

# Research and Development Request

## Project Specifics

|  |  |   |  |
|--|--|---|--|
| Date<br><input type="text"/>   |  | Request Made By:<br><input type="text"/>  |  |
| Address:<br><input type="text"/>   |  |   |  |
| City <input type="text"/>  |  | State/Province <input type="text"/>   |  |
| Zip/Postal Code <input type="text"/>   |  | Contact Phone <input type="text"/>  |  |
| Fax <input type="text"/>   |  | Contact Person <input type="text"/>   |  |
| Best Time to Call <input type="text"/>   |  |   |  |
| <input type="checkbox"/><br>Product to be altered<br>Product code<br><input type="text"/>  | <input type="checkbox"/><br>New Product<br>to be created | Name of Product<br><input type="text"/>   |  |
|  |  | Type of Product<br><input type="text"/>   |  |
| Date Samples Required<br><input type="text"/>  |  | Does it need to be exclusive?<br><input type="checkbox"/> yes <input type="checkbox"/> no   |  |
| Is a similar product available on the market?<br><input type="checkbox"/> yes <input type="checkbox"/> no  |  | Ingredients not to be used (i.e. MSG)<br><input type="text"/>   |  |
| Target Cost (without shipping)<br><input type="text"/>   |  |   |  |
| Copy of (brand or Recipe)<br><input type="text"/><br><br><i>if recipe please attach copy of recipe with detailed instructions. If copy of Brand please supply a sample of the product.</i> |  | Does it have to be exactly the same?<br><input type="checkbox"/> yes <input type="checkbox"/> no  |  |
|  |  | Product will be used by<br><input type="checkbox"/> Restaurant <input type="checkbox"/> Processor<br><input type="checkbox"/> Manufacturer <input type="checkbox"/> Other |  |

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|   |   |
|---|---|
| Handling Requirements   | Yield Requirements  |
| <br><br>  | <br><br>  |
| How will product be used? (Equipment and cooking techniques used) | Sample Yield requirement<br><input type="checkbox"/> qt <input type="checkbox"/> 1/2 gal <input type="checkbox"/> gallon<br><br><input type="checkbox"/> Other<br><i>if other, please specify</i> |
| <br><br>  | <br><br>  |
| Pack Size Requirements (per case)                                 | Projected Yearly Volumes  |
| <br><br>  |   |
| Brand Name  |   |
| <br><br>  |   |

***N.B.:*** *If new ingredients are required, minimum order to customer may change. Private label recipes currently produced by our company cannot be offered to another customer unless written permission from the current customer is obtained. This policy applies to all future private label customers as well.*

|               |                   |  |
|---------------|-------------------|--|
| Date Received | Date Samples Sent | Revision required?<br><input type="checkbox"/> yes <input type="checkbox"/> No |
| <br><br>      | <br><br>          | Revision Samples sent  |
|               |                   | <br><br>   |

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