1757-8

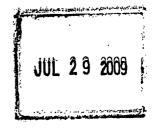
07/29/200

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460

> OFFICE OF PREVENTION, PESTICIDES AND TOXIC SUBSTANCES

Kathryn Ingram, Regulatory Specialist Ashland, Inc. 7910 Baymeadows Way Jacksonville, FL 32256

Subject: Notification per PR Notice 2007-4 Wrico BGA EPA Registration Number: 1757-87 Application Date: July 1, 2009 Receipt Date: July 6, 2009



Dear Ms. Ingram:

This is to acknowledge the notification submitted under the provisions of PR Notice 2007-4, FIFRA section 3(c) 9.

Proposed Notification:

Label change as per PR Notice 2007-4.

Comment:

The notification is acceptable. A copy has been inserted in your file for future reference.

Should you have further questions concerning this letter, please contact me by telephone at (703) 308-6415 or by e-mail at <u>lantz.tracy@epa.gov</u> or Killian Swift of my staff by telephone at (703) 308-6346 email address at: <u>swift.killian@epa.gov</u> during the hours of 8:00 am to 4:00 pm EST. When submitting information or data in response to this letter, a copy of this letter should accompany the submission to facilitate processing.

Sincerely yours,

Dray Last

Tracy Lantz Acting Product Manager 34 Regulatory Management Branch II Antimicrobials Division (7510P)

| lesse read instructions on reverse before of thing form.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Form Appr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | OV0 MB No. 2070-                                                                                                              | Print Form                                                                                                                                    |
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| United States<br>Environmental Protection<br>Washington, DC 20460                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | n Agency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Registratio<br>Amendmer<br>× Other                                                                                            | n OPP Identifier Number                                                                                                                       |
| Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | for Pesticide - Sec                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | tion I                                                                                                                        |                                                                                                                                               |
| . Company/Product Number<br>1757-87                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>2. EPA Product Man</b><br>Adam Heyward -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                               | 3. Proposed Classification                                                                                                                    |
| . Company/Product (Name)<br>Wrico BGA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>PM#</b><br># 34                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                               | None Restricte                                                                                                                                |
| Name and Address of Applicant (Include ZIP Code)<br>Drew Industrial Division, Ashland Chemical Company, Divis<br>of Ashland Inc. One Drew Plaza Boonton, NJ 07005                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | sion (b)(i), my product i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                               | with FIFRA Section 3(c)(3) in composition and labeling                                                                                        |
| Check if this is a new address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Product Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                               |                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Section - II                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                               |                                                                                                                                               |
| Amendment - Explain below.<br>Resubmission in response to Agency letter dated<br>Notification - Explain below.<br>Explanation: Use additional page(s) if necessary. (For section I<br>Notification of a label change per PR Notice 2007-4. This not<br>requirements of EPA's regulations at 40 CFR 156.10, 156.140<br>statements.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Agency lett<br>"Me Too" /<br>Other - Exp<br>I and Section II.)<br>stification is consistent with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Application.<br>Iain below.<br>the guidance in PR N                                                                           |                                                                                                                                               |
| . Msterial This Product Will Be Packaged In:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Section - III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                               |                                                                                                                                               |
| Child-Resistant Packaging<br>Yes*<br>No<br>Cartification must<br>be submitted<br>Unit Packaging<br>Yes<br>No<br>No<br>No<br>No<br>No, per<br>Unit Packaging                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Water Soluble Packaging<br>Yes<br>No<br>If "Yes" No. per<br>Package wgt containe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | PI<br>GI<br>Pi                                                                                                                | etal                                                                                                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | il Containes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 5. Location of Label D                                                                                                        |                                                                                                                                               |
| Location of Net Contents Information 4. Size(s) Retail                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | li Container                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | On Label                                                                                                                      | irections<br>secompanying product                                                                                                             |
| Label Container                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | uph Othe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | On Label<br>On Labeling                                                                                                       |                                                                                                                                               |
| Label Container                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | uph Othe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | On Label<br>On Labeling                                                                                                       |                                                                                                                                               |
| Label Container<br>Manner in Which Label is Affixed to Product Lithogra<br>Paper gi<br>Stenciled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Dothe Othe<br>d<br>Section - IV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | On Label<br>On Labeling                                                                                                       | accompanying product                                                                                                                          |
| Label Container<br>Manner in Which Label is Affixed to Product Lithogra<br>Paper gli<br>Stenciler<br>Contact Point <i>(Complete items directly below for identification</i><br>Label Contact Point <i>(Complete items directly below for identification</i> )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Dothe Othe<br>d<br>Section - IV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | if necessary, to process                                                                                                      | accompanying product                                                                                                                          |
| Label Container<br>Manner in Which Label is Affixed to Product Lithograg<br>Paper gli<br>Stenciler<br>Contact Point <i>(Complete items directly below for identification</i><br>Lame                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Defini | if necessary, to proces<br>Tel<br>90<br>e, accurate and comple                                                                | eccompanying product<br>es this application.)<br>ephone No. (Include Area Code)<br>4/256-0311<br>6. Date Application<br>Recijved              |
| Label   Container     i. Manner in Which Label is Affixed to Product   Lithographic player gliphic stenciled     i. Manner in Which Label is Affixed to Product   Lithographic player gliphic stenciled     i. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete it | Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Defini | on Label<br>On Labeling<br>if necessary, to process<br>Tel<br>90<br>e, accurate and complete<br>the or imprisonment corr<br>c | eccompanying product<br>ss this application.)<br>aphone No. (Include Area Code)<br>4/256-0311<br>6. Dete Application<br>Reculyed<br>(Stamped) |
| Label   Container     i. Manner in Which Label is Affixed to Product   Lithograg<br>Paper gli<br>Stenciled     i. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. Contact Point   (Complete items directly below for identification)     I. contact Point   (Complete items directly below for identification)     I. contact Point   (Complete items)  <             | Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Definition<br>Defini | on Label<br>On Labeling<br>if necessary, to proces<br>Tel<br>90<br>e, accurate and comple<br>he or imprisonment or            | eccompanying product<br>es this application.)<br>ephone No. (Include Area Code)<br>4/256-0311<br>6. Date Application<br>Received<br>(Stamped) |

EPA Form 8570-1 (Rev. 8-94) Previous editions are obsolete.

.

Yallow - Applicant Copy



Name Kathryn Ingram Title Regulatory Specialist

# **Ashland Hercules Water Technologies**

7910 Baymeadows Way Jacksonville, FL 32256 KRIngram@Ashland.com

July 1, 2009

55

Document Processing Desk (NOTIF) Office of Pesticides Programs (7504P) Antimicrobials Division U.S. Environmental Protection Agency Room S-4900, One Potomac Yard 2777 South Crystal Drive Arlington, VA 22202-4501

## Subject: Wrico BGA; EPA Registration # 1757-87 Notification per PR Notice 2007-4

Dear Mr. Heyward:

This submission is to notify the EPA of a label change to the Storage & Disposal section of the Wrico BGA label per PR Notice 2007-4.

This notification is consistent with the guidance in PR Notice 2007-4 and the requirements of EPA's regulations at 40 CFR 156.10, 156.140, 156.144, 156.146, and 156.156. No other changes have been made to the labeling or the Confidential Statement of Formula for 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 the amended label is not consistent with the requirements of 40 CFR 156.10, 156.140, 156.140, 156.144, 156.146, and 156.156, 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.

Enclosed are the following:

- Application form, EPA Form 8570-1
- · Revised product label with changes clearly marked

Please send all correspondence to the following address: Ashland Inc 7910 Baymeadows Way Jacksonville, FL 32256 Attn: Kathryn Ingram

Please contact me at 904-256-0311 or via email at <u>KRIngram@Ashland.com</u> with questions or comments regarding this submission. Thank you for your assistance.

Thank you,

athryn Angan



K

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WRICO<sup>®</sup> BGA

NOT Detel Reviou

٠.

Industrial Microbiocide

| ACTIVE INGREDIENTS                               |  |
|--------------------------------------------------|--|
| Potassium salt of Ortho-benzyl-para-chlorophenol |  |
| INERT INGREDIENTS                                |  |
| TOTAL                                            |  |

# **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.<br>Remove contact lenses, if present, after the first 5 minutes, then continue<br>rinsing. Call a poison control center or doctor for treatment advice.                                                  |
| IF ON SKIN   |                                                                                                                                                                                                                                                                                  |
| OR CLOTHING  | Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Call a poison control center or doctor for further treatment advice.                                                                                                              |
| IF INHALED   | Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible. Call a poison control center or doctor for further treatment advice.                                                    |
| IF SWALLOWED | Call a Poison Control Center or doctor immediately for treatment advice.<br>Have person sip a glass of water if able to swallow. Do not induce<br>vomiting unless told to do so by a Poison Control Center or doctor.<br>Do not give anything by mouth to an unconscious person. |

In case of emergency call toll free: 1-800-274-5263 or 1-800-ASHLAND

NOTE TO PHYSICIAN: Probable mucosal damage may contraindicate the use of gastric lavage. Measures against circulatory shock, respiratory depression, and convulsions may be needed.

## SEE SIDE PANEL FOR ADDITIONAL PRECAUTIONARY STATEMENTS

| EPA Reg. No. 1757-87                              |             | Est. No. 1757-NJ-1<br>1757-TX-1<br>18533-KS-1<br>50522-TX-001 |  |
|---------------------------------------------------|-------------|---------------------------------------------------------------|--|
| FOR INDUSTRIAL USE ONLY<br>NET CONTENTS MARKED ON | DRUM        | 74655-GA-QQ1                                                  |  |
| 07/01/2009                                        | Page 1 of 3 | ن ن دی<br>ن ز د<br>ز ز ر                                      |  |

#### PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS AND DOMESTIC ANIMALS

# DANGER

CORROSIVE. CAUSES IRREVERSIBLE EYE DAMAGE AND SKIN BURNS. HARMFUL IF SWALLOWED OR ABSORDED THROUGH THE SKIN.

Do not get in eyes, skin, or on clothing. Avoid breathing spray mist. Users should wash hands before eating, drinking, chewing gum, using tobacco or using the toilet. Remove contaminated clothing and wash before reuse.

Applicator and other handlers must wear long-sleeved shirt and long pants; socks and shoes; goggles or face shield; chemical-resistant gloves (such as barrier laminate, butyl rubber, nitrile rubber, neoprene rubber, polyvinyl chloride, or viton.)

Follow manufacturer's instructions for cleaning/maintaining Personal Protective Equipment (PPE). If no such instructions for washables exist use detergent and hot water. Keep and wash PPE separately from other laundry. If pesticide gets inside clothing, remove clothing immediately, wash thoroughly, and put on clean clothing. Users should remove PPE immediately after handling this product. Wash the outside of gloves before removing. As soon as possible, wash thoroughly and change into clean clothing.

#### ENVIRONMENTAL HAZARD

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.

#### DIRECTIONS FOR USE IT IS A VIOLATION OF FEDERAL LAW TO USE THIS PRODUCT IN A MANNER INCONSISTENT WITH ITS LABELING.

Do not apply this product in a way that will contact workers or other persons, either directly or through drift. Only protected handlers may be in the area during application.

Badly fouled systems should be cleaned before treatment is begun.

INDUSTRIAL RECIRCULATING WATER SYSTEMS: For control of bacteria and algae in industrial cooling towers and evaporative condensers, treat the system with 6.4 – 25.6 fluid ounces of WRICO BGA microbioicde per 1000 gallons of water in the system.

INITIAL DOSE: When the system is noticeably fouled, ad 13.0 – 25.6 fluid ounces of WRICO BGA microbiocide per 1000 gallons of water in the system. Repeat until control is evident.

SUBBSEQUENT DOSE: When microbial control is evident add 6.4 – 12.8 fluid ounces of WRICO BGA microbiocide per 1000 gallons of water in the system as needed to maintain control.co

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INDUSTRIAL PROCESS WATER SYSTEMS: For control of bacteria in industria process water systems, treat the system with 6.4 – 25.6 fluid ounces of WRICO BGA microbiocide per 1000 gallons of water in the system.

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### STORAGE AND DISPOSAL Do not contaminate water, food, or feed by storage or disposal

PESTICIDE STORAGE: Store drums in well ventilated, dry area.

PESTICDE DISPOSAL: Pesticide wastes are acutely hazardous. Improper disposal of excess pesticide, spray mixture, or rinsate is a violation of Federal Law. If there wastes cannot be disposed of by use according to label instructions, contact your Regional Office of the EPA for guidance.

CONTAINER HANDLING: Nonrefillable container. Do not reuse or refill this container. Triple rinse container (or equivalent) promptly after emptying. Offer for reconditioning, if appropriate. Triple rinse as follows: Empty the remaining contents into application equipment or a mix tank. Fill the container ¼ full with water. Replace and tighten closures Tip container on its side and toll it back and forth, ensuring at least one complete revolution, for 30 seconds. Stand the container on its end and tip it back and forth several times. Turn the container over onto its other end and tip it back and forth several times. Empty the rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Repeat this procedure two more times.

IMPORTANT NOTICE: SELLER WARRANTS THAT THE PRODUCT CONFORMS TO ITS CHEMCIAL DESCRIPTION. ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING THE WARRANTIES OF MERCHANTABILITY AND FITNESSS FOR A PARTICULAR PURPOSE, ARE DISCLAMINED. BUYER ACCEPTS FULL RESPONSIBILITY FOR COMPLIANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS.

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CAUSTIC ALKALI LIQUIDS, N.O.S. (CONTAINS POTASSIUM HYDROXIDE) UN1719



07/01/2009