

# Cosmetic Product Safety Report – CPSR Request Form

## Variants of a Base Formula

### Mandatory information

Product Name: \_\_\_\_\_

Responsible Person: \_\_\_\_\_

Address: \_\_\_\_\_

Contact email: \_\_\_\_\_

### Product Specifications

Appearance: \_\_\_\_\_

Scent: \_\_\_\_\_

PH: \_\_\_\_\_

Viscosity: \_\_\_\_\_

Specific Gravity \_\_\_\_\_

### Packaging Information:

Final container: \_\_\_\_\_

Materials: \_\_\_\_\_

Airless Packaging: \_\_\_\_\_

### Directions of use as they appear on the label (if any)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Base Formula:

	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				

Have you performed Stability Test?

\_\_\_\_\_

Does the formula need Preservation Test (PET or Challenge Test)?

\_\_\_\_\_

## Variant 1:

Variant Name: \_\_\_\_\_

Additional ingredients:

	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				

## Variant 2:

Variant Name: \_\_\_\_\_

Additional ingredients:

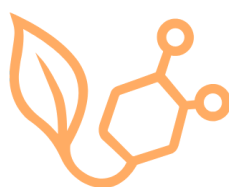
	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				

## Variant 3:

Variant Name: \_\_\_\_\_

Additional ingredients:

	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				



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formulas

## Variant 4:

Variant Name: \_\_\_\_\_

Additional ingredients:

	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				

## Variant 5:

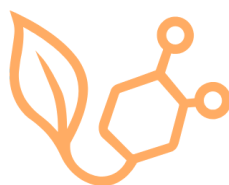
Variant Name: \_\_\_\_\_

Additional ingredients:

	Common name OR INCI Name	Weight in %	Weight in Grams / ml	Supplier
1				
2				
3				
4				
5				

Name: \_\_\_\_\_

Signature: \_\_\_\_\_



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