

Food Label Approval Form

Please fill out completely and attach copy of label

Product and Company Information	
Product Name:	Company Name:
Owner:	Company Address:
Phone:	
Email:	
Mandatory Label Information	
Ingredients (list in descending order by weight) Use back for additional ingredients	Allergens (milk, wheat, eggs, soybeans, fish, crustacean shellfish, tree nuts, peanuts)
	Name and Physical Address of manufacturer or distributor as it will appear on the label. (email optional)
	Name:
	Address:
Net content: weight minus packaging (both US and metric needed): US equivalency _____ Metric _____	City: _____ State _____
	Zipcode: _____
Other Information	
Storage Instructions (Keep Refrigerated, Refrigerate after opening):	Email Address:
Reduced Oxygen Packaging: Yes No Material of container (plastic, glass, cardboard):	Remarks (use back for additional information):



Food Label Approval Form

Additional Ingredients:	Remarks continued:

Do not write below this line

Reviewer Comments: _____

Approved: _____ Yes _____ No (see reviewer comments for details)

Reviewed by: _____ Date: _____

