

TTB ID: 10067-000-000064

1. REP. ID. NO. (if any): 1014

2. PLANT REGISTRY/BASIC PERMIT/REVEYER'S NO. (required): VA-I-416

3. SOURCE OF PRODUCT (Required): Domestic Imported

4. SERIAL NUMBER (Required): 10-645

5. TYPE OF PRODUCT (Required): WINE DISTILLED SPIRITS MALT BEVERAGES

6. BRAND NAME (Required): LEO HILLINGER

7. FANCIFUL NAME (if any): Hill Side

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 20151-2029

8a. MAILING ADDRESS, IF DIFFERENT:

9. EMAIL ADDRESS: Kate.Norris@selectwines.com

10. FORMULA/SOP NO. (if any):

11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (if any):

12. NET CONTENTS: 750 ML

13. ALCOHOL CONTENT: 14%

14. WINE APPELLATION (if on label): BURGENLAND/AUSTRIA

15. WINE VINTAGE DATE (if on label): 2007

16. PHONE NUMBER: 703-631-8100

17. FAX NUMBER: 703-222-9894

18. TYPE OF APPLICATION (Check applicable box(es)):
 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:

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 convales, 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: 3/5/10

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 31 2010

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU: Herb C. Buckenardt

QUALIFICATIONS: FOR TTB USE ONLY

EXPIRATION DATE (if any):

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



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