** COMPLETE THIS FORM TO INITIATE SUPPLIER SCOUTING ** MEPNN Supplier Scouting Opportunity Synopsis

(To view in larger text, press Ctrl + Simultaneously)

The submitting entity agrees to notify NIST MEP of the status of actions taken as a result of this society agree scouting instance within 30 days after receiving a results report.

Number of days to be posted if other than 30 45

Item to be Scouted Apple Juice Concentrate 70 brix

Please describe the item application/the end use of the item

To be used as a sweetener in apple based fermented beverages.

Supplier Customer/Product NAICS Code, if known

TECHNICAL INFORMATION
1. Supplier Information

1a. Type of supplier being sought

If other, please specify type of supplier

1b. Reason for scouting submission 2nd Supplier

If other, please specify reason

2. Summary of Technical Specifications and Performance Requirements

2a. Describe the manufacturing process

Long periods of boiling apple juice, then aseptically filled in food

grade double walled bags inside of a metal drum, or simply

pumped into an IBC after cooling.

2b. Provide dimensions, size, tolerances, and performance specifications for the item 50 gall drums or 250 gallon totes or IBCs (Intermediary Beverage

iontainers)

Manufacturer

2c. List required materials needed to make the product, including materials of product components Apples, apple juice.

2d. Are there applicable certification requirements?

refrigerated that is preferable.

2e. Are there applicable regulations?

If yes, please explain applicable regulations

2f. Are there any other standards, requirements, etc.?

If yes, please explain other standards, requirements, etc.

2g. Additional Comments

BUSINESS INFORMATION
3. Volume and Pricing

3a. Estimated potential business volume (i.e. # Units per day/month/year) 500-750 gallons per month

3b. Estimated target price/unit cost information (flexible and negotiable not accepted) \$15/gallon

4. Delivery Requirements

4a. When is it needed by? (immediate, 30 days, 6 months, etc.)

6 months

4b. Describe packaging requirements (i.e. individually/group packaging)

Aseptic drums or bag in box totes.

4c. Where will this item be shipped?

York Pennsylvania.

5. Additional Comments

5a. Is there other information you would like to include?

6. Requesting Scout

6a. Scout Name

6b. Center Name

If an organization other than a Center, please enter

6c. Scout Email

Supplier Scouting Number (NIST MEP use only)

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