

9-3-96 241-314 10/16

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 11-30-93

	United States Environmental Protection Agency Office of Pesticide Programs (H7505C) Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number 208015
	Application for Pesticide:		

Section I

1. Company/Product Number 241-314	2. EPA Product Manager K. Whitby	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) COUNTER® CR® systemic insecticide nematicide.	PM# 14	
5. Name and Address of Applicant (Include ZIP Code) American Cyanamid Company Agricultural Research Center P.O. Box 400 Princeton, NJ 08543-0400 <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 type="checkbox"/> Final printed labels in response to Agency letter dated _____
<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.)

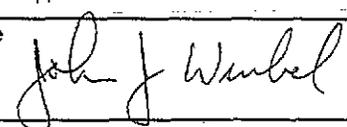
Notification of supplemental labeling regarding use recommendations with flumetsulam containing products as per PR 95-2.

NOTIFICATION
2-3-1996

Section III

1. Material This Product Will Be Packaged In:				2. Type of Container	
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		<input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____	
* 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 type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) of Retail Container		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner In Which Label Is Affixed To Product <input type="checkbox"/> Lithograph <input type="checkbox"/> Other (_____) <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled					

Section IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name John J. Wrubel	Title Product Registrations Manager	Telephone No. (Include Area Code) 609-746-2378
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 Product Registrations Manager	
4. Typed Name John J. Wrubel	5. Date 8/30/96	



Supplemental Labeling

RESTRICTED USE PESTICIDE

Due to acute oral and dermal toxicity

For retail sale to, and use only by Certified Applicators or persons under the direct supervision of a Certified Applicator, and only for those uses covered by the Certified Applicator's certification.

American Cyanamid Company endorses Certification to promote the responsible use of pesticides to insure the protection of man and the environment.

EPA Reg. No. 241-314

FOR USE OF BROADSTRIKE* PLUS, BROADSTRIKE SF + DUAL**, BROADSTRIKE + DUAL, SCORPION* III (flumetsulam and flumetsulam containing products) HERBICIDES IN FIELD CORN

(excluding Field Corn grown for Seed)

DIRECTIONS FOR USE

BEFORE USING, READ PRECAUTIONARY STATEMENTS ON CONTAINER LABEL

It is a violation of Federal law to use this product in a manner inconsistent with its labeling. COUNTER CR should be applied with a granular pesticide applicator properly calibrated to assure placement and proper dosage. See label for specific instructions. This label must be in possession of the user at the time of pesticide application.

Cover granules that may be exposed on the ends of the treated rows, turns and loading areas by deep discing immediately after treating fields.

Crops	Pests Controlled	Rates of COUNTER CR	Application	Remarks
FIELD CORN At Planting	Corn rootworm ¹ Wireworms White grubs Seedcorn maggots Seedcorn beetles Corn flea beetles Maize billbugs Southern corn billbugs Thrips Chinchbugs ² Symphylans Nematodes Lance Lesion Root knot Spiral Stunt Sting Stubby root Dagger Suppression of: Cutworms ³ Lesser cornstalk borer	Banded 6 oz per 1,000 ft. of row for any row spacing. Do not exceed 6.5 pounds per acre.	Banded Place granules in a 7-inch band over the row, in front of the presswheel and lightly incorporate with drag chains or tines.	American Cyanamid Company recommends that Broadstrike Plus, Broadstrike SF + Dual, Broadstrike + Dual, Scorpion III herbicides may be applied before or after BANDED applications of COUNTER CR. If application is made at planting, do not make postemergence or cultivation time treatments of COUNTER CR. ¹ COUNTER CR controls all species of corn rootworms including southern, northern, western, and Mexican corn rootworms. ² For use in the states of Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, and Texas only, for early season control of light to moderate infestations. ³ Under dry soil conditions or heavy infestations, it may be necessary to apply an insecticide rescue treatment with another registered insecticide after corn emergence to control surviving cutworm larvae.



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Form Approved. OMB No. 2070-0060. Approval expires 11-30-93

(A) 	United States Environmental Protection Agency Office of Pesticide Programs (H7505C) Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number <div style="font-size: 24pt; text-align: center;">208017</div>
	Application for Pesticide:		

Section I		
1. Company/Product Number 241-314	2. EPA Product Manager K. Whitby	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) COUNTER® CR® systemic insecticide nematicide	PM# 14	
5. Name and Address of Applicant (Include ZIP Code) American Cyanamid Company Agricultural Research Center P.O. Box 400 Princeton, NJ 08543-0400 <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 type="checkbox"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. <input type="checkbox"/> Other - explain below.

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

Notification of supplemental labeling regarding use recommendation with combination products containing primisulfuron-methyl and prosulfuron as per PR Notice 95-2.

NOTIFICATION
1996

Section III			
1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No * Certification must be submitted.	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," Unit Package wgt. No. per container	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) of Retail Container	5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
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 John J. Wrubel	Title Product Registrations Manager	Telephone No. (Include Area Code) 609-716-2378
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 <div style="text-align: center; font-weight: bold;">(Stamped)</div>
2. Signature 	3. Title Product Registrations Manager	
4. Typed Name John J. Wrubel	5. Date 8/30/96	

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Supplemental Labeling

RESTRICTED USE PESTICIDE

Due to acute oral and dermal toxicity

For retail sale to, and use only by Certified Applicators or persons under the direct supervision of a Certified Applicator, and only for those uses covered by the Certified Applicator's certification.

American Cyanamid Company endorses Certification to promote the responsible use of pesticides to insure the protection of man and the environment.

