Landscape Design Questionnaire

This questionnaire will help you understand your current landscape, determine your needs, think about your "like to haves" and "must haves", and recognize issues that may need to be resolved.

| Name: | Date: |
|--|---|
| Address: | |
| Would you like to focus on your front or back yard | d? Front yard Back yard |
| How many members are in your family? | Adults Children |
| Do you have pets?Yes No lf | f yes, what kind and how many? |
| Who will install the landscape? Owne | er Contractor Both |
| Who will maintain the landscape Owne | er Contractor Both |
| What level of maintenance do you want to perfor | rm? Minimum Moderate High |
| What style of landscape do you prefer? | |
| Formal Informal | _ Straight lines |
| Curves Circles | _ Don't know |
| SOIL PROPERTIES/DRAINAGE | |
| What type of soil do you have? Clay | Sand Loam Don't know |
| Is there a slope? Yes | |
| Do you have drainage issues on your property? | |
| <u>IRRIGATION</u> | |
| Do you have or plan to use an irrigation controlle | r/timer? Yes No |
| Would you like to convert any overhead spray sys | stems to a drip irrigation system? Yes No |
| Would you like to replace existing sprinkler heads | s with high-efficiency rotator heads? Yes |
| Would you like to use low-volume, drip irrigation | for plants? Yes No |
| Will additional irrigation be required to support y | our plant material? Yes No |
| WALKWAYS/PATHS | |
| Would you like to incorporate a new walkway or | path? Yes No |
| Are you interested in using pervious materials to | reduce runoff? Yes No |
| If yes, what type of material would you like to use | e? Concrete Pavers Mulch |
| Do existing walkways/paths provide proper acces | ss to your property? Yes No |
| Would you want existing walkways/paths moved | ? Yes No |
| Are you interested in reusing / repurposing existing | ng materials? Yes No |

| PLANTS, GARDENS AND LAWN | | | |
|---|--------------------|-------------|------|
| Would you like to replace or reduce lawn areas with water-e | fficient plants? | Yes No |) |
| Would you like to incorporate more low water-use plants int | o your yard or gar | den? Yes | No |
| Will existing plants and shrubs be incorporated into a new de | esign? Yes | No | |
| Will trees or plantings need to be removed? Yes N | lo | | |
| Do you want to strategically place trees to maximize shade a | | use? Ye | s No |
| Are there specific plants you would like to include? | | | |
| Are there any plants you dislike? | | | |
| Does anyone in your family have allergies to specific plants? | | | |
| What types of plants would you like to incorporate into your | | | |
| Low-water use California natives | s Perer | ınials | |
| Ornamental grasses Edibles | | | |
| Habitat plants Attract beneficia | | | |
| | | | |
| What colors do you like? Bold, bright Soft, paste | :I | | |
| FEATURES, STRUCTURES, ETC. | | | |
| Do you want or have any of the following structures and/or in | features? | | |
| | WANT | HAVE | |
| Arbor (lattice attached to the house or freestanding) | | | |
| Trellis (a lattice screen) | | | |
| Containers/decorative pots | | | |
| Rocks/boulders | | | |
| Sculpture (gazing ball, sun dial, or statues) | | | |
| Active play equipment (swing set or trampoline) | | | |
| Passive play equipment (sand box, etc.) | | | |
| Areas for vegetable, herbs, or fruit trees | | | |
| Rain collection bin and distribution system | | | |
| Rain Garden | | | |
| Compost bin | | | |
| Recycling area | | | |
| Other | | | |