

PLEASE NOTE

This image contains more than one label approved for this product on this date.



NM-35-1

ACTIVE INGREDIENT(S)

Disodium cyanodithioimdocarbonate.....	14.7%
Potassium N-methyldithiocarbamate.....	20.3%
INERT INGREDIENTS	65.0%
TOTAL	100.0%

**KEEP OUT OF REACH OF CHILDREN
DANGER**

FIRST AID

If in Eyes	- Hold eye open and rinse slowly and gently with water for 15-20 minutes. - Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. - Call a poison control center or doctor for further treatment advice.
If on Skin, Clothes	- Take off contaminated clothing. - Rinse skin immediately with plenty of water for 15-20 minutes. - Call a poison control center or doctor for treatment advice.
If Swallowed	- Call poison control center or doctor immediately for treatment advice. - Have person sip a glass of water, if able to swallow. - Do not induce vomiting unless told to do so by the poison control center or doctor. - Do not give anything by mouth to an unconscious person.
If Inhaled	- Move person to fresh air. - If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth-to-mouth if possible. - Call a poison control center or doctor for further treatment advice.

HOT LINE NUMBER

Have the product container or label with you when calling a Poison Control Center or doctor or going for treatment. You may also contact 901-278-0330 or 1-800-BUCKMAN for emergency medical treatment information.

NOTE TO PHYSICIAN

Probable mucosal damage may contraindicate the use of gastric lavage.

Precautionary Statements**HAZARDS TO HUMANS AND DOMESTIC ANIMALS**

DANGER: Corrosive. Causes irreversible eye damage and skin burns. Harmful if absorbed through skin or inhaled. Do not get in eyes, on skin, or on clothing. Wear goggles or face shield, rubber gloves and protective clothing. Harmful or fatal if swallowed. Avoid contamination of food. Wash thoroughly after handling and before eating, drinking, or using tobacco. Remove contaminated clothes and wash before reuse.

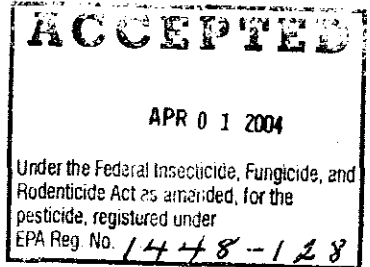
ENVIRONMENTAL HAZARDS: This pesticide is toxic to fish. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans or other waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) permit and the permitting authority 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.

Directions for Use

It is a violation of Federal law to use this product in a manner inconsistent with its labeling.

COOLING WATER SYSTEMS: NM-35-1 is used to inhibit the growth of microorganisms in industrial, commercial, and institutional cooling water systems. In noticeably fouled systems, NM-35-1 should be added at a rate of 1.5 to 3.0 fl oz of NM-35-1 per 1000 gallons of system water (15-ppm) until control is evident. Subsequent additions of NM-35-1 should be made to the system as needed at a rate of 0.5 to 3.0 fl oz of NM-35-1 per 1000 gallons of system water (5-30 ppm) to maintain control. The required frequency of treatment depends upon the severity of the microbiological problem. For the best results, the system should be cleaned prior to treatment.

INDUSTRIAL WATER PURIFICATION SYSTEMS: NM-35-1 is used to control microbiological fouling in industrial water purification systems including reverse osmosis systems, filters, clarifiers, and ion exchange equipment. For off-line treatment, NM-35-1 should be fed at concentration of 5.0 to 10.0 fl. oz. of NM-35-1 to 1000 gallons of water (50 - 100 ppm) for 4 to 8 hours. For on-line maintenance treatment, dosage of 1.0 to 2.0 fl. oz. of NM-35-1 per 1000 gallons of water (10 - 20 ppm) for 6 to 12 hours should be made once a week or as needed to maintain control. Not intended for use in potable water systems.



NEXT

LABEL

1448-128

04/01/2004

113

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

APR 1 2004

Buckman Laboratories, Inc.
1256 N. McLean Blvd.
Memphis, TN 38108

Attention: Jody L. Stobbe
Senior Regulatory Specialist

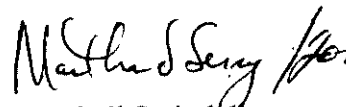
Subject: NM-35-1
EPA Registration No. 1448-128
Amendment Dated March 12, 2004

This will acknowledge receipt of your notification to add the Non-FIFRA statement "Not registered for this use in California" to the label, submitted under the provisions of FIFRA Section 3(c)(9). Based on a review of the submitted material, the following comments apply.

The notification is in compliance with PR Notice 98-10 and is acceptable. This information has been added to your file.

If you have any questions concerning this letter, please contact Martha Terry at (703) 308-6217.

Sincerely



Marshall Swindell
Product Manager (33)
Regulatory Management Branch 1
Antimicrobials Division (7510C)

CONCURRENCES

SYMBOL							
SURNAME							
DATE							



United States
Environmental Protection Agency
Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 1448-128	2. EPA Product Manager Marshall Swindell	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) NM-35-1	PM# 33	
5. Name and Address of Applicant (Include ZIP Code) Buckman Laboratories, Inc. 1256 North McLean Boulevard Memphis, TN 38108 <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.

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

Addition of "Not registered for this use in California." to the Industrial Water Purification Systems use pattern. First Aid correction: "If Ingested" changed to "If Swallowed" per amendment submitted January 19, 2004.

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 these products. I understand that it is a violation of 18 USC, § 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	If "Yes" Unit Packaging wgt. No. per container		<input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> 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 <input type="checkbox"/>		
6. Manner in Which Label is Affixed to Product <input 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 Jody L. Stobbe	Title Senior Regulatory Specialist	Telephone No. (Include Area Code) 901-272-8550
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 (Stamp!)
2. Signature 	3. Title Senior Regulatory Specialist	
4. Typed Name Jody L. Stobbe	5. Date March 12, 2004	

NM-35-1

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