



1547 – 152nd Ave. N.E. Anoka, MN 55304
763-434-6497

Client Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ **Cell:** _____ **E-mail:** _____

Family Members:

Name: _____ *Age:* _____

Pets:

Hobbies / Recreational Activities: *(Describe)*

General Color Preferences:

General Style Preference: *(Traditional, Contemporary, Victorian, etc.)*

General Wood / Metal / Fabric Preference: *(Oak, Maple, Iron, Brass, Silk, Plaid, Stripes, etc.)*

Window Treatment: *(What are you looking for?)*

Draperies? Y N
Blinds? Y N
Shutters? Y N
Fabric? Y N
Woods? Y N

Any unusual shape or hard to reach windows? Y N

House Issues:

Direct Sun? Y N
Heat? Y N
View? Y N
Privacy? Y N

Is this a new or existing home or office?

Area / rooms to be furnished: *(Describe)*

Furnishings being kept:

Ambiance of specific room / rooms: *(Casual, Formal, Romantic, etc.)*

What would you like this project to accomplish?

What is your anticipated budget for this project

Any areas with special consideration: *(Fragile accessories / furniture, damaged wall / floor, etc)*

Comments:

Preferred time / day to be contacted: AM / PM M T W TH F SA *(Circle)*

Directions to your home:

You may fax this form to us at 763-434-1900.

Thank You