

748-31

09-21-2007

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460



United States  
Environmental Protection  
Agency

Office of Pesticide Programs

**FILE COPY**

September 21, 2007

Donna L. Butler  
PPG Industries, Inc.  
4325 Rosanna Drive  
Allison Park, PA 15101

Subject: **Chlorine**  
EPA Registration Number: 748-31  
Application Dated: August 28, 2007  
Receipt Date: August 30, 2007

Dear Ms. Butler:

This acknowledges receipt of your notification, Submitted under the provision of PR Notice 98-10, FIFRA Section 3(c) 9.

**Proposed Notification**

- Add non-pesticidal uses

**General Comment**

Based on a review of the material submitted, the following comment applies:

This notification is accepted and a copy has been inserted in your file for future reference.

Should you have any questions concerning this letter, please contact Wanda Henson at (703) 308-6345.

Sincerely,

A handwritten signature in black ink that reads "Wanda Henson".

Wanda Henson

Product Reviewer (32)  
Regulatory Management Branch II  
Antimicrobials Division (7510P)



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Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0080. Approval expires 2-28-95

	United States <b>Environmental Protection Agency</b> Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number
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### Application for Pesticide - Section I

1. Company/Product Number 748-31	2. EPA Product Manager Mitchell	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Chlorine	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) PPG Industries, Inc. 4325 Rosanna Drive Allison Park, PA 15101 <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 checked="" 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.)

PPG would like to update the label text for Chlorine, EPA Reg. No. 748-31, to specifically add non-pesticidal uses. This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

### 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
* Certification must be submitted				<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
	If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt.	Other (Specify) _____	
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container		5. Location of Label Directions	
6. Manner in Which Label is Affixed to Product <input checked="" 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 Donna L. Butler	Title Regulatory Compliance Specialist	Telephone No. (Include Area Code) 412-492-5497
<b>Certification</b> 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 Regulatory Compliance Specialist	
4. Typed Name Donna L. Butler	5. Date 8/28/07	

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# CHLORINE

UN1017

RQ

LIQUEFIED GAS UNDER PRESSURE, NON-FLAMMABLE

FOR USE AS A DISINFECTANT AND/OR ALGICIDE, by experienced personnel only, in the treatment of municipal water supplies, sewage and waste management plants, in accordance with all applicable federal, state, and local laws and regulations.

FOR USE IN MANUFACTURING PROCESSES, by trained personnel only, in the production of bleach, plastics, chlorinated solvents, refrigerants, and intermediates for products containing no chlorine. Proper training in safety and use of protective equipment are essential. Well designed and maintained handling and processing facilities are required.

FOR USE BY REPACKAGERS FOR THE ABOVE USES, in accordance with all applicable federal, state, and local laws and regulations.

Active Ingredient: Chlorine .....99.5%  
Other Ingredients: .....0.5%

KEEP OUT OF REACH OF CHILDREN

**DANGER!**  **POISON** 

- MAY BE FATAL IF INHALED
- CORROSIVE - CAUSES SEVERE BURNS

### ✚ FIRST AID ✚

**If inhaled:** After properly protecting yourself, move person to fresh air. Contact a poison control center, emergency room or physician as soon as possible as further treatment will be necessary. If person is not breathing, call 911 or an ambulance, then give artificial respiration immediately. Trained personnel should administer humidified oxygen.

**If on Skin or Clothing (contact with liquid chlorine):** Use an emergency shower immediately for at least 15 minutes. Remove contaminated clothing under the shower. Call a Poison Control Center or doctor for treatment advice.

**If on Skin (contact with gaseous chlorine):** Immediately change contaminated clothing and wash exposed area with soap and water. Refer to a physician if irritation persists or if the skin is blistered or broken.

**If in Eyes:** Hold eye open and rinse slowly and gently with water for 15-20 minutes. If contact lenses are present, remove the lenses after the first 5 minutes, then continue rinsing eye. Call a Poison Control Center or doctor for treatment advice.

Contact 1-412-434-4515 or your Poison Control Center for 24-hour emergency medical treatment information. Have the product container or label with you when calling a poison control center or doctor, or going for treatment.

**NOTE TO PHYSICIAN:** Symptoms may become more severe up to 36 hours after exposure including pulmonary edema.

**ENVIRONMENTAL HAZARDS:** This pesticide is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans or other waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) permit and the permitting authority has been notified in writing prior to discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the local sewage treatment plant authority. For guidance contact your State Water Board or Regional Office of the EPA.

