Glybet #31	Please read instructions on re	verse before completing form.			Form Approved,	OMB No. 2070		Approval expires 2-28-95	
1. Company/Product Number A170-38 4. Company/Product Number A170-38 4. Company/Product Number Clybet 5. Name and Address of Applicant (Include ZIP Code) BECC Corporation 1001 Brown Avenue Toledo, Ohio 43607 Chesk if this is a new address Section - II Amendment - Explain below. Resubstiction in response to Agency letter dated Resubstiction in Results in response to Agency letter dated Resubstiction in Results in response to Agency letter dated Results in response to Agency le	Environmental Protection Ager			псу		Amendment			
1. Company/Product Number A170-38 4. Company/Product Number A170-38 4. Company/Product Number Clybet 5. Name and Address of Applicant (Include ZIP Code) BECC Corporation 1001 Brown Avenue Toledo, Ohio 43607 Chesk if this is a new address Section - II Amendment - Explain below. Resubstiction in response to Agency letter dated Resubstiction in Results in response to Agency letter dated Resubstiction in Results in response to Agency letter dated Results in response to Agency le	Application for Pesticide - Section I								
4. Compenying oduct (Name) G1) bett G1)	1. Company/Product Number			2. EPA Product Manager					
Betco Corporation 1001 Brown Avenue Toledo, Ohio 43607 Check if this is a new address Product Name Section - II	4. Company/Product (Name) Glybet			PM# #31			X.	None Restricted	
Amendment - Explain below. Resubmission in rasponse to Agency letter dated "Me Too" Application.	1001 Brown Avenue Toledo, Ohio 43607			(b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No					
Resubmission in response to Agency letter dated	Section - II								
Section - III 1. Material This Product Will Be Packaged In: Child Resistant Packaging	Resubmission in response to Agency letter dated				Agency letter dated "Me Too" Application.				
1. Material Thic Product Will Be Packaged In: Child-Resistant Packaging									
Child Resistant Packaging	Section - III								
**Certification must be submitted **Certification must be submitted **Certification must be submitted **No. per Unit Packaging w.c. **No. per Package w.g. **No. per Package w.g. **No. per Other (Specify) **June 16	1. Material This Product Will Be Packaged In:								
3. Location of Net Contents Information Label Container Label Container Lithograph Peper glued Stenciled Section - IV 1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.) Title Marlene Taylor Certification Lectify that the statements I have made on this form and all attechments thereto are true, accurate and complete. Lacknowledge that any knowingly felse or misleading statement may be punishable by fine or imprisonment or both under applicable law. 2. Signature Junithy Juny Technical Director 4. Typed Name 5. Date	Yes* No * Certification must	Yes No No No. per If "Yes Unit Packaging we', container Packaging we're container when the container we're container when the container		Yes No. per		Metal Plastic Glass Paper			
Label Container On Label On Label On Label On Labeling accompanying product	be submitted							·	
Section - IV 1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.) Name Title Government Services Certification I certify that the statements I have made on this form and all attechments 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. 2. Signature 3. Title Technical Director 4. Typed Name Services Technical Director 5. Date				ner	5. Loc	On Labei			
1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.) Name Title Marlene Taylor 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. 2. Signature 3. Title Technical Director 4. Typed Name Today Telephone No. (Include Area Code) 419-241-2156 6. Date Application Received (Stamped)	Paper glued								
Name Marlene Taylor 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. 3. Title Technical Director 4. Typed Name Telephone No. (Include Area Code) 419-241-2156 6. Date Application Received (Stamped)	Section - IV								
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Jennithy Junget Technical Director 4. Typed Name 5. Date	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 (Stamped)								
	Timothy glunget			chnical	Director				
				vember	16, 1995				

DIRECTIONS FOR USE
It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.
When used as directed, this disinfectant/deodorant demonstrates effective disinfection against Staphylococcus

aureus, Saimonella choleraesus, Pseudomonas aeruginosa, and Trichophyton mentagrophytes. This product is effective against Pathogenic Fungi (Athlete's Foot Fungus).