EPA Reg. No. 241-314

FOR USE OF EXCEED* (primisulfuron-methyl or prosulfuron containing products) HERBICIDE IN FIELD CORN (excluding Field Corn grown for Seed)

NOTIFICATION
SEP 23 1996

DIRECTIONS FOR USE

BEFORE USING, READ PRECAUTIONARY STATEMENTS ON CONTAINER LABEL

It is a violation of Federal law to use this product in a manner inconsistent with its labeling. COUNTER CR should be applied with a granular pesticide applicator properly calibrated to assure placement and proper dosage. See label for specific instructions. This label must be in possession of the user at the time of pesticide application.

Cover granules that may be exposed on the ends of the treated rows, turns and loading areas by deep discing immediately after treating fields.

Crops	Pests Controlled	Rates of COUNTER CR	Application	Remarks
FIELD CORN At Planting	Corn rootworm ¹ Wireworms White grubs Seedcorn maggots Seedcorn beetles Corn flea beetles Maize billbugs Southern corn billbugs Thrips Chinchbugs ² Symphylans Nematodes Lance Lesion Root knot Spiral Stunt Sting Stubby root Dagger Suppression of: Cutworms ³ Lesser cornstalk borer	Banded 6 oz per 1,000 ft. of row for any row spacing. Do not exceed 6.5 pounds per acre.	Banded Place granules in a 7-inch band over the row, in front of the presswheel and lightly incorporate with drag chains or tines.	American Cyanamid Company recommends that Exceed herbicide may be applied 10 days after BANDED applications of COUNTER CR at planting. If application is made at planting, do not make postemergence or cultivation time treatments of COUNTER CR. ¹ COUNTER CR controls all species of corn rootworms including southern, northern, western, and Mexican corn rootworms. ² For use in the states of Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, and Texas only, for early season control of light to moderate infestations. ³ Under dry soil conditions or heavy infestations, it may be necessary to apply an insecticide rescue treatment with another registered insecticide after corn emergence to control surviving cutworm larvae.



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 (A)	United States Environmental Protection Agency Office of Pesticide Programs (H7505C) Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number <div style="font-size: 24pt; text-align: center;">208018</div>
	Application for Pesticide:		

Section I

1. Company/Product Number <div style="text-align: center;">241-314</div>	2. EPA Product Manager <div style="text-align: center;">K. Whitby</div>	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) COUNTER® CR® systemic insecticide nematicide	PM# <div style="text-align: center;">14</div>	
5. Name and Address of Applicant (Include ZIP Code) American Cyanamid Company Agricultural Research Center P.O. Box 400 Princeton, NJ 08543-0400 <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 type="checkbox"/> Final printed labels in response to Agency letter dated _____
<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 of supplemental labeling regarding use recommendations with prosulfuron containing products as per PR 95-2.

NOTIFICATION
SEP 23 1996

Section III

1. Material This Product Will Be Packaged In:					
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 type="checkbox"/> Other (Specify) _____		
* 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 type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) of Retail Container		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
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 (_____)		

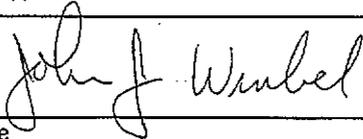
Section IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)

Name <div style="text-align: center;">John J. Wrubel</div>	Title <div style="text-align: center;">Product Registrations Manager</div>	Telephone No. (Include Area Code) <div style="text-align: center;">609-716-2378</div>
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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.

2. Signature 	3. Title <div style="text-align: center;">Product Registrations Manager</div>	6. Date Application Received (Stamped)
4. Typed Name <div style="text-align: center;">John J. Wrubel</div>	5. Date <div style="text-align: center;">8/30/96</div>	



Supplemental Labeling

RESTRICTED USE PESTICIDE

Due to acute oral and dermal toxicity

For retail sale to, and use only by Certified Applicators or persons under the direct supervision of a Certified Applicator, and only for those uses covered by the Certified Applicator's certification.

American Cyanamid Company endorses Certification to promote the responsible use of pesticides to insure the protection of man and the environment.

EPA Reg. No. 241-314

FOR USE OF PEAK* (prosulfuron containing products) HERBICIDE IN GRAIN SORGHUM

CERTIFICATION
SEP 23 1996

DIRECTIONS FOR USE

BEFORE USING, READ PRECAUTIONARY STATEMENTS ON CONTAINER LABEL

It is a violation of Federal law to use this product in a manner inconsistent with its labeling. COUNTER CR should be applied with a granular pesticide applicator properly calibrated to assure placement and proper dosage. See label for specific instructions. This label must be in possession of the user at the time of pesticide application.

Cover granules that may be exposed on the ends of the treated rows, turns and loading areas by deep disking immediately after treating fields.

Crops	Pests Controlled	Rates of COUNTER CR	Application	Remarks
GRAIN SORGHUM At Planting	Corn rootworm Including southern corn rootworms Wireworms White grubs Nematodes Greenbugs Corn leaf aphids Chinch bugs ¹	Banded 6 oz per 1,000 ft. of row for any row spacing (minimum 20 inch spacing) or no more than 9.8 pounds per acre.	Banded ² Place granules in a 7-inch band over the row, in front of the presswheel and lightly incorporate with drag chains or tines.	American Cyanamid Company recommends that Peak herbicide may be applied 15 days after BANDED applications of COUNTER CR at planting. Only one application of COUNTER CR per year may be used. Do not graze or harvest grain sorghum forage within 50 days after treatment. Do not harvest grain sorghum fodder or grain within 100 days after treatment. ¹ For use in the states of Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, and Texas only, for early season control of light to moderate infestations. ² Do not use banded applications for aphid control in New Mexico, West Texas and the panhandle of Oklahoma.



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