



NEW VENDOR SCREENING QUESTIONNAIRE

Company Name: _____ Date: _____ Phone: _____

Contact Person: _____ Products: _____

Email: _____

Website: _____

Product Information:

Marketing Support: (check all that apply)		Key selling points:
Vendor plans to provide:	With GSD:	_____ _____ _____ _____ _____
Telemarketing	Sampling	
Mailings	Advertising	
Advertising	Promo Discounts	
Brokers	Other _____	

Are your products: (check all that apply)				Do your products contain:
Gluten Free	Fair Trade	Whole Grain	Frozen	Artificial Flavorings/ Colorings Trans Fatty Acids Hydrogenated Fats Artificial Sweeteners Fructose or HFCS GM Ingredients
Vegan	Heat-n-Serve	High Fiber	Refrigerated	
Vegetarian	Kosher	Low Salt	Dry Storage	
Certified Organic	Casein Free	Low Carb		
Raw	Dairy Free	Grab-n-Go Snack		
Other: _____	Trendy	Non GMO		

If your products are Gluten Free:

Are they certified Gluten Free?	Are they made/ packaged in a dedicated facility?
Are they marketed as Gluten Free?	Are the products tested?
If no to above, are they manufactured on a separate line?	

What is the shelf life? _____ Case quantity, size & gross weight: _____

What is the product ranking (top sellers)? _____



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Company Name: _____ Contact: _____ Date: _____

Please indicate which of the following distributors are currently carrying or soon will be carrying your products:

UNFI Dayville

Kehe

Associated Buyers

UNFI Chesterfield

Haddon House

None

UNFI York

Avenue Gourmet

Other: _____

Please estimate how many accounts in the Garden Spot service area do you sell to directly? _____

Shipping Information:

What is the **SHIPPING** point? _____

Order Minimums: _____

Minimum order for prepaid freight: _____

Minimum order for pick up: _____

Pricing:

Distributor Pricing/ Retail pricing you feel the market will support: _____

Checklist:

Have you answered the following?

Product Info

Distributor Info

Shipping Info

Pricing