

2724-75

1-5-2001

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Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 2-28-95

 <p>United States Environmental Protection Agency Washington, DC 20460</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><input type="checkbox"/> Registration</td> <td style="width:50%;">OPP Identifier Number</td> </tr> <tr> <td><input type="checkbox"/> Amendment</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Other</td> <td></td> </tr> </table>	<input type="checkbox"/> Registration	OPP Identifier Number	<input type="checkbox"/> Amendment		<input checked="" type="checkbox"/> Other		
<input type="checkbox"/> Registration	OPP Identifier Number							
<input type="checkbox"/> Amendment								
<input checked="" type="checkbox"/> Other								

Application for Pesticide - Section I

1. Company/Product Number Wellmark International/2724-75	2. EPA Product Manager G. Tompkins	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Wellmark International/Vet-Kem Kemic Flea & Tick Powder	PM # 04	
5. Name and Address of Applicant / Registrant (Include ZIP Code) Wellmark International 1100 East Woodfield Road Suite 500 Schaumburg, Illinois 60173 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(C)(3) (b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	

Section - II

<input type="checkbox"/> Amendment - Explain below. <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application <input type="checkbox"/> Other - Explain below.
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NOTIFICATION
JAN 05 2001

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

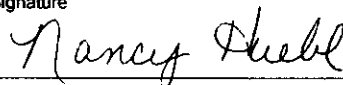
Label Notification: Additional marketing claims, address change

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of 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 this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

Section - III

1. Material This Product Will be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Type of Container <input checked="" type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input checked="" type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
* Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Unit Packaging wgt. No. per container
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container 5 oz	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Label Accompanying Product
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input type="checkbox"/> Other _____	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Nancy Huebl	Title Regulatory Specialist	Telephone No. (include Area Code) (847) 330-5376
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 statements may be punishable by fine or imprisonment or both under applicable law.		6. Date Application Received (Stamped)
2. Signature 		3. Title Regulatory Specialist
4. Typed Name Nancy Huebl		5. Date December 20, 2000

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Label Review Sheet

FILENAME: G:\LABELS\CAHSPEC\
 02724075\dec 00 flea tick
 powder notif tte

COVERSHEET December 2000
UPDATE:

PRODUCT: Vet-Kem Kemic Flea & Tick
 Powder

EPA REG. NO.: 2724-75

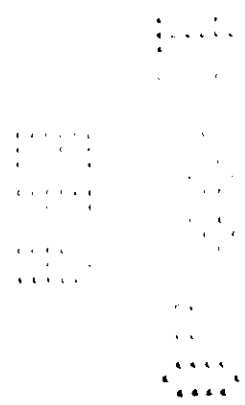
APPROVED Notif submitted 12/21/00
SUPERSEDES: 6/4/99

NOTIFICATION

JAN 05 2000

OVERVIEW: Additional marketing claims

Page #	Description of Major Changes
1	Marketing claims added: Controls fleas & ticks For dogs & cats 12 weeks of age Tested, trusted, effective
3	Address change



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[] indicates optional text

NOTIFICATION

JAN 0 5 2000

VET-KEM® KEMIC FLEA & TICK POWDER

For use on adult cats/dogs over 12 weeks of age
Controls Fleas and Ticks
For Dogs & Cats 12 weeks of age
Tested, Trusted, Effective
Available Through Veterinarians
[Step 4][Part of the (Brand Name)(#) step Pet Protection Program]
100% Satisfaction Guaranteed

ACTIVE INGREDIENT:

Carbaryl (CAS #63-25-2)..... 5.25%

OTHER INGREDIENTS:..... 94.75%

TOTAL:..... 100.00%

KEEP OUT OF REACH OF CHILDREN

CAUTION

See back panel for additional Precautions

NET WEIGHT:



**READ ENTIRE LABEL BEFORE EACH USE
USE ONLY ON DOGS OR CATS**

DIRECTIONS FOR USE: It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

Kemic may be used as an aid in the control of Brown Dog Ticks on dogs, cats, and premises and is effective against fleas on dogs and cats.

This product should not be applied by children. Use product only outside or in a well-ventilated area.

For control of ticks and fleas on dogs and cats: Wearing household latex or rubber gloves, dust entire animal, avoiding pet's eyes, nose, mouth, and genital areas. Rub or brush pet's hair to work dust down to the skin. Be sure to apply also to the feet, between the toes, and on the legs. Comb out dead ticks a few hours after treatment.

When dusting mother dogs or cats, remove the mother for treatment and return her to the puppies or kittens after one or two hours. Repeat every week if needed.

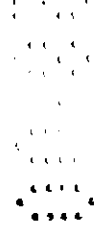
In kennels, dog houses: Dust in and around sleeping quarters and other areas where ticks and fleas occur. Dust pet bedding and doghouse using a shaker can or other dust applicator.

STORAGE AND DISPOSAL: Store in original closed container away from children. Do not reuse empty container. Wrap and put in trash.

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS - CAUTION: May be harmful if swallowed. Avoid breathing dust. Avoid contact with eyes, skin, or clothing. Wash thoroughly after handling. Do not use this product in places where food is prepared or processed. Consult a veterinarian before using this product on debilitated, aged, animals on medication, or nursing animals. Do not use on pregnant dogs or cats. Do not use on kittens or puppies under 12 weeks of age. Sensitivities may occur after using ANY pesticide product for pets. If signs of sensitivity occur bathe your pet with mild soap and rinse with large amounts of water. If signs continue, consult a veterinarian immediately. Do not use this product on animals simultaneously or within 30 days before or after treatment with or exposure to cholinesterase inhibiting drugs, pesticides, or chemicals.

FIRST AID: **If Swallowed,** call a physician/veterinarian or Poison Control Center. Drink 1 or 2 glasses of water and induce vomiting by touching back of throat with finger. If person is unconscious, do not give anything by mouth and do not induce vomiting. **If Inhaled,** remove individual to fresh air. If not breathing, give artificial respiration, preferably mouth-to-mouth. Get medical attention. **If in Eyes,** flush eyes with plenty of water. Call a physician/veterinarian if irritation persists. **If on Skin,** wash with plenty of soap and water. Get medical attention if irritation persists.



NOTE TO PHYSICIAN/VETERINARIAN: Atropine and homatropine are antidotal only if symptoms of cholinesterase inhibition are present. Usual symptoms in animals include salivation, labored breathing, incoordination, and pin-point pupils.

USER SAFETY REQUIREMENTS

- Wear long-sleeved shirt, long pants, shoes plus socks, and household latex or rubber gloves when applying this product.
- Change clothing as soon as possible after use, wash clothing before reuse.
- Wash the outside of gloves before removing. As with any pesticide product, wash hands thoroughly with soap and water immediately after handling and before eating, smoking, or using the toilet.

Seller makes no warranty, expressed or implied, concerning the use of this product other than indicated on the label. Buyer assumes all risk of use and handling of this material when such use and handling is contrary to label instructions.

Visit our web site: [web site URL]

Wellmark International
Schaumburg, IL 60173

EPA Reg. No. 2724-75
Made in USA

EPA Est. No.

VET-KEM® is a registered trademark of Wellmark International.

For information, or in case of an emergency, call [phone number]

