

CUSTOMER INFORMATION

Company Name: _____
 Address: _____
 Country: _____ City: _____ State: _____ Postcode: _____
 Contact: _____ Email: _____ Phone: _____
 Purchase Order Number: _____

PRODUCT DEVELOPMENT BRIEF

Product: _____ Brand: _____
 Category: _____ Format: _____
 Launch Country: _____ Proposed Launch Date: _____

Project Overview	
Target Consumer	
No. SKU's	
Target COG	
Fragrance Supplier	
Packaging Format	
Packaging Material	
Target Dose	
Key Marketing Claims	
Target Competitors	
Technical Performance Requirements	
Ingredient Limitations/Requirements	
Certification Requirements <i>(e.g., GECA, Cruelty Free, etc.)</i>	

*For further samples please see overleaf.

Requestor Name: _____ Requestor Signature: _____ Date: _____