



Prospective Retailer Questionnaire

Date: \_\_\_\_\_ Tax-Id / EIN# \_\_\_\_\_

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

Contact Name & Title: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Number of Years in Business / Anticipated Opening: \_\_\_\_\_

Size of Store: \_\_\_\_\_ Number of Locations: \_\_\_\_\_

Number of Staff: \_\_\_\_\_ Hours: \_\_\_\_\_

Number of Makeup Artists on Staff: \_\_\_\_\_

Brief Description of Location: \_\_\_\_\_

\_\_\_\_\_

Unique Features of Location: \_\_\_\_\_

\_\_\_\_\_

Please List Brands Carried / Anticipate Carrying: \_\_\_\_\_

\_\_\_\_\_

What is Most Important to You When Selecting a New Makeup Line: \_\_\_\_\_

\_\_\_\_\_

Would you be Adding NVEY ECO, or Replacing a Current Line: \_\_\_\_\_

\_\_\_\_\_

How did you hear about NVEY ECO, Certified Organic Makeup: \_\_\_\_\_

\_\_\_\_\_

Please also include any photos of your store and/or cosmetics area that are available.

\*Tax-Id / EIN must be included to receive wholesale information.

Completed forms can be submitted via email to [info@conveybeauty.com](mailto:info@conveybeauty.com) or via fax to 859.261.7635.