

2/10/97


PM 13

773-72

P9-112

Please read Instructions on reverse before completing form.

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

<b>(A)</b> 	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  211015
	<b>Application for Pesticide:</b>		

**Section I**

1. Company/Product Number 773-72	2. EPA Product Manager George LaRocca	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Atroban® Delice™ Plus Insecticide	PM# 13	
5. Name and Address of Applicant (Include ZIP Code) Mallinckrodt Veterinary, Inc. 421 E. Hawley St. Mundelein, IL 60060 <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.

**NOTIFICATION**  
FEB 10 1997

**Explanation:** Use additional page(s) if necessary. (For section I and Section II.)  
Notification of Additional Brand Name "Synergized Delice Pour-On" per PR Notice 95-2. This notification is consistent with the provisions of PR notice 95-2 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 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 95-2 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 checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" 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 checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) of Retail Container 8oz, 16oz, 32oz, 64oz, 128oz 2.5 gal, 55 gal.		5. Location of Label Directions <input checked="" 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 checked="" 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 Eileen T. Valenta	Title Regulatory Affairs Specialist	Telephone No. (Include Area Code) 847-970-4709

**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 	3. Title Regulatory Affairs Specialist	
4. Typed Name Eileen T. Valenta	5. Date February 3, 1997	



# SYNERGIZED DELICE® POUR-ON

526190

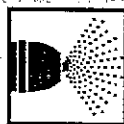
INSECTICIDE FOR  
CATTLE, SHEEP AND  
THEIR PREMISES



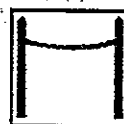
POUR ON



SPRAY



MIST



BACK RUBBER

**Active Ingredients**

Permethrin (3-phenoxyphenyl) methyl (±) cis, trans-3-(2,2-dichloroethenyl)-2, dimethylcyclopropanecarboxylate	1.0%
Piperonyl Butoxide Technical	1.0%
Inert Ingredients	98.0%
	100.0%

cis/trans ratio: Min 35% (±) cis and max 65% (±) trans  
 Equivalent to Min 0.8% (butylcarbityl)(S-propylpiperonyl)  
 ether and 0.2% related compounds.



KEEP OUT OF REACH OF CHILDREN

## CAUTION

SEE BACK PANEL FOR PRECAUTIONARY STATEMENTS

Mallinckrodt Veterinary, Inc.  
 421 East Hawley Street  
 Mundelein, IL 60060 U.S.A.  
 U.S. Patent No. 4,024,163  
 1304000C, 00197  
 EPA Est. No. 6175-LA-1 EPA Reg. No. 773-72

Net Contents One U.S. Gallon (3.785 L)



PMS 877 SILVER    PMS 2925 BLUE  
 PMS 2593 PURPLE    BLACK    PMS 341 GREEN

NOTIFICATION  
 FEB 10 1997