

3432-31

03/17/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460



Office of Pesticide Programs

MAR 17 2009

**FILE COPY**

Al Pastore  
N.Jonas and Co., Inc.  
4520 Adams Circle  
Bensalem, PA 19020

Subject: **Algaecide**  
EPA Registration Number: 3432-31  
Application Dated: March 6, 2009  
Receipt Dated: March 11, 2009

Dear Mr. Pastore:

This acknowledges receipt of your notification, submitted under the provision of PR Notice 98-10, FIFRA Section 3(c) 9.

**Proposed Notification:**

- Proposed Alternate Brand Name " Under the Sun Algaecide-30 "

**General Comment:**

Based on a review of the material submitted, the following comment applies:

This notification is accepted and a copy has been inserted in your file for future reference.

Should you have any questions concerning this letter, please contact Wanda Henson at (703) 308-6345.

Sincerely,

Wanda Henson  
Product Reviewer (32)  
Regulatory Management Branch II  
Antimicrobials Division (7510P)

<p>United States  <b>Environmental Protection Agency</b>                  Washington, DC 20460</p>	<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>	<b>Registration                  Amendment                  Other</b>	OPP Identifier Number
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**Application for Pesticide - Section I**

<b>1. Company/Product Number</b> 3432-31	<b>2. EPA Product Manager</b>  PM# <span style="font-size: 24px; margin-left: 20px;">32</span>	<b>3. Proposed Classification</b> <input type="checkbox"/> None <input type="checkbox"/> Restricted
<b>4. Company/Product (Name)</b> ALGAECIDE	<b>6. Expedited Review.</b> In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: <input checked="" type="checkbox"/> EPA Reg. No. _____ Product Name _____	
<b>5. Name and Address of Applicant (Include ZIP Code)</b> N.Jonas and Co., Inc. 4520 Adams Circle Bensalem, PA.19020  <input type="checkbox"/> Check if this is a new address		

**Section - II**

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

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

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 DFR 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 statements to the EPA. I further understand that if this notification is not consistent with the terms of PR 98-10 and CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under section 12 and 14 of FIFRA.

Proposed Alternate Brand Name is: Under the Sun Algaecide-30

**Section - III**

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

**Section - IV**

<b>1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)</b>			
<b>Name</b> Al Pastore	<b>Title</b> Technical Director	<b>Telephone No. (Include Area Code)</b> 215-639-8071	
<p style="text-align: center;"><b>Certification</b></p> I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment both under applicable law.			<b>6. Date Application Received (Stamped)</b>  <div style="border: 1px dashed gray; width: 100px; height: 100px; margin: 0 auto;"></div>
<b>2. Signature</b> 	<b>3. Title</b> Technical Director		(Grid area for stamping)
<b>4. Typed Name</b> Al Pastore	<b>5. Date</b> 3-6-09		



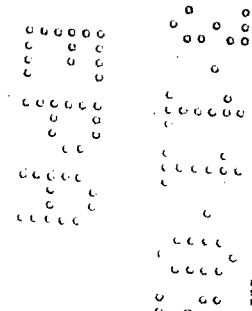
Subject: Pro Algaecide  
EPA Registration Number 3432-31  
Application Date 3-6-09

Dear Wanda Y. Henson  
Product Manager 32  
Regulatory Management Branch II  
Antimicrobials Division (7510P)

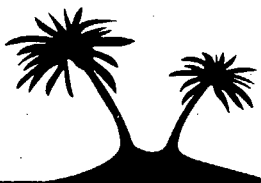
Enclosed is the Proposed Alternate Brand Name: Under the Sun Algaecide-30,  
Form 8570-1 and a stamped copy of the accepted label.

Sincerely,

Al Pastore  
Technical Director



Under  
the Sun



# Algaecide-30

**EFFECTIVE AGAINST GREEN,  
BLACK & MUSTARD ALGAE**

- NO FOAMING • NO STAINING
- NO DISCOLORATION • NO METALS

**ACTIVE INGREDIENT:**

Poly [oxyethylene (dimethyliminio)  
ethylene-(dimethyliminio)  
ethylene dichloride] ..... 30%  
**OTHER INGREDIENT** ..... 70%  
**TOTAL** 100%

This product contains 2.88 lbs. of active ingredient per gallon and weighs 8.97 lbs. per gallon

**KEEP OUT OF REACH OF CHILDREN**

**CAUTION**

See back panel for additional precautions

**Net Cont: 1 qt.**

Mfg. by: N. JONAS AND CO., INC. • Bensalem, PA 19020

EPA EST. NO. 3492-PA-1 • EPA REG. NO. 3492-11

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**PRECAUTIONARY STATEMENT**

**HAZARDS TO HUMANS AND DOMESTIC ANIMALS**

**CAUTION:** Harmful if swallowed. Avoid breathing vapors. Avoid contact with skin, eyes, or clothing.

FIRST AID	
<b>IF SWALLOWED</b>	<ul style="list-style-type: none"> <li>• Call a poison control center or doctor immediately for treatment advice.</li> <li>• Have person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by a poison control center or doctor.</li> <li>• Do not give anything by mouth to an unconscious person.</li> </ul>
<b>IF INHALED</b>	<ul style="list-style-type: none"> <li>• Move person to fresh air.</li> <li>• If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth, if possible.</li> <li>• Call a poison control center or doctor for further treatment advice.</li> </ul>
<b>IF ON SKIN OR CLOTHING</b>	<ul style="list-style-type: none"> <li>• Take off contaminated clothing.</li> <li>• Rinse skin immediately with plenty of water for 15-20 minutes.</li> <li>• Call a poison control center or doctor for treatment advice.</li> </ul>
<b>IF IN EYES</b>	<ul style="list-style-type: none"> <li>• Hold eye open and rinse slowly and gently with water for 15-20 minutes.</li> <li>• Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye.</li> <li>• Call a poison control center or doctor for treatment advice.</li> </ul>
Have the product container or label with you when calling a poison control center or doctor, or going for treatment.	

**DIRECTIONS FOR USE**

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

This product is used to prevent and control the growth of algae, including so called "black algae", in swimming pools. For maximum effectiveness, pools containing heavy growth of algae should be cleaned prior to using this product. For pools having visible growth of algae, add an initial dose of 24 to 36 oz. per 10,000 gal. water and remove settled algae debris by cleaning (vacuuming). For treatment of freshly cleaned and filled pool, add initial dose 14 to 24 ozs. per 10,000 gal. pool water. To maintain pools free of visible algae growth, subsequent additions of 4 1/2 ozs. per 10,000 gal. (aprox. 1 oz. per 2,500 gal.) should be used every 5-7 days after initial treatment. Uniform distribution is necessary. Pour this product all around pool and throughout the pool water for maximum effectiveness. This product is compatible with those chemicals normally used to treat pools and is effective at both acid and alkaline pH. This product can be used in pools treated with chlorine chemicals and may reduce the amount of those chemicals normally required. However, do not mix this product with concentrated dry or liquid chlorine products.

**STORAGE AND DISPOSAL:** Do not contaminate water, food, or feed by storage or disposal.

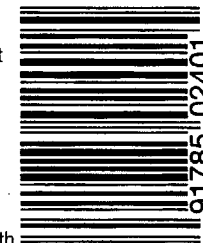
**PESTICIDE STORAGE:** Keep container closed and in cool place when not in use. Leaking or damaged containers should be placed in a plastic bag and discarded in trash. Mop up spills with clear water. All pesticides should be kept out of reach of children and stored away from food.

**PESTICIDE DISPOSAL:** Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility.

**PESTICIDE CONTAINER:** Do not reuse container. Rinse thoroughly before discarding in trash.

**TO CALCULATE GALLONAGE FOR ROUND OR OVAL POOLS:**  
Multiply diameter x diameter x average depth (all in feet) x 5.9 = gallons.

**FOR RECTANGULAR POOLS:** Multiply length x width x average depth (all in feet) x 7.5 = gallons.



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