

ID	03112-002-000081		
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DEPARTMENT OF THE TREASURY
BUREAU OF ALCOHOL, TOBACCO AND FIREARMS
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF
LABEL/BOTTLE APPROVAL
(See Instructions and Paperwork Reduction Act Notice on Back)

PART I - APPLICATION

1. VENDOR CODE (Required)	2. SERIAL NUMBER (Required)
8 0 3 8	YEAR 0 3 - 0 3
3. BRAND NAME (Required) Garlic Wine	
4. CLASS AND TYPE (Required) (Includes wine varietal designation, if applicable) Class 6 - Cooking Wine	
5. FANCIFUL NAME (If any) Minnesota Garlic	
6. PLANT REGISTRY/BASIC PERMIT NO./BREWER'S NO. (Required) MN-W-34	

7. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT OR BREWER'S NOTICE (Required) Scenic Valley Winery, Inc. 101 West Coffee Street Lanesboro, Mn. 55949
7a. MAILING ADDRESS, IF DIFFERENT Scenic Valley Winery PO Box 395 Lanesboro, Mn. 55949

8. FORMULA NO. (If any) 29	9. LAB. NO./DATE	10. NET CONTENTS 375 ml	11. PHONE NUMBER 507-467-2958	12. AGE (Distilled Spirits)	13. ALCOHOL CONTENT	14. VINTAGE (Wine products only, if stated on label)	15. FAX NUMBER 507-467-2640	16. TYPE OF APPLICATION (Check applicable box) <input type="checkbox"/> CERTIFICATE OF LABEL APPROVAL <input checked="" type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in MN only" (Fill in State abbreviation) <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)
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17. 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) EMBOSSED ON THE CONTAINER. 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.

Container size is blown into the glass net contents will not exceed 3 liters

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 appear on the reverse of an original ATF F 5100.31, Certificate/Exemption of Label/Bottle Approval.

18. DATE OF APPLICATION 4-16-03	19. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT <i>Karrie Ristau</i>	20. TYPE NAME OF APPLICANT OR AUTHORIZED AGENT Karrie Ristau
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PART III - ATF CERTIFICATE

This certificate is issued subject to applicable laws, regulations and conditions as set forth on the back of this form.

21. DATE ISSUED APR 29 2003	22. AUTHORIZED SIGNATURE, BUREAU OF ALCOHOL, TOBACCO AND FIREARMS <i>Cassandra Marin</i>
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FOR ATF USE ONLY

QUALIFICATIONS

27. FOR SALE IN MN ONLY.

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF LABELS BELOW



July 2