

1543-9

5/13/2010

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
PREVENTION, PESTICIDES
AND TOXIC SUBSTANCES

Ms. Louise A. Chartier
W.F. Young, Inc.
302 Benton Drive
East Longmeadow, MA 01028

MAY 13 2010

Subject: Label Notification(s) for Pesticide Registration 2007-4

Dear Ms. Chartier:

The Agency is in receipt of your Application(s) for Pesticide Notification under Pesticide Registration Notice (PRN) 2007-4 dated for April 14, 2010 for:

EPA Registration Number: 1543-9 Absorbine Concentrated Fly Repellent

The Registration Division (RD) has conducted a review of this request for applicability Under PRN 2007-4 and finds that the label change(s) requested falls within the scope of PRN-2007-4. The label has been date-stamped "Notification" and will be placed in our records.

Please be reminded that 40 CFR Part 156.140(a)(4) requires that a batch code, lot number, or other code identifying the batch of the pesticide distributed and sold be placed on non-refillable containers. The code may appear either on the label (and can be added by non-notification/PR Notice 98-10) or durably marked on the container itself.


If you have any questions, please contact Melody Banks on 703 305-5413.

Sincerely,

A handwritten signature in cursive script, appearing to read "Richard Gebken".

Richard Gebken
Product Manager
Insecticide Branch
Registration Division (7504P)

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 United States Environmental Protection Agency Office of Pesticide Programs (H7505C) Washington, DC 20460	Application for Pesticide: <table border="1" style="margin-left: 20px;"> <tr><td style="width: 20px; height: 20px;"><input type="checkbox"/></td><td style="padding: 2px;">Registration</td></tr> <tr><td style="width: 20px; height: 20px;"><input type="checkbox"/></td><td style="padding: 2px;">Amendment</td></tr> <tr><td style="width: 20px; height: 20px;"><input checked="" type="checkbox"/></td><td style="padding: 2px;">Other</td></tr> </table>	<input type="checkbox"/>	Registration	<input type="checkbox"/>	Amendment	<input checked="" type="checkbox"/>	Other	OPP Identifier Number
<input type="checkbox"/>	Registration							
<input type="checkbox"/>	Amendment							
<input checked="" type="checkbox"/>	Other							

Section I		
1. Company/Product Number W. F. Young, Inc./1543-9	2. Product Manager Richard Gepken	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) W.F. Young, Inc./Absorbine Concentrated Fly Repellent	PM# 10	
5. Name and Address of Applicant (include ZIP Code) W. F. Young, Inc. 302 Benton Drive East Longmeadow, MA 01028		6 Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labelling to: EPA Reg. No. <u>1543-9</u> Product Name <u>Absorbine Concentrated Fly Repellent</u>
<input type="checkbox"/> Check if this is a new address		


Section II	
<input type="checkbox"/> Amendment - Explain below <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed label in response to Agency letter dated _____ <input type="checkbox"/> "ME TOO" Application. <input type="checkbox"/> Other - explain below

NOTIFICATION
MAY 13 2010

Explanation: Use additional page(s) if necessary. (For section I and Section II)

Notification of label change per PR Notice 2007-4. This notification is consistent with the guidance in PR Notice 2007-4 and the requirements of EPA's regulations at 40 CFR §§156.10, 156.140, 156.144, 156.146 and 156.156. No other changes have been made to the labeling or the Confidential Statement of Formula for this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if the amended label is not consistent with the requirements of 40CFR §§156.10, 156.140, 156.144, 156.146 and 156.156, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA

Section III				
1. Material in Which This Product Will Be Packaged:				
Child-Resistant Packaging <input type="checkbox"/> Yes * <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	Water-Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input checked="" type="checkbox"/> Other (Specify) <u>HDPE</u>	
* Certification must be submitted.		If "YES," Unit package wgt _____ No. per container _____	If "YES," Package wgt _____ No. per container _____	
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) of Retail Container 32 oz.		5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product
6. Manner in Which Label Is Affixed To Product <input type="checkbox"/> Lithographed <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled				

Section IV		
1. Contact Point (Complete items directly below for identification of the individual to be contacted, if necessary, to process this application)		
Name Louise A. Chartier	Title Registrations Manager	Telephone No. (include Area Code) 413-526-9999
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		6 Date Application Received (Stamped)
2. Signature 		3. Title Registrations Manager
4. Typed Name Louise A. Chartier		5. Date April 14, 2010

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W. F. Young, Inc. 302 Benton Drive T: (413) 526-9999
P. O. Box 1990 (800) 628-9653
East Longmeadow F: (413) 526-8990
MA, USA 01028-5990 www.wfyoung.com



April 14, 2010

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504P)
U.S. Environmental Protection Agency
Room S-4900
One Potomac Yard
2777 South Crystal Drive
Arlington, VA 22202-4501

Via Courier

Subject: W. F. Young, Inc.
Absorbine Concentrated Fly Repellent
EPA Registration No. 1543-9
NOTIFICATION

Dear Mr. Gebkin:

W. F. Young, Inc. is submitting this notification for the product Absorbine Concentrated Fly Repellent EPA. Reg. No. 1543-9. This notification consists of label language adopting the exact wording set forth in the regulations describing the container as refillable or nonrefillable.

