



## Custom Formulation & Contract Packaging

Communication is everything in Custom Formulation. We must know your exact requirements and specifications for this project. Therefore, we do require that you complete ALL sections of this application that apply to your project. Any questions should be asked via phone or email as we will need all information before we can start the process. This will help to expedite your project. Thanks!

---

### SECTION 1: Which of the following formulation services will you require?

- I will be slightly altering one of your stock product bases.
- I have my own formulation that Essential Labs will manufacture for me.
- I want to create a new product and consult with Essential Labs to do it.
- I want to reformulate a product not manufactured by Essential Labs.

### SECTION 2: Formulation Details

Please describe your project in as much detail as possible.

---

---

---

---

---

---

---

---

---

---

---

### SECTION 3: Special Ingredients

Please list any/all special ingredients required for your custom formulation project, as well as any/all preferred vendors for these ingredients if you expect us to provide the special ingredient. **We will need the MSDS and Spec Sheet on all special ingredients that you will be providing.**

---

---

---

---

---

---

---

---

---

---

---

**SECTION 4: Special Instructions and/or Considerations**

Please describe in detail, any special instructions or specifications regarding this project.

---

---

---

---

---

---

---

---

**SECTION 5: About Your Initial Purchase**

1. How much product will you require with your initial (first) order? (Remember our minimum is 55 gallons in bulk or 1000 units per product for custom products.) \_\_\_\_\_
2. How often do you anticipate re-orders? \_\_\_\_\_
3. On what date do you expect this project to be complete and delivered? (Please remember that our normal lead time is 4 to 6 weeks and up to 12 weeks during peak season.) \_\_\_\_\_
4. Do you have any special requirements, if so what?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SECTION 6: Company & Contact Information**

Your Name: \_\_\_\_\_

Contact Name (if different): \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

I \_\_\_\_\_ (print your name) am authorized to represent above named company in the pursuit of gaining more information regarding Essential Labs Custom Formulation Services as they pertain to the project described in this document.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\* FOR OFFICE USE – Please do not mark below this line \**

Date Rcvd: \_\_\_\_\_ By: \_\_\_\_\_

Formulation Comments / Remarks:

---

---

---

## Customer Provided Product Packaging

Thank you for choosing Essential Labs! To better serve you, we ask that you complete the following form for EACH PRODUCT that we will be filling and/or scenting using one or more part of your own provided materials. If you have any questions, please contact our friendly customer service department at tel: 503-722-7557.

Product/Item Number: \_\_\_\_\_ Product/Item Name: \_\_\_\_\_  
 Customer Formulation or Quote Number (if applicable): \_\_\_\_\_

### **SCENTING/COLORING**

Is this product scented/colored (circle one)? Yes No **if yes**, who is supplying the scent/color (circle one)? EW Customer

**IF customer supplied scent/color**, where will the scent be coming from (Vendor)? \_\_\_\_\_

What is the vendor's name for your scent/color? \_\_\_\_\_. What do you call this scent/color? \_\_\_\_\_

Is there a specific amount/percentage that we should use for your this product? \_\_\_\_\_

**IF using an Essential Labs supplied scent**, what scents will we use for this product? \_\_\_\_\_

### **PACKAGING**

**Who is supplying the container for this project** (circle one)? EW Customer

Please provide the following details about the container for this product:

Container Size: \_\_\_\_\_ Container Color: \_\_\_\_\_ Qty: \_\_\_\_\_

Container Style (be specific): \_\_\_\_\_

Vendor: \_\_\_\_\_ Vendor Product Number: \_\_\_\_\_

**Who is supplying the cap/closure for this project** (circle one)? EW Customer

Please provide the following details about the cap/closure for this product:

Cap/Closure Size: \_\_\_\_\_ Cap/Closure Color: \_\_\_\_\_ Qty: \_\_\_\_\_

Cap/Closure Style (press disk, pump, spray, etc...): \_\_\_\_\_

Vendor: \_\_\_\_\_ Vendor Product Number: \_\_\_\_\_

**Who is supplying the sealing disk for this project** (circle one)? EW Customer No Sealing Disk Required

Please provide the following details about the sealing disk for this product:

