

**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)*

**PART I - APPLICATION**

1. REP. ID. NO. (if any) 04236-000-000211 CT 04 OR 04

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

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

YEAR 04 - 04 10

WINE  
 DISTILLED SPIRITS  
 MALT BEVERAGE

5. BRAND NAME (Required) WEINGUT STEININGER

6. FANCIFUL NAME (if any) RIESLING SEKT

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

8. EMAIL ADDRESS (if any) JENNIFER.GAINES@SELECTWINES.COM

9. FORMULA/SOP NO. (if any)

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

11. NET CONTENTS 12. ALCOHOL CONTENT 13. WINE APPELLATION (if on label)

950 ml 13% KAMPTAL/ÖSTERREICH

14. WINE VINTAGE 15. PHONE NUMBER 16. FAX NUMBER

2002 703-631-8100 703-222-9894

17. TYPE OF APPLICATION (Check applicable boxes)

CERTIFICATE OF LABEL APPROVAL

CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL

D-STRUCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE

RESUBMISSION AFTER REJECTION

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) SLOW, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., all 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.

19. DATE OF APPLICATION 8/8/04 20. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT/21. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT

Jennifer Gaines Jennifer Gaines

**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.

22. DATE ISSUED SEP 08 2004 23. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

Jennifer Gaines

QUALIFICATIONS FOR TTB USE ONLY

EXPIRATION DATE (if any)

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

