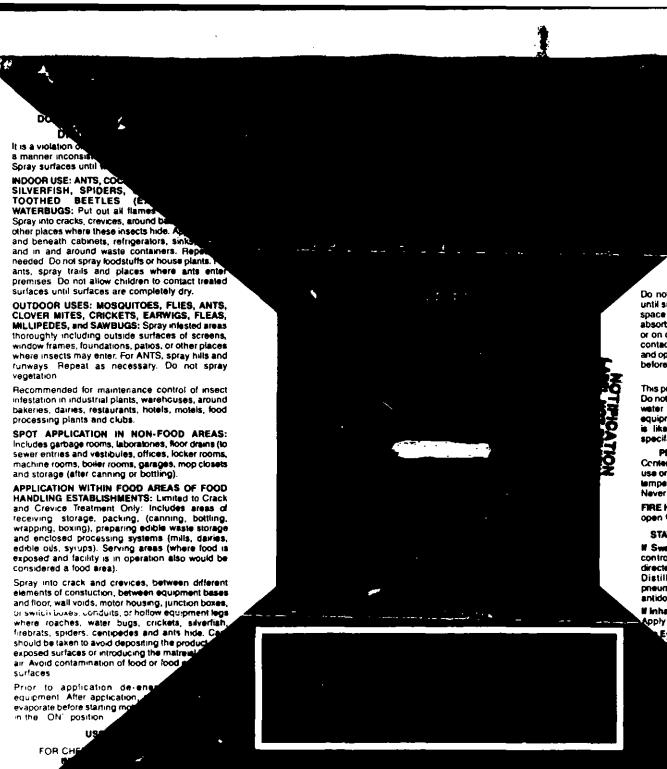
Parc 14 >

Please read instructions on reverse before completing form. Form Approved. OMB No. 2070-0060. Approval expires 11-30-93 United States Environmental Protection Agency **OPP Identifier Number** Registration Office of Pesticide Programs (H7505C) **Amendment** Washington, DC 20460 195532 Application for Pesticide: Other Section I 2. EPA Product Manager 3. Proposed Classification 1. Company/Product Number 1203-39 <u>Dennis Edwards</u> Restricted None PM# 4. Company/Product (Name) Ant & Foremost 4883-ES Resid-U-Cide Roach Killer 19 6. Expedited Review. In accordance with FIFRA Section 3(c)(3) 5. Name and Address of Applicant (Include ZIP Code) (b)(i), my product is similar or identical in composition and labeling DELTA FOREMOST CHEMICAL CORPORATION 3915 Air Park St. Memphis, TN 38118 EPA Reg. No.\_\_\_ Check if this is a new address **Product Name** Section II Final printed labels in response to Amendment - Explain below Agency letter dated Resubmission in response to Agency letter dated\_ "Me Too" Application. Notification - Explain below. Other - explain below. Explanation: Use additional page(s) if necessary. (For section I and Section II.) Notification in accordance with PR Notice 93-6 Section III 1. Material This Product Will Be Packaged In: Child-Resistant Packaging Unit Packaging 2. Type of Container Water Soluble Packaging Metal Yes\* Yes Plastic No Glass No Nο Pager If Yes. If Yes. No. per No. per Other (Specify) Unit Package wgt. container Package wgt. container Certification must be submitted. Location of Label Directions 3 Location of Net Contents Information Size(s) of Retail Container On Label \_\_\_ Container On Labeling accompanying product 6. Manner In Which Label Is Affixed To Product Lithograph Other ( Paper glued Stenciled Section IV 1 Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.) Name Telephone No. (Include Area Code) Haschal Golden Lab Manager (901)363-4340 6. Date Application Certification Received I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete Lacknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or (Stamped) both under applicable law 3 Title Hoachel Haiden Lab Manager Typed Name 5 Date Haschal Golden 6 - 1 - 93



ner. Wrap container a

## CAUTIONARY STATEMENTS

Hazardous To Humans and Domestic Animals CAUTION:

Do not allow children to contact treated surfauntil surfaces are completely dry. Do not use a space spray. Harmful if swallowed or inhaled absorbed through skin. Do not get in eyes, on si or on clothing. Avoid breathing spray mist. Avicontact with skin and eyes. Keep away from his and open flame. Remove pets and cover lish bot before spraying.

EVIRONMENTAL HAZARDS

This product is toxic to fish, birds and other wildling not apply directly to water. Do not contamine water by cleaning of equipment, or disposal equipment washwaters. Do not apply where run is likely to occur. Apply this product only specified on this label.

PHYSICAL AND CHEMICAL HAZARDS Contents under pressure. Do not puncture. Do a use or store near heat or open flame. Exposure temperatures above 130°F may cause burstil Never throw container into fire or incinerator.

FIRE HAZARD — Do not spray into or near fire open flame. Do not smoke white spraying.

STATEMENT OF PRACTICAL TREATMENT

W Swallowed — Contact a physician or post control center. Do not induce vomiting unle directed by a physician. Contains Petrole-Distillate. Vomiting may cause aspirate pneumonia. To physician — Atropine sulfate antidote.

Winhaled — Remove affected person to fresh Apply artificial respiration if indicated

Eyes or on Skin — Flush with plenty of wa

NOTICE

o warranty, expressed or impl use of this product other the H. Buyer assumes all rish the material when such by to label instruction

> 03-39 TN-1