

PM 25 352-390

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<p>(A) EPA</p>	<p>United States Environmental Protection Agency Office of Pesticide Programs (H75C5C) Washington, DC 20460</p> <p>Application for Pesticide:</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/></td> <td>Registration</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Amendment</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Other</td> </tr> </table>	<input type="checkbox"/>	Registration	<input type="checkbox"/>	Amendment	<input checked="" type="checkbox"/>	Other	<p>OPP Identifier Number 224624</p>
<input type="checkbox"/>	Registration								
<input type="checkbox"/>	Amendment								
<input checked="" type="checkbox"/>	Other								

Section I

<p>1. Company/Product Number 352-390</p>	<p>2. EPA Product Manager R. J. Taylor</p>	<p>3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted</p>
<p>4. Company/Product (Name) DuPont Lexone® DF Herbicide</p>	<p>PM# 25</p>	
<p>5. Name and Address of Applicant (Include ZIP Code) E.I. du Pont de Nemours and Co., Inc. Barley Mill Plaza, Walker's Mill Bldg. 37 Wilmington, De 19880-0038 Attn: Donald H. Drane, WM6-160 <input type="checkbox"/> Check if this is a new address</p>		<p>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 _____</p>

Section II

<p><input type="checkbox"/> Amendment - Explain below</p> <p><input type="checkbox"/> Resubmission in response to Agency letter dated _____</p> <p><input checked="" type="checkbox"/> Notification - Explain below.</p>	<p><input type="checkbox"/> Final printed labels in response to Agency letter dated _____</p> <p><input type="checkbox"/> "Me Too" Application.</p> <p><input type="checkbox"/> Other - explain below.</p>
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Explanation: Use additional page(s) if necessary. (For section I and Section II.)
 Notification of supplemental label change: Correction of typo in use rate
 Attachments: •Five (5) copies of final label identified as (072182, 041195) [Replaces E-50438] (H-62723)
 •Reference letter from D.H. Drane to S.D. Hobgood, dated June 30, 1995

Section III

1. Material This Product Will Be Packaged In:				2. Type of Container	
<p>Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No</p>	<p>Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p><input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____</p>	
<p>* Certification must be submitted.</p>		<p>If "Yes," Unit Package wgt. _____</p>	<p>No. per container _____</p>	<p>If "Yes," Package wgt. _____</p>	<p>No. per container _____</p>
<p>3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container</p>		<p>4. Size(s) of Retail Container _____</p>		<p>5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product</p>	
<p>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</p>					

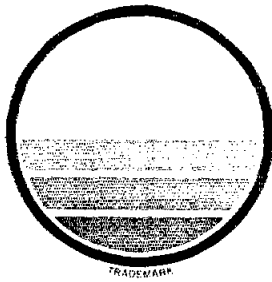
Section IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
<p>Name Donald H. Drane</p>	<p>Title Product Registration Manager</p>	<p>Telephone No. (include Area Code) (302)992-6028</p>
<p>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.</p>		<p>6. Date Application Received (Stamped)</p>
<p>2. Signature </p>	<p>3. Title Product Registration Manager</p>	
<p>4. Typed Name Donald H. Drane</p>	<p>5. Date June 30, 1995</p>	



DuPont Agricultural Products

"..... A Growing Partnership With Nature"



SUPPLEMENTAL LABELING

LEXONE® DF HERBICIDE FOR WEED CONTROL IN ESTABLISHED TOMATOES

LEXONE® DF HERBICIDE

EPA REG NO. 352-390

FOR WEED CONTROL IN ESTABLISHED TOMATOES

DIRECTIONS FOR USE

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

General Information

DuPont LEXONE DF Herbicide is recommended for postemergence weed control in established tomatoes. Direct-seeded or transplant tomatoes must be in the 5- to 6-leaf stage or older before treatment with LEXONE DF.

Weeds Controlled

1/3 to 2/3 lb LEXONE DF/Acre

- Carpetweed
Jimsonweed
Pigweeds
Common Purslane
Velvetleaf
Wild Mustard
Cheeseweed
Lambsquarters

1 to 1 1/3 lb LEXONE DF/Acre

- Common Ragweed
Pennsylvania Smartweed
Yellow Foxtail

For best results, treat when weeds are small, 1 to 2" tall or across, and actively growing.

