



Landscape Design Questionnaire

Where did you hear about Edgewater Landscaping?

- At the Greenhouse, Customer Referral, Website, TV or Commercial, Radio, Trade Show, Flyer/Newspaper

Name, Home Phone, Address, Work Phone, City, State, Zip, E-Mail

Name and age of family members: (list any hobbies or sports that take place in the yard)

Any Pets? YES NO If yes, what kind?

What style is your house? (Victorian, cottage, colonial etc...)

How old is your house?

Do you have plot plans or architectural plans for the house or lot? YES NO

What is the approximate budget for the design and installation of the landscape project? Please comment if necessary:

Who will maintain the landscape? Owner, Maintenance Co., Other

What level of maintenance would best fit your lifestyle?

- As little as possible, I'll pull a weed or two, Dirty nails don't bother me

Are you a: DIY—Do it Yourself OR DIFM—Do it For Me

Soil Conditions table with categories: Poor drainage, Compacted soil, Excessive Runoff, Steep Slopes, Poor Water Holding, Other grade Problems

Digger's Hotline Information:

City or Village: If Rural, Township

Location of home relative to the street North South East West

Nearest Intersection

Approx feet Miles

To the North South East West Of above stated Intersection

Work to be done on:

- Northwest, Northeast, Entire Lot, Southwest, Southeast, Other

Please indicate any private lines on the property—Lines installed by private contractors such as propane, outdoor lighting, irrigation or invisible fence

Special Considerations - Circle all that apply table with categories: Screens needed, Traffic noise, windbreaks, Snow drifting, Shade needed, Too much shade, Patio/seating area needed, Poor driveway, Existing plants, Deer Problems, Too much lawn, Not enough lawn, Others, please specify:

2957 Cty Rd CX, P.O. Box 757, Portage, WI 53901, Phone: 608.742.6558, Fax: 608.742.6237, E-mail: designer_bre@verizon.net



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Light Conditions:

Please provide information on the amount of sun the landscape receives. Be Specific.

Plant Selection:

Plants Liked:

Plants Disliked:

What type of foundation planting do you prefer?

- Deciduous shrubs Evergreen shrubs Combination

Service Areas
Circle all that apply
Cloth line Compost bin Dog kennel
Boat/trailer storage Vegetable garden Approx size?
Grill/fire pit Others

Recreational/Entertainment Area:

Would you like recreational areas? YES NO

If yes, please indicate what the areas will be used for.

Would you like a deck or patio? YES NO

If yes, please indicate the average number of people you will entertain.

Elements of Landscape Design:

Please Circle all that you would like incorporated into your design
Annual Flowers Perennial Flowers Ornamental Grasses
Prairie Garden Water Garden Butterfly Garden
Pond/Waterfall Water feature Trees
Shrubs Entry Garden Driveway/ car turnaround
Patio Walks/Paths Retaining wall—block
Retaining wall-natural stone Seatwalls Stairs
Outdoor lighting Wildlife Garden Large Lawn for recreation
Large Shade trees Children's play area Lawn
Pillars Pergola Berms
Concrete Edging Other

Would you prefer you beds mulches with: Red Mulch Brown Mulch River Rock Other

Please use the following space to provide any other information that you feel will be useful in the development of your landscape design Please be as specific as possible.



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