

Bathroom : Questionnaire

Please briefly state what you would like BBG Interiors & Design to achieve for you :

What is the orientation of this space?

North		East		South		West		Don't know	
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What is the quality of the natural light in this room / area?

Bright		Neutral		Dark
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How many people use this space?

Adults		Children	
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How many windows are there in the bathroom and what is the orientation of each window?

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Flooring

What of flooring do you have at the moment?	Do you want to keep it?	
	Yes	No

CLIENT'S NAME

What is your preferred flooring?

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Window Treatments

List and / or describe any patterns or colours that must NOT be included in the window treatment?

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If you want to keep your Window Treatments briefly describe them and / or take a photo of them:

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Wall coverings

What is your wall covered with?

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What is your preferred wall covering? i.e. wallpaper, paint, ceramic tiles, wood etc

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Lighting

What lighting is used in this room / area?

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Is it lighting adequate for all functions that are to take place in this space?
Comments:

Storage

What storage is there?
Is it enough or is more storage required?

Bathroom Utilities

What bathroom utilities need REPLACING? Tick accordingly				
	Bath		Basin	
	Bidet		Shower	
	Heater / Radiator		Shaving socket	
	Other:			

Budget

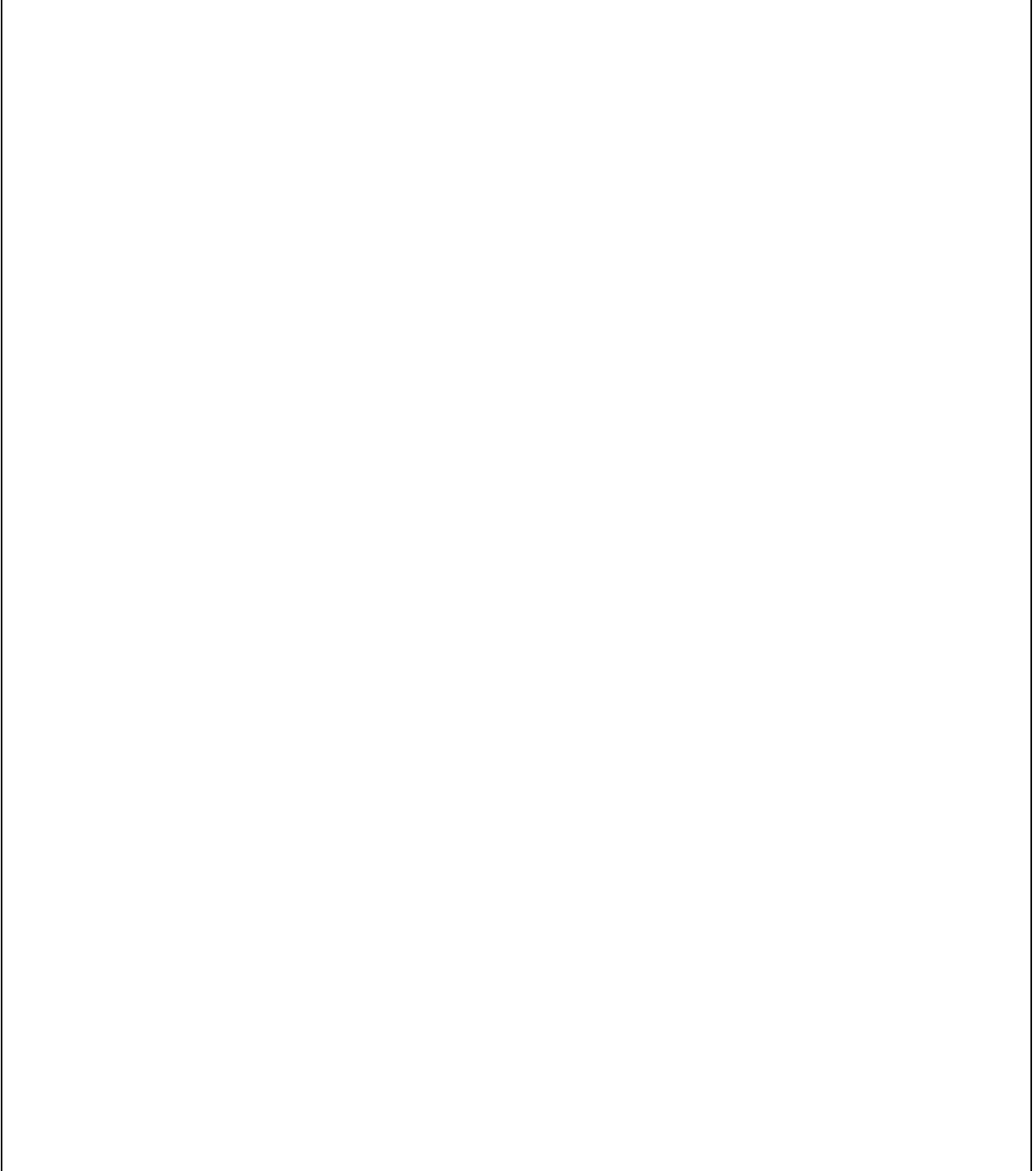
What is your budget for this room / area?

Other Comments:

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Floor Plans

Please draw a rough sketch of the room's layout indicating where the following are: windows, radiators, bath, shower, lightin, basin, toilet, shaving socket, etc



I have included photos (please tick accordingly)

CLIENT'S NAME