239-2657

9-19-2002

	9-11-300				
Please read instructions on reverse before completing form.  United State Environmental Protect Washington, DC	tion Agency	R	egistration mendment ther	O. Approval expires 2-29/9	
Applica	tion for Pesticide - S	ection I			
1. Company/Product Number 239-2657	l l	2. EPA Product Manager  James Tompkins  3. Proposed Classification  None Restricted			
Company/Product (Name)     ORTHO GroundClear Total Vegetation Killer	PM# 25				
5. Name and Address of Applicant (Include ZIP Code)  The Scotts Company d/b/a The ORTHO Group P.O. Box 1749  Columbus, OH 43216	(b)(i), my produ to: EPA Reg. No	EPA Reg. No.			
Check if this is a new address	Product Nam	e			
	Section - II	<del>-</del>		- TION	
Amendment - Explain below.  Resubmission in response to Agency letter dated  Notification - Explain below.	Agency "Me To	Final printed labels in repsonse to NOTIFICATION Agency letter dated "Me Too" Application.  SEP 1 9 2002  Other - Explain below.			
Explanation: Use additional page(s) if necessary. (For sec The ORTHO Group is submitting a notification of "minor label re 98-10 and EPA regulations at 40 CFR 152.46, and no other chaunderstand that it is a violation of 18 U.S.C. Sec. 1001 to willfull consistent with the terms of PR Notice 98-10 and 40 CFR 152.4 penalties under sections 12 and 14 of FIFRA.	evisions" per PR Notice 98-10. TI inges have been made to the lab ly make any false statement to EF	eling or the co PA. I further u	onfidential statement of understand that if this	of formula of this product. I notification is not	
	26CHOH - III	-			
1. Material This Product Will Be Packaged In:  Child-Resistant Packaging  Yes  No  * Certification must be submitted  1 qt  Unit Packaging  Ves  No. per Containe	Water Soluble Packaging Yes No If "Yes" No. p	er	. Type of Container  Metai Plastic Glass Paper Other (S	Specify)	
3. Location of Net Contents Information 4. Size(s)  Label Container	Retail Container	5. Local	tion of Label Direction	ons	
Pa	per glued enciled				
	Section - IV				
1. Contact Point /Complete items directly below for identific	ation of individual to be contact	ed, if necess	ery, to process this	application.)	
Name Deena Newell	Title Registration Specialist			Telephone No. (Include Area Code)	
Certify described the statements I have made on this form a lacknowledge that any knowlingly false or misleading both under applicable law.				6. Datc Application Received (Stamped)	
2. Signature THE SCOTTS COMPANY BY DECOME Newell	3. Title  Registration Specialist		****	• • • • • • • • • • • • • • • • • • • •	
4. Typed Name	5. Date				

Deena Newell

September 10, 2002

NOTIFICATION

SEP 1 9 2002

C005694R000

and Subsidiaries



September 10, 2002

Mr. James A. Tompkins, PM-25 U. S. Environmental Protection Agency Office of Pesticide Programs Registration Division, H7505C Ariel Rios Building 1200 Pennsylvania Avenue, N.W. Washington, DC 20460

RE:

ORTHO GroundClear Total Vegetation Killer (EPA Reg. No. 239-2657)

Notification of Minor Label Revision

Dear Mr. Tompkins:

Please find enclosed an application for a minor label revision for the above referenced product. We wish to add the following claim as a violator on the front of the package: "NO WEEDS FOR UP TO 1 YEAR!" This claim is very similar to ones already approved for this product.

## Please find attached:

- 1) EPA Application Form 8570-1
- 2) A copy of the printed violator that will appear at the top of the existing label on the front of the package

Please call me at 937.644.7314 if you have any questions regarding this submission. Thank you for your assistance in this matter.

	Sincerely,		6 * 4 ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢ ¢
	THE SCOTTS COMPAN d/b/a THE ORTHO GRO		6 ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
Ву:	Deena Newell Registration Specialist	<del></del>	••••
		•-	•••••