



Leaping Bunny certification

Cosmetics and personal care products

Application Form

Revised Spring 2017

All sections of this application form must be completed and supporting documentation attached where necessary. Before completing this form, please refer to the Leaping Bunny criteria and read the associated Guidance Booklet. Please contact the Leaping Bunny Certification Manager if you require help or clarification on any aspect of the criteria or process before submitting your application.

Section 1: Company information

Please provide company details, including contact details for customer enquiries.

Name of company		
Company headquarters (country)		
Trading name/s		
Leaping Bunny responsible person		
Position held		
Correspondence address		
Telephone		
Email		
Website		
Date company established	_ _ / _ _ / _ _	
Type of organisation	Limited company	<input type="checkbox"/>
	Other	<input type="checkbox"/>
	Incorporation number:	
	Date of incorporation:	_ _ / _ _ / _ _
	If other, please supply unique tax reference number (and any additional relevant information)	
	Are you registered for VAT?	Yes/No
	If relevant, please provide unique VAT registration number:	
	Is the company part of a group of companies?	Yes/No
	If yes, please list the other companies in the group:	

Please provide annual sales figures for own brand products falling within the remit of the certification you are applying for. This should be based on the previous year of trading or an estimate of annual sales for the first year of trading.

Currency:	
Amount:	



Section 2: Company policy on animal testing

Please see the associated Guidance Booklet document for clarification of definitions.

1	Does your company already have an official animal testing policy statement? If yes, please attach a copy to this application.	Yes No	<input type="checkbox"/> <input type="checkbox"/>
2	<p>A Leaping Bunny certified company must select, and maintain, a fixed cut-off date.</p> <p>This means that:</p> <ul style="list-style-type: none"> (i) your company will not conduct, commission or be party to any animal tests on own brand certifiable products after this specific date; and (ii) your company commits to not purchasing, either directly or indirectly (via third party product manufacturers), any finished products, raw materials or cosmetics ingredients for its own brand certifiable products that have been animal tested after your fixed cut-off date. <p>Please confirm your selected fixed cut-off date. For companies selling into or headquartered in the EU the recommended date against which you will be audited is 11th March 2013</p>	Company FCOD:	__/__/__
3	Does your company purchase any finished products or ingredients from another company?	Yes No	<input type="checkbox"/> <input type="checkbox"/>
4	Does your company manufacture any of its own finished products?	Yes No	<input type="checkbox"/> <input type="checkbox"/>
5	Does your company manufacture finished products on behalf of other companies?	Yes No	<input type="checkbox"/> <input type="checkbox"/>
6	After your fixed cut-off date has your company ever conducted or commissioned animal testing for any purpose. If so provide details.	Yes No	<input type="checkbox"/> <input type="checkbox"/>
7	Do you have a supplier monitoring system in place to ensure all finished products, raw materials and the ingredients they contain are not animal tested after your fixed cut-off date.	Yes No	<input type="checkbox"/> <input type="checkbox"/>
8	Does your supplier monitoring system contain processes and procedures for managing any non-compliance issues which may arise with manufactures?	Yes No	<input type="checkbox"/> <input type="checkbox"/>
9	Do you agree to an independent audit to verify compliance with Leaping Bunny criteria during the first year of being awarded certification and every three years following this?	Yes No	<input type="checkbox"/> <input type="checkbox"/>

Section 3: Products, availability and consumer queries

This information will help us upload your company information onto our website following completion of your certification.

10	Please specify your company name as you would like it to appear online and in other marketing communications.	
11	Under what distinctive brand names (as opposed to your company or trading name) are your products marketed?	
12	Please provide specific contact details for consumer queries.	Address: Telephone: Email: Website:

Leaping Bunny certification relates to animal testing alone, and it is not a requirement that companies only sell vegetarian or vegan products. Shoppers do however often query which companies offer vegetarian or vegan options. We, therefore, allow search options for this requirement on our website.

13	Does your company offer any vegetarian product options?	Yes No	<input type="checkbox"/> <input type="checkbox"/>
14	Does your company offer any vegan product options?	Yes No	<input type="checkbox"/> <input type="checkbox"/>

15	Please select the own brand products that your business sells for the certification it is applying for:	
	<input type="checkbox"/> Acne Treatments <input type="checkbox"/> Eye Care <input type="checkbox"/> Lubricants <input type="checkbox"/> Aromatherapy <input type="checkbox"/> Foot Care <input type="checkbox"/> Animal Grooming <input type="checkbox"/> Baby and Child Care <input type="checkbox"/> Hand Care <input type="checkbox"/> Self-Tan <input type="checkbox"/> Dental Care <input type="checkbox"/> Insect Repellent <input type="checkbox"/> Sun Care <input type="checkbox"/> Women's Personal Care <input type="checkbox"/> Men's Personal Care <input type="checkbox"/> Bath & Shower <input type="checkbox"/> Hair Care <input type="checkbox"/> Maternity Products <input type="checkbox"/> Body Care <input type="checkbox"/> Hair Colour <input type="checkbox"/> Medicated Shampoo <input type="checkbox"/> Deodorant <input type="checkbox"/> Hair Grooming	<input type="checkbox"/> Shaving/ Depilatory <input type="checkbox"/> Facial Skin Care <input type="checkbox"/> Hypo-allergenic <input type="checkbox"/> Skin Care <input type="checkbox"/> Soap <input type="checkbox"/> Fragrance <input type="checkbox"/> Lip Care <input type="checkbox"/> Blusher & Bronzer <input type="checkbox"/> Concealer <input type="checkbox"/> Eye and Brow Liner <input type="checkbox"/> Eye Colour <input type="checkbox"/> Eye Make-up Remover <input type="checkbox"/> Face Powder <input type="checkbox"/> Foundation <input type="checkbox"/> Lip Care <input type="checkbox"/> Lip Colour <input type="checkbox"/> Make-up Remover <input type="checkbox"/> Mascara <input type="checkbox"/> Nail Care <input type="checkbox"/> Nail Polish <input type="checkbox"/> Nail Polish Remover <input type="checkbox"/> Tinted Moisturiser
17	Please select where shoppers can purchase your products?	
	<input type="checkbox"/> Department stores <input type="checkbox"/> Mail order <input type="checkbox"/> Online <input type="checkbox"/> Retail stores	<input type="checkbox"/> Supermarkets <input type="checkbox"/> Your own stores <input type="checkbox"/> Other (please specify):
18	Please select regions where your products are available?	
	<input type="checkbox"/> All countries <input type="checkbox"/> Africa and the Middle East <input type="checkbox"/> Asia (excl. China) <input type="checkbox"/> Asia (incl. China) <input type="checkbox"/> Australia and New Zealand	<input type="checkbox"/> Europe (non-EU) <input type="checkbox"/> European Union <input type="checkbox"/> South and Central America <input type="checkbox"/> USA and Canada
19	Please specify countries below:	

Section 4: Your company declaration

This declaration must be completed in full and signed by an authorised company representative.

I confirm that I have read, understood and meet the Leaping Bunny criteria as outlined in the Guidance Booklet.

Signed	
Name	
Position	
Correspondence address	
Telephone	
Email	
Date	

