

REDWOOD
KITCHEN & BATH

625 Du Bois Street, Suite C San Rafael, CA 94901 • Phone 415.456.7100 • Fax 415.456.7106

BATHROOM PLANNING GUIDE

1. Is this bathroom for a :

House _____
Condo _____
Other _____

2. How many primary users of this bathroom will there be? 1 2 3 4 more

3. Who are the primary users of this bathroom:

Adults _____
Children _____
Guests _____

4. This bathroom will be:

Master Suite Bathroom
Located in Master Suite? Yes ___ No ___

Children's Bathroom
Located in Child's room? Yes ___ No ___

Guest Bathroom
Located in Guest Bedroom? Yes ___ No ___

Hall Bathroom
Located on main Bedroom level of home? Yes ___ No ___

Powder Room
Located in what area of home? _____

5. Would you like a shower area and tub separate ___ or combined ___?

6. Should a linen closet be considered in your new bathroom? Yes ___ No ___

7. Do you require a storage area for personal items? Yes ___ No ___

8. Do you want an "appliance garage" for commonly used items such as hairdryers and other electrical appliances? Yes ___ No ___

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9. Do you want his and her facilities? Yes ____ No ____

10. What room will the bathroom be accessible from?

Bedroom only ____

Hallway ____

Multiple Bedrooms ____

Other ____

11. Is this the only bathroom in your home? Yes ____ No ____

12. What style is your home?

Modern ____

Traditional ____

Country ____

Other ____

13. What is the age of your home? ____ years.

14. What do you like about your current bathroom?

15. What do you *dislike* about your current bathroom?

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16. Before we remodel your bathroom, decide if the following items are necessary items or items you would like:

	Need	Want
Accessories	___	___
Bidet	___	___
Countertop(s)	___	___
Exercise Area	___	___
Faucets	___	___
Flooring	___	___
Full-length mirror	___	___
Heat Lamp	___	___
Heated Flooring	___	___
Heated towel rack	___	___
Knobs / pulls	___	___
Lighted make-up mirror	___	___
Lighting Fixtures	___	___
Medicine Cabinet(s)	___	___
Mirror(s)	___	___
Pedestal sink(s)	___	___
Shower Door	___	___
Shower-stand alone	___	___
Shower / tub combination	___	___
Sink(s)	___	___
Sitting area / chair	___	___
Steam Unit	___	___
Telephone	___	___
Toilets	___	___
Towel bar(s)	___	___
Vanity	___	___
Wall coverings	___	___
Whirlpool tub	___	___