

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

TTB ID 07017-000-000137		CT 80	OR 64
1. REP. ID. NO. (If any)			
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) VA-I-416			
3. SERIAL NUMBER (Required)		4. TYPE OF PRODUCT (Required)	
YEAR 07-581	<input checked="" type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGE		
5. BRAND NAME (Required) TEUFERN SEER Hof			
6. FANCIFFU/NAME (If any) CREATION			
8. EMAIL ADDRESS Kate.Norris@selectwines.com		9. FORMULA/SOP NO. (If any)	
11. NET CONTENTS 750 ml		12. ALCOHOL CONTENT 14.5%	13. WINE APPELLATION (If on label) WACHAU / Austria
14. WINE VINTAGE DATE (If on label) 2001		15. PHONE NUMBER (753) 651-8100	16. FAX NUMBER (753) 232-9894

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

7a. MAILING ADDRESS, IF DIFFERENT

17. TYPE OF APPLICATION (Check applicable box(es))
 CERTIFICATE OF LABEL APPROVAL
 CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL
For rate in _____ only (fill in State abbreviation)

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, BLOWN OR EMBOSSED ON THE CONTAINER (e.g., net 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: 1/16/07
 20. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: Kate Norris
 21. 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.

22. DATE ISSUED: JAN 31 2007
 23. AUTHORIZED SIGNATURE: *[Signature]*

FOR TTB USE ONLY

QUALIFICATIONS

THIS LABEL MUST BE AFFIXED TO THE FRONT OF THE CONTAINER

EXPIRATION DATE (If any)

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

GOVERNMENT WARNING: (1) ACCORDING TO THE SURGEON GENERAL, WOMEN SHOULD NOT DRINK ALCOHOLIC BEVERAGES DURING PREGNANCY BECAUSE OF THE RISK OF BIRTH DEFECTS. (2) CONSUMPTION OF ALCOHOLIC BEVERAGES IMPAIRS YOUR ABILITY TO DRIVE A CAR OR OPERATE MACHINERY, AND MAY CAUSE HEALTH PROBLEMS.

Teuferserhof