

Company Details		
Company Name	Company Name	
Year of Establishment	Year of Establishment	
Company Turnover	Company Turnover	
Company Address	Company Address	
Company Website	Company Website	
CONTACT PERSON'S DETAILS		
Contact Person Name	Contact Person Name	
Contact Person Designation	Designation	
Contact Number	Contact Number	
How did you come to know about Lifespan?	How did you come to know about Lifespan?	
PRODUCT DETAILS		
Product Name	Product Name	
Product Type	Tablets	
If any other please specify	If any other please specify	
This Product will be applied under	Applied under	
If any other please specify	If any other please specify	
Product Description *	Product Description *	
Benchmark Product in Market (If any)	Benchmark Product in Market (If any)	
Tentative Label Claim/ Ingredients List	Tentative Label Claim/ Ingredients List	
Desired Packaging Options	Desired Packaging Options	
Do you require Lifespan to provide Logistics	Yes	
Tentative Budget	Tentative Budget	
Tentative MOQ	Tentative MOQ	
Order quantities are for	One Time	
Any Other Specifications/queries	Any Other Specifications/queries	