

**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 on Back)

TTB ID: 06093-000-000796

1. REP. ID. NO. (If any): 1014 CT SD OR CA

2. PLANT REGISTRY/BASIC PERMIT/BREWERS NO. (Required): VA-I 416

PART I - APPLICATION

7. 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

3. SERIAL NUMBER (Required) 4. TYPE OF PRODUCT (Required)

YEAR: 06-568

WINE
 DISTILLED SPIRITS
 MALT BEVERAGE

5. BRAND NAME (Required): Weingut Hillinger

6. FANCY NAME (If any): Pinot Noir

8. EMAIL ADDRESS: JENNIFER STOKES E

9. FORMULA/SOP NO. (If any): SELGWINES INC.COM

11. NET CONTENTS: 750 ML

12. ALCOHOL CONTENT: 14 %

13. WINE APPELLATION (If on label): BURGENLAND

14. WINE VINTAGE: 2004

15. PHONE NUMBER: 703-631-8100

16. FAX NUMBER: 703-222-7814

17. 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) _____

18. 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., metal containers, 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.

19. DATE OF APPLICATION: 3/31/06

20. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: Jennifer Stokes

21. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT: Jennifer Stokes

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.

22. DATE ISSUED: APR 10 2006

23. AUTHORIZED SIGNATURE: Anna Miller

24. THIS CERTIFICATE IS ISSUED SUBJECT TO APPLICABLE LAWS, REGULATIONS AND CONDITIONS AS SET FORTH IN THE INSTRUCTIONS PORTION OF THIS FORM.

25. QUALIFICATIONS: FOR TTB USE ONLY

26. EXPIRATION DATE (If any): _____

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



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