

# CLIENT QUESTIONNAIRE



Please help me understand your landscape needs by answering a few questions. The better I understand your requirements and desires, the easier it will be for me to capture your vision.

These are “casual” questions; some of them might not apply to your situation, so please feel free to omit them.

*Please be assured that all of this information will be strictly confidential.*

**Name(s):**

**Date:**

**Address:**

**Home Phone**

**Work Phone**

**Cell Phone**

**Email address(es)**

What is your design time schedule (finish due date)?

What is your install time schedule (finish due date)?

What do you want to invest in your landscape?

What's the percentage thereof that you want to invest into hardscape (man-made structures)?

What's the proportion thereof that you want to invest into softscape (plants)?

What's the proportion thereof that you want to invest into amenities (BBQ, spa, furniture)

What's the proportion thereof that you want to invest into landscape lighting?

If you desire a Master Plan with the intention to implement your design in phases, please identify the budget you would be willing to spend annually on your site for the next five years.

Is this your 1<sup>st</sup> collaboration with a design professional?

What are your financial criteria to make the final decision on a designer?

What, in our relationship with the designer, would make this a successful project ?

## THE CLIENT'S PERSONAL DATA

How many people are in your household?

What are their ages?

What are the occupations of the adults in your home?

Are there any pets in your household, and which part of the landscape would they use?

Is this your primary residence?

How long have you lived in your home?

How many years do you intend to live in it?

## THE CLIENT'S ARCHITECTURAL OBSERVATIONS:

What's the size of your property?

What's the size of your home?

What's the age of your home?

What made you purchase this home?

What's the architectural style of your home?

Any particulars, any architectural detail that you have noticed?

Are there any “interior” features of the house that you find noteworthy (such as specific flooring, a special tile, certain colors)?

## **THE CLIENT’S SITE OBSERVATIONS**

### **Existing site conditions:**

Do you have an **existing irrigation system**, and if so, how old is it? Does it meet your needs?

### **Are you aware of any drainage issues? Any “puddling” after a rain event?**

Location:

**Do you know the quality of your soil? Do you know your soil drainage?** (i.e. sandy soil drains well; clay soil drains slowly)

**Front yard** problems. Please list the current problems in the front yard that you think should be minimized or overcome in the design.

1. Visual
2. Functional
3. What are its assets and potentials?

**Back yard** problems. Please list the current problems in the front yard that you think should be minimized or overcome in the design.

1. Visual
2. Functional
3. What are its assets and potentials?

## **THE DESIGN PROGRAM**

**Please tell me your three most important reasons for landscaping, and about your wants and wishes.**

**Can you name adjectives or properties of your dream landscape?**

**What’s your dream vacation destination?**

**Is there a “main” area of higher priority in your property?** (i.e., is the back/interior garden more important than the front garden?), and what do you want to use the main area for?

Order of priority for different areas:

- 1.
- 2.
- 3.

**Will you want to do (a) certain area(s) in the future?**

**Do you want to explore all design options** with the aim of developing a master plan that can be executed in phases?

**DESIRED OUTDOOR ACTIVITIES**

Please place a check mark next to those activities in which you want to participate on your site.

Desired Outdoor activity	Season				Days per week	Time of Day
	W	S	S	A		
<input type="checkbox"/> Barbecuing						
<input type="checkbox"/> Eating						
<input type="checkbox"/> Sitting/ Relaxing / Reading						
<input type="checkbox"/> Sitting/Talking/with family						
<input type="checkbox"/> Private contemplation						
<input type="checkbox"/> Primarily viewing						
<input type="checkbox"/> Entertain						
<input type="checkbox"/> 4-6 guests						
<input type="checkbox"/> 6-10 guests						
<input type="checkbox"/> more than 10 guests						
<input type="checkbox"/> Entertainment: Primarily family in informal groups?						
<input type="checkbox"/> Entertainment: Primarily non-family in formal groups?						
<input type="checkbox"/> Sunbathing						
<input type="checkbox"/> Watching birds						
<input type="checkbox"/> Gardening (see also below)						
<input type="checkbox"/> Annuals						
<input type="checkbox"/> Perennials						
<input type="checkbox"/> Vegetables						
<input type="checkbox"/> Fruit trees						
<input type="checkbox"/> Woody shrubs						
<input type="checkbox"/> perennial and ornamental grasses						
<input type="checkbox"/> succulents						
<input type="checkbox"/> roses						
<input type="checkbox"/> Recreation						
<input type="checkbox"/> Badminton						
<input type="checkbox"/> Volleyball						
<input type="checkbox"/> Croquet						
<input type="checkbox"/> Swimming						
<input type="checkbox"/> Throwing baseball						
<input type="checkbox"/> throwing football						
<input type="checkbox"/> throwing Frisbee						
<input type="checkbox"/> throwing horse show						
<input type="checkbox"/> Other / please identify						

