

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

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 14196001000235			
1. REP. ID. NO. (If any)	CT 906	OR 39	

PART I - APPLICATION

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) BR-PA-CBC-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) CBC LATROBE ACQUISITION, LLC 100 33RD ST LATROBE PA 15650 THUMP KEG BREWING CO. (Used on label)
4. SERIAL NUMBER (Required) 140006	5. TYPE OF PRODUCT (Required) <input type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input checked="" type="checkbox"/> MALT BEVERAGE		
6. BRAND NAME (Required) THUMP KEG		8a. MAILING ADDRESS, IF DIFFERENT	
7. FANCIFUL NAME (If any) RYE IPA			

9. EMAIL ADDRESS MDEGIER@CITYBREWERY.COM	10. GRAPE VARIETAL(S) (If any)	11. FORMULA 1202135	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 type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID. NO. _____
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 (608) 785-4437	17. FAX NUMBER (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.		
20. DATE OF APPLICATION 07/15/2014	21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT (Application was e-filed)	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT 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

08/18/2014

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