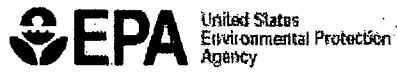


3432-61

2/24/2009

1/7

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460



Office of Pesticide Programs

FEB 24 2009

**FILE COPY**

Wendy A. McCombie  
Agent for N. Jonas & Co., Inc.  
c/o Lewis & Harrison  
122 C Street NW Ste. 740  
Washington, DC 20001

Subject: Maxi Clor Super 3" Chlorinating Tablets  
EPA Registration No. 3432-61  
Application Date: January 26, 2009  
Receipt Date: February 02, 2009

Dear Ms. McCombie:

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

**Proposed Notification:**

- Addition of Environmental Hazards statement
- Revision of Storage and Disposal statement per PR Notice 2007-4
- Addition of "and First Aid" to the statement, "See [back] [side] panel for additional precautions."

**General Comments:**

Based on a review of the material submitted, the following comments apply:

The notification application is acceptable and a copy has been inserted in your file for future reference.

Should you have any questions or comments concerning this letter, please contact me at (703) 308-6345.

Sincerely,

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



**EPA**

United States  
**Environmental Protection Agency**  
 Washington, DC 20460

- Registration  
 Amendment  
 **Other NOTIFICATION**

OPP Identifier Number

**Application for Pesticide - Section I**

1. Company/Product Number <b>3432-61</b>	2. EPA Product Manager <b>Emily Mitchell</b>	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) <b>MAXI-CLOR SUPER 3" CHLORINATING TABLETS</b>	PM# <b>Team 32</b>	
5. Name and Address of Applicant (Include ZIP Code) <b>N. Jonas &amp; Co., Inc. 4520 Adams Circle Bensalem, PA 19020</b>	6. <b>Expedited Review.</b> 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 _____	

**NOTE: PLEASE SEND ALL CORRESPONDENCE TO "CONTACT POINT" LISTED BELOW**  
 Check if this is a new address

**Section - II**

- Amendment - Explain below.  Final printed labels in response to Agency letter dated \_\_\_\_\_  
 Resubmission in response to Agency letter dated \_\_\_\_\_  "Me Too" Application  
 Notification - Explain below.  Other - Explain below

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

**APPLICATION FOR NOTIFICATION: MINOR LABEL CHANGES**

**Notification of Minor Label Changes in Accordance With PR Notices 1998-10, 2007-1 and 2007-4**

*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 95-2 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be the subject to enforcement action and penalties under sections 12 and 14 of FIFRA.*

Signature: [Signature] Date: 26 JAN 2009

**THIS SUBMISSION IS NOT SUBJECT TO PRIA FEES**

**Section - III**

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

**Section - IV**

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application)				
Name <b>Wendy A. McCombie, Lewis &amp; Harrison 122 C Street NW Ste. 740, Washington DC 20001</b>	Title <b>Agent for N. Jonas &amp; Co., Inc.</b>	Telephone No. (Include Area Code) <b>202-393-3903 ext. 11</b>		
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received (Stamped)	
2. Signature <u>[Signature]</u>		3. Title <b>Agent for N. Jonas &amp; Co., Inc.</b>		
4. Typed Name <b>Wendy A. McCombie, Lewis &amp; Harrison</b>		5. Date <b>January 26, 2009</b>		

# LEWIS & HARRISON

Consultants in Government Affairs

122 C Street, N.W., Suite 740  
Washington, D.C. 20001

telephone 202.393.3903  
fax 202.393.3906

direct 202.393.3903 ext. 11  
wmccombie@lewisharrison.com

January 26, 2009

**HAND DELIVERED**

Registration Division (Mail Code 7504P)  
Office of Pesticide Programs  
Document Processing Desk [NOTIFY]  
U.S. Environmental Protection Agency  
Room S-4900, One Potomac Yard  
2777 South Crystal Drive  
Arlington, VA 22202

**ATTENTION: Emily Mitchell**  
**Product Manager, Team 32**  
**Antimicrobials Division**

**SUBJECT: N. Jonas & Company Inc.**  
**Maxi-Clor Super 3" Chlorinating Tablets (EPA Reg. No. 3432-61)**  
**Notification of Minor Label Changes per PR Notices 1998-10, 2007-1, and 2007-4**  
**This Submission Is Not Subject To PRIA Fees**

Dear Ms. Mitchell:

As Agent for N. Jonas & Company Inc. ("Jonas"), I am submitting a Notification under the provisions of PR Notices 1998-10, 2007-1 and 2007-4 to advise the Agency of minor changes to the label for **Maxi-Clor Super 3" Chlorinating Tablets (EPA Reg. No. 3432-61)**.

The label changes are as follows:

- 1) Replace the Environmental Hazards language, which was inadvertently omitted from the last label notification.
- 2) Update the container disposal language in the Storage and Disposal section per the instructions provided in PR Notice 2007-1 and PR Notice 2007-4. Please note that this Jonas product is sold for household/residential use only. Therefore, only the label language for household/residential containers required by these PR Notices is applicable to this product.
- 3) Add "and First Aid" to the statement, "See [back] [side] panel for additional precautions".

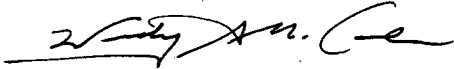
Please find enclosed the following documents to support the notification for Quizalofop-P-Ethyl MUP Herbicide:

- 1) Pesticide Application Form; and,
- 2) Three (3) copies of the revised product label with the changes highlighted.

Insofar as I am the authorized "Contact Point" and "Company Agent" for Nissan, please relay all correspondence directly to me at 122 C Street NW, Suite 740, Washington DC 20001. If you have any questions, please contact me by telephone at 202-393-3903 ext. 11 or by e-mail at [wmccombie@lewisharrison.com](mailto:wmccombie@lewisharrison.com).

