

HOMEOWNER PREPARATION CHECKLIST

Homeowner Preparation Checklist Before Meeting Your Architect

Name: _____ Phone Number: _____ Email: _____

1. PROPERTY INFORMATION

- | | |
|---|---|
| <input type="checkbox"/> Property Address
_____ | <input type="checkbox"/> Desired total square footage
_____ |
| <input type="checkbox"/> TMK (Tax Map Key) _____ | <input type="checkbox"/> Bedroom count _____ |
| <input type="checkbox"/> Lot size _____ | <input type="checkbox"/> Bathroom count _____ |
| <input type="checkbox"/> Land type: <input type="checkbox"/> Flat, <input type="checkbox"/> Sloped | <input type="checkbox"/> Special spaces: <input type="checkbox"/> Office, <input type="checkbox"/> Game room,
<input type="checkbox"/> Theater, <input type="checkbox"/> Guest suite, <input type="checkbox"/> Storage |
| <input type="checkbox"/> Environmental conditions: <input type="checkbox"/> SMA / <input type="checkbox"/>
Flood zone / <input type="checkbox"/> Shoreline | <input type="checkbox"/> Style preferences (optional)

_____ |
| <input type="checkbox"/> Topographic survey (if required)(attached) | |
| <input type="checkbox"/> Property photos (attached) | |

2. EXISTING BUILDING

- One story / two stories
- Current size _____
- Condition _____
- Known issues: structural, electrical,
 plumbing
- Photos

3. PROJECT GOALS (PROGRAMMING)

- New build / Addition / Second-story
addition / Major remodel / ADU

4. SITE IMPROVEMENTS

- New driveway
- Pool
- Retaining walls
- Landscaping
- Fencing/gates

5. BUDGET + TIMELINE

- Budget range _____
- Target start date _____
- Deadline / must-finish-by date _____