

INDIANA REDUCED IGNITION PROPENSITY STANDARD FOR CIGARETTES MANUFACTURER'S APPLICATION FORM

Application Type 3YearRenewal

Application Date 04/24/2024

Manufacturer Details

Company Name R.J. Reynolds Tobacco Co.
Address 401 North Main Street
 Winston-Salem NC 27101

Phone 3367410026 Fax

Contact Details

Contact Person Erin Dotson
Title Scientist
Email sneade@rjrt.com

Receipt Id 1 Phone 3367410026 Fax

Cigarette Details

<u>Brand</u>	<u>Style</u>	<u>Length</u> <u>(mm)</u>	<u>Circumference.</u> <u>(mm)</u>	<u>Marking</u>	<u>Flavor/Filter</u> <u>Package</u>
Misty	Blue Slim 100	100	23.1	FSC	Non-Menthol Filter Hard Pack
Misty	Blue Slim 120	120	23.1	FSC	Non-Menthol Filter Hard Pack
Misty	Menthol Green Slim 100	100	23.1	FSC	Menthol Filter Hard Pack
Misty	Menthol Green Slim 120	120	23.1	FSC	Menthol Filter Hard Pack
Misty	Menthol Silver Slim 100	100	23.1	FSC	Menthol Filter Hard Pack
Misty	Rose Slim 100	100	23.1	FSC	Non-Menthol Filter Hard Pack

**INDIANA REDUCED IGNITION PROPENSITY STANDARD FOR CIGARETTES
MANUFACTURER'S APPLICATION FORM**

A. The undersigned manufacturer certifies, under the penalty of perjury, it is a manufacturer (as defined in IC 22-14-7-4) and is in full compliance with provisions of Indiana's Reduced Ignition Propensity Standards for Cigarettes law as contained in IC 22-14-7. Said manufacturer further certifies that each cigarette has been tested as required under IC 22-14-7-13 or IC 22-14-7-15, and each cigarette meets the performance standard in IC 22-14-7-13(c) or IC 22-14-7-15.

B. The manufacturer further certifies, under the penalty of perjury, that it will timely provide a copy of each certification to each wholesale dealer (as defined in IC 22-14-7-11) to whom it sells cigarettes and will timely provide sufficient copies of an illustration of the package marking used by the manufacturer for each retail dealer to which the wholesale dealers or agents sell cigarettes.

In Witness Whereof, I have set my hand to be legally bound as the manufacturer making this certification under the laws of the State of Indiana this _____ day of _____, 20 ____.

By: _____

Printed Name: _____

Title: _____