

Custom Blending Services Questionnaire

Thank you for your interest in pursuing a Custom Blending agreement with Chemfax Products Ltd. In order to ascertain whether or not we are able to blend your specific product, we request that you complete this brief questionnaire.

Company Name:				Phone Nu	mber:		
Address:				Contact N	ame:		
City:	Р	rovince:		Postal Co	de:		
Email address:							
Chemfax require prepared formule *Do you have a core *This product is a L	a, completen plete formuliquides minimur	e with blen ula and blend Pow n purchase	ding proceding procedure der	dures. es for your pr Powder bler or Custom I	oduct? Yes nded into a Lid	No quid emicals (two ski	
* 864 x 909 ml bott	•	, , ,	•		•		
Can you commit to What size packagir 909 ml 4 L	•		skias of proat	ιστ, paid in ad BULK	ivance? Yes	No	
What is your month	nly and yearl	y requiremer	nt of product?	L/N	M onth	L/Year	
Do you have a logo or a complete label design?							
l have a logo only l have a fully desigi * <i>Chemfax can assi</i>		Yes Yes layout*	No No				
Do you have an SD f yes, please includ *Chemfax can assi	de it with this	s form	Yes	No			
	. ,	our raw mate	erials or finish	ed product h	azardous? Ye	es No	
Do you have an S	SDS for all r	aw compon	ents? Yes	No			
Please include a brief description of your business operations							

We appreciate your interest in Chemfax Custom Blending Services.

Please forward completed questionnaire to sales@chemfax.com