

**Contact Name:**

**Date:**

**Business Name:**

**Address:**

**City:**

**State:**

**Zip:**

**Country:**

**Postal Code:**

**E-mail:**

**Contact Number:**

**Country Code:**

**Web site:**

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## Manufacturing Information

**Please briefly describe the product you are interested in have manufactured.**

### What Type of production service are you inquiring about?

Bench Sample - 1 to 20 units (samples for investors, concept work / not for sale)

Hero Samples - 20 to 150 units (not sale / for distributors, vendors, buyers, etc)

Pilot / Test run - 50 gallons (for sale, consumer testing, sampling, etc)

Trade Show Samples - 500 to 2000 units (Production Quality)

Hot / Cold Fill Production Run > 50 gallons to 800 gallons, per SKU

Canning Production > 250 gallons to 500 gallons, per SKU

### Other Volume / Manufacturing Needs:

### Product Category?

Non-Alcohol Beverage / Drink / Ready to Drink (RTD)

Supplement / Herbal Elixir / Shot

Spirits / Wine / Malt / Sugar Brew infused RTD

**Is this a carbonated beverage?**

Yes

No

**# of Flavors / SKUs**

**What type of container are you planning on using for this project?**

Glass

PET

Aluminum Can

**What type of cap are you planning on using?**

Plastic Cap with Safety Band

CT cap that requires additional Tamper Seal

Metal "End" for cans

**Method of Preservation?**

Hot Fill (PET or Glass)

pH < 4.0

Tunnel Pasteurization

Refrigerated

Added Preservatives

Velcorin

**Volume of Container in ounces?**

**Container / Serving Type:**

Shot (0.5oz - 5oz)

Single Serve (5oz - 20oz)

Multiserve (>20oz)

**Type of label that is being applied?**

Pressure Sensitive (PSL)

Shrink Sleeve (steam applied)

Pre-Printed

Pre-Sleeved

**Final Packaging - Select those that apply**

12-pack Tray w/ Clear Shrink

24-pack Tray w/ Clear Shrink

4/6/12-pack unit & Master Case

12 / 24 Box packed

Variety Pack / Multipack

Loose Packed / Boxed

Other

**List any other packing / pack out needs that are required for this project:**

**Required Certifications: Check all that apply**

Organic

Non-GMO

Kosher

Allergen Free

**Same base formula for all flavors?**

YES

NO

**Has this been previously manufactured?**

Yes

No

**Do you have an existing Process Authority Letter?** Yes  
No

**How was the product formulated?**

Self / Internally formulated  
Food Center/ Incubator or University  
Independent Formulator / Consultant  
Flavor House / Ingredient Supplier

**What is your time frame to complete this project?**

< 30 days ( needed it ASAP)  
30 - 60 days (time is tight)  
60 - 90 days (we need to lock-in now)  
It's a CRISES and I need it yesterday

**Who will be doing the production planning, ingredient, packaging materials, etc sourcing?**

Client / Customer has all the tools, contacts, documentation and skills to manage  
Client requires/needs the work to be done by MetaBrand

**How did you learn about our services?**

Web Search (Google, Yahoo, etc)  
Trade / Industry Show Website  
Flavor / Ingredient Supplier  
Formulator / Consultant  
Existing or Prior Client of Ours  
Referral  
Other

**Please let us know of any other information we should be aware of:**

Once you have completed the form, please save it as a PDF and email it to:info@metabrandcorp.com - We recommend you download our standard [Confidentiality & NDA Agreement](http://metabrandcorp.com/wp-content/uploads/MetaBrand-Confidentiality-NDA-2019-V4.pdf) by clicking the link. Or use (http://metabrandcorp.com/wp-content/uploads/MetaBrand-Confidentiality-NDA-2019-V4.pdf)