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 Phone 3367410026 Fax **Cigarette Details** Flavor/Filter **Brand** Length Circumference. Style **Package** (mm) (mm) Marking Classic 100 Soft Pack Tareyton 100 24.5 **FSC** Non-Menthol Filter Soft Pack Classic Soft Pack 85 **FSC** Non-Menthol Tareyton 24.5 Filter Soft Pack 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: