

1543-1

9/16/2011

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
PREVENTION, PESTICIDES
AND TOXIC SUBSTANCES

September 16, 2011

Ms. Louise A. Chartier,
Regulatory Manager
W.F. Young, Inc.
302 Benton Drive
East Longmeadow, MA 01028

Subject: Notification to add Alternate Brand Name –ABN-
"Absorbine UltraShield Red Insecticide & Repellent"

EPA Reg No. / Name: 1543-1 / Absorbine WFY0901
Date of Applications: August 09 and September 15, 2011

Dear Ms Chartier:

The Agency is in receipt of your above referenced application for Pesticide Notification under Pesticide Registration (PR) Notice 98-10, for the subject product. The Registration Division (RD), after conducting a review of your request for its applicability, finds that the action requested fall within the scope of the aforementioned PR Notice.

Please note that we have approved the amended labeling for this product with the understanding that it is consistent with the Agency's previously stamped accepted label(s); and other than the above stated, no other changes have been made to the labeling and/or the Confidential Statement of Formula (CSF).

The label submitted with the application has been stamped "Notification" and will be placed in our records. If you have any questions regarding this letter, please contact me or Dr. B. A. Akinlosotu at (703) 605-0653.

Sincerely,


Richard Gebken,
Product Manager 10
Insecticide Branch
Registration Division (7505P)

Jx

Please read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0060

Print Form



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 1543-1	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) WFY0901	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) W. F. Young, Inc. 302 Benton Drive East Longmeadow, MA 01028 <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: <input checked="" type="checkbox"/> 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.)

Notification of one (1) alternate brand name per PR Notice 98-10.
Absorbine UltraShield Red Insecticide & Repellent
See attached statement.

Section - III

1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Unit Packaging wgt. _____ No. per container _____	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Package wgt. _____ No. per container _____	2. Type of Container <input checked="" type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input checked="" type="checkbox"/> Other (Specify) _____
* Certification must be submitted			
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input checked="" type="checkbox"/> Container	4. Size(s) Retail Container 4oz to 1 gallon	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 checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Other _____ <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 Louise A. Chartier	Title Regulatory Manager	Telephone No. (Include Area Code) 413-526-9990

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 <i>Louise A. Chartier</i>	3. Title Regulatory Manager
4. Typed Name Louise A. Chartier	5. Date September 15, 2011



United States
Environmental Protection Agency
Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 1543-1	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) WFY0901	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) W. F. Young, Inc. 302 Benton Drive East Longmeadow, MA 01028 <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: <input checked="" type="checkbox"/> 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.)

Notification of two (2) alternate brand names per PR Notice 98-10.
Absorbine UltraShield Broad Spectrum Control Insecticide & Repellent
Absorbine UltraShield Red Insecticide & Repellent
See attached statement.

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	Metal <input checked="" type="checkbox"/> Plastic <input checked="" type="checkbox"/> Glass _____ Paper _____ Other (Specify) <input checked="" type="checkbox"/>			
* Certification must be submitted		If "Yes" Unit Packaging wgt. _____ No. per container _____	If "Yes" Package wgt. _____ No. per container _____			
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input checked="" type="checkbox"/> Container		4. Size(s) Retail Container 4oz to 1 gallon		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 checked="" type="checkbox"/> Lithograph <input checked="" 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 Louise A. Chartier	Title Regulatory Manager	Telephone No. (Include Area Code) 413-526-9999
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.		3. Date Application Received (Stamped)
2. Signature <i>Louise A. Chartier</i>	3. Title Regulatory Manager	
4. Typed Name Louise A. Chartier	5. Date August 9, 2011	

WFY0901
EPA Reg. No. 1543-1
Master Label

**READ ENTIRE LABEL BEFORE EACH USE
USE ONLY ON HORSES AND PONIES**

(Blanket your horse with WFY0901 protection (from Absorbine®))
(Broad-spectrum control (from Absorbine®))
(Protect your horses (with Absorbine®))

DIRECTIONS FOR USE:

