

# Going Native — Create Your Own Native Landscape

## FAMILY NEEDS CHECKLIST

DATE \_\_\_\_\_

FAMILY MEMBERS (include outdoor pets):

Name	Age	Activities in the garden
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUMMARY OF EXISTING PROBLEMS (visual and functional):

POSITIVE ELEMENTS:

DESIRED CHARACTER OF SITE (formal/informal):

FAVORITE PLANTS:

DESIRED PLANTING EFFECTS:

Texture:

Specimen plants:

Color:

Shrub beds:

Fragrance:

Flowers for cutting:

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### SEASONAL INTEREST

Spring:

Summer:

Fall:

Winter:

### DESIRED MATERIALS, PATHS, WALLS, BORDERS:

Brick	Concrete
Gravel	Cobbles
Decomposed granite	Granite
Stone	Wood
Metal	Other?

### ADDITIONAL ELEMENTS:

Irrigation	Garden furniture
Night lighting	Ornaments
Security lighting	Trellis/arbor
Water feature	Deck
Patio	Other structures

### FAMILY REQUIREMENTS:

Parking area  
Sitting area  
Play area  
Pet area  
Nature walk  
Specialized gardens (fruit, herb, vegetable)  
Utility areas (tools, firewood, trash)  
Compost  
Other?

### BUDGET

Initial cost:

Maintenance: