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

FOR TTB USE ONLY

TTB ID 09089-000-000009

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 Below)

1. REP. ID. NO. (If any): 1004 | 402 | 01

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required): BR-CA-LAG-1

3. SOURCE OF PRODUCT (Required): ☑ Domestic ☐ Imported

4. SERIAL NUMBER (Required): YEAR 0 9 - 0 1 0 0

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

6. BRAND NAME (Required): LAGUNITAS

7. FANCIFUL NAME (If any): Lagunitas 2009 Correction

PART I - APPLICATION

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):
THE LAGUNITAS BREWING CO.
1280 NORTH MCDOWELL BLVD.
PETALUMA, CA 94954

8a. MAILING ADDRESS, IF DIFFERENT

9. EMAIL ADDRESS: Stephanie@Lagunitas.com

10. FORMULA/SOP NO. (If any)

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

12. NET CONTENTS: 1 PINT 6 FL OZ.

13. ALCOHOL CONTENT: 7.2%

14. WINE APPELLATION (If on label)

15. WINE VINTAGE DATE (If on label)

16. PHONE NUMBER: (707) 769-4495 X5311

17. FAX NUMBER: (707) 763-5254

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, celoseals, 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.

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: 3/27/2009

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: Stephanie Parsons

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT: STEPHANIE PARSONS

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: APR 01 2009

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU: Kurt B. Mueller

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QUALIFICATIONS

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF LABELS

TTB F 5100.31 (6/2006)