

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

FOR TTB USE ONLY			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 09322001000238					
1. REP. ID. NO. (If any)	CT 906	OR 20			

PART I - APPLICATION

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) BR-IA-KNO-15000		3. SOURCE OF PRODUCT (Required) <input checked="" type="checkbox"/> Domestic <input 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 LABEL (Required) HUB CITY BREWING COMPANY, KNOKE, INC. 11352 40TH ST STANLEY IA 50671	
4. SERIAL NUMBER (Required) 0907SB		5. TYPE OF PRODUCT (Required) <input type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input checked="" type="checkbox"/> MALT BEVERAGE			

6. BRAND NAME (Required) HUB CITY BREWING COMPANY		8a. MAILING ADDRESS, IF DIFFERENT			
7. FANCIFUL NAME (If any) SNOWBUNNY ALE					

9. EMAIL ADDRESS GLORIAKNOKE@YAHOO.COM		10. FORMULA/SOP NO. (If any) 1		11. LAB. NO. & DATE / PREIMPORT NO. & DATE (If any)		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. NO. ____09299001000246____	
12. NET CONTENTS 12 FL. OZ.		13. ALCOHOL CONTENT		14. WINE APPELLATION IF ON LABEL			
15. WINE VINTAGE DATE IF ON LABEL		16. PHONE NUMBER (319) 283-3668		17. FAX NUMBER (319) 283-3668			

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.

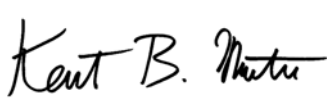
PART II - APPLICANT'S CERTIFICATION

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 11/18/2009	21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT (Application was e-filed)	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT BRIAN KNOKE
--	--	---

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 11/23/2009	24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU 
--------------------------------------	--

FOR TTB USE ONLY

QUALIFICATIONS STATUS THE STATUS IS APPROVED. CLASS/TYPE DESCRIPTION MALT BEVERAGES SPECIALITIES - FLAVORED	EXPIRATION DATE (If any)
--	---------------------------------

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Brand (front)

Actual Dimensions: 6 inches W X 3 inches H



TTB F 5100.31 (6/2006) PREVIOUS EDITIONS ARE OBSOLETE