

3432-69

04/16/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460



Office of Pesticide Programs

APR 16 2009

FILE COPY

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

Subject: **Maxi-Clor II**
EPA Registration Number: 3432-69
Application Dated: March 18, 2009
Receipt Dated: March 27, 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:

- Alternate Brand Name " Riviera SOL Chlorinating Granules "

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)

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Please read instructions on reverse before completing form.

Form Approved

OMB No. 2070-0080

Print Form



United States
Environmental Protection Agency
Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 3432-69	2. EPA Product Manager	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Maxi-Clor II	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) N.Jonas and Co., Inc. 4520 Adams Circle Bensalem, PA. 19020 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: <input checked="" type="checkbox"/> EPA Reg. No. _____ Product Name _____	

Section - II

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

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

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.

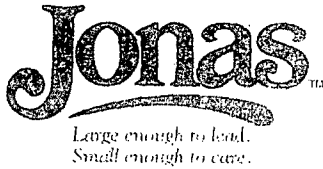
Alternate Brand Name is: Riviera SOL, Chlorinating Granules

Section - III

1. Material This Product Will Be Packaged In:				2. Type of Container	
Child-Resistant Packaging <input checked="" type="checkbox"/> Yes* <input 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	Metal <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____		
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt	No. per container
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container 2 to 50 lbs.		5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph <input 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 Al Pastore	Title Technical Director	Telephone No. (Include Area Code) 215-634-8971
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.		8. Date Application Received (Stamped)
2. Signature 	3. Title Technical Director	
4. Typed Name Al Pastore	5. Date 3-18-09	



Subject: **Alternate Brand Names**
Application Date 3-18-09

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

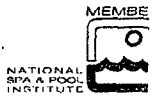
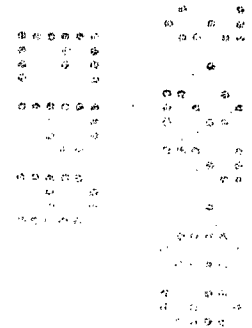
Enclosed are the Proposed Alternate Brand Names:

- Maxi Clor II: EPA Registration # **3432-69**
Proposed Alternate Brand Name is:
Riviera SOL, Chlorinating Granules
- Maxi Clor Chlorinating Tablets: EPA Registration # **3432-24**
Proposed Alternate Brand Name is:
Riviera SOL, 1" Chlorinating Tablets
- Maxi-Clor Super 3" Chlorinating Tablets: EPA Registration # **3432-61**
Proposed Alternate Brand Name is:
Riviera SOL, Super 3" Chlorinating Tablets

and the corresponding Form 8570-1 and a stamped copy of the Accepted labels.

Sincerely,

Al Pastore
Technical Director



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Chlorinating Granules

FOR SPARKLING AND
CRYSTAL CLEAR WATER
SWIMMING POOL ALGAEICIDE
NO SCALE FORMING MINERALS
OR INSOLUBLES
CONVENIENT COMPLETE POOL CARE

ACTIVE INGREDIENT:
Sodium Dichloro-s-triazinetrione
Dihydrate..... 99%
OTHER INGREDIENTS 1%
Total 100%
Available Chlorine 55%

KEEP OUT OF REACH
OF CHILDREN
DANGER
See back panel for additional
precautionary statements

EPA. Reg. No. 3432-69
EPA. Est. No. 3432-PA-1

NET WT. 50 LBS.

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

NOTIFICATION
Date Reviewed: *11/16/09*
Reviewed By: *[Signature]*