

OMB No. 1513-0020 (07/31/2015)

|                                 |                  |                 |  |
|---------------------------------|------------------|-----------------|--|
| <b>FOR TTB USE ONLY</b>         |                  |                 | <b>DEPARTMENT OF THE TREASURY</b><br><b>ALCOHOL AND TOBACCO TAX AND TRADE BUREAU</b><br><b>APPLICATION FOR AND</b><br><b>CERTIFICATION/EXEMPTION OF LABEL/BOTTLE</b><br><b>APPROVAL</b><br>(See Instructions and Paperwork Reduction Act Notice on Back) |
| <b>TTB ID</b><br>14196001000237 |                  |                 |  |
| <b>1. REP. ID. NO. (If any)</b> | <b>CT</b><br>906 | <b>OR</b><br>39 |  |

**PART I - APPLICATION**

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)</b><br>BR-PA-CBC-15000 |  | <b>3. SOURCE OF PRODUCT (Required)</b><br><input checked="" type="checkbox"/> Domestic<br><input type="checkbox"/> Imported  |  | <b>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)</b><br><br>CBC LATROBE ACQUISITION, LLC<br>100 33RD ST<br><br>LATROBE PA 15650<br><br>THUMP KEG BREWING CO. (Used on label)   |  |
| <b>4. SERIAL NUMBER (Required)</b><br>140007                                     |  | <b>5. TYPE OF PRODUCT (Required)</b><br><input type="checkbox"/> WINE<br><input type="checkbox"/> DISTILLED SPIRITS<br><input checked="" type="checkbox"/> MALT BEVERAGE |  |  |  |
| <b>6. BRAND NAME (Required)</b><br>THUMP KEG                                     |  |  | <b>8a. MAILING ADDRESS, IF DIFFERENT</b> |  |  |
| <b>7. FANCIFUL NAME (If any)</b><br>AGAVE AMBER ALE                              |  |  |  |  |  |
| <b>9. EMAIL ADDRESS</b><br>MDEGIER@CITYBREWERY.COM                               |  | <b>10. GRAPE VARIETAL(S) (If any)</b>  | <b>11. FORMULA</b><br>1205954            | <b>18. TYPE OF APPLICATION (Check applicable box(es))</b><br>a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL<br>b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL<br>"For sale in _____ only" (Fill in State abbreviation.)<br>c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL.<br>TOTAL BOTTLE CAPACITY BEFORE CLOSURE _____ (Fill in amount)<br>d. <input type="checkbox"/> RESUBMISSION AFTER REJECTION<br>TTB ID. NO. _____ |  |
| <b>12. NET CONTENTS</b><br>12 FL. OZ.  |  | <b>13. ALCOHOL CONTENT</b>   | <b>14. WINE APPELLATION IF ON LABEL</b>  |  |  |
| <b>15. WINE VINTAGE DATE IF ON LABEL</b>   |  | <b>16. PHONE NUMBER</b><br>(608) 785-4437  | <b>17. FAX NUMBER</b><br>(608) 785-4403  |  |  |

19. SHOW ANY INFORMATION THAT IS BLOWN, BRANDED, OR EMBOSSED ON THE CONTAINER (e.g., net contents) ONLY IF IT DOES NOT APPEAR ON THE LABELS AFFIXED BELOW. ALSO, SHOW 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. |  |  |
| <b>20. DATE OF APPLICATION</b><br>07/15/2014   | <b>21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT</b><br>(Application was e-filed) | <b>22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT</b><br>MICHAEL DEGIER |

## 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

08/15/2014

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU



## FOR TTB USE ONLY

## QUALIFICATIONS

TTB has not reviewed this label for type size, characters per inch or contrasting background. The responsible industry member must continue to ensure that the mandatory information on the actual labels is displayed in the correct type size, number of characters per inch, and on a contrasting background in accordance with the TTB labeling regulations, 27 CFR parts 4, 5, 7, and 16, as applicable.

EXPIRATION DATE (if any)

## STATUS

THE STATUS IS APPROVED.

## CLASS/TYPE DESCRIPTION

MALT BEVERAGES SPECIALITIES - FLAVORED

AFFIX COMPLETE SET OF LABELS BELOW

Image Type:

Brand (front)

Actual Dimensions: 4.54 inches W X 4.54 inches H

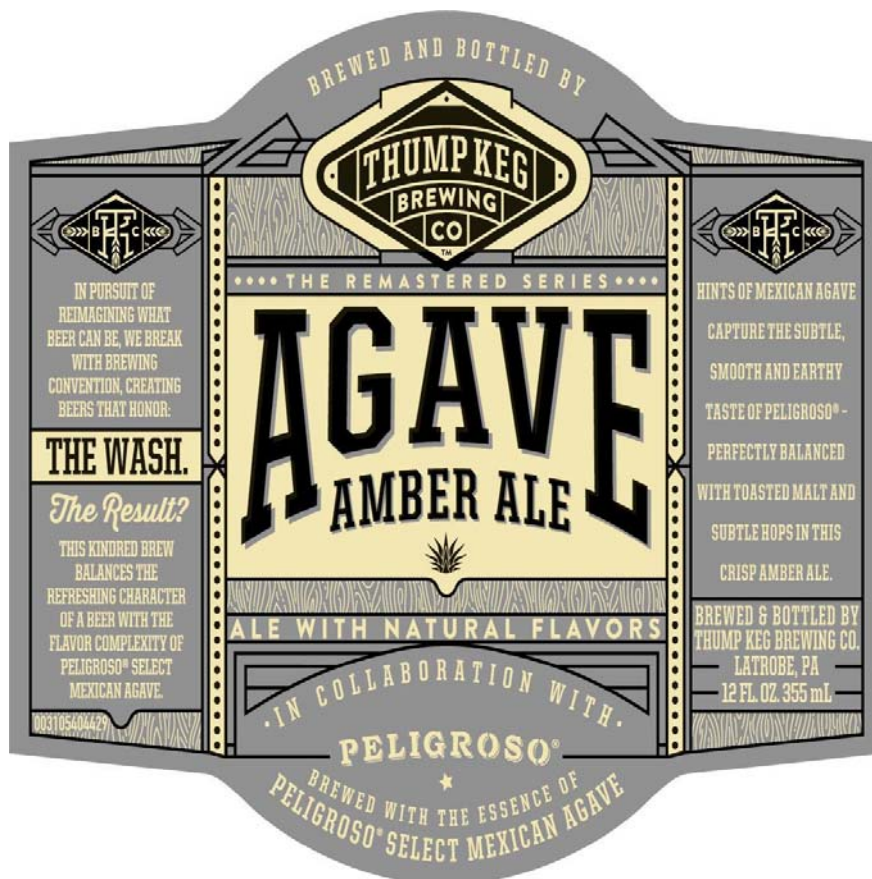


Image Type:

Back

Actual Dimensions: 2.25 inches W X 2.25 inches H



Image Type:

Neck

Actual Dimensions: 4.47 inches W X 1.65 inches H



TTB F 5100.31 (7/2012) PREVIOUS EDITIONS ARE OBSOLETE