### PRECAUTIONARY STATEMENTS

#### HAZARDS TO HUMAN AND DOMESTIC ANIMALS

- **DANGER.** Fatal if inhaled or absorbed through the skin. Corrosive. Causes irreversible eye damage and skin burns. Do not breathe vapors or get in eyes, on skin or clothing. Wear goggles, protective clothing and rubber gloves as discussed below. Wash hands thoroughly with soap and water after handling and before eating, drinking, or using tobacco. Remove contaminated clothing and wash clothing before reuse. Prolonged frequently repeated skin contact may cause allergic reactions in some individuals.
- **PERSONAL PROTECTIVE EQUIPMENT.** Applicators and other handlers must wear long-sleeved shirts, long pants, shoes, and socks



PPG INDUSTRIES, INC.  
One PPG Place  
Pittsburgh, PA 15272

L119A-LA-807K

SEE REVERSE SIDE FOR HANDLING AND STORAGE

NOTE: READ TAG BEFORE UNLOADING

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# CHLORINE

UN1017 RQ  
LIQUEFIED GAS UNDER PRESSURE, NON-FLAMMABLE

<b>EXPOSURE</b>	Remove patient from contaminated area. If breathing, place in a comfortable position, keep warm and at rest until physician arrives. If breathing is difficult, give oxygen. If breathing has stopped, give artificial respiration, preferably mouth-to-mouth. Call a physician as soon as possible. Keep patient at rest.
<b>SPILL OR LEAK</b>	Immediately evacuate area. Only trained personnel wearing NIOSH - approved, full-face, self-contained breathing apparatus and full protective clothing may enter area to locate leak. DO NOT PUT WATER ON LEAK. Use appropriate emergency capping kit.
<b>FIRE</b>	Cannot catch fire. Notify fire-fighting personnel chlorine containers are in area. Otherwise, keep containers cool with water spray. Chlorine will support combustion. Reacts readily with hydrocarbons, alcohols, ethers, ammonia, hydrogen, and some metals, sometimes with explosive violence. Will react with (burn) steel containers at temperatures above 450°F.
<b>EMERGENCY</b>	Transportation Incident: Contact CHEMTREC at (800) 424-9300. In all other emergencies, contact PPG Industries, Inc., 1-412-434-4515.

## DANGER! POISON

- MAY BE FATAL IF INHALED
- CORROSIVE - CAUSES SEVERE BURNS

### DIRECTIONS FOR USE:

It is a violation of federal law to use this product in a manner inconsistent with the labeling. Have available full-face, self-contained breathing apparatus approved by the U.S. Mine Safety and Health Administration or the National Institute for Occupational Safety and Health. Handle and use only in accordance with practice recommended in the Chlorine Manual published by Chlorine Institute, Inc. New York. Use only in well-ventilated areas. Only specifically designed dispensing equipment should be used and only in accordance with manufacturer's instructions and according to state regulatory agency recommendations for dosages or residual chlorine levels which should be maintained for each specific site of application.

For specific information refer to the Chlorine Institute Pamphlet 66, "Chlorine Tank Car Loading, Unloading, Air Paddling, Hydrostatic Testing."

Cars must be monitored during the unloading operation. When not in use or when car is left unattended, valves must be closed and unloading lines disconnected.

ALWAYS BE PREPARED FOR AN EMERGENCY! See Chlorine Institute Pamphlet 64, Emergency Control Planning Checklist.

### STORAGE AND DISPOSAL

Chlorine tank cars and tank trailers are designed for reuse and must be returned to the supplier. The tank cars or tank trailers to be returned should be identified with DOT tag or label and shipping in accordance with supplier's instructions. Bulk storage containers must not be left unlabeled and accessible to the general public. All storage containers must have a weather-resistant label attached near outlet valve.

EPA REG. No. 748-31  
EPA EST. No. 748-LA-1

PPG INDUSTRIES, INC.  
One PPG Place  
Pittsburgh, PA 15272

Net Weight \_\_\_\_\_ Tons  
L119A-LA-807K

**SEE REVERSE SIDE FOR PRECAUTIONS AND FIRST AID**

**NOTE: READ TAG BEFORE UNLOADING**