Sealing Disk Size: \_\_\_\_\_ Sealing Disk Style: \_\_\_\_\_

Vendor: \_\_\_\_\_ Vendor Product Number: \_\_\_\_\_

**Is Essential Labs labeling this product** (circle one)? Yes No

If yes, where are your labels coming from (Vendor): \_\_\_\_\_

Are the labels on a NUMBER 3 Roll (circle one)? Yes, they are on a #3 roll No, they will need to be hand applied

What style are the labels? Single Wrap Style Label Separate Front & Back Labels Other (describe) \_\_\_\_\_

How Many labels are being applied to each product \_\_\_\_\_

### **SPECIAL INSTRUCTIONS:**

---



---



---

DISCLAIMER: Essential Labs will scent and/or package your product by your specific instructions above. Any changes must be made by completing a new form PRIOR to your order going to production. You alone are solely responsible for errors or omissions made with regard to your order when the Essential Labs production staff follows the specifications in this document.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## SPECIAL NOTES AND REMINDERS

### FORMULATIONS:

- All custom formulation work done in-house is subject to a \$1500 development fee for up to 5 lab hours plus stock materials and \$150 per excess hour . All fees are paid in advanced.

### PRODUCTION:

- All custom quotes are for 55 Gallon minimum or 1000 units in pre-packaged product. No Exceptions.
- Every product has varying weights. Some products have a heavier weight per volume and a full fill may come out looking shorted from the top, others have a lighter weight per volume and a full fill will not weigh out to the bottles specifications. If you are sending your own container, we require that you send the container prior to finalizing the quote. This will allow us to accurately determine the amount required to properly fill your container.
- No quotes will be finalized until you, the customer signs off on the Pre-Production Sample Product and that it meets all of your specifications.

### SCENT:

- If you are sending your own fragrance for scenting, then you MUST fill in the “Custom Packaging & Scenting Form” as to where and when your scent will be arriving.
- No quotes will be finalized until you, the customer signs off on the Pre-Production Sample for the scent and accepts the levels and odor.
- Essential Labs is not responsible for any discoloring that may occur from any scent that you, the customer supply.

### CONTAINER:

- If you are sending your own container we will need to receive at least two samples of the container, closure, sealing product and any other packaging that may be required. Your quote will NOT be finalized until we have at least two of all packaging pieces associated with the project. We can not give you proper fill weights without those samples.
- If you are sending your own container you MUST fill in the “Custom Packaging & Scenting Form” as to where and when your container will be arriving.

### LABELS:

- If we are applying your labels, we will need to know the following about them prior to finalizing your quote:
  - Label Size
  - Label Style (Rectangle, Square, Round, etc..)
  - Location of label on container
- If we are applying your labels you MUST fill in the “Custom Packaging & Scenting Form” as to where and when your label will be arriving.
- Additionally, we will need 2 samples of each label being applied prior to production.

### SHIPPING:

- You will be given several freight options for your finished product, or you may chose to use your own carrier. We can not do freight estimate until the project is complete.
- All shipping quotes are estimates, if your shipping is more or less we will adjust your shipping costs at the day of shipping. You the customer are responsible for ALL shipping and handling costs.

DISCLAIMER: By signing this form you agree that you have read the above special notes and reminders and understand all that has been presented to you. Any damage or loss that may occur due directly or indirectly to non compliance of this form, Essential Labs will NOT be held responsible for.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

## Customer Packaging & Scenting Drop Shipment

Thank you for choosing Essential Labs for your product needs. To best serve you, we ask that you please complete the following form for EACH VENDOR that we will be receiving your packaging and/or Scenting from. If you have any questions, please contact our customer service department at tel: 503-722-7557. Thank you.

Expect A Shipment For: \_\_\_\_\_  
Your Company Name Your Name

YOUR Contact Telephone Number: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Item	Estimated Delivery	Vendors Name	Product Description (Size, Color & Item)	Quantity	√
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

COMMENTS / SPECIAL INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

-----  
 \*\*\* FOR OFFICE USE – PLEASE DO NOT WRITE OR TYPE BELOW THIS LINE \*\*\*  
 -----

**TO BE COMPLETED BY PRODUCTION STAFF**

Date Shipment Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Was shipment received in full?    Yes    No    Backordered Item(s) \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Form Filed By Office Personnel: \_\_\_\_\_ Date: \_\_\_\_\_