**Product Specification Form**

**Company Name:**

To decide on the eligibility of your product we need following information:

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| 1. | Product Type:(disinfectant/sanitizer) |  |
| 2. | Product Name (CAS#, scientific name, etc.): |  |
| 3. | Product Formulation:(chemical formula of raw material used) |  |
| 4. | Product claims:(e.g. effective against COVID) |  |
| 5. | If your company is already registered with EPA in any form (facility registration) or if there are similar products with EPA registration, then kindly provide us with the appropriate registration numbers. |  |
| 6.  | Please provide references to relevant safety or efficacy studies within your possession.  |  |