OMB No. 1513-0043 (04/30/2015)

1. SERIAL NUMBER

## **DEPARTMENT OF THE TREASURY**

ALCOHOL AND TOBACCO AND TAX TRADE BUREAU (TTB)

# APPLICATION AND PERMIT TO SHIP PUERTO RICAN SPIRITS TO THE UNITED STATES WITHOUT PAYMENT OF TAX

See Instructions on erse

|   |              |   |               |             |                 |             | PART                          | I - APPL   | ICATION                   | l                               |                      |                    |                                |   |
|---|--------------|---|---------------|-------------|-----------------|-------------|-------------------------------|--|---------------------------|---------------------------------|----------------------|--------------------|--------------------------------|---|
| Го  | The Secre    | etary of t  | the Tre       | asurv of F  | Puerto Rico     |             |                               |  |                           | <del>-</del>                    |                      |                    |                                | - |
| Αрі   |              | made to   |               | -           |                 | Rican ma    | anufacture                    | to the U   | nited Sta                 | tes for transfer                | from customs cu      | stody, under the   | e provision of                 | _ |
| 2. PLANT NUMBER DSP 2A. OPERATED BY 2   |              |   |               |             |                 |             |                               | 2B. AT (Number, street, city State and ZIP Code) |                           |                                 |                      |                    |                                |   |
| 3.  | DISTRIC      | T DIREC   | CTOR, I       | PUERTO F    | RICO OPERA      | TIONS, A    | LCOHOL /                      | AND TOE  | BACCO T                   | TAX AND TRAD                    | E BUREAU <i>(Add</i> | lress)             |                                | _ |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             | 4. DESCF                      | RIPTION  | OF SPIF                   | RITS                            |                      |                    |                                | _ |
|   |              |   | CONTAINER     |             |                 |             | F                             | FORMULA (If                                      |                           |                                 |                      |                    |                                |   |
|   | KIND<br>(a)  | AGE (b)   |               | MBER (c)    | KIND<br>(d)     | NUM         | RIAL<br>BERS<br>e)            | NUI  | ORM<br>MBER<br><i>(f)</i> | SERIAL NUMBE<br>(If any)<br>(g) | DATE APPROVED (h)    | PROOF <sup>1</sup> | PROOF<br>GALLONS<br><i>(j)</i> |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                | _ |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
| 5.  | PRODUC       | CED OR  | RECTI         | FIED BY     | (Name and a     | ddress)     |                               | '  |                           |                                 |                      |                    |                                |   |
| 3.  | TO BE S      | HIPPED  | BΥ <i>(</i> Λ | lame of ve  | essel)          |             |                               |  |                           | 7.                              | TO (Port of arriv    | val in U.S.)       |                                | _ |
|   |              |   |               |             | at this applica | ation and   | the statem                    | ents ther  | ein have                  | been examine                    | d by me and, to t    | ne best of my kr   | nowledge and                   | _ |
|   | DATE         | , are true, correct, and complete.  ATE 9. APPLICANT 9A. BY (Signature and Title) |               |             |                 |             |                               |  | _                         |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 | PART II     | - CERTIFI                     | CATE OF  | REVEN                     | IUE AGENT <sup>2</sup>          |                      |                    |                                |   |
|   |              |   |               |             | Puerto Rico     |             | 4b a4 1 b a                   | . :  |                           |                                 | 40 documbed these    | ain an fallaway    |                                | _ |
| 10.   |              | ne stater<br>KIND (   |               | n Part I ar | e true and co   | rrect and   |                               | ONTAINE  |                           | auged the spiri                 | ts described ther    |                    |                                | _ |
|   | SPIRITS      |   |               | NUMBER KIND |                 |             | SERIAL NUMBERS                |  |                           |                                 | PROOF<br>GALLONS     |                    |                                |   |
| (a)   |              |   |               | (b)         | )               | (d)         |                               |  |                           | (e)                             |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |
| 11. SERIAL NUMBERS OF GOVERNMENT SEALS USED <sup>3</sup> 12. DATE 13.                       |              |   |               |             |                 |             | 13.                           | SIGNATURE OF REVENUE AGENT                       |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             | PART III                      | - DEDM   | T TO SL                   | IIP                             |                      |                    |                                | _ |
| Pei   | rmit is here | eby grant   | ted to t      | he applica  | nt designated   | d in item 1 |                               |  |                           |                                 | escribed above       |                    |                                | _ |
| Permit is hereby granted to the applicant designated in item 10 to ship to the Ur  14. DATE |              |   |               |             |                 |             | 15A. BY (Signature and Title) |  |                           |                                 |                      |                    |                                |   |
|   |              |   |               |             |                 |             |                               |  |                           |                                 |                      |                    |                                |   |

