

Survey / Bathroom Inspection / Project Scope

Customer _____ Rep _____ Date _____

1. How did you hear about us? _____
2. What is your overall goal for this project?

3. What do you like most about your current bathroom?

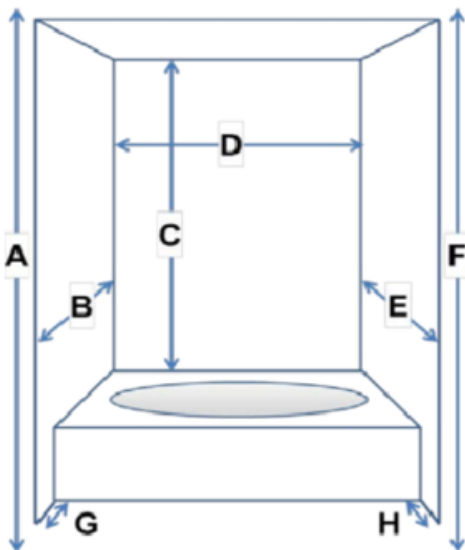
4. What do you like least about your current bathroom?

5. Do you have any specific design ideas of what you’re looking for?

6. How long have you been considering doing this project? _____
7. What has prevented you from doing this project? _____
8. Other than price being important, what else is most important to you for a project like this?

Bathroom Inspection Notes

Project Scope _____



Dimensions (inches)

- A) _____ E) _____
- B) _____ F) _____
- C) _____ G) _____
- D) _____ H) _____

- Project type _____
- Home type _____
- Foundation type _____
- Floor level _____
- Existing drain loc _____
- Reposition drain? _____
- Window size? _____
- Year home built _____
- Glass door install? _____
- Toilet to tub dist _____