This notification is not subject to PRIA. Enclosed is the required form 8570-1 along with the product label with changes highlighted.

Please contact me should you have any questions regarding this submission.

Sincerely,

Louise A. Chartier
Registrations Manager

APR 32 2010

Absorbine® Concentrated Fly Repellent
Master Label
Front Label

Absorbine®
Concentrated Fly Repellent
Repels for 2-3 days
The Horse World's Most Trusted Name ®

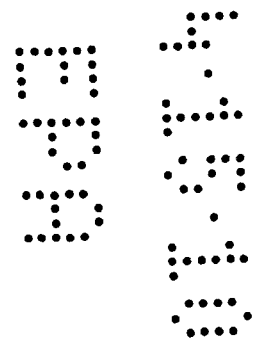
ACTIVE INGREDIENTS:

Butoxypropylene Glycol	11.0000%
Resmethrin* [5-(Phenylmethyl)-3Furanyl]	.5540%
Methyl 2,2-Dimethyl-3-(2-Methyl-1-Propenyl) Cyclopropanecarboxylate	
Related Compounds	.0754%
Inert Ingredients	88.3706%

*Cis/Trans Isomers Ratio: Max. 30% (±) Cis and Min. 70% (±) Trans.

KEEP OUT OF REACH OF CHILDREN
CAUTION
SEE BACK PANEL FOR ADDITIONAL PRECAUTIONARY STATEMENTS

32 fl oz (946 mL)



Absorbine® Concentrated Fly Repellent
Master Label
Back Label

NOTIFICATION

MAY 13 2010

Absorbine®
The Horse World's Most Trusted Name®

**FOR MAXIMUM PROTECTION
APPLY 4 TO 6 OZ. OF DILUTED SOLUTION TO ANIMAL**

DIRECTIONS FOR USE

It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

FOR USE ON HORSES

Kills and repels Stable Flies, Horn Flies, House Flies, Face Flies, Horse Flies, Deer Flies, Bot Flies, Mosquitos, Ticks and Gnats.

SHAKE WELL BEFORE DILUTING & DURING APPLICATION

Dilute Absorbine Concentrated Fly Repellent before applying to horse. Mix 7 parts water to 1 part concentrate. 4 oz. of concentrate makes 1 quart of ready to use repellent.

TO APPLY: First, remove excess dirt and dust by brushing.

WIPE ON USE: Dampen a soft cloth with diluted solution and rub over hair.

SPRAY MIST: Apply spray mist to horse's coat. Pay particular attention to legs, shoulders and neck, avoiding eyes with spray or wipe. For facial area, wipe on only. For maximum protection apply 4-6 oz. of diluted solution to animal. Repeat every 2-3 days, if necessary.

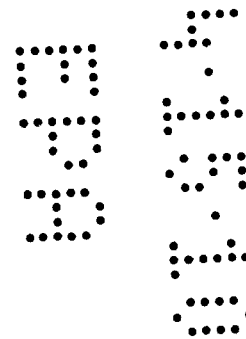
Buyer assumes all risks of use, storage or handling of this material not in strict accordance with directions given herewith.

STORAGE AND DISPOSAL STATEMENTS

PESTICIDE STORAGE: Store in a cool area above 32°F and protect from freezing.
Store in original container only in a locked storage area.

PESTICIDE DISPOSAL AND CONTAINER HANDLING:

- Nonrefillable container: Do not reuse or refill this container.
- If Empty: Place in trash or offer for recycling if available.
- If partly filled: Call your local solid waste agency for disposal instructions.
- Never place unused product down any indoor or outdoor drain.



PRECAUTIONARY STATEMENTS

CAUTION

HAZARDS TO HUMANS & DOMESTIC ANIMALS: Harmful if swallowed. Avoid contamination of feed and foodstuffs. Avoid contact with eyes. Use on Show, Race, Work, or Pleasure horses only. Do not use on horses intended for slaughter.

ENVIRONMENTAL HAZARD: This product is toxic to fish. Keep out of lakes, streams or ponds. Do not apply where runoff is likely to occur. Do not contaminate water when disposing of equipment washwaters. Apply this product only as specified on this label.

FIRST AID	
If swallowed	<ul style="list-style-type: none"> • Call poison control center or doctor immediately for treatment advice. • Have person sip a glass of water if able to swallow. • Do not induce vomiting unless told to do so by the poison control center or doctor. • Do not give anything by mouth to an unconscious person.
If in eyes	<ul style="list-style-type: none"> • Hold eye open and rinse slowly and gently with water for 15- 20 minutes. • Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. • Call a poison control center or doctor for further treatment advice.
Have the product container or label with you when calling a poison control center or doctor, or going for treatment.	

EPA Est. No.
EPA Reg. No. 1543- 9

Distributed by:
W. F. YOUNG, INC. 302 Benton Drive
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