



PLAN AHEAD DRAFTING AND DESIGN, LLC

9 Choptank Avenue, Easton, MD 21601

410-822-3447 planaheaddrafting@msn.com

About You

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax number: _____

About Your Family

Family members / ages: _____

Does your family have any special needs? _____

Where does your family spend the most time together? _____

Where does your family eat most meals? _____

Does your family usually watch TV together, or do you prefer separate viewing areas for parents and children? _____

How do you entertain? _____

How important are formal living areas to you? _____

General House Requirements

What do you like/dislike about your present home? _____

Preferred architectural style: _____

Preferred exterior material: Brick Stone Siding Stucco

Preferred roofing material: Asphalt shingles Metal Other

What is your budget? _____ What is your timeframe? _____

Anticipated square footage: _____ Do you want a porch? yes no

Porch location: Front Rear Side

Foundation style: Slab Crawl space Basement

How many levels: _____ Ceiling Heights: up_____ down_____

If two story, how many staircases and locations? _____

Do you want a permanent attic stair or pull-down stairs? _____

Front door style preference: French Solid Single Double

Window style preference: Double hung Casement



Room Requirements: Foyer

Size: _____ Coat Closet: yes no

Ceiling Height: _____

Room Requirements: Living Room

Size: _____ Fireplace: yes no Built-ins: yes no

Ceiling style, texture and height: _____

What furniture must it accommodate? _____

Other special features: _____

Room Requirements: Study or Home Office

Do you need one? yes no Size: _____ Built-ins: yes no

Where do you want it located? _____

How will it be used? _____

Other special features: _____

Room Requirements: Dining Room

Size: _____ Formal: yes no Built-ins: yes no

Ceiling style, texture and height: _____

What furniture must it accommodate? _____

Other special features: _____



Room Requirements: Kitchen

Size: _____

Please indicate the kitchen features you are most interested in:

- Island Breakfast Bar Butler's Pantry Walk-in Pantry Built-in Desk

Describe the type of appliances you want and where they should be located? _____

Will the kitchen be typically used for serious meal preparation or for quick convenient meals?

Will you eat most family meals here? _____

What material would you like for the counters? _____

What material would you like for the floor? _____

Will your family use an outdoor eating area off the kitchen? _____

Other special features: _____

Room Requirements: Family / Great Room

Size: _____ Fireplace: yes no Built-ins: yes no

Ceiling style, texture and height: _____

What furniture must it accommodate? _____

Will the family's main TV/VCR/DVD be located in this room? _____

Describe desired location of fireplace to TV: _____

Would you like a wet bar in this room? : yes no

Do you want this room open to the kitchen? yes no

Other special features: _____



Room Requirements: Master Bedroom

Size: _____ First or Second Floor: ____ Fireplace: yes no

Ceiling style, texture and height: _____

What furniture must it accommodate? _____

Do you want patio or deck access? _____

Do you want a sitting area or retreat area? _____

Do you need adjacent exercise, hobby, office, or nursery areas? _____

Other special features: _____

Room Requirements: Master Bath

Vanities: Single Double Knee Space Medicine Cabinets Height: 31" 36"

Separate tub and shower? yes no Tub style? Soaking Jetted

What type of shower do you want? Enclosed with door Walk-in (no door)

How many shower heads? 1 2 Steam unit in shower? yes no

Do you want a seat in the shower? yes no What size shower? _____

Do you want a bidet? yes no

Do you want separate walk-in closets? _____ What size? _____

Do you want a dressing area? yes no

Do you want access to the closets from the Bedroom Bath Dressing area

Room Requirements: Secondary Bedrooms

How many? _____ What size? _____ Walk-in closets? yes no

Preferred bath arrangement: Private Jack-and-Jill Public

Room Requirements: Laundry / Utility Room

Location: First floor Second floor

Amenities: Freezer space Sink Built-in Ironing Board TV space

Broom closet Laundry chute Access to outside



Room Requirements: Miscellaneous: Mud Room, Half Bath

Do you want a mudroom? yes no Size: _____

Amenities: Lockers with bench Separate walk-in closet

Where would you like a half bath located? _____

Would you like access from the outside, such as a pool entrance? yes no

Room Requirements: Garage

How many car spaces? 1 2 3 4 Front load Side load Rear load

Would you like a storage / workshop area? yes no

Where would you like your garage located? Left side Right side

Site Information

Have you already purchased a lot? yes no

Lot # _____ Subdivision name _____

Are there any special features of your lot that we should know about, such as views, water, trees, etc.? _____

Are there subdivision restrictions on your lot? yes no If yes, we will need a copy.

Will an architectural committee review your plans? yes no