



Beauty Companies Distribution Readiness Survey

Applies to all consumer or professional product defined by the FDA as a cosmetic or over the counter drug (OTC). Generally, trademarks fall in class #3. Please complete one survey per brand.

Brand Name:		Contact:	
DATE:		Brand Website:	
Email address:		Cell Phone:	
Product Category - check all that apply		<input type="checkbox"/> Hair <input type="checkbox"/> Skin <input type="checkbox"/> Nail <input type="checkbox"/> Body <input type="checkbox"/> Appliance <input type="checkbox"/> Ingestible	
Mailing address		City/State/Zip	
Country of Origin			
Annual sales in Country of Origin if not American			
Annual sales in the America			
Channels of sales in America			
Margin between cost of goods and US retail price = 8X to 10X		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Product Labels meets FDA requirements		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Website meets FTC standards		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Selling Direct to Consumer? Check all that apply		<input type="checkbox"/> Own site <input type="checkbox"/> Amazon (protected) <input type="checkbox"/> Amazon (multiple sellers) <input type="checkbox"/> Other eCommerce (list name)	
Digital Footprint	<input type="checkbox"/> Instagram	# of Followers	
	<input type="checkbox"/> Face Book	# of Followers	
	<input type="checkbox"/> Pinterest	# of Followers	
	<input type="checkbox"/> YouTube	# of Followers	
	<input type="checkbox"/> SnapChat	# of Followers	
	<input type="checkbox"/> LinkedIn	# of Followers	
Registered Trademark in America?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
"Made in America" claim on package or marketing		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3 rd party Validation for Natural or Organic		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Brand Line Sheet		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Marketing Support		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Digital Assets		<input type="checkbox"/> Yes	<input type="checkbox"/> No



International Distribution Readiness

Do you sell Internationally?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, in what markets:		
Channels of sales and volumes (US\$) in International territories?		
Product registration for international markets completed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, in what markets:		
Trademark registration for international markets completed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, in what markets and date registered mark approved:		
Do you have International languages on your labels?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what languages do you have?		
Do you list a European Responsible Party on your labels?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what company and address do you have?		
Safety Testing and Toxicology Assessment completed on products	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have International warehouses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Where?		

Please return completed form with brand presentation deck and line sheet to info@kirschnergroupp.com

Comments: