Please read instructions on reverse before completing form.							
Please read instructions on reverse before completing form.	38-212	page 143					
	Form Approved. OMB No. 2070-006						
United States	Registration	OPP Identifier Number					
<b>Environmental Protection</b>	Agency Amendment	222948					
Washington, DC 204	_X Other						
Application for Pesticide - Section I							
1. Company/Product Number 538-212 2. EPA Product Manager 3. Proposed Classification							
	Cynthia Giles-Parker						
4. Company/Product (Name) Fertilizer with TGR(F Poa annua Control	PM# 22	PM# 22 Restricted					
5. Name and Address of Applicant (Include ZIP Code)	6. Expedited Review. In accordance with FIFRA Section 3(c)(3)						
The Scotts Company	(b)(i), my product is similar or identical in composition and labeling						
14111 Scottslawn Road	to:						
Marysville, Ohio 43041	EPA Reg. No.	EPA Reg. No.					
Check if this is a new address	Product Name						
Section - II							
Amendment - Explain below.	XX Final printed labels in response to	11/1/02					
Agency letter dated 11/1/93							
Resubmission in response to Agency letter dated	"Me Too" Application.						
X Notification - Explain below.	Other - Explain below.						
Explanation: Use additional page(s) if necessary. (For section	and Section II.)						
NOTIFICATION: We have changed the Limitation of Liability to a Disclaimer and Limitation of							
	the name in this section from "The	Scotts Company or					
any other seller" to "-	Scotts Company or its affiliates".	, ,					
	Section - III						
Material This Product Will Be Packaged in:	Section - III						
Material This Product Will Be Packaged In: Child-Resistant Packaging Unit Packaging	Section - III  Water Soluble Packaging 2. Type of Containe	or .					
	Water Soluble Packaging 2. Type of Containe Yes Metal						
Child-Resistant Packaging Unit Packaging	Water Soluble Packaging 2. Type of Containe Yes Metal Plastic						
Child-Resistant Packaging  Yes  No  If "Yes"  No. per	Water Soluble Packaging  Yes  No  If "Yes"  No. per  2. Type of Containe  Metal Plastic Glass Paper						
Child-Resistant Packaging  Yes  No  No	Water Soluble Packaging  Yes  No  If "Yes"  No. per  2. Type of Containe  Metal Plastic Glass Paper						
Child-Resistant Packaging  Yes* No  * Certification must be submitted  Unit Packaging  Yes No  If "Yes" Unit Packaging wgt.  No. per Unit Packaging wgt.	Water Soluble Packaging  Yes  No  If "Yes"  No. per Package wgt  Container  2. Type of Container  Metal Plastic Glass Paper Other	(Specify)					
Child-Resistant Packaging  Yes*  No  * Certification must be submitted  Yes  Unit Packaging  Yes  No. per Container  Yes  No. per Container  A. Size(s) Re	Water Soluble Packaging  Yes  No  If "Yes"  Package wgt  Container  Container  S. Location of Label Direct	(Specify)					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  1. Label  Unit Packaging Yes No  If "Yes" Unit Packaging wgt.  No. per container  4. Size(s) Re	Water Soluble Packaging  Yes  No  If "Yes"  Package wgt  Container  Ton Label Direct  On Labeling acco	(Specify)					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  1. Label  Unit Packaging Yes No  If "Yes" Unit Packaging wgt.  No. per container  4. Size(s) Re	Water Soluble Packaging  Yes  No  If "Yes"  Package wgt  Container  Ton Label Direct  On Labeling acco	(Specify)					
Child-Resistant Packaging  Yes  No  * Certification must be submitted  1. Label  Unit Packaging  Yes  No. per Container  Unit Packaging wgt.  A. Size(s) Re	Water Soluble Packaging  Yes  No  If "Yes"  Package wgt  Container  Container  Other  Other  Other  Other	(Specify)					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  1. Label  Unit Packaging Yes No  If "Yes" Unit Packaging wgt.  No. per container  4. Size(s) Re	Water Soluble Packaging  Yes  No  No  If "Yes"  Package wgt  Container  Section - IV  2. Type of Container  Metal Plastic Glass Paper Other  On Label On Labeling acco	(Specify) ions mpanying product					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  3. Location of Net Contents Information Label  Container  6. Manner in Which Label is Affixed to Product  Lithor Paper Stend  1. Contact Point (Complete items directly below for identification)  Name	Water Soluble Packaging  Yes  No  No  If "Yes"  Package wgt  Container  Container  Other  Section - IV  If individual to be contacted, if necessary, to process the container of the container of the container of the contacted of	(Specify) ions mpanying product					
Child-Resistant Packaging  Yes  No  * Certification must be submitted  3. Location of Net Contents Information Label  Container  Container  6. Manner in Which Label is Affixed to Product  Lithon Paper Stend  1. Contact Point (Complete items directly below for identification in the content of the content o	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  2. Type of Container  Metal Plastic Glass Paper Other  On Label Direct On Labeling acco	(Specify)  ions  mpanying product  is application.)  one Ño. (Include Area Code)					
Child-Resistant Packaging  Yes  No  * Certification must be submitted  3. Location of Net Contents Information Label  Container  Container  6. Manner in Which Label is Affixed to Product  Lithon Paper Stend  1. Contact Point (Complete items directly below for identification in the content of the content o	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt Container  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  Telephone	(Specify)  ions  mpanying product  is application.)  one No. (Include Area Code)  13) (S14-0011  6. Date Application ; * ;					
Certification must be submitted  3. Location of Net Contents Information Label Container  6. Manner in Which Label is Affixed to Product Lithorappes Stend  1. Contact Point (Complete items directly below for identification Name Vincent Snyder, Jr.  Certific I certify that the statements I have made on this form and I acknowledge that any knowingly false or misleading states.	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  Telephone (5.00)	(Specify)  ions  mpanying product  is application.)  one Ño. (Include Area Code)					
Child-Resistant Packaging  Yes* No  * Cartification must be submitted  3. Location of Net Contents Information Label  Container  6. Manner in Which Label is Affixed to Product  1. Contact Point (Complete items directly below for identification of the Contents Information of the Contents Information  1. Contact Point (Complete items directly below for identification of the Content Information Information of the Content Information Informatio	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  No. per Container  Section - IV  If individual to be contacted, if necessary, to process the Senior Technical Associate  Telephonal Associate  Teleph	(Specify)  ions  mpanying product  is application.)  ine No. (Include Area Code)  13) \$14-0011  6. Date Application ( Received )					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  3. Location of Net Contents Information Label  Container  6. Manner in Which Label is Affixed to Product  1. Contact Point (Complete items directly below for identification of the contents in the contents in the contents in the contents in the contents items directly below for identification in the contents in	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  Telephone  attachments thereto are true, accurate and complete.  In the senior true of the senior of the	(Specify)  ions  mpanying product  is application.)  ine No. (Include Area Code)  13) \$14-0011  6. Date Application ( Received )					
Child-Resistant Packaging  Yes* No  * Cartification must be submitted  3. Location of Net Contents Information Label  Container  6. Manner in Which Label is Affixed to Product  1. Contact Point (Complete items directly below for identification of the Contents Information of the Contents Information  1. Contact Point (Complete items directly below for identification of the Content Information Information of the Content Information Informatio	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  No. per Container  Section - IV  If individual to be contacted, if necessary, to process the Senior Technical Associate  Telephonal Associate  Teleph	(Specify)  ions  mpanying product  is application.)  one No. (Include Area Code)  13) \$\text{G4}=0011  6. Date Application (Stamped) (St					
Child-Resistant Packaging  Yes* No  * Certification must be submitted  3. Location of Net Contents Information Label  Container  6. Manner in Which Label is Affixed to Product  1. Contact Point (Complete items directly below for identification of the contents in the contents in the contents in the contents in the contents items directly below for identification in the contents in	Water Soluble Packaging  Yes  No  No  If "Yes" Package wgt  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  Telephone  attachments thereto are true, accurate and complete.  In the senior true of the senior of the	(Specify)  ions  mpanying product  is application.)  one No. (Include Area Code)  13) \$\text{G4}=0011  6. Date Application (Stamped) (St					
Certification must be submitted  3. Location of Net Contents Information Label Container  6. Manner in Which Label is Affixed to Product Lithor Paper Stend  1. Contact Point (Complete items directly below for identification I acknowledge that any knowingly false or misleading starboth under applicable law.  2. Signature THE SCOTTS COMPANY  By: Manner I Packaging Wgt. No. per Container  No. per Container  4. Size(s) Results of the Size(s) Results of Siz	Water Soluble Packaging  Yes No No No No No. per Package wgt Container  Container  Container  Container  Container  Other  Section - IV  of individual to be contacted, if necessary, to process the Senior Technical Associate  Telephone attachments thereto are true, accurate and complete. Itelent may be punishable by fine or imprisonment or  Title  Senior Technical Associate	(Specify)  ions  mpanying product  is application.)  one No. (Include Area Code)  13) \$\text{G4}=0011  6. Date Application (Stamped) (St					

Triaform, Technology









# Net Weight 31.94 lbs. (14.48 kg)

CAUTION PRECAUTIONARY STATEMENTS

Hazards to Humans and Domestic Animals: CAUTION. Keep out of reach of children. Harmful if swallowed. Avoid contact with skin, eyes or clothing. Causes eye irritation. If In eyes, flush with plenty of water. Get medical attention if infration persists. Do not contaminate feed or foodstuffs. Do not graze treated areas. Do not feed clippings to livestock.

Personal Protective Routoment
Applicators and other handlers must wear. Long-sleeved shirt and long parits, waterproof gloves, shoes plus socks.

Follow manufacturer's instructions for cleaning/maintaining personal protective equipment (PPE). If no such instructions for washables, use detergent and hot water. Keep and wash personal protective equipment separately from attentions.

# **User Safety Recommendations**

- Geer sarety recommendations

  Users should:

  Wash hands before eating, drinking, chewing gum, using tobacco or using the toilet.

  Remove cottling immediately if pesticide gets inside. Then wash theroughly and put on clean clothing.

  Remove PPE immediately after handling this product. Wash the outside of gloves before removing. As soon as possible, wash thoroughly and change into clean clothing.

Environmental Hazarda: Do not apply directly to water, to areas where sur-lace water is present or to intertidal areas below the mean high water mark. Do not apply to ateep slopes near water or when weather conditions favor drift from target areas. Do not contaminate water when disposing of equipment washwaters.

· 自然是我們有一個一個一個一個一個一個一個一個 ा रेटर है। विद्वित्ति । ति पदारे हैं विद्वार प्राप्ति । विद्वार प्राप्ति । विद्वार विद्वार है। विद्वार विद्वार

ACTIVE INGREDIENT:

Quarenteed Applysis 

29.5% urea, methylene ureas nitrogen
0.9% water insoluble nitrogen
Available phosphate {P<sub>2</sub>O<sub>5</sub>}
Soluble potash (K<sub>2</sub>O)
Derived from monoammonium phosphate, urea, methylene ureas, and potassium suifate.
\*Contains 9.2% slowly available methylenediurea and impathylenetiums nitrogen.

"Contains star a sowny aromains many," dimethylenetriures nitrogen. EPA Reg. No. 538-212 US Pat. Nos. 4,378,238 and 5,102,440 EPA Est, No. 538-OH-1

Professional Business Group, The Scotts Company 14111 Scottslawn Rd. Marysvilke, OH 43041 6 1993, The Scotts Company. World rights reserved.

Product of U.S.A.

Recommended For Use By Professional Turfgrass Managers

It is a violation of federal lew to use this product in a manner inconsistent with its labeling. On this apply this product in a way that will contact workers or either persons, either directly or through drift. Only protected handlers may be in the area during application. For any require-ments specific to your fatter or Tribe, conveul the agency responsible for pesticide regulation.

#### AGRICULTURAL USE REQUIREMENTS

AGRICULTURAL INE REQUIREMENTS
Use this product only is accordance with its labeling and with the Worker Protection Standard, 40 OFFI part 17D. This Standard contains requirements for the protection of agricultural workers on farms, forests, nurseries, and greenhouses and handlers of agricultural pesticides, it contains requirements for tailong, decordantmentsion, notification and entergency assistance. It also contains specific instructions and exceptions pertaining to the statements on this label about personal protective equipment PPEs and restricted-entry interval. The requirements in this box only apply to uses of this product that are covered by the Worker Protection Standard. On not enter or allow worker entry into treated areas during the restricted-entry interval [RE] of 24 hours. PPE required for airly entry to treated areas that is permitted under the Worker Protection Standard and that involves contact with anything that has been treated, such as plants, soil or water, sic coveralis, waterproof gloves, shoes plus socks.

#### POA ANNUA CONTROL

A CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE CONTRACTOR DE LA CONTRAC

For suppression of *Poe annue* in bentgrass, zoystagrass, Kentucky bluegrass, and Kentucky For suppression of Poe annus in bentgress, copylagrass, Kentucky bluegrass, and Kentucky bluegrass, and Kentucky bluegrass, and bentgreeninal syspenses finlawsys, tess and roughs, and bentgress greens. Papeat applications in a programmed approach will result in the gradual elimination of Poe annua as a major component of the surfgress stand. Once the desired level of Poe annua is obtained, annual applications and appropriate management practices will help prevent Poe annua from reestablishing as a major management problem.

#### What To Expect

The growth and competitive ability of Pos annus will be reduced within 1-2 weeks of an applica-tion. The shoot and lest tiesue will become discolored (yellow to brown) for 3-6 weeks following the onest of growth regulation. Growth reduction of Pos annus will last for at least 3-5 weeks. During this period, growth of bentgress, syesiegress, Kerntucky bisegrass, and personial rye-grass will be attenuisted to "crowd out" the westeened Pos annus. Creeping bentgresses will be more effective than Colonial bentgrass varieties in aggressively encroaching Pos annus areas. On bentgrass greens, growth reduction of Pos annus may last longer than 5 weeks and in some cases Pos annus discoloration may not occur during this growth reduction period.

The formation of Post sorius seechesds will not be prevented, but spring and previous fell applica-flone will sturt the growth of the seedlesd stalk. Applications made just prior to seedlesd emergence will greatly reduce the visibility of seedlesds for 3-6 weeks.

Regreening/regrowth of Pos annue will occur 4-5 weeks after application. Bentgrass, Kentucky bluegrass, and perennial ryegrass color will be enhanced for 6-12 weeks under non-stress condi-

Stress conditions following application may result in temporary undestrable color changes of bentgrass and Kentucky bluegrass. Avoid these conditions by intigating and applying at the rec-

Treatments will not have any distrimental effects on turigrass root growth under normal growing conditions and when used as directed.

The degree of Pos annue control will be influenced by turfgrass management practices, climate, soil type, bentgrass variety, and Pos annue biotype.

#### Program Scheduline

Use any time when Poa annua is actively growing. Avoid applications during stressful conditions since the extent of discoloration on Poa annue and other desirable grasses may be unaccept-

Fairways and gruphs: Repeat late summer/early laif followed by spring applications are recommended for gradual Fos annua control. Avoid applications during stressful conditions.

Officers and tass: Apply 5-2 works prior to Pos annus seedhead emergence to reduce seed-head visibility and encourage bentgrass growth and coverage, Repeat applications can be made under non-stress conditions at least 2 weeks after Pos annus has recovered from any discolaration.

For long-term control in areas containing a high initial percentage of *Pos annua* contamination, repeat applications over a 2 to 3 year period may be required before the desirable grasses pre-dominate.

Moderate soil moleture conditions should be present before and after application to achie best regulating effect (see precautions concerning saturated soil conditions). For best results, avoid applications during extreme soil temperature and moisture conditions.

Spring applications should be delayed until any observable effects from preemergent control applications on bentgrass growth, color and quality have subsided.

Where large creat of the deskable turn have been thinned from winter damage, disease of insects, withhold application until desired fill-in and routing of the turn stand is achieved.

Continue normal cultural practices after application. However, do not early and topdress grawhile Pos annue is undergoing growth regulation. Allow sertification treatments to heal before

When Pos annus populations have been reduced to the desked level, annual fate fall applications are recommended where continuous long-term control is desked. How to use:

Apply to dry follage. For best results, water in (at least 1/4 inch) within 48 hours after application Adjust the application rate according to the percent of Pox annua conta

Pos annua Contemination Level High (50%-70%) Pos annua

population densit Low (less than 50%) Pos annue

LIGHT for less overall tion of Pos sonus) NORMAL ifor quicker removati

Secommended Application Pate

# Additional Program Scheduling

Overseeding is recommended to hasten conversion from Poz annus to the more deskrable grasses. To avoid stunting the growth of the deskrable seedlings allow at least 2 weeks following treatment before overseeding, and in newly overseeded areas, make treatments at least 5 weeks

If crabgrass or other annual weeds have been a problem in the past, an application of the appro-priate preemergent control product should be made before using this product.

If a weed, disease or insect problem occurs after application, apply a recommended control

product in the same manner as is normally practiced, since the use of this prowith existing control products.

if Embarke is used for Pos annus seedtead control, apply this product at least 14 days after Embarke use to avoid potential discolaration of bentgrass and Kentucky bluegrass.

Avoid fell applications during onset of turigress dormancy to prevent fell and early apring discol-oration of bentgress and Kentucky bluegrass. Subsequent renewed growth and spring mowings will elimite this potential discoloration.

Applications made in the fall after the destrable grasses have ceased growing may result in less color response and reduced or delayed activity in affecting Pas annus but will provide both a greening response on the deskable grasses as well as growth suppression of Pas annus the folving spring,

Collecting dippings and the use of lightweight equipment throughout the year will enhance the long-term performence of treatments.

Embarke is a registered trademark of the PBI Gordon Corporation.

### PRECAUTIONS

Not for use on hybrid bermudegrass areas,

Not for use on athletic fields under heavy traffic or where maximum growth potential of the turi fe

Do not apply to Kantucky bluegrass collers and other areas around greens where consistent to height and color is desired.

Not for use around shrubs, fruit trees, flowers or vegetable plants; however, applications to turi-sisse under the tree caronies will not affect or harm frees.

Do not use during periods of extreme environmental stress, such as heat, drought, or cold, or

Frequent irrigation after application throughout hot and dry weather conditions will help prevent potential discoloration of bentgrass and Kentucky bivegrass and ensure continued aggressive growth of the desirable grasses into Fox annua areas.

Heavy rainfall or intigation after application in areas where the solf is afreedy saturated me cause the active ingredient to move laterally on steep slopes and collect in low areas. Th areas may undergo more server growth control for a longer period of time. To avoid this response, do not apply when soil is afreedy saturated.

Do not use spreader settings other than those recommended, improper rates may cause unde-skable turf growth control and areas may discolor temporarily.

Where large areas of the deskable turf have been thinned from winter damage, disease, or insects, withhold application until desired fill-in and rooting of the turf stand is achieved.

Use in areas containing greater than 70% Pos annua will result in more widespread discoloration of the fairway and green and may not appear acceptable to the user. Use of other cultural techniques are encouraged to lower the percentage of Pos annua below the 70% level. GROWTH REGULATION OF LAWN TURFGRASSES

For growth regulation of well-maintained, lawn-height commercial, industrial and residential bluegrass, ryegrass and Postannus turigrass areas that are on regular fertilization programs,

#### What to Expect

Applications made at the "NORMAL" rate between March 1 - April 30 (spring) or September 1 -Appendiculation at the formation of the property of the proper

### PRECAUTIONS

Do not make more than 2 spring and 1 fall applications per year.

Do not make applications to turi areas containing more than 50% Pos sonus.

Do not make applications outside March 1 - April 30 or September 1 - October 31 periods, Do not use during the recommended period if extreme environmental stresses such as heat, drought or cold or if heavy insect or disease pressures are present.

# STORAGE AND DISPOSAL

d or feed by storage or disposal.

STORAGE: Store in a clean, dry place. Reseal opened bag by folding top down and securing. PESTICIDE DISPOSAL: Do not conteminate water, food, or feed by storage or disposal. Wastes resulting from the use of this product may be disposed of on site or at an approved waste dis-

CONTAINER DISPOSAL: Completely empty bag into application equipment. Then dispose of empty bag in a sankary landfill or by incineration, or, if allowed by State and local authorities, by burning. If burned, stay out of smoke.

# IMPORTANT NOTICE:

# DISCLAIMER AND LIMITATION OF LIABILITY

While a wide variety of tests have been conducted, it must be understood that this product has not been tested on greens of all bentgrass varieties under all possible growing conditions. The user should exercise judgement and caution when using this product on a given variety until tamillar with the performance under his growing conditions. NO WARRANTY OR REPRESENTA-TION IS MADE, EXPRESS, OR IMPLIED CONCERNING THE RESULTS OBTAINED FROM THE USE OF THIS PRODUCT ON BENTGRASS GREENS IF NOT USED IN ACCORDANCE WITH DIRECTIONS AND ESTABLISHED SAFE PRACTICES. The avirance remotive of the user or fluvor and the limit of liability of The Scotts Company or its atliliates, for any and all losses, injuries and 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 all users are de-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.

Professional Business Group The Scotts Company 14111 Scottslawn Rd. Marysville, CH 43041

# Recommended Spreader Settings

To provide proper distribution calibrate spreader before application.
31.94 lbs. treats 15,500 ft.² (3/3 acre) at LIGHT RATE.
31.94 lbs. treats 11,000 ft.² (1/4 acre) at NORMAL RATE.

SPREADER .			RECOMMENDED EPREADER I		
POR GREENS APPLICATIONS	GROUND	WIGTH OF	<del>nońi û</del> vie	HORMAL MATE	
Scotts Rotaries	BPERO	COTTAGE	3/3/		
8-7. R-7X**	3 mph	6 tt.	C1/2	D1/2	
R-8A, SR-1		J 11,		J	
(cone 7)	3 mph	6 ft.	H1/2	J	
NON-GREENS USES				•	
Scotts Rotaries					
R-7, R-7X**	3 mph	12 ft.	£!/2	G1/2	
R-8A, SR-1	3 mph	12 ft.	J1/2	L	
(cone 7)	•			_	
Lely Models	4,5 mph	30 ft.	41/4 III	5 III	
(see below)		/		- 24.	
Vicon (Model 02)	4,5 mph	30 ft.	19	24	
Vicon (Model 03)	4.5 mph	24 ft.	17	21	
Tiely Models WTR WER HR and to					

" Mave stide to 1/4 closed position

Metric Coverage: 14.46 kg treats 1532m' at the LIGHT RATS and 1922m' at the NORMAL RATE.