**Which landscape structures do you want to include? (Please check all that apply.)**

- Deck
- Terrace/Patio
- Paths/Walkways
- Steps/Stairs

**Garden structures & support**

- |   |                                   |  |   |
|---|-----------------------------------|--|---|
| <input type="checkbox"/> Cooking center | <input type="checkbox"/> fire pit | <input type="checkbox"/> If BBQ, what size | <input type="checkbox"/> portable/built-in        |
| <input type="checkbox"/> Side-burner    | <input type="checkbox"/> sink     | <input type="checkbox"/> fridge            | <input type="checkbox"/> shade structure/ pergola |
| <input type="checkbox"/> gazebo         | <input type="checkbox"/> arbor    | <input type="checkbox"/> other:            |   |

**Children's play**

- |                                      |                                    |   |
|--------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Sand box    | <input type="checkbox"/> playhouse | <input type="checkbox"/> tricycle path  |
| <input type="checkbox"/> Toy storage | <input type="checkbox"/> slide     | <input type="checkbox"/> lawn play area |

**Storage needs**

- |                                       |  |                                       |  |
|---------------------------------------|--|---------------------------------------|--|
| <input type="checkbox"/> Tool storage | <input type="checkbox"/> furniture storage | <input type="checkbox"/> bike storage | <input type="checkbox"/> Trash enclosure |
|---------------------------------------|--|---------------------------------------|--|

**Water features:**Fish / lily pond  
reflecting poolfountain  
pool

stream

waterfall

Number of people:  
Play pool  
Exercise pool  
Desired size  
Desired features  
Pool fence  
Slide**Bird & Insect attraction**Bird feeder  
Bird bathButterfly Garden  
Other:

Bird flowers

**Low voltage landscape lighting****YOUR GARDEN STYLE****Materials.**

Please list the types of materials you like most for pavements, fences, walls, etc.

Do you prefer a particular style of garden like Mediterranean, Contemporary, Modern, Southwestern, Tropical, Japanese, English etc.?

**Desired Site character.**

Please describe how you think your site should look (formal/informal, open/wooded, etc.).

Circle the number that describes the correct end of the range you would like your garden to have:

Casual:	1	2	3	4	5	6	7	Formal
Classical	1	2	3	4	5	6	7	Modern
Unified	1	2	3	4	5	6	7	Eclectic
Sunny	1	2	3	4	5	6	7	Shady
Bold/vibrant	1	2	3	4	5	5	7	Calm/Subdued
Open	1	2	3	4	5	6	7	Enclosed
Elegant	1	2	3	4	5	6	7	Whimsical
Simple	1	2	3	4	5	6	7	Complex
Loose	1	2	3	4	5	6	7	Manicured
Free-form	1	2	3	4	5	6	7	Symmetrical, geometrical
Urban	1	2	3	4	5	6	7	Woodsy
Flowery	1	2	3	4	5	6	7	Restrained
Striking	1	2	3	4	5	6	7	Humble, modest, low-key
Fully planted	1	2	3	4	5	6	7	Loosely/sparsely planted

*(Please ask for visual examples if you need help with these questions)*

## PERSONAL INVOLVEMENT

### How much interest do you personally have in gardening?

Little or no interest	Garden must be low maintenance
Moderate interest	Will garden occasionally
High interest	Will garden weekly

### Do you plan to employ a garden maintenance service?

### If you already employ a maintenance company, are you satisfied with their service?

## SPECIAL PLANTING ELEMENTS

Cutting garden	Vegetables	Container Planting
Fruit trees	Spring bulbs	Roses
Tropical plants	Herb garden	Other:

Are there any plants that you especially like?

Are there any plants that you especially dislike?

Are there foliage and flower colors that you like?

Are there foliage and flower colors that you dislike?

Would you prefer to install more mature (larger) plants or would you like to watch your plants grow to maturity over 1-2 growing seasons (trees may need longer)? *(Using smaller, less mature plants saves money and is beneficial to the plant allowing it to acclimate to its new environment as it grows. Installing more mature plants while more costly, gives more immediate viewing pleasure.)*