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| --- | --- |
| Customer: |  |
| Contact email: |  |
| Product Name: |  |
| Product Type: |  |
| Preferred Packaging: |  |

To help us give you the most valuable feedback, please share the following details about your formula and expectations. Don’t worry if you’re not sure how to describe something — just tell us in your own words. The more you share, the easier it will be for us to guide you!

1. Your Formula

Please provide your full ingredient list with percentages (if available).

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| --- | --- | --- | --- | --- |
|  | **Common name OR INCI Name** | **Weight in**  **%** | **Weight in**  **Grams / ml** | **Supplier** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
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1. **Your Observations**

What problems have you noticed so far? (e.g., separation, texture, stability, performance, preservative doubts, regulatory concerns).

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1. **Your Goals & Expectations**

What do you want to achieve with this product? (e.g., smoother texture, longer shelf life, natural preservation, improved skinfeel, meeting regulatory requirements).

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1. **Additional Notes**

Any specific restrictions, preferences, or inspirations we should keep in mind? (e.g., “must be vegan,” “avoid silicones,” “inspired by [brand/product]”).

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Name:

Signature: