Preliminary New Product Development Questionnaire

Date: __________________________________________

Name: __________________________________________

Business Name: __________________________________

Address: _________________________________________

Address: _________________________________________

City, State and Zip: _______________________________

Email: __________________________________________

Primary Number: _________________________________

Secondary Number: _______________________________

Product Name: _________________________________

Primary Industry: ________________________________

NDA with EXO2 on File?: __________________________

Please complete the following questionnaire in its entirety and as completely as possible.

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1. What is the primary purpose of the product you wish to create or heat?

_____________________________________________________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

2. If created to solve a problem, what problem will the product solve?

_____________________________________________________________________________________________________

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________________________________________________________________________________________

3. Are there other (competing) products currently in the marketplace? If so:
   a. What are they?  ____________________________________________________________
   b. Who makes them?  ____________________________________________________________
   c. What are their price points?  ________________________________________________
   d. Do they work?  ______________________________________________________________
   e. How are they distributed?  _____________________________________________________
   f. Estimated market share?  _______________________________________________________  

   (Please use a separate piece of paper for each competitive product.)

4. Are there other (competing) strategies (not relating to a specific product) currently in the marketplace? If so, please describe.

   ________________________________________________________________________________
   ________________________________________________________________________________

5. Do you presently make, distribute or sell any of these remedies? __________________________

6. Have old remedies failed and if so, why?

   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________

7. How will this product outperform existing or previous products or solutions?

   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________

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8. Who is the targeted end user(s)? ____________________________________________

9. What are the potential distribution channels? _________________________________

10. Will state or government agency certifications be required (FDA, OSHA, AMA, etc.)? If
    so, which one? ___________________________________________________________

11. Will National Recognized Testing Laboratories (NRTL) certifications be required (ex.
    UL, CSA, etc.)? __________

12. Can end users receive discounts or reimbursement for this product (i.e., insurance,
    government grants, etc.)? If so, what? _______________________________________

13. What are the desired and/or available power sources for this electrically heated
    product (120 volt mains current, portable/rechargeable batteries, 12 volt power
    sources, etc.)?

    _________________________________________________________________________

14. Will you (the company) market this product directly? ___________________________

15. For all supply chain entities, what are the industry standards for expected margins (i.e.,
    Distributor, Dealer, etc.)? _______________________________________________

16. Is packaging/presentation a key to the success for this product? _________________

17. What are the key characteristics/requirements of this product that will make it a
    market leader?

    _________________________________________________________________________

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18. What are the minimum performance requirements of the product?
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

19. What is the targeted Retail (or End User) price point for this product? __________

20. What is the typical, desired, standard or expected warranty period for this product?
________

21. Do governing regulations prevent certain materials or power sources from being used?  
If so, please explain. __________________________________________________________________________

22. Will there be variations of the product (i.e., sizes, shapes, colors, textures, temperatures,  
etc.)? If so, please explain.  ________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

23. Do manufacturing requirements exist for this product (i.e., must be made in the USA,  
must be made with a percentage of recycled materials, etc.). If so, what?
_________________________________________________________________________________________

24. What is your forecast sales volume?
   a. Year 1 _________________ Units
   b. Year 2 _________________ Units
   c. Year 3 _________________ Units
25. Will you seek to patent this product design? __________

26. Has a patent application been filed? ____________________

27. Do you desire exclusive rights for this product? If so, in what territories and for what time frame?

_____________________________________________________________________________________________________

_____________________________________________________________________________________________________

_____________________________________________________________________________________________________

28. If an OE design, are you interested in the opportunity to earn a portion of the Development Fee back (via volume sales) over time? __________________________

29. Do you intend to manufacture the product or do you want EXO2 to deliver a finished product? __________________________

30. Other Design Functions, Questions or Comments:

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The information supplied in this document will be held in the highest professional regard by EXO2 but governed only by the Confidentiality Agreement and/or Nondisclosure Agreement in place at the time the questionnaire is submitted to an authorized EXO2 representative. Presentation of this questionnaire without an appropriate confidentiality agreement in place is discouraged and may put your product concept at risk. Merely supplying this document to EXO2 does not protect you, your company or your product concepts.

Completed By: ________________________________
Title: ______________________________________
Signature: __________________________________
Date: ______________________________________

For EXO2 Use Only:
Received By: ________________________________
Date: ______________________________________
Assigned To: ________________________________