

239-2491

10-19-2001

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Please read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0060, Approval expires 2-28-95



United States
Environmental Protection Agency
Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

| | | |
|---|--|--|
| 1. Company/Product Number 239-2491 | 2. EPA Product Manager James Tompkins | 3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted |
| 4. Company/Product (Name) ORTHO Brush-B-Gon Brush Killer | PM# 25 | |
| 5. Name and Address of Applicant (Include ZIP Code) The Scotts Company d/b/a The ORTHO Group 14111 Scottslawn Rd Marysville, OH 43041 <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: EPA Reg. No. _____ Product Name _____ | |

Section - II

| | | |
|--|---|--|
| <input type="checkbox"/> Amendment - Explain below. | <input checked="" type="checkbox"/> Final printed labels in response to Agency letter dated _____ | NOTIFICATION OCT 19 2001 |
| <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.)

The ORTHO Group is submitting a notification of "minor label revisions" per PR Notice 98-10. 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 confidential statement of formula of 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 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 I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

Section - III

| | | | | | |
|---|--|---|------------------------|--|---|
| 1. Material This Product Will Be Packaged In: | | | | 2. Type of Container | |
| Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Unit Packaging <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | <input type="checkbox"/> Metal | <input checked="" type="checkbox"/> Plastic |
| * Certification must be submitted | | If "Yes" Unit Packaging wgt. 16 fl oz | No. per container 1 | <input type="checkbox"/> Glass | <input type="checkbox"/> Paper |
| | | If "Yes" Package wgt | No. per container | <input type="checkbox"/> Other (Specify) _____ | |
| 3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container | | 4. Size(s) Retail Container | | 5. Location of Label Directions | |
| 6. Manner in Which Label is Affixed to Product | | <input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> 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 Charles T. Levey | Title Manager, Federal Registrations | Telephone No. (Include Area Code) 937-644-7696 |
| 2. Signature | | 6. Date Application Received (Stamped) |
| 3. Title Manager, Federal Registrations | | |
| 4. Typed Name Charles T. Levey | 5. Date October 4, 2001 | |
| 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. | | |

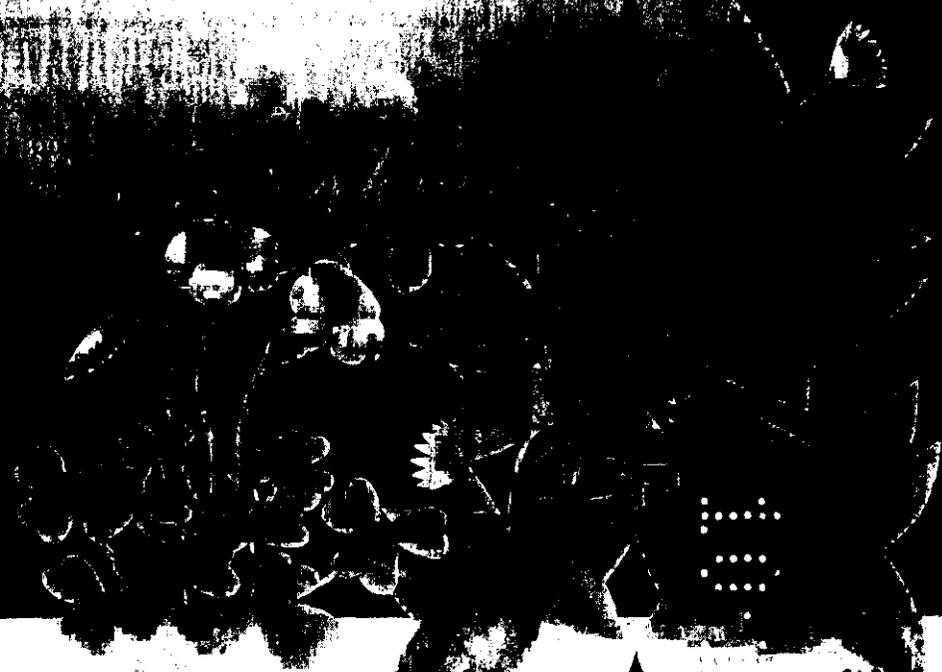
ORTHO®

*Kills Chickweed, Clover, Oxalis
and Other Tough Weeds*

WEED B GON

**TOUGH WEED KILLER
FOR LAWNS**

CONCENTRATE



**NET
16 FL OZ (1 PT)
473 mL**



**NOTIFICATION
OCT 19 2001**



LF010907000

COMBINE WITH WEED-B-GON® WEED KILLER FOR LAWNS

To quickly kill all major broadleaf weeds in lawns. See the label of Weed-B-Gon Weed Killer for Lawns for more than 80 broadleaf weeds. Follow all directions and precautions on both product labels.

MIXING INSTRUCTIONS for COMBINATION SPRAY

Amount to Use: 1/2 fl oz (1 Tbs) of Weed-B-Gon Tough Weed Killer for Lawns + 1 fl oz (2 Tbs) Weed-B-Gon Weed Killer for Lawns per gallon of water for each 200 sq ft.

