

LANDSCAPE DESIGN/BUILD
Request for Service

Today's Date _____ / _____ / _____

Name

Street

Address _____

City _____ State _____ Zip

Referred By

- Internet Search Drive-By/Job Sign Garden Center
 Advertisement (where?)

PHONE:

Home () _____ - _____ best time to call: ___am/pm

Work () _____ - _____ best time to call: ___am/pm

Cell () _____ - _____ best time to call: ___am/pm

EMAIL

NEEDS & INTERESTS

- Property Plan/Design Foundation Planting Water garden/pond
 Screen/Border planting Shade/Flowering Trees Walk, Patio or Wall
 Perennial/Herb garden
Other _____

PROPERTY PROFILE

What direction does the area face? North South East West

How would you describe this landscape project?

- Enhance existing garden
- Redo older plantings
- Create a new landscape area

Is the area clean of old shrubs/plants and ready for planting?

- Yes No

Light Conditions:

- Full sun (6+ hours of sunlight)
- Part Shade (4-6 hours of direct or full day of filtered sunlight)
- Shade (Less than 4 hours of direct sunlight)
- Deep Shade (no direct sun or bright light)

What are your maintenance expectations?

- Absolute minimum
- Enjoy working in the garden
- Somewhere in-between

Do you have deer eating your plants? No Moderately Severely

Do you have an irrigation system or intend to have one installed?

- Yes No

What additional garden features would you like to see incorporated?

- Water feature (pond, fountain, bird bath)
- Patio furniture
- Container plantings
- Fire pit/Chiminea
- Garden bench
-

Other _____

List any favorite plants and/or colors that you would LIKE to see in your design.

List anything you DO NOT want to see/have in your design.

Do you have a budget in mind?

- Under \$500
- \$500 - \$1000
- \$1000 - \$1500
- \$1500 - \$2000
- \$2000 - \$4000
- \$4000 - \$5000
- Over \$5000