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

General Precautions & Use Restrictions

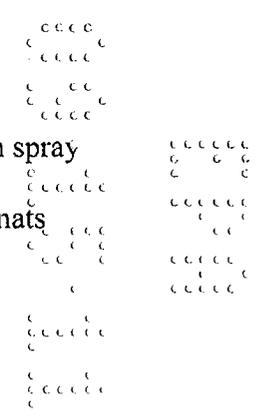
- Not for broadcast use.
- Do not apply as a space spray.
- Except when applying to horses, do not allow adults, children or pets to enter the treated area until sprays have dried.
- Except when applying to horses, do not apply this product in a way that will contact any person or pet either directly or through drift. Keep people and pets out of the area during application.
- Remove or cover exposed food and drinking water before application.
- Remove or cover dishes, utensils, food processing equipment and food preparation surfaces or wash them before use.
- During any indoor surface application, do not allow dripping or runoff to occur.
- Do not apply directly into sewers or drains or to any area like a gutter where drainage to storm sewers, water bodies or aquatic habitat can occur. Do not allow the product to enter any drain during or after application.
- Do not use on foals less than 12 weeks of age.
- Do not use on horses intended for human consumption.
- Remove pets, birds and cover fish aquariums before surface spraying.

HOLD CONTAINER UPRIGHT. SHAKE WELL BEFORE USING.

Spray or wipe on.

Ready to use. No mixing necessary. This formulation may be applied directly with spray applicator or as a wipe-on.

(7 day formula provides repellency and protection from biting and nuisance flies, gnats and mosquitoes.)



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USE ONLY ON HORSES, PONIES, LLAMAS, ALPACAS, MULES AND DONKEYS.

Cannot be used on domestic animals such as dogs and cats.

Kills and repels biting and nuisance flies, gnats and mosquitoes for up to 7 days. Including: Horse Flies, Stable Flies, Face Flies, Horn Flies, Deer Flies, House Flies, Black Flies, Barn Flies, Cluster Flies, Sciarid Flies, Gnats, Midges, Punkies, No-See-Ums, Chiggers, and Fleas. Kills ticks including: Deer Ticks, Lone Star Ticks, American Dog Ticks, Brown Dog Ticks and Gulf Coast Ticks.

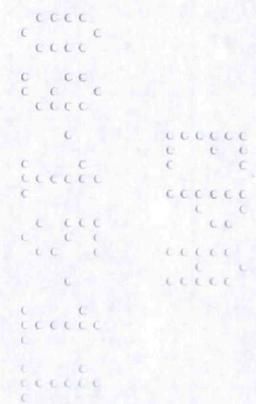
USE AS A WIPE OR A SPRAY: This product may be applied either as a wipe or as a spray. When applying as a wipe, or on the animal's face, always use a soft cloth. When possible, first brush animal to remove excess dirt and dust. Spray or wipe animal's entire body while brushing against the lay of the coat to ensure adequate coverage. Avoid getting spray into animal's eyes, nose or mouth. Do not wet skin, or apply to the point of dripping or exceed two ounces per application. Reapply every 7 days under normal conditions. Reapply each time animal is washed or exposed to heavy rain for best results. When possible, after application, brush thoroughly to bring out bright sheen on the coat.

USE AS A ROLL ON: Remove cap from bottle. Apply around animal's nose, eyes, ears and mouth. May also be used as a spot treatment on areas where flies gather. Avoid direct application to eyes, nose and mouth. Replace cap after use.

USE AS A PREMISE SPRAY: Kills insects on contact such as: American Cockroaches, German Cockroaches, Oriental Cockroaches, Smokey Brown Cockroaches, Carpenter Ants, House Flies, Stable Flies, Black Flies, American Dog Ticks, Brown Dog Ticks and Fleas.

Apply as a spot and crack & crevice treatment in stables, barns and animal quarters. Apply at a rate of 1.5 gallons per 1000 sq. ft.

Spray in areas where insects congregate. Direct spray to contact insects for rapid knockdown and kill. Spray around door facings and screens to render area unattractive to insects. This will help to repel insects and prevent entrance into building.



WFY0901
EPA Reg. No. 1543-1
Master Label

- (Kills and repels like no other Absorbine® formula)
- (Kills and repels five (5) (different) ways)
- (Works five (5) (different) ways)
- (Rapid knockdown and kill)
- (Five (5) Active Ingredient Combination (Com) Formula)
- (Multiple (Multi) Active Formula with Five (5) Actives)
- (Formula Contains (Con) Five (5) Optimal (Opt) Actives)
- (Opt In To The (New) Formula With Five (5) Active Ingredients)

() Denotes alternate text in addition to any subset of the directions for use