When using Ortho® Dial 'n Spray® :



1. Set dial to 1 1/2 oz.
2. Add 3 fl oz (6 Tbs) of Weed-B-Gon Tough Weed Killer for Lawns + 6 fl oz (12 Tbs) of Weed-B-Gon Weed Killer for Lawns to sprayer jar.
DO NOT add water.
3. Spray evenly over 1,200 sq ft until jar is empty.

1 Tablespoon (Tbs) = 3 teaspoons (tsp)

1 fl oz = 2 Tbs

STORAGE AND DISPOSAL

STORAGE: Store in original container in a safe place.

DISPOSAL: Do not reuse container. Securely wrap partially filled or empty container in newspaper and put in trash.

ORTHO® WEED-B-GON®

TOUGH WEED KILLER FOR LAWNS

OPEN
Resealable Label
for Directions &
Precautions

Special formula for control of tough lawn weeds. Weed-B-Gon Tough Weed Killer for Lawns kills weeds right down to the roots without harming lawns.

PRODUCT FACTS

Treats 3,200 sq ft (approx. size of 1 1/2 tennis courts)

KILLS WEEDS

Chickweed, Clover, Creeping Charlie, Ground Ivy, Oxalis, Speedwell (Veronica), Wild Violet & other tough lawn weeds



WHERE TO USE

ON LAWNS 
Bent, Buffalo, Fescues, Kentucky Blue, Rye & Zoysia

AMOUNT TO USE

1 fl oz (2 Tbs) / gal of water / 200 sq ft



Questions, Comments or Medical Information
call 1-800-225-2883 www.ortho.com

Specially formulated for residential use.

Manufactured for
The ORTHO Group
P.O. Box 1749 Columbus, OH 43216
Form LB01100U000
EPA Reg. No. 239-2491
EPA Est. 239-1A-3¹, 58996-MO-1A
Superscript is first letter of lot number
Made in USA



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DIRECTIONS FOR USE

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

WEEDS CONTROLLED



Black Medic, Carolina Geranium, Chickweed (Common & Mouseear), Cinquefoil, Clover, Creeping Charlie, Dandelion, Evening Primrose, Florida Pusley, Ground Ivy, Ironweed, Lespedeza, Morningglory (Bindweed), Oxalis, Pennywort, Plantains, Red Sorrel, Speedwell (Veronica), Spurge (Garden & Spotted), Thistle, Wild Onion, Wild Violet & Yellow Rocket

MIXING INSTRUCTIONS

Amount to Use: 1 fl oz (2 Tbs) per gallon of water for each 200 sq ft



When using Ortho® Dial 'n Spray®:

1. Set dial to 1 oz.
2. Add 6 fl oz (12 Tbs) to sprayer jar. **DO NOT** add water.
3. Spray evenly over 1,200 sq ft until jar is empty.

1 Tablespoon (Tbs) = 3 teaspoons (tsp)

1 fl oz = 2 Tbs

FOR BEST RESULTS

MEASURE



- **To treat entire lawn:** Use a tank or hose-end sprayer. Measure lawn. Calculate square feet by multiplying length times width. Spray evenly over measured area.
- **To spot treat** individual weeds in lawns: Use a tank sprayer.

MOW



Avoid mowing 1 to 2 days after application.

WATER



- If lawn needs watering, water thoroughly before application.
- Rain or watering 24 hours after application will not wash away effectiveness.

WHEN TO APPLY



- **Spray when:**
 - weeds are actively growing
 - temperature is below 90°F
 - air is calm to prevent drift to desirable plants
- Reapplication can be made in 2 to 3 weeks if necessary.
- Newly seeded lawn can be sprayed after second mowing.

IMPORTANT

Not for use on Bahia, Bermuda, Centipede, Kikuyu or St. Augustine lawns. Not for use on or around fruits, vegetables or flowers. If an ornamental shrub or tree is in the lawn, keep spray off foliage and exposed roots.

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PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS & DOMESTIC ANIMALS

CAUTION: Causes moderate eye irritation. Avoid contact with eyes or clothing. Avoid breathing spray mist. Wash thoroughly with soap and water after handling.



People and pets may enter treated area after spray has dried.

FIRST AID: IF IN EYES: Flush with plenty of water. Call a physician if irritation persists. **Note to Physician:** Emergency Information call 1-800-225-2883.

ENVIRONMENTAL HAZARDS: Do not apply directly to any body of water. Do not pour product or rinse water down any drain.

NOTICE: Buyer assumes all risks of use, storage or handling of this product not in accordance with directions.

The ORTHO Guarantee

If for any reason you are not satisfied with this product, mail us proof of purchase to obtain a full refund of your purchase price.

PRESS TO RESEAL



Questions, Comments or Medical Information
call 1-800-225-2883

www.ortho.com 

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P.O. Box 1749
Columbus, OH 43216
Form LB01100U000
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EPA Est. 239-IA-3, 58996-MO-1A
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