



Jan. 2017

LANDSCAPING WORKSHEET

NAME:		
ADDRESS:		
PHONE :	Home:	Cell:
EMAIL:		

OUR GOAL

In a few sentences please let us know what you would like to achieve at the end of the project.

How did you hear about us? _____

PROJECT BUDGET

- Do you have a budget in mind for your project? If so, please check one below:

<input type="checkbox"/> None	<input type="checkbox"/> \$15,000 to \$20,000	<input type="checkbox"/> \$75,000 to \$100,000
<input type="checkbox"/> Less than \$5,000	<input type="checkbox"/> \$20,000 to \$30,000	<input type="checkbox"/> \$100,000 +
<input type="checkbox"/> \$5,000 to \$10,000	<input type="checkbox"/> \$30,000 to \$50,000	Write in Budget _____
<input type="checkbox"/> \$10,000 to \$15,000	<input type="checkbox"/> \$50,000 to \$75,000	
- Would you like the project completed during one season or in phases? one season phases
- Are you working with a building contractor on a new home? Yes No Who? _____
 - If so, have they provided you with a landscaping budget? Yes No Amount? \$ _____
- May we go over this contractor's budget? Yes No How much? \$ _____

COORDINATION

Please pick one of the following that best fits what you are looking for from Baker Landscaping.

Need help with a design, but we can install the landscape ourselves.

Need help with the design and installation.

Have you previously worked with a landscaping contractor at this property?

Yes No If yes, who? _____



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WHAT WOULD YOU LIKE US TO DO FOR YOU?

- Please Check ✓ all the elements you would like us to include in the Design
- Please Double Check ✓✓ all the elements you would like us to Install

- | | | |
|---|--|---|
| <input type="checkbox"/> <input type="checkbox"/> Patio | <input type="checkbox"/> <input type="checkbox"/> Trees/Shrubs | <input type="checkbox"/> <input type="checkbox"/> Retaining Wall |
| <input type="checkbox"/> <input type="checkbox"/> Foundation/Privacy Planting | <input type="checkbox"/> <input type="checkbox"/> Container Gardening | <input type="checkbox"/> <input type="checkbox"/> Cut Flower Garden |
| <input type="checkbox"/> <input type="checkbox"/> Seating Wall | <input type="checkbox"/> <input type="checkbox"/> Walkway/Path | <input type="checkbox"/> <input type="checkbox"/> Pond & Waterfall |
| <input type="checkbox"/> <input type="checkbox"/> Fountain | <input type="checkbox"/> <input type="checkbox"/> Low Voltage Lighting | <input type="checkbox"/> <input type="checkbox"/> Herb Garden |
| <input type="checkbox"/> <input type="checkbox"/> Perennial Garden | <input type="checkbox"/> <input type="checkbox"/> Annual Garden | |

CONSIDER THESE

Check all that you agree with

- The contractor will be able to drive on our yard/lawn with a bobcat or truck
- The contractor can drive on our driveway with trucks and equipment.
- We, as the property owners, will be able to finish levelling.
- We, as the property owners, have existing drainage issues or concerns.
- We, as the property owners, would like a formal design style.
- We, as the property owners, would like an informal/natural design style.
- We, as the property owners, are able to dispose of old rock, soil, debris, etc.
- We, as the property owners, have a project that is adjacent to our neighbour's property.
(ex. Around Utility Boxes, Shared Property Line)
- We, as the property owners, have an irrigation system.
Is there someone you prefer to do irrigation repairs if necessary? Yes No Who? _____

Residential Projects Only:

- We like to socialize outdoors.
- We have allergies to certain plants. If so, which plants? _____
- We have children that will use the yard.
- We have pets that will use the yard.

VISIT OUR WEBSITE, OR STOP IN TO CREATE YOUR OWN PLANT LIST

www.bakernursery.com/pc-baker.html

TREES

Are there any trees you *do not want in your design*? _____

Are there any trees you *would like to have in your design*? _____

Would you like any fruit trees? Yes No What kind? _____

SHRUBS

Are there any shrubs you *do not want in your design*? _____

Are there any shrubs you *would like to have in your design*? _____



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PERENNIALS

(flowers that come back every year)

Are there any varieties you *do not* want in your design? _____

Are there any varieties you *would like* to have in your design? _____

Any colors you *do not* want in your design? _____

Any colors you *would like* in your design? _____

ANNUALS

(flowers that need to be replaced every year)

Would you like an area for planting annual flowers worked into the landscape design? Yes No

Would you like us to come back and plant the annuals for you each year? Yes No

LAWN

Would you like Large Grassy Areas? Or Minimal Mowing?

Would you prefer your lawn to be Seeded? Or Sodded?

PREFERENCES

For the planting areas would you like? Rock Wood Mulch Rubber Mulch

What kind of edging are you looking for? Paver/Bullet Metal Concrete Curb Poly Edging

If you would like a patio, would you like? Paver or Concrete

ADDITIONAL COMMENTS OR CONCERNS

Are there any concerns or needs that we did not address?

Please indicate them here so Baker Landscaping can create the best design solution to fit your needs.

WE LOOK FORWARD TO WORKING WITH YOU!

When we schedule an appointment with you please have the following information with you.

The more information you provide up front the better we can serve you!

Things to Bring to the Appointment:

*House Plans *Plot Plan

*Pictures/Magazine images of features / ideas

*Photo(s) of the Landscape

THANK YOU!

The information provided will help us get one step closer to designing the landscape of your dreams.