



UVSA New Product / Item Form

Industry - New Item Form

Submission Information

Submission date
Form completed by
Contact phone
Contact email
Distributor buyer name

Product Information

Product name
Product trade name, if different
Manufacturer name
Manufacturer website
Manufacturer product number
Supplier name, if different from manufacturer
Supplier product number
Product species
Target customer
Brief description of product and how it is used
Does the product have an expiration date? YES NO
 If yes, what is the shelf life?

Attachments (Please check all that will be attached to email)

Product image
Product detailer
Product pricing
Product configuration
Product label
Product tech/spec sheet
Compendium
MSDS/SDS

Units

Smallest unit of purchase
Purchase cost of smallest unit
Minimum order quantity
Suggested selling unit
Suggested wholesale price
Is the suggested wholesale price contractually restricted? YES NO





Tiered price breakdown, if applicable
Unit of measure (e.g., bag, bottle, can, etc.)

Unit of measure weight
Dimensions of selling unit

Selling unit UPC/bar code

Does the product have these options? Check all that apply: inner pack; case;pallet

Inner pack UPC/bar code Inner Pack Case Pallet

Number of selling units in inner pack

Inner pack type

Case UPC/bar code

Selling units in case

Case weight (lbs)

Pallet UPC/bar code

Selling units on pallet

Pallet weight (lbs)

Selling units per tier

Tiers per pallet

CA Prop-65 Considerations

Are you familiar with the product labeling requirements of California’s Proposition 65 (“Prop 65”), officially known as the Safe Drinking Water and Toxic Enforcement Act of 1986?

YES NO [What Is Prop 65?](#)

If yes, are you also familiar with revised Prop 65 labeling requirements that became effective August 30, 2018?

YES NO

If you are the manufacturer of the product, do you certify that no substances on the Prop 65 list (as of the submission date above) have been knowingly or intentionally added?

YES NO [CA Prop 65 Carcinogen or Reproductive Toxicant List](#)

If you cannot so certify, please supply documentation explaining the substances used and the concentration of those substances.

Documentation Attached to email? YES NO

If you are not the manufacturer of the product, do you certify that you have confirmed with the manufacturer that the product contains no substances on the Prop 65 list (as of the submission date above)?

YES NO

Do you certify that the labeling on your product complies with Prop 65?

YES NO



Product Specifics and Restrictions

Is the product in a gallon jug?

Does the product contain glass?

Is the product or does the product contain a List 1 chemical?

What is a list 1 chemical?

Is the product a drug (either over-the-counter or requiring a prescription)? YES NO

National drug code (11 digits)

Is this product a chemotoxic drug?

FDA code type

FDA code info

Does the product require a prescription (RX) or a veterinary feed directive (VFD)? YES NO

Is the product a pesticide? YES NO

 If a pesticide, in which states is the product registered for sale?

Is the product a Restricted Use Pesticide (RUP)? YES NO

Are any customers or customer groups restricted from purchasing this product?

 If yes, please provide details

EPA registration number

Is this product a controlled substance? YES NO

 If yes, what is the controlled class?

 Is this product a biological product? YES NO

If yes, are there any state restrictions on the product?

 List States Here:

Storage and Shipping Specifications

Storage temperature

Shipping temperature

Is the product subject to freezing effects? YES NO

Other shipping details

Is the product labeled as Limited Quantity? YES NO

Is the product labeled as ORM-D? YES NO

Is the product classified as HazMat? YES NO

Please provide pictures of the Limited Quantity, ORM-D, or HazMat labels on the product package Attached to Email?

UN number

Actual DOT proper shipping name

Technical name (if required)

Hazard class or division number

Packing group

Container type

Are EDI purchase orders accepted? YES NO

If yes, how should the item be displayed for EDI?

Additional Information

Product's country of origin

Lot number, if available

Lot tracking requested? YES NO

Product's date of manufacture

Serial number, if available

Serial tracking requested? YES NO

UNSPC code

Medical device class

Medical device source

Company responsible for medical device tax

Marketing Information

Product lead time

Product launch date

Monthly sales projections

Is this product a replacement? YES NO

 If yes, what does it replace?

With which other products does this item compete?

What marketing support will you provide?

Is this product eligible for a rebate? YES NO

Is this an agency item? YES NO

Is this product to be stocked or drop shipped? YES NO

Return policy Attached to Email?

Contact Information

Operations/Shipping:

Email

Phone

Regulatory:

Email

Phone