

**DEPARTMENT OF THE TREASURY  
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU  
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF  
LABEL/BOTTLE APPROVAL**

*(See Instructions and Paperwork Reduction Act Notice Below)*

TTB ID: 09071-000-000016		CT <u>DC</u> OR <u>VA</u>	
1. REP. ID. NO. (If any) <u>1614</u>		3. SOURCE OF PRODUCT (Required) <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Imported	
2. PLANT REGISTRY/BASIC PERMIT/BREWERS NO. (Required) <u>VA-I-416</u>		5. TYPE OF PRODUCT (Required) <input checked="" type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGES	
4. SERIAL NUMBER (Required) <u>09-631</u>		6. BRAND NAME (Required) <u>Paul Dieder</u>	
7. FANCIFUL NAME (If any) <u>Wines &amp; Select Wines, Inc.</u>		10. FORMULA/SOP NO. (If any)	
9. EMAIL ADDRESS <u>Wines@selectwines.com</u>		11. LAB. NO. & DATE/PRIE-IMPORT NO. & DATE (If any)	
12. NET CONTENTS <u>1 liter</u>		14. WINE APPELLATION (If on label) <u>Weinland / Austria</u>	
13. ALCOHOL CONTENT <u>13%</u>		17. FAX NUMBER <u>703-222-9894</u>	
15. WINE VINTAGE <u>2008</u>		16. PHONE NUMBER <u>703-631-8100</u>	

**PART I - APPLICATION**  
8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT, OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON THE LABEL (Required)  
**Select Wines, Inc**  
14000 Willard Rd Suite 3  
Chantilly VA 20151-2929

8a. MAILING ADDRESS, IF DIFFERENT

11. TYPE OF APPLICATION (Check applicable boxes)  
 a.  CERTIFICATE OF LABEL APPROVAL  
 b.  CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL (For sale in \_\_\_\_\_ only) (Fill in State abbreviation)  
 c.  DISTINCTIVE LIQUOR BOTTLE APPROVAL - TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)  
 d.  RESUBMISSION AFTER REJECTION  
 TTB ID: 09071-000-000016

19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., 'not contents, etc.). THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.

**PART II - APPLICANT'S CERTIFICATION**

Under the penalties of perjury, I declare: that all statements appearing on this application are true and correct to the best of my knowledge and belief; and, that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent the content of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the conditions and instructions which are attached to an original TTB F 5100.31, Certificate/Exemption of Label/Bottle Approval.

20. DATE OF APPLICATION 3/11/09 21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT Kate Norris 22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Kate Norris

**PART III - TTB CERTIFICATE**

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

23. DATE ISSUED MAR 30 2009 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU  
John A. Smith

FOR TTB USE ONLY

QUALIFICATIONS  
"Front" label must appear on container exactly as shown on Application Form.

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF LABELS (See General Instructions 4, 6 and 7)



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Front

Ref