Weeds Suppressed

1 to 1 1/3 lb LEXONE DF/Acre

- Barnyardgrass
Hairy Nightshade

These weeds must be treated before they are more than 1" tall in order to suppress their growth.

HOW TO USE

Apply LEXONE DF at the recommended rates per acre in 20 to 50 gallons of water. Use a properly calibrated, fixed-boom sprayer to assure uniform coverage. Spray booms must be shut off while starting, turning, slowing, or stopping as crop injury may result. Continuous agitation is required to keep the material in suspension.

Broadcast Spray (Except Florida)

Apply LEXONE DF at 1/3 to 2/3 lb per acre as a single application. For split applications, apply 1/3 to 1/2 lbs per acre per treatment, allowing 14 days between treatments. INTERVALS SHORTER THAN 14 DAYS MAY RESULT IN SIGNIFICANT CROP INJURY AND ARE THE RESPONSIBILITY OF THE USER. Do not exceed 2 broadcast treatments per crop season. Use the lower use rate on soils of 1/2 to 2% organic matter and the higher rate on soils with more than 2% organic matter. Do not apply within 7 days of harvest. Do not use with surfactant. Do not tank mix. Do not apply within 24 hours of other chemical treatments.

Directed Spray

Apply LEXONE DF at 2/3 to 1 1/3 lbs per acre as a single or split application, allowing 14 days between treatments for split applications. INTERVALS SHORTER THAN 14 DAYS MAY RESULT IN SIGNIFICANT CROP INJURY AND ARE THE RESPONSIBILITY OF THE USER. DO NOT EXCEED 1 1/3 LBS. PER ACRE PER CROP SEASON. Avoid spray contact with tomato foliage. Use this method of treatment in fields with severe weed pressure and in fields with hard to control weeds. Do not apply within 7 days of harvest. Use the lower rate on soils with 1/2 to 2% organic matter and the higher rate on soils with more than 2% organic matter. Do not use with surfactant.

Crop Rotation

Soybeans, potatoes, peas, lentils, alfalfa, asparagus, tomatoes, corn, barley, wheat, forage grasses, and sainfoin may be planted in treated areas 4 months after application of LEXONE DF. Do not apply LEXONE DF to the rotational crop during the same year as the initial treatment. Do not plant any crop not listed above within 18 months after use of LEXONE DF, except cover crops planted to prevent soil erosion or for soil building purposes.

Such crops may be planted at any time after application of LEXONE DF, but do not graze or harvest them for feed or food. Stand reduction of these cover crops may occur in some areas.

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IMPORTANT

NOTE: Do not treat direct-seeded or transplant tomatoes until plants have reached the 5- to 6-true-leaf stage or until transplants have recovered from transplant shock and new growth is evident, as significant crop injury may occur. Do not apply within 3 days after periods of cool, wet, or cloudy weather, as crop injury will occur. Do not treat plants lacking in vigor due to previous pesticide injury, insect damage, disease, high alkalinity, drought stress, or other causes. Do not use hot caps on tomatoes within 7 days before, or any time after, application of LEXONE DF. Crop injury or delayed maturity may result from adverse growing conditions prior to or immediately after treatment. Do not use in Kern County, California. Do not use more than 1 1/3 lbs of LEXONE DF per crop season. Do not apply to soils containing less than 1/2% organic matter. Do not use on soils having a calcareous surface area or a pH of 7.5 higher, as crop injury may result.

IMPORTANT

BEFORE USING "LEXONE" DF, READ AND FOLLOW ALL APPLICABLE DIRECTIONS, RESTRICTIONS AND PRECAUTIONS ON THE EPA-REGISTERED LABEL.

This bulletin contains new or supplemental instructions for use of this product which do not appear on the EPA-registered package label. Follow the instructions carefully.

This labeling must be in the possession of the user at the time of pesticide application.

072182,041195 (Replaces E-50438)

07/21/82