


RECOIL INDIA PALE ALE: KEG COLLAR

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 24051001000735			
1. REP. ID. NO. (If any)	CT 902	OR 18	
PART I - APPLICATION			
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) BR-ID-20033	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) Payette Brewing Company LLC 733 S PIONEER ST Boise ID 83702	
4. SERIAL NUMBER (Required) 24REC2	5. TYPE OF PRODUCT (Required) <input type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input checked="" type="checkbox"/> MALT BEVERAGE		
6. BRAND NAME (Required) RECOIL IPA	8a. MAILING ADDRESS, IF DIFFERENT		
7. FANCIFUL NAME (If any)			
9. FORMULA	10. GRAPE VARIETAL(S) (Wine Only) N/A	14. TYPE OF APPLICATION (Check applicable box(es))	
11. WINE APPELLATION (If on label)	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"/> RE SUBMISSION AFTER REJECTION TTB ID. NO. _____		
12. PHONE NUMBER (916) 521-6485	13. EMAIL ADDRESS PAIGE@PAYETTEBREWING.COM		
15. 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.			
16. DATE OF APPLICATION 02/20/2024	17. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT (Application was e-filed)	18. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Michael Francis	
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.			
19. DATE ISSUED 02/27/2024	20. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU 		

RECOIL INDIA PALE ALE: 12OZ CAN

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TTB ID 24038001000587			
1. REP. ID. NO. (If any)	CT 902	OR 18	
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