

FOR TTB USE ONLY

OMB No. 1513-0020 (01/31/2009)

TTB ID#

08259-000-000016

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

(See Instructions and Paperwork Reduction Act Notice Below)

1. REP. ID. NO. (If any) <i>1002</i>		3. SOURCE OF PRODUCT (Required) <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Imported		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) MHW LTD dba Purity Vodka 272 Plandome Road Suite 100 Manhasset NY 11030 USA	
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) NY-I-1727		5. TYPE OF PRODUCT (Required) <input type="checkbox"/> WINE <input checked="" type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGES		PART I - APPLICATION	
4. SERIAL NUMBER (Required) YEAR: 0 8 - 1 1 0 0		6. BRAND NAME (Required) PURITY Vodka		7a. MAILING ADDRESS, IF DIFFERENT Same	
7. FANCIFUL NAME (If any)		9. EMAIL ADDRESS mduran@mhw1td.com		10. FORMULA/SOP NO. (If any)	
11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any) B200700315001 10/03/07		12. NET CONTENTS 50 ML		13. ALCOHOL CONTENT 40.0%	
14. WINE APPELLATION (If on label)		15. WINE VINTAGE DATE (If on label)		16. PHONE NUMBER 516 869-9170	
17. FAX NUMBER 516 869-3833		18. TYPE OF APPLICATION (Check applicable box(es)) a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in _____ only" (Fill in State abbreviation) c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE _____ (Fill in amount) d. <input checked="" type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID 08241003000002		19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celloseals, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED 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. BRAND NAME, PRODUCER NAME, AND GRAPHICS MAY REPEAT ON CAP, CAPSULE OR BOTTLE NECK.	

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 09/11/08	21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT <i>Millie Duran</i>	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Millie Duran
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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 OCT 08 2008	24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU <i>Barbara Johnson</i>
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QUALIFICATIONS

EXPIRATION DATE (If any)

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



TTB F 5100.31 (10/2007) PREVIOUS EDITIONS ARE OBSOLETE