

PM 14 528-160 1043

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  
 222931

**Application for Pesticide - Section I**

|   |  |   |
|---|--|---|
| 1. Company/Product Number<br>538-162  | 2. EPA Product Manager<br>Robert Forrest   | 3. Proposed Classification<br><input type="checkbox"/> None <input type="checkbox"/> Restricted |
| 4. Company/Product (Name)<br>ProTurf(R) Insecticide 4/Insecticide IV  | PM#<br>14  |   |
| 5. Name and Address of Applicant (Include ZIP Code)<br>The Scotts Company<br>14111 Scottslawn Road<br>Marysville, Ohio 43041<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**

Amendment - Explain below.  Final printed labels in response to Agency letter dated 4/20/94

Resubmission in response to Agency letter dated \_\_\_\_\_  "Me T ." Application.

Notification - Explain below.  Other - Explain below.

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

NOTIFICATION: We have changed the name in the Disclaimer and Limitation of Liability from "The O.M. Scott & Sons Company or any seller" to "The Scotts Company or its affiliates".

**Section - III**

1. Material This Product Will Be Packaged In:

|   |   |  |  |
|---|---|--|--|
| Child-Resistant Packaging<br><input type="checkbox"/> Yes*<br><input type="checkbox"/> No | Unit Packaging<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | Water Soluble Packaging<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | 2. Type of Container<br><input 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" Unit Packaging wgt. No. per container   | If "Yes" Package wgt. No. per container  |

3. Location of Net Contents Information  
 Label  Container

4. Size(s) Retail Container

5. Location of Label Directions  
 On Label  
 On Labeling accompanying product

6. Manner in Which Label is Affixed to Product  
 Lithograph  
 Paper glued  
 Stenciled  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>Vincent Snyder, Jr. | Title<br>Senior Technical Associate | Telephone No. (Include Area Code)<br>(513) 644-0011 |
|-----------------------------|-------------------------------------|---|

**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 (Stamped)

|   |  |
|---|--|
| 2. Signature<br>By: THE SCOTT'S COMPANY<br><i>Vincent Snyder, Jr.</i> | 3. Title<br>Senior Technical Associate |
| 4. Typed Name<br>Vincent Snyder, Jr.                                  | 5. Date<br>October 27, 1995            |

IV



- provides control of white grubs
- prevents sod webworm and controls chinch bugs, mole crickets and *Hyperodes* weevil

**Net Weight 37 7/8 lbs. (17.17 kg)**

KEEP OUT OF REACH OF CHILDREN  
**CAUTION**  
PRECAUTIONARY STATEMENTS

Hazards to Humans and Domestic Animals: **CAUTION:** Causes eye irritation. Avoid contact with eyes or clothing. Wash thoroughly with soap and water after handling. **IF IN EYES:** Flush eyes with plenty of water. Get medical attention if irritation persists. Harmful if swallowed. **IF SWALLOWED:** Call a physician or Poison Control Center. Give a glass or two of water and induce vomiting by touching finger to back of throat. Do not induce vomiting or give anything by mouth to an unconscious or convulsing person. Avoid inhalation. As directed, water turf immediately after application. Active ingredient is a cholinesterase inhibitor. Treat symptomatically. Atropine is antidotal only if symptoms of cholinesterase inhibition are present. Do not feed treated clippings to domestic animals or graze treated areas. Do not contaminate feed or foodstuffs.

Environmental Hazards: This product is toxic to fish and wildlife. Do not apply directly to water, to areas where surface water is present or to intertidal areas below the mean high water mark. Do not contaminate water by cleaning of equipment or disposal of wastes. Apply this product as specified on the label.

**ACTIVE INGREDIENT:**  
 isofenphos 1-Methylethyl 2-[[ethoxy[(1-methylethyl) amino] phosphinothioyl]oxy] benzoate ..... 2%  
**INERT INGREDIENTS:** ..... 98%  
 Total 100%

EPA Reg. No. 538-162 EPA Est. 5905-IA-01 Product of USA

Professional Business Group  
The Scotts Company  
14111 Scottslawn Rd.  
Marysville, OH 43041  
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**Recommended For Use By Professional Turfgrass Managers**

Hyperodes weevil

Hyperodes

Spring

Apply product  
granules soon  
after

See spreader settings below

For control of Hyperodes weevil, apply as soon as grass greens in the spring. Under severe spring infestations of Hyperodes weevil a repeat treatment may be necessary in early July to control new infestations.

To prevent sod webworm make application after moths are first noted flying or as soon as silk-like webs formed by the larva are first observed on the turf, (spring-summer). Repeat in 3-6 weeks. The shorter interval should be followed in cases of severe infestations.

To prevent new grub infestations apply any time from spring—early summer.

ACCORDANCE WITH DIRECTIONS OR ESTABLISHED SAFE PRACTICE. The exclusive remedy of the user or Buyer, and the limit of liability of The Scotts Company or its affiliates, for any and all losses, injuries or damages resulting from the use or handling of this product shall be the purchase price paid by the user or Buyer for the quantity of this product involved. The Buyer and users are deemed to have accepted the terms of this Notice, which may be varied only by agreement in writing, signed by a duly authorized representative of The Scotts Company

Distributed By:  
Professional Business Group  
The Scotts Company  
Marysville, OH 43041

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## Suggested Spreader Settings

To provide proper distribution calibrate spreader before application  
This bag treats 22,000 ft<sup>2</sup> (1/2 acre) at RECOMMENDED RATE with 1.5 lbs. ai/A  
This bag treats 16,500 ft<sup>2</sup> (3/8 acre) at HEAVY RATE with 2.0 lbs. ai/A

| SPREADER  | GROUND SPEED | WIDTH OF COVERAGE | SPREADER SETTING |           |
|---|--------------|-------------------|------------------|-----------|
|   |              |                   | RECOMMENDED      | HEAVY     |
| Scotts (Drop type)                              | 3 mph        | overlap wheels    | 5                | 5 3/4     |
| Scotts Rotaries<br>PT-10*, PT-11*,<br>R-7, R-7X | 3 mph        | 9 ft              | E                | F 1/2     |
| R-8 (cone B)                                    | 3 mph        | 9 ft              | 1 1/2            | J 1/2     |
| Lely Models (see below)                         | 4.5 mph      | 18 ft             | 4 1/4 III        | 4 3/4 III |
| Vicon   | 4.5 mph      | 18 ft             | 15               | 17        |

\*Use discharge hole cover #13030 (already attached to the PT-10 and PT-11 models). For the R-7X model use with adjustable pattern; side 1/4 closed.

Lely Models WTR, WFR, HR, PTO at 450 rpm  
Metric coverage: 17.17 kg treats 2044m<sup>2</sup> at the Recommended Rate