Panda Home Improvement LLC

Full Service Remodeling Interior and Exterior

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Office #: 262-505-6262

Additional Bedrooms:

Customer Name: _____

Address: _____

City: _____

Phone Number: _____

Email Address: _____

Budget for project: $ _____

Desired Completion Date: _____

Bedroom #2:

Goal for remodel: Improve Fun

Room Dimensions: _____ **X** _____ = SF

Current Square Footage: _____

Desired Square Footage: _____

Ceiling Height: _____

Do you have a plan or drawing of the room? No

Who will pull the necessary permits? No

Bedroom #2 Lighting:

Quantity: _____ Type: Sconce _____

LED

Manufacturer and Source: _____

Exhaust fan with our without light? _____

Other Bedroom #2 Electrical:

Outlets:

How many currently? _____ More needed? No _____

Switches:

Need to be removed? No Dimmer switches? No

Switch plate covers:

How many single outlet covers? _____ Color: _____

Other: _____

How many single light switch covers? _____ Color: _____

Other: _____

Bedroom #2 Flooring:

Material Type: _____ Color: _____
Square Footage: _____ Grout color is using tile: _____
Baseboard Type: _____ Square Footage: _____

Bedroom #2 Walls and Ceiling:

Wall Paint Color: _____ Brand/Sheen: _____
Ceiling Paint Color: _____ Brand/Sheen: _____
What type of wall finish or texture? _____

Bedroom #2 Windows:

New Windows Needed? No Size: _____
Brand: _____ Manufacturer: _____
Number of windows: _____ Color: _____
Make or model: _____

Casings: No Type: _____ Profile: _____

Bedroom #2 Doors:

- Are new doors needed? No How many? _____
  Type: _____ Size: _____
- Are new knobs needed? No How many? _____
  Type: Lever Finish: _____ Size: _____
- Are new hinges needed? No How many? _____
  Shape: _____ Finish: _____ Size: _____

Bedroom #3:

Goal for remodel: Improve Fun
Room Dimensions: _____ **X** _____ = SF
Current Square Footage: _____
Desired Square Footage: _____
Ceiling Height: _____

Do you have a plan or drawing of the room? No

Who will pull the necessary permits? You

Bedroom #3 Lighting:

Quantity: _____ Type: Sconce _____
LED
Manufacturer and Source: _____
Exhaust fan with our without light? _____

Other Bedroom #3 Electrical:

Outlets:

How many currently? _____ More needed? No _____

Switches:

Need to be removed? No Dimmer switches? No

Switch plate covers:

How many single outlet covers? _____ Color: _____

Other: _____

How many single light switch covers? _____ Color: _____

Other: _____

Bedroom #3 Flooring:

Material Type: _____ Color: _____

Square Footage: _____ Grout color is using tile: _____

Baseboard Type: _____ Square Footage: _____

Bedroom #3 Walls and Ceiling:

Wall Paint Color: _____ Brand/Sheen: _____

Ceiling Paint Color: _____ Brand/Sheen: _____

What type of wall finish or texture? _____

Bedroom #3 Windows:

New Windows Needed? No Size: _____

Brand: _____ Manufacturer: _____

Number of windows: _____ Color: _____

Make or model: _____

Casings: No Type: _____ Profile: _____

Bedroom #3 Doors:

- Are new doors needed? No How many? _____
  Type: _____ Size: _____
- Are new knobs needed? No How many? _____
  Type: Lever Finish: _____ Size: _____
- Are new hinges needed? How many? _____
  Shape: _____ Finish: _____ Size: _____