Thank you very much for your cooperation.

Sincerely,



Wendy A. McCombie  
for,  
N. Jonas & Company Inc.

Enclosures

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

5/17

**MAXI-CLOR  
SUPER 3" CHLORINATING TABLETS**

**[CONCENTRATE] [STABLIZED] [SLOW DISSOLVE]  
[COMPLETELY SOLUBLE] [NO MINERAL SCALE BUILD-UP]  
[SUPER CHLORINATING TABLETS FOR WATER DISINFECTION]  
[24-HR. CHLORINE RESIDUAL FOR ROUND THE CLOCK ACTIVITY]**

**ACTIVE INGREDIENTS:**

Trichloro-s-Triazinetrione .....	99%
<b>OTHER INGREDIENT</b> .....	<u>1%</u>
<b>TOTAL</b>	<b>100%</b>

Approximately 90% available chlorine

**KEEP OUT OF REACH OF CHILDREN**

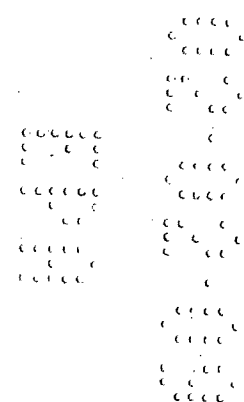
**DANGER**

See [back] [side] panel for precautions in handling and First Aid.

**EPA REG. NO. 3432-61  
EPA EST. NO. 3432-PA-1**

**NET WT. 10 LBS.**

Mfg. by: N. Jonas & Co., Inc. • Bensalem, PA 19020



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

**DANGER. CORROSIVE:** Causes irreversible eye damage and skin burns. May be fatal if absorbed through skin. May be fatal if inhaled. Do not breath dust or spray mists. Irritating to nose and throat. Harmful if swallowed. Do not get in eyes, on skin, or on clothing. Wear goggles or face shield, protective clothing and rubber gloves when handling this product. Wash thoroughly with soap and water after handling and before eating, drinking or using tobacco. Remove contaminated clothing and wash before reuse.

<b>FIRST AID</b>	
<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.</li> <li>• Do not induce vomiting unless told to by a poison control center or doctor.</li> <li>• Do not give anything by mouth to an unconscious person.</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>
<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 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>
Have the product container or label with you when calling a poison control center or doctor or going for treatment.	
<b>NOTE TO PHYSICIAN</b>	
Probable mucosal damage may contraindicate the use of gastric lavage.	

*(If container size is less than 5 gallons, use the following Environmental Hazards statement)*  
**ENVIRONMENTAL HAZARDS:** This pesticide is toxic to fish and aquatic organisms.

*(If container size is 5 gallons or larger, use the following Environmental Hazards statement)*  
**ENVIRONMENTAL HAZARDS:** 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 National Pollutant Discharge Elimination Systems (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.

**PHYSICAL AND CHEMICAL HAZARDS:**

**STRONG OXIDIZING AGENT.** Mix only with water. Use clean dry utensils. Do not add this product to any dispensing device containing remnants of any other product. Such use may cause a violent reaction leading to fire or explosion. Contamination with moisture, organic matter, or other chemicals may start a chemical reaction, with generation of heat, liberation of hazardous gases, and possible generation of fire and explosion. In case of contamination or decomposition, do not reseal container. If possible isolate container in open air or well ventilated area. Flood with large volumes of water, if necessary.

2/7

**This product is meant to help keep bacteria and algae under control in swimming pools.**

**DIRECTIONS FOR USE**

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

1. Before using Chlorinating Tablets make sure there is sufficient chlorine residual (3.5-5.0 ppm) in the swimming pool by superchlorination. Next day add 1 lb. Chlorine Stabilizer (Booster) for each 4,000 gallons of water.
2. Place approximately 1 super tablet for 6,800 gallons of water per week either into a tablet dispenser and float it in the pool or directly into a skimmer basket if one is available. In no case should tablets be thrown directly into or on a vinyl liner as bleaching will result.
3. A good pool water test kit should be used at least once a day to check both pH and chlorine levels. pH should be between 7.2-7.6 and adjusted as necessary. Chlorine should be between 1-2 ppm. If chlorine level is too low, add more tablets until there is enough to maintain the 1-2 ppm.

This product can be used in any dispenser that uses Chlorine Concentrate tablets or sticks. Should not be mixed with any other kind of chlorine as an explosion could result.

**NOTE:** During heavy bathing loads, very hot weather, rain, etc. and at least once a week, chlorine residual should be raised to 3.5-5.0 ppm with granular chlorine (superchlorinated). It is preferable to do this after swimming day so that pool will have a chance to come back to the 1-2 ppm before swimmers go back in next day. Reentry into treated swimming pools is prohibited above levels of 3 ppm of chlorine. Super tablets will last approximately 5-7 days depending upon temperature and amount of water flow. A 20 lb. pail will last a 10,000 gal. pool approximately 30 weeks; 30,000 gal. pool approximately 10 weeks. Each tablet weighs approximately 7.3 oz.

**STORAGE AND DISPOSAL:**

Do not contaminate food or feed by storage, disposal, or cleaning of equipment.

**STORAGE:** Keep this product dry in a tightly closed container, when not in use. Store in a cool, dry, well ventilated area away from heat or open flame. In case of decomposition, isolate container (if possible) and flood area with large amounts of water to dissolve all material before discarding this container.

**CONTAINER DISPOSAL:** Nonrefillable container. Do not reuse or refill this container. Offer for recycling if available. If Empty: Do not reuse this container. Place in trash or offer for recycling if available. If Partly Filled: Call your local solid waste agency for disposal instructions. Never place unused product down any indoor or outdoor drain.

