

3525-75

11-25-2003

1/5

November 25, 2003

Debbie Schaub
General Administrator
Qualco, Inc.
225 Passaic Street
Passaic, NJ 07055

Subject: Utikem Trichlor Shock Treatment
EPA Registration No. 3525-75
Application Date: October 23, 2003
Receipt Date: November 3, 2003

Dear Ms. Schaub:

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

Proposed Notification

- update to Storage and Disposal Statements in accordance with 2001-6
- addition of optional label text
- minor corrections to CSF per Agency letter dated 4/11/2002

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 Mitchell
Product Manager 32
Regulatory Management Branch II
Antimicrobials Division (7510C)

CONCURRENCES							
SYMBOL	7510C	7510C					
SURNAME	Ebers	Mitchell					
DATE	11/25/03	11-23-03					

2/5

Please read instructions on reverse before completing form.

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



United States
Environmental Protection Agency
Washington, DC 20460



Registration
Amendment
Other

OPP Identifier
Number

Application for Pesticide - Section I

1. Company/Product Number 3525-75	2. EPA Product Manager ROBERT BRENNIS	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
Company/Product (Name) TRICHLOR SHOCK TREATMENT	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) QUALCO, INC. 225 PASSAIC STREET PASSAIC, NJ 07055		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. <u>3525-75</u> Product Name <u>TRICHLOR SHOCK TREATMENT</u>
<input type="checkbox"/> Check if this is a new address		

Section - II

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

Explanation: Use additional page(s) is necessary. (For section I and Section II.)
UPDATE STORAGE AND DISPOSAL AS PER PR NOTICE 2001-6. OPTIONAL LABEL TEXT AS PER ATTACHED LIST.

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		<input type="checkbox"/> Metal	<input type="checkbox"/> Plastic
*Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
		If "Yes" Unit Packaging wgt.	No. per container	<input type="checkbox"/> Other (Specify) _____	
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container 2 LB., 15 LB., 25 LB.		5. Location of Label Directions <input checked="" type="checkbox"/>	
6. Manner in Which Label is Affixed to Product			<input type="checkbox"/> Lithograph	<input checked="" type="checkbox"/> Other <u>SILK SCREENED</u>	
			<input type="checkbox"/> Paper Glued		
			<input type="checkbox"/> Stenciled		

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name DEBBIE SCHAUB	Title GENERAL ADMINISTRATOR	Telephone No. (Include Area Code) 973-473-1222
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 	4. Title GENERAL ADMINISTRATOR	
5. Typed Name DEBBIE SCHAUB	6. Date	

October 23, 2003

QUALCO, INC.

225 Passaic Street
Passaic, NJ 07055

Phone No.: (973) 473-1222
Fax No.: (973) 473-0535
Website: www.Qualco.com

Attn.: Mr. Robert Brennis
Product Manager 32
Regulatory Management Branch II
Antimicrobial Division 7510C
US EPA
401 M Street S.W.
Washington, D.C. 20460

Ref: 3525-75
Trichlor Shock Treatment

Dear Mr. Brennis:

This notification is consistent with the provisions of PR Notice 95-2 and EPA regulations at 40CFR 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 subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

Sincerely,



Debbie Schaub

UTIKEM

TRICHLOR SHOCK

SUPERCHLORINATOR FOR GUNITE OR CONCRETE POOLS

- DESTROYS ALL TYPES OF ALGAE INCLUDING BLACK ALGAE
- COMPLETELY SOLUBLE

ACTIVE INGREDIENT:

Trichloro-s-triazinetriene.....	99.0%
OTHER INGREDIENTS	1.0%
TOTAL	100.0%
Available Chlorine.....	92.0%

**KEEP OUT OF REACH OF CHILDREN
DANGER**

FIRST AID STATEMENT

IF SWALLOWED:	Call a poison control or doctor immediately for treatment advice. Have person sip glass of water if able to swallow. Do not induce vomiting unless told to do so by a poison control center or doctor. Do
IF IN EYES:	Hold eye open and rinse slowly and gently with water for 15-20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. Call a poison control center or doctor for
IF ON SKIN OR:	Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Call a
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
HOT LINE	Have the product container or label with you when calling the poison control center or doctor, or
NOTE TO	Probable mucosal damage may contraindicate the use of gastric lavage.

MADE ESPECIALLY FOR POOL SPECIALISTS

Net Weight: 2 lbs. (32 oz.) (907.2 grams)

DIRECTIONS FOR USE

It is a violation of Federal law to use this product in a manner inconsistent with its labeling. Reentry into treated swimming pools/spas is prohibited above levels of 3.0 ppm. Trichlor Shock rapidly kills unsightly black algae as well as other types of algae. Just add directly to the pool and algae will begin to be destroyed.

REGULAR CARE:

1. Adjust pH of swimming pool water to 7.2 to 7.6 before using Trichlor Shock.
2. Shut off pool filter 4-6 hours before use. Allow water to become calm, with no motion. If black algae is present, scrub black algae colonies with a steel algae brush prior to application of Trichlor Shock.
3. Add 14 oz. of Trichlor Shock per 10,000 gallons of pool water. Apply treatment along walls, at edge of pool, and over surface of water.
4. After 6-8 hours, turn on filter and vacuum or scrub dead algae from pool bottom or walls. Dead algae colonies may be removed from pool walls or pool bottom with steel algae brush. If live algae remains, repeat treatment.
5. Before using pool, check the chlorine residual. If chlorine residual is above 2.0 ppm, do not use pool until chlorine residual drops to below 2.0 ppm as determined by a PoolChem Test Kit.

**DO NOT USE TRICHLOR SHOCK IN PAINTED, VINYL LINED, FIBERGLASS OR COLORED PLASTER POOLS. USE ISO SHOCK OR INSTANT SHOCK FOR THESE POOLS.
NEVER MIX POOL CHEMICALS TOGETHER! ALWAYS ADD THEM SEPARATELY!**

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

DANGER: Keep Out Of Reach Of Children. **CORROSIVE.** Causes irreversible eye damage and skin burns. May be fatal if absorbed through skin. May be fatal if inhaled. Do not breathe 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.

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. Isolate container, if possible, in open air or well ventilated area. Flood with large volumes of water to dissolve all material before discarding container.

ENVIRONMENTAL HAZARDS

This pesticide is toxic to fish and other aquatic organism. 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.

STORAGE AND DISPOSAL

STORAGE: Keep product dry in tightly closed container when not in use. Store in a cool, dry well ventilated area away from heat and open flame.

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 or 1-800-CLEANUP for disposal instructions. Never place unused product down any indoor or outdoor drain.

E.P.A. Reg. No. 3525-75
55002

E.P.A. Est. No. 3525-NJ-1
S55002

Made & Printed in U.S.A.
Manufactured by:

QUALCO, INC.
225 Passaic Street
Passaic, NJ 07055

NOTIFICATION

Date Reviewed: 11-25-03
Reviewed By: *A. Berg*

4/5

