

## DESIGN BRIEF

*It is our aim to give the customers the best possible service that we can provide. With this in mind we would like to give you the benefit of over 34 years experience, and offer to design the best wall for the budget you have.*

*By filling in the enclosed questionnaire we can provide you with a detailed design and quotation for a climbing wall, which will often eliminate the need for a site visit.*

*We have found that the best way to achieve value for money is for the client to provide as much information as possible. For this we need to have an indication of the proposed user groups and an idea of what type of climbing wall they expect.*

*If available we will also require the following:*

- ◆ *A copy of the architect/engineers drawings including cross sections and a plan of the proposed area for the wall.*
- ◆ *A structural evaluation*
- ◆ *Photographs of the proposed site, showing any fixed obstacles, such as radiators, pipes, fire alarms or conduits etc.*

*The information provided on this questionnaire will help us create the most innovative proposal for your money. Once you have received your design /quotation, and secured your budget, we will be pleased to arrange a presentation meeting to answer any questions you may have relating to the project.*

*If you need any assistance in filling in this questionnaire then please do not hesitate to contact our office.*

**CLIMBING WALL QUESTIONNAIRE**

**CONTACT DETAILS**

NAME: \_\_\_\_\_

TELEPHONE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MOBILE: \_\_\_\_\_

\_\_\_\_\_

FAX: \_\_\_\_\_

\_\_\_\_\_

EMAIL: \_\_\_\_\_

\_\_\_\_\_

COMPANY/ORGANISATION: \_\_\_\_\_

\_\_\_\_\_

**WHAT TYPE OF WALL DO YOU WANT?**

Leading Wall  
Top Roping Wall  
Bouldering Wall


**LOCATION**

Proposed Budget £ \_\_\_\_\_ Indoor or Outdoor \_\_\_\_\_

Width of wall \_\_\_\_\_m Height of wall \_\_\_\_\_m

Depth of wall (How far can it project in to the room?) \_\_\_\_\_

Depth of circulation space in front of wall \_\_\_\_\_

Are there any structural constraints? \_\_\_\_\_

Are there any costs, which have to come out of the climbing wall budget?

YES

NO

Floor surface matting?



Moving of electrical/heating systems?

Moving of any fire alarm/exit signs?

Nets rebound boards?

Other?

## WHO IS THE WALL INTENDED FOR?

	YES	NO
Novice use	<input type="checkbox"/>	<input type="checkbox"/>
Instruction	<input type="checkbox"/>	<input type="checkbox"/>
School use	<input type="checkbox"/>	<input type="checkbox"/>
Club/group use	<input type="checkbox"/>	<input type="checkbox"/>
Intermediate climbers	<input type="checkbox"/>	<input type="checkbox"/>
Expert training	<input type="checkbox"/>	<input type="checkbox"/>
Competition training	<input type="checkbox"/>	<input type="checkbox"/>

What is the age range of users: \_\_\_\_\_

## Will the wall be used for competitions?

	YES	NO
Leading	<input type="checkbox"/>	<input type="checkbox"/>
Bouldering	<input type="checkbox"/>	<input type="checkbox"/>
Local	<input type="checkbox"/>	<input type="checkbox"/>
National	<input type="checkbox"/>	<input type="checkbox"/>
International	<input type="checkbox"/>	<input type="checkbox"/>

How many users are expected to use the wall simultaneously? \_\_\_\_\_

What is the spectator space? \_\_\_\_\_

What is the estimated annual usage? \_\_\_\_\_

## CLIMBING WALL FEATURES & MATERIALS

Please score features from 1-5 (5 being the most desirable)

<b>Bolt on holds</b>	<input type="checkbox"/>	<b>Disc holds</b>	<input type="checkbox"/>	<b>Natural rock holds</b>	<input type="checkbox"/>
<b>Pockets</b>	<input type="checkbox"/>	<b>Flakes</b>	<input type="checkbox"/>	<b>Chimneys</b>	<input type="checkbox"/>
<b>Arêtes</b>	<input type="checkbox"/>	<b>Buttresses</b>	<input type="checkbox"/>	<b>Grooves</b>	<input type="checkbox"/>
<b>Mantelshelves</b>	<input type="checkbox"/>	<b>Overhangs</b>	<input type="checkbox"/>	<b>Tufa Columns</b>	<input type="checkbox"/>
<b>Cracks – hand jamming</b>	<input type="checkbox"/>	<b>Cracks – finger jamming</b>	<input type="checkbox"/>		

Does your wall need to be:-

Slabs (i.e. less than vertical)?       Vertical?       Overhanging?

Is there a vertical limit? (please specify) \_\_\_\_\_

***Is the wall expected to be built using:-***

	YES	NO
<i>Bolt on holds only</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Painted plywood</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fully coated plywood</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Featured plywood</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Curved resin</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Concrete</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Are fully featured routes required?</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Is a belay/abseil ledge required?</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Are Trad-Pro protection points required on some routes? eg: for nuts, threads, cams etc</i>	<input type="checkbox"/>	<input type="checkbox"/>

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***Are there any walls that you have visited, that have features that you would like on your wall? If so which wall was it and which features did you like?***

**Is this quotation required for:-**  
(Please tick)

**Budget planning**

**Grant application**

**Immediate purchase**

**Will a main contractor be used?**

**Envisaged construction date:-** \_\_\_\_\_

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**Which facilities are on site for construction use:-**

**Electricity**

**Water**

**lighting**

**Toilets**

**First Aid**

**Secure Storage**

**Car Parking**

**Dining Area**

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**What is the approximate distance from the loading bay/car park area? How would you describe access to the proposed climbing wall area? Good/fair/poor?**

**Is the proposed climbing wall area on the ground floor, if not which floor?**

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**Other Comments:-**

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**Thank you for completing this form – please send to us at the address below, by fax/email/post**