

NAME AND ADDRESS OF APPLICANT:				FOR OFFICIAL USE			
				CERTIFICATE NUMBER			
				APPLICATION NUMBER			
				SUBMISSION NUMBER			
				DATE TO BE SUBMITTED			

SUBMISSION TYPE

ADMIN	WITH SAMPLES	SPECIAL TARRIF	ADDITIONAL SEALS	RESUBMISSION		EBIS		SINGLE VINEYARD	
				BOARD	REPRESENTATION	YES	NO	YES	NO
WS-/WSB-NUMBER BULK		TANK NUMBER	WSB-NUMBER IF ALLOCATED		DATE BOTTLED			LITERS	

ADDRESS OF PREMISES WHERE WINE WILL BE BOTTLED:	DELIVERY ADDRESS OF SEALS:

TRADE NAME OF WINE:

PARTICULARS OF INDICATIONS OR CLAIMS AS INDICATED ON LABELS			ADDITIONAL LAB PARTICULARS			
			LAB REQUEST NUMBER:			
VINTAGE			PRODUCT CLASS			
ESTATE			ADDITIONAL LAB ANALYSIS			
PRODUCTION AREA			COUNTRY OF EXPORT			
VARIETAL (S)		%	LABEL ALCOHOL		CRATE NUMBER:	
		%	PACK OF SAMPLE			
TYPE OF PRODUCT			SEAL INFORMATION			
IPW SEALS REQUIRED	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	ASCORBIC ACID ADDED	YES <input type="checkbox"/> NO <input type="checkbox"/>
					ALCOHOL REMOVED	YES <input type="checkbox"/> NO <input type="checkbox"/>

PACK TYPE	NUMBER OF SEALS REQUIRED	FOR OFFICIAL USE			
		SEALS ALLOCATED			

I, the undersigned, declare that the information furnished above, is true and correct and hereby apply for provisional approval of the above mentioned wine.

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SIGNATURE OF APPLICANT	SIGNATURE OF INSPECTOR
.....
DATE	TELEPHONE NUMBER
	CONTACT PERSON

SENSORIAL EVALUATION					
WINE EVALUATION COMMITTEE		TECHNICAL COMMITTEE		FINAL RESULT	
GREEN		GREEN		APPROVED	
				REJECTED	
RED		RED		RESUBMISSION	

.....
DATE	SIGNATURE