TTB F 5110.31 (05/2009)

| PART IV - CERTIFICATE OF CUSTOMS AND BORDER PROTECTION OFFICER AT PORT OF ARRIVAL IN THE UNITED STATES           |             |  |   |                                    |  |  |  |  |  |  |  |
|--|-------------|--|---|------------------------------------|--|--|--|--|--|--|--|
| I certify that the spirits described before were received and have been inspected and were released, as follows: |             |  |   |                                    |  |  |  |  |  |  |  |
| 16. RESULTS  | OF INSPEC   | CTION (See instruction 6)  | 17. PROOF GALLONS RELEASED  |                                    |  |  |  |  |  |  |  |
|  |             |  | 20. REMARKS   |                                    |  |  |  |  |  |  |  |
| 18. PORT OF  | 19. SE      | EALS ON CONVEYANCE INTACT ON ARRIVAL <sup>4</sup>                |   |                                    |  |  |  |  |  |  |  |
|  | YE          | ES NO  |   |                                    |  |  |  |  |  |  |  |
| 21. DATE   | 22. S       | 22. SIGNATURE AND TITLE OF CUSTOMS AND BORDER PROTECTION OFFICER |   |                                    |  |  |  |  |  |  |  |
|  |             |  |   |                                    |  |  |  |  |  |  |  |
|  |             |  | CATE OF RECEIPT   |                                    |  |  |  |  |  |  |  |
| 23. GAUGE O  | F SPIRITS F | RECEIVED IN BULK (Çc@:/Ác@e) Áŋ Ááæ;¦^ • ÉÁá;ˇ{•ÉÁ               | 24. UNDER PENALTIES OF PERJURY, I DECLARE THAT THE SPIRITS DESCRIBED WERE RECEIVED, EXCEPT AS NOTED ON THIS FORM OR ON ACCOMPANYING PACKAGE |                                    |  |  |  |  |  |  |  |
| TANK NO.   | PROOF       | OTHER ELEMENTS OF GAUGE  | PROOF GALLONS   | GAUGE RECORD, AND WERE RECORDED IN |  |  |  |  |  |  |  |
|  |             |  |   | MY:                                |  |  |  |  |  |  |  |
|  |             |  |   | PRODUCTION PROCESSING              |  |  |  |  |  |  |  |
|  | G           | SAIN LOSS  |   | ACCOUNT ACCOUNT                    |  |  |  |  |  |  |  |
| 25. DATE REC   | CEIVED 26   | . PROPRIETOR   | STORAGE ACCOUNT   |                                    |  |  |  |  |  |  |  |

#### **FOOTNOTES**

#### **INSTRUCTIONS**

- 1. GENERAL. The consignor must make application on TTB F 5110.31 (original and 5 copies) for each consignment. Separate applications must be filed for shipments in barrels, drums, or similar packages, and for shipments in bulk conveyances. Only spirits produced under one formula may be shown on the same TTB F 5110.31. The serial number shown in Item 1 must be prefixed by the last two digits of the calendar year, e.g., "09-1."
- PART I. The consignor must complete Part I of TTB F 5110.31 and deliver all copies to the revenue agent. The address of the District Diretor, Puerto Rico Operations of the consignee's region must be entered in item 3. Contact 1-877-882-3277 for information on where to send this form.
- 3. PART II. The revenue agent must determine that the spirits are properly described in Part I and must gauge the spirits. After executing the certification in Part II, the revenue agent will retain one copy of TTB F 5110.31 and of the package gauge record, if any, and forward the remaining copies to the Secretary.
- 4. PART III. If the application is in order, the Secretary will complete Part III, retain one copy of TTB F 5110.31 and any accompanying package gauge record and return the remaining copies of each form to the consignor.

- 5. DISPOSITION BY CONSIGNOR. On receipt of the approved forms from the Secretary, the consignor will retain one copy of TTB F 5110.31 and any accompanying package gauge records, dispatch one copy of each on the vessel concerned for the guidance of the Customs officer who will inspect the cargo at the port of arrival in the United States, and forward the remaining copies of each, by mail, to the District Director of Customs at the port of arrival in the United States.
- 6. PART IV. On receipt of all copies of the TTB F 5110.31 and any related package gauge record, the Customs officer must inspect the shipment and report the results on TTB F 5110.31, Part IV. If the seals on bulk containers are intact, the shipment will be released. If the seals are not intact, they must, before release of the shipment, be replaced by Customs seals. Each barrel, drum, or similar package, which appears to have sustained a loss, must be weighed and reported on the package gauge record in triplicate. On completing the inspection, the Customs officer will execute his certification on all copies of TTB F 5110.31. He/She will retain one copy of TTB F 5110.31 and any related package gauge record. On release of the spirits, the Customs officer will forward the original and remaining copies of each form to the consignee.
- PART V. The consignee will complete Part V of TTB F 5110.31, retain the copy and the copies of each package gauge record and forward the original of each form to the Director, TTB National Revenue Center.

### PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection is used to make a determination of the eligibility of the person to withdraw and use taxable commodities on which tax has not been paid. The information requested is mandatory by statute (26 U.S.C. 5314 and 7652).

The estimated average burden associated with this collection of information is 45 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to the Reports Management Officer, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau, 1310 G Street, NW, Suite 200-E, Washington, DC 20220.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current, valid OMB control number.

<sup>&</sup>lt;sup>1</sup>Show proof only if spirits are in bulk containers other than barrels, drums, or similar packages.

<sup>&</sup>lt;sup>2</sup>If spirits are in barrels, drums, or similar packages, prepare a package gauge record in quintuplicate.

<sup>&</sup>lt;sup>3</sup>If in tanks or vans.

<sup>4</sup>lf seals on tanks or vans are not intact, explain under "Remarks" and record the serial number(s) of any Customs seal(s) affixed.