				OMB No. 1513-0020 (01/31/2009)	
TTB :D 08322-003-000032			DEPARTMENT OF THE TREASURY ALCOHOL AND TOBACCO TAX AND TRADE BUREAU APPLICATION FOR AND CERTIFICATION/EXEMPTION OF		
1. REP. ID. NO. (If any)	CT 901	OR ₃		L/BOTTLE APPROVAL d Paperwork Reduction Act Notice Below)	
2. PLANT REGISTRY/BASIC	3. SOURCE OF P			ART I - APPLICATION	
PERMIT/BREWER'S NO. (Required) (Required) (Required) Domestic Imported		 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) 			
4. SERIAL NUMBER (Required) 5. TYPE OF PRODUCT			MANChester Brewing, LLC 119 018 Turnaike Road ste 36		
YEAR	(Required)				
08 0002 DISTILLED SPIRITS MALT BEVERAGES		CONCORD, MERRIMACK COUNTY, NH 03301			
6. BRAND NAME (Requir		4			
MAHCHES te	DIEWIN.)			
The Devils				ha Turne of Addition (of the Market Lands)	
6. E-MAIL ADDRESS	(If any)		11. LAB. NO. & DATE/PRE- IMPORT NO. & DATE (If any)	18. TYPE OF APPLICATION (Check applicable box(es)) a. CERTIFICATE OF LABEL APPROVAL b. CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL	
12. NET CONTENTS	13. ALCOHOL 14. WIN		E APPELLATION (If on label)	"For sale in only" (Fill in State abbreviation) c DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL	
1 Pint 6 ounce	Nove state	9		BOTTLE CAPACITY BEFORE CLOSURE	
15. WINE VINTAGE DATE (If on label)	16. PHONE NUMBER		17. FAX NUMBER	d. RESUBMISSION AFTER REJECTION	
TO SECTION AND ADDRESS OF THE PARTY OF THE P	603-617-24		NONE	ps, celoseals, corks, etc.) OTHER THAN THE LABELS AFFIXED	
and, that the representation and that the representation containers to which these attached to an original TT 20. DATE OF APPLICATION 11-12-08	ons on the labels atta- labels will be applied B F 5100.31, Certific 21. SIGNATURE O	ched to this fil. I also certifate/Exemption APPLICANT	orm, including supplemental docume for the property of the pro	ents, truly and correctly represent the content of the complied with the conditions and instructions which are RINT NAME OF APPLICANT OR AUTHORIZED AGENT	
NUV 1 3 2000			FOR TTB USE ONLY		
PS MA MU LE	when new label thted, all of thted, all of motory inform stappear in se gible printing mpletely contra exceptions.	ADIL:	OVERNMENT VARNING STATEMENT.	EXPIRATION DATE (If any)	
AFEIX COMPLETE SET	DE LABELS BELOW	Coe Conoral	Instructions 4 6 and 7)		
AFFIX COMPLETE SET	DF LABELS BELOW	See General	4	(anchester Prewing	

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