Clean	☐ Patch Exist	☐ Remove Exist. Covering:
	☐ Other:			☐ Repairs:
Window Treatment	☐ Blinds	☐ Fabric	☐ Shutters	☐ Other:

Construction	Source			Category
HVAC/**HEATING**	Use Existing	Responsibility KS	Responsibility O/OA	
HVAC Details:	☐ Yes No ☐	☐	☐	Air Conditioning System Age:_____ Planned Improvements:_____
Heating System: Fuel Source Type: Cooling Ventilation: Relocate, Replace Existing	☐ Yes No ☐	☐	☐	Heating System Age:_____ Planned Improvements:_____ Cooking Ventilation Ductwork Age:_____ Planned Improvements:_____
Electrical Work Details: Wire Type: Open Circuits:	☐ Yes No ☐	☐	☐	New Service Panel:_____ Code Updates:_____ Modifications to Exist. Service:_____
Plumbing: Water Supply: Waste Pipe Type:	☐ Yes No ☐	☐	☐	New Rough-In Requirements:_____ New Drainage Requirements:_____ New Vent Stack Requirements:_____ Modifications to Exist. Lines:_____
General Carpentry Existing Wall: Existing Trim:	☐ Yes No ☐	☐	☐	Reconstruction Work (Except as previously noted.) Windows:_____
Demolition Work: Removal of Windows: Removal of Ceiling: Removal of Floor Covering: Removal of Soffitts: Removal of Debris:	☐ Yes No ☐	☐	☐	Doors:_____ Interior Walls:_____ Exterior Walls:_____ Cabinet Install. / Woodworking Trim Install:_____
Miscellaneous Work Details:	☐ Yes No ☐	☐	☐	**Miscellaneous Work:** Building Permit(s):_____ Structural Engineering / Architectural Fees:_____ Inspection Fees: _____ Other:_____

Existing Construction Details- continued

18.*Condition of –*

Surface Walls _____

Floors: _____

Ceilings: _____

Soffit / Fascia: _____

Squareness of Corners: _____ (Parallel Wall to Within ¾)

Is there any hazardous material to be removed? _____

***19.** Construction of Floor:* ☐ Slab ☐ Frame

***20. Direction of Floor Joists*:** ☐ Parallel to Longest Kitchen Wall ☐ Perpendicular to Longest Kitchen Wall Joist Height: _____

***21.** Exterior:* ☐ Brick ☐ Aluminum ☐ Stucco ☐ Wood ☐ Other: _____

***22.** Interior:* ☐ Drywall ☐ Lath & Plaster ☐ Wood ☐ Other: _____

23. *Windows Can Be Relocated:* ☐ Yes ☐ No *Doors Can Be Relocated:* ☐ Yes ☐ No *Walls Can Be Relocated:* ☐ Yes ☐ No

***24.** Windows:* ☐ Sliders ☐ Double Hung ☐ Skylights ☐ Casement ☐ Greenhouse ☐ Bow/Bay ☐ Other: _____

***25.** Sewage System:* ☐ City Service ☐ Septic System ☐ Other: _____

26. *Type of Roof Material:* _____ *Age of Roof:* _____

Access:

Can Equipment Fit Into The Room? _____

Basement: _____ Attic: _____ Crawl Space: _____

Material Storage: _____ Trash Collection Area: _____

HVAC: Describe Existing System: Heating: _____ Ventilation: _____ Air Conditioning: _____

Plumbing:

Location of Existing Vent Stack: _____ Type of Trap: _____

Add Additional Line: _____

Electrical

GFCI Existing: ☐ Yes ☐ No

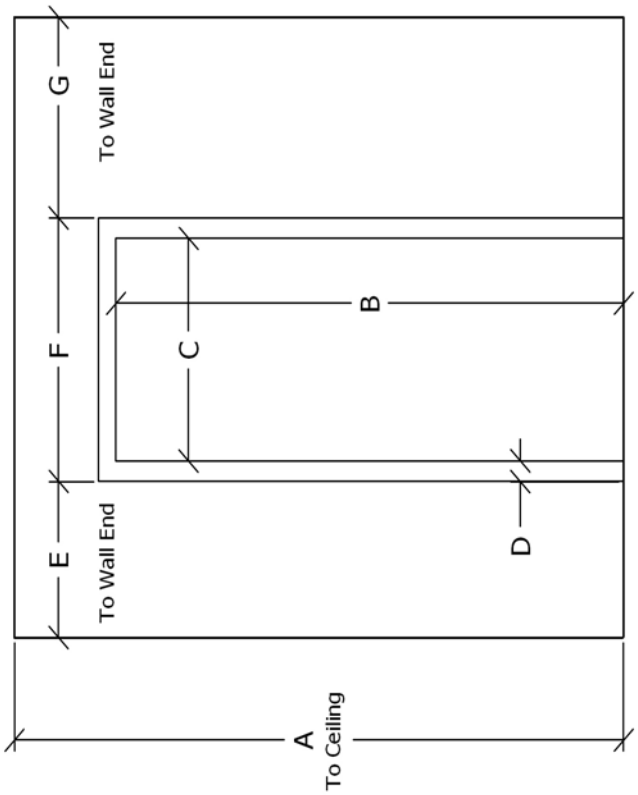
New Wiring Access: ☐ Hard ☐ Average ☐ Easy Number of Circuits Open for Expansion: _____

Existing Electrical Service Capacity: _____ Number of 120V Circuits: _____ Number of 240V Circuits: _____

27. *Room Below Kitchen* _____

Existing Construction Details

Doors	No.	A	B	C	D	E	F	G



Existing Construction Details (continued)

Windows

No.	A	B	C	D	E	F	G	H	I