



BKT Bath, Kitchen
& Tile Center

**KITCHEN MEASURING
GUIDE**

PROJECT INFORMATION

NAME: _____

PHONE: _____

ADDRESS: _____

EMAIL: _____

| | | | | |
|-----------------------------------|--------------------|------------------|------------------|-------------|
| PROJECT TYPE (CIRCLE ONE): | NEW CONSTR. | REMODEL | ADDITION | |
| BUDGET (CIRCLE ONE) | \$12K – 18K | 18K – 25K | 30K – 60K | 60K+ |

MUST HAVE:

COMPLETE PROJECT IN (CIRCLE ONE):

| | | | |
|---------------------|---------------------|---------------------|------------------|
| 1 – 2 MONTHS | 2 – 4 MONTHS | 4 – 6 MONTHS | 6 MONTHS+ |
|---------------------|---------------------|---------------------|------------------|

CURRENT HOME

| | | | |
|---|--------------------|---------------------|------------------|
| AGE OF HOME (CIRCLE ONE): | 1 – 5 YEARS | 5 – 10 YEARS | 10+ YEARS |
| CEILING HEIGHT _____ FT _____ IN | | | |
| FLOORING (CIRCLE ONE): | KEEP | REPLACE | |
| LIGHTING (CIRCLE ONE): | KEEP | REPLACE | |
| CABINETS (CIRCLE ONE): | KEEP | REPLACE | |
| TOP (CIRCLE ONE): | KEEP | REPLACE | |
| APPLIANCES (CIRCLE ONE): | | | |
| RANGE | KEEP | REPLACE | |
| MICROWAVE | KEEP | REPLACE | |
| DISHWASHER | KEEP | REPLACE | |
| REFRIGERATOR | KEEP | REPLACE | |
| VENTILATION | KEEP | REPLACE | |
| FAUCET(S) (CIRCLE ONE): | KEEP | REPLACE | |
| SINK(S) (CIRCLE ONE): | KEEP | REPLACE | |
| GARBAGE DISP. (CIRCLE ONE): | KEEP | REPLACE | |
| TILE: | KEEP | REPLACE | |

MEASURING STEPS

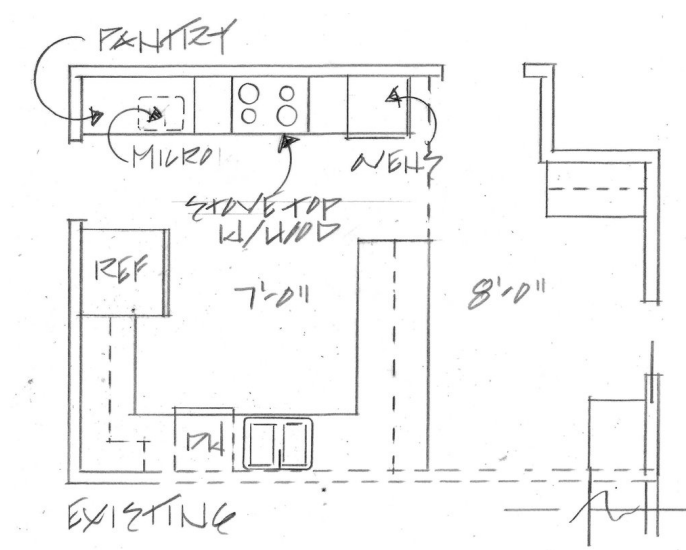
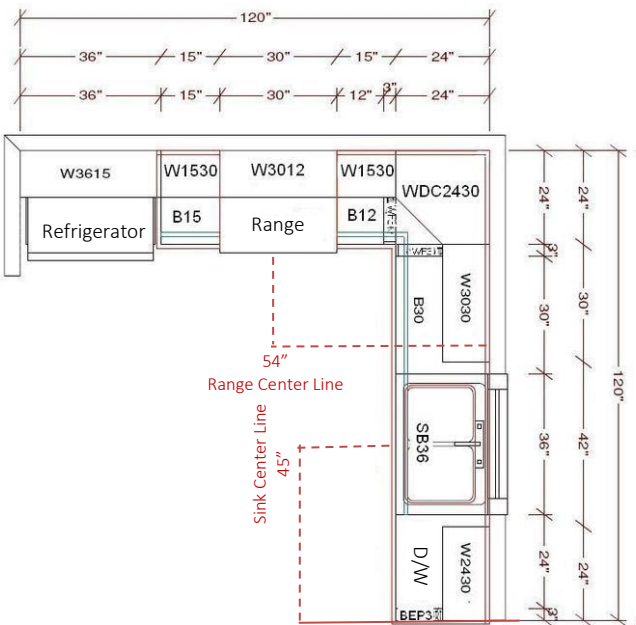
1. Pick a starting point, preferably a corner – measure from that point to the end of the other corner.
Continue around the room being sure to make note of windows and door ways and proximity of distance to that corner.
2. Make note of venting, outlets, switches, etc.



DOs



DON'Ts



| WINDOWS (INCHES) | | | | | DOORS (INCHES) | | | | |
|----------------------|---|---|---|---|----------------------|---|---|---|---|
| | 1 | 2 | 3 | 4 | | 1 | 2 | 3 | 4 |
| WIDTH | | | | | WIDTH | | | | |
| HEIGHT | | | | | HEIGHT | | | | |
| FLOOR TO WINDOW SILL | | | | | FLOOR TO WINDOW SILL | | | | |

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www.bathkitchenandtile.com

JOB _____

SHEET NO. _____ OF _____

CALCULATED BY _____ DATE _____

CHECKED BY _____ DATE _____

SCALE _____

