



RL FOOD TESTING
LABORATORY.COM

RECIPE TEMPLATE ORDER FORM

Email or Fax Completed Form
info@rlfoodtestinglaboratory.com
Fax #: 877-203-4598

Have Questions?
CALL US TOLL-FREE From the U.S. - 877.753.6631
International - 949.309.0105
We answer our phones 7-days-a-week from 6am-9pm PST

Name: _____
Company: _____ Date: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ E-Mail: _____

Product Name: _____
Serving Weighs in Grams or Ounces: _____
Household Measure Term for Serving (ie: 1 cookie, 1 cup): _____
Servings per Package: _____
Servings this Recipe Makes: _____

How is this processed? (baked, sauteed, ect.) _____
Percent moisture in final product (if known) _____
Initial weight before process _____
Final weight after process _____
Weight loss during process (difference) _____

RECIPES NEED TO FOLLOW THIS FORMAT AND CONTAIN AS MUCH DETAIL AS POSSIBLE ABOUT EACH INGREDIENT.

Quantity (in Grams, Ounces, Percentages, or Household Measurements)	Ingredient <i>Stock ingredients from our data base will be used for any ingredient information not provided.</i>	Brand of Ingredient	Sub-Ingredients of Processed Foods Used (list ingredieints below) <i>ALL sub-ingredients MUST attach a copy of nutrition facts panel label, ingredient statement and allergen statement from package.</i>

PLEASE NOTE: When submitting this form, you are confirming that your recipe is final. Any changes made to the recipe may incur \$100 change fee. We offer a 5 business day review period of your final labels, any change requests after this time may incur \$100 change fee.

CHECK HERE:

The client is responsible for supplying RL Food Testing Laboratory, Inc. with the accurate ingredients weights, and serving size with detail to differentiate from any common ingredient. By checking this box, you confirm you understand.

