



Client Brief

Client

Client name: _____
Client Address: _____
Contact Number: _____
Email Address: _____
Site Address: _____
Date: _____/_____/_____

Please complete this form to help us understand your project requirements and design preferences.

PROJECT OVERVIEW

Project Type: Single Dwelling. Grouped Dwelling.

- For grouped Dwelling, a separate form may be required for each dwelling if requirements differ.

Storeys: Single Storey. Double Storey. Other: _____.

BEDROOMS

Number of Bedrooms: _____.

Built-In Robes: Yes. No. → All Bedrooms. Other: _____.

Number of Bathrooms: _____ (Including Ensuite)

Toilet Configuration: Combined. Separate.

Master suite

Master suite Size: Small. Medium. Large. Luxury.

Ensuite: Yes. No. → Standard. Large.

Walk-In Robe: Yes. No. → Standard. Large.

LIVING & DINING

Living Room Size: Small. Medium. Large.

Ceiling Type: Standard. Recessed. Coffered.

Dining Type: Open Plan. Separate. Formal.



KITCHEN & LAUNDRY

Kitchen Type: Standard. Scullery. Butler Pantry. Other: _____.

Laundry: Standard. Large. → Storage Included.

ADDITIONAL ROOMS

Select Required Spaces: Theatre. Home Office. Study. Guest Room. Activity. Gym.
 Storeroom. Other: _____

OUTDOOR AREAS

Alfresco: None. Standard. Large

Outdoor Kitchen: Yes. No.

Garage

Garage Required: Yes. No. (If yes →)

Garage Location: Attached. Detached. Other: _____.

Garage Size: Single. Double. Other: _____ → Storage. Workshop.

SITE INFORMATION

Available Documents: Title. Survey. Soil Report. BAL Report. Existing Plans.

BUDGET & TIMELINE

Estimated Budget: _____ **Preferred Construction Start Date:** ____/____/_____

SPECIAL REQUIREMENTS



SORUSH DESIGN STUDIO

Design Studio

Office: 1 Ailby street, Gosnells, WA

M: +61 435 021 021

E: admin@sorush.com.au

W: sorush.com.au

Architectural Style

Preferred Style: Modern. Contemporary. Coastal. Federation. Hamptons.

1- <input type="checkbox"/> Modern Style	
2- <input type="checkbox"/> Contemporary Style	
3- <input type="checkbox"/> Coastal Style	
4- <input type="checkbox"/> Federation Style	
5- <input type="checkbox"/> Hamptons Style	

Client Name: _____

Signature: _____

Date: ____ / ____ / ____