

First Name		Surname	
First Name		Surname	
Address		Zip Code	
		Phone No.	
		Email	

GENERAL

1. What's the type of your property?

☐

Independent Home

☐

Apartment

☐

Villa

2. What do you want to get done?

☐

Furnish a new house

☐

Renovate an existing house

3. Approximate Budget:

☐

Upto Rs.2 L

☐

Rs. 2L to 5L

☐

Rs. 5L to 10L

☐

Rs. 10L above

DESIGNS

4. Tick the number of spaces you want to be designed:

<input type="checkbox"/> Bedroom	<input type="checkbox"/> Formal Lounge	<input type="checkbox"/> Terrace
<input type="checkbox"/> Kitchen	<input type="checkbox"/> Gym	<input type="checkbox"/> Dining
<input type="checkbox"/> Living	<input type="checkbox"/> Home Theatre	

5. Tick 3 Design Styles you prefer: (with Images)

<input type="checkbox"/> Minimalist	<input type="checkbox"/> Eclectic	<input type="checkbox"/> Vintage
<input type="checkbox"/> Art Deco	<input type="checkbox"/> New York Loft	<input type="checkbox"/> Hollywood Glam
<input type="checkbox"/> Contemporary	<input type="checkbox"/> Industrial	<input type="checkbox"/> Bohemian

6. Choose a color scheme of your choice: (only Images)

<input type="checkbox"/> Blue(Cobalt or Navy)	<input type="checkbox"/> Black	<input type="checkbox"/> Green (Emerald or Avocado)
<input type="checkbox"/> Red	<input type="checkbox"/> Gray	<input type="checkbox"/> Pink (Millennial Pink)
<input type="checkbox"/> White	<input type="checkbox"/> Yellow	<input type="checkbox"/> Beige (Sand or Champagne or Blush)

BEDROOM

7. According to the no. of bedrooms renovation, please select the users

<input type="checkbox"/> Spouse and I	<input type="checkbox"/> Parents	<input type="checkbox"/> Kids	<input type="checkbox"/> Guests
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8. Please tick the units you require:

<input type="checkbox"/> TV Unit	<input type="checkbox"/> Study Table	<input type="checkbox"/> Sitting
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KITCHEN

9. Choose a color scheme of your choice: (only Images)

<input type="checkbox"/> L-shaped	<input type="checkbox"/> Island
<input type="checkbox"/> U-shaped	<input type="checkbox"/> Parallel
<input type="checkbox"/> Straight	

10. Your Preference

<input type="checkbox"/> Value	<input type="checkbox"/> Comfort	<input type="checkbox"/> Premium	<input type="checkbox"/> Luxury
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LIVING

11. Please tick your requirements:

<input type="checkbox"/> T.VUnit	<input type="checkbox"/> BookCase/ShowCase	<input type="checkbox"/> Bar Unit	<input type="checkbox"/> Loose Seats (poufs)
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12. Please select the seats you want to accommodate:

<input type="checkbox"/> 6-8	<input type="checkbox"/> 9-12	<input type="checkbox"/> 13-15
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DINING

13. Please select your seating your requirements:

☐

4 Seater

☐

6 Seater

☐

8 Seater

☐

12 Seater

14. Please tick your requirements:

☐

Crockery Unit

☐

Table Shape- Round, Rectangle, Square