

NEEDS ASSESSMENT FORM

Date _____ Telephone _____ Residence _____
Name _____ Work _____
Address _____ Mobile _____
City, State, Zip _____

General Information

Area of property to design? _____
Drainage problems? _____
Soil tested recently? _____
Accurate survey/plans available? _____
Building additions planned? _____
Any active problems? _____
Important items to protect? _____
How long have you lived here? _____ Intend to stay (years)? _____
Key views: To enhance? _____
To screen? _____

Style Preferences

Garden and plantings? _____
Hard surfaces? _____
Garden art? _____
Color preferences? _____
Favorite plants? _____
Least favorite plants? _____
Plants to save/transplant? _____
Wildlife attracting/bird feeding? _____

Family Size

Parents _____ Children _____ Ages _____
Pets: Kind: _____ Number: _____ Fence: _____ Pen _____ Invisible Fence _____
Size and type of typical gatherings? _____
Daily use by family? _____
Outdoor Cooking: Gas? _____ Charcoal? _____ Built-in? _____ Location of BBQ? _____
Food preparation/serving area? _____
Lighting to cook by? _____
Special play areas? Swing set _____ Tree house / fort _____ Volleyball _____ Sand box _____

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Outdoor Living Spaces

Decks? _____ Material? _____

Patios? _____ Material? _____

Swimming pool? Shape _____ Size: _____ Above/In ground _____ Depth _____

Fire pit? _____ Spa? _____ Tennis Court? _____

Structures (gazebo, trellis, shade porch, sunroom, pool cabana, etc.) _____

Outdoor telephone _____ Outdoor sound system? _____

Functionality

Screening/privacy? _____

Storage? _____

Firewood? _____

Trash? _____

Deliveries (loading, unloading)? _____

Lighting

Type and style? _____

Current switching locations? _____

Desired switching locations? _____

Panel size/circuit availability? _____

1st priority for installation? _____ **First phase budget** \$ _____

2nd priority for installation? _____ **Long-term budget** \$ _____

Utilities locations

Gas? _____ Oil? _____

Water? City _____ Well _____

Electric? Above _____ Buried _____

Cable? _____ Septic? _____

Irrigation System? Existing _____ Desired _____

Sewer? _____