

4-456

5/13/2010

1 of 4



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

**MAY 13 2010**

OFFICE OF CHEMICAL SAFETY  
AND POLLUTION PREVENTION

Nicole Russell  
Pesticide Compliance Specialist  
Bonide Products, Inc.  
6301 Sutliff Road  
Oriskany, NY 13424

RE: Product Name: Bonide Tomato & Blossom Set Spray  
EPA Reg. No: 4-456  
Application for Label Notification Dated April 29, 2010 to update the storage and disposal statement per PR Notice 2007-4

Dear Ms. Russell:

The Biopesticides and Pollution Prevention Division is in receipt of your application for Notification under Pesticide Registration (PR) Notice 98-10 dated above. A preliminary screen of this request has been conducted for its applicability under PR Notice 98-10 and it has been determined that the action(s) requested falls within the scope of PR Notice 98-10. Our records have been duly noted, and the label submitted with this application has been stamped "Notification Accepted" and will be placed accordingly in our records.

If you have any questions concerning this action, please feel free to contact Ms. Menyon Adams at (703) 347-8496 or email at [adams.menyon@epa.gov](mailto:adams.menyon@epa.gov).

Sincerely,

*Linda Hollis*  
Linda Hollis, Chief  
Biochemical Pesticides Branch  
Biopesticides and Pollution Prevention  
Division (7511P)

2014



United States  
**Environmental Protection Agency**  
 Washington, DC 20460

Registration  
 Amendment  
 Other

OPP Identifier Number

**Application for Pesticide - Section I**

|   |   |   |
|---|---|---|
| 1. Company/Product Number<br>4-456  | 2. EPA Product Manager  | 3. Proposed Classification<br><input type="checkbox"/> None <input type="checkbox"/> Restricted |
| 4. Company/Product (Name)<br>Bonide Xtra Set Blossom Spray  | PM# 91  |   |
| 5. Name and Address of Applicant (Include ZIP Code)<br>Bonide Products, Inc.<br>6301 Sutliff Road<br>Oriskany, NY 13424 Attn: Nicole Russell<br><input type="checkbox"/> Check if this is a new address | 6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i), my product is similar or identical in composition and labeling to:<br>EPA Reg. No. _____<br>Product Name _____ |   |

**Section - II**

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Amendment - Explain below.                            | <input type="checkbox"/> Final printed labels in response to Agency letter dated _____ | <b>Notification Accepted</b><br>Date: 13 May 10<br>Reviewer: M. Adams |
| <input type="checkbox"/> Resubmission in response to Agency letter dated _____ | <input type="checkbox"/> "Me Too" Application.   |   |
| <input checked="" type="checkbox"/> Notification - Explain below.              | <input type="checkbox"/> Other - Explain below.  |   |

**Explanation:** Use additional page(s) if necessary. (For section I and Section II.)  
 NOTIFICATION: Changes to Storage and Disposal section in accordance to PR Notice 2007-4.  
 This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the CSF of this product. Bonide Products, Inc. understands that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA and further understands that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and Bonide Products, Inc. may be subject to enforcement action and penalties under section 12 and 14 of FIFRA.

**Section - III**

|   |  |   |  |   |   |
|---|--|---|--|---|---|
| 1. Material This Product Will Be Packaged In:   |  |   |  | 2. Type of Container  |   |
| Child-Resistant Packaging<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | Unit Packaging<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Water Soluble Packaging<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If "Yes" Unit Packaging wgt. No. per container |   | <input checked="" type="checkbox"/> Metal<br><input type="checkbox"/> Plastic<br><input type="checkbox"/> Glass<br><input type="checkbox"/> Paper<br><input type="checkbox"/> Other (Specify) _____ |
| * Certification must be submitted   |  | If "Yes" Package wgt. No. per container   |  |   |   |
| 3. Location of Net Contents Information<br><input checked="" type="checkbox"/> Label <input type="checkbox"/> Container                               |  | 4. Size(s) Retail Container<br>8 fl. oz.; 1 quart   |  | 5. Location of Label Directions<br><input checked="" type="checkbox"/> on label |   |
| 6. Manner in Which Label is Affixed to Product<br><input checked="" type="checkbox"/> Lithograph Paper glued Stenciled <input type="checkbox"/> Other |  |   |  |   |   |

**Section - IV**

|  |   |  |
|--|---|--|
| 1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)  |   |  |
| Name<br>Nicole Russell   | Title<br>Pesticide Compliance Specialist    | Telephone No. (Include Area Code)<br>315-736-8231 ext. 230 |
| <b>Certification</b><br>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<br>(Stamped)                  |
| 2. Signature<br><i>Nicole Russell</i>  | 3. Title<br>Pesticide Compliance Specialist |  |
| 4. Typed Name<br>Nicole Russell  | 5. Date<br>4/29/10                          |  |