MOLD AND MILDEWSTAT: This disinfectant/deodorant prevents and controls mold and mildew and the odors they cause on hard, nonporous surfaces when used as directed. This disinfectant/deodorant has been designed specificably dependent and provided and product in the product of the provided and product and address the product of the prod cause on hard, nonporous surfaces when used as directed. This disinfectant/deodorant has been designed specifically for hospitals, nursing homes, institutions, offices, schools, motels, and hotels as a disinfectant, deodorant, and air refreshner. It is recommended for disinfecting telephones, door knobs, linen carts, hampers, light switches garbage palls, and other clean, inanimate, hard, nonporous surfaces. SURFACE DISINFECTION AND DEODORIZATION: (1) Preclean all surfaces to be disinfected. (2) Hold can six inches from surface and spray until completely wet, allowing the surface to remain wet for 10 minutes. Allow to air dry. AIR DEODORIZER AND AIR REFRESHNER: Point spray upwards to center of norm and spray for three seconds. MILDEWSTAT:To control mold and mildew on hard, nonporous surfaces (such as floors, walls, table tops), spray the surfaces to be treated, making sure to wet completely. Let air dry. Repeat application at weekly intervals or when mildew growth reappears.

KILLS HIV-1 ON PRECLEANED ENVIRONMENTAL SURFACES/OBJECTS PREVIOUSLY SOILED WITH BLOOD/BODY FLUIDS in health care settings (Hospitals, Nursing Homes) or other settings in which there is an expected likelihood of soding of inanimate surfaces/objects with blood or body fluids, and in which the surfaces/objects likely to be soiled with blood or body fluids can be associated with the potential for transmission of human immunodeficiency virus Type 1 (HIV-1) (associated with AIDS). SPECIAL INSTRUCTIONS FOR CLEANING AND DECONTAMINATION AGAINST HIV-1 OF SURFACES/OBJECTS SOILED WITH BLOOD/BODY FLUIDS. PERSONAL PROTECTION: When handling items solled with blood or body fluids use disposable latex gloves, gowns. masks.

PROTECTION: When handling items solled with blood or body fluids use disposable latex gloves, gowns. masks, or eye coverings. CLEANING PROCEDURES: Blood and other body fluids must be thoroughly cleaned from surfaces and objects before application of this product. CONTACT TIME: Allow surface to remain wet for 10 minutes. DISPOSAL OF INFECTIOUS MATERIALS: Blood and other body fluids should be autoclaved and disposed of ac-

DISPOSAL OF INFECTIOUS MATERIALS: Blood and other body fluids should be autoclaved and disposed of according to local regulations for infectious waste disposal.

"VIRUCIDAL PERFORMANCE: This product was evaluated and found to be effective against Herpes Simplex Type 1 (virus that causes cold sores) and Herpes Simplex Type 2 (virus that causes vonereal dispase) on procloaned, hard, nonporous, inanimate environmental surfaces for a contact time of 10 minutes.

"RESIDUAL SELF-SANITIZING ACTIVITY: This product has been evaluated and found to have residual scill-sanitizing activity in 5 minut is on precleaned, hard, nonporous, inanimate environmental surfaces. This residual sanitizing activity is applicable to surfaces that are reasonably expected to become we funder normal conditions such as shower and restroom fixtures. This residual self-sanitizing activity will continue for 5 days or until the surface is rinsed or deaned.

PRECAUTIONARY STATEMENTS **Hazards to Humans and Domestic Animals** WARNING

Causes eye and skin irritation. Do not get in eyes, on skin, or on clothing. Harmful if swallowed.

STATEMENT OF PRACTICAL TREATMENT

In case of contact, immediately flush eyes or skin with plenty of water for at least 15 minutes. For eyes, call a physician. Remove and wash all contaminated clothing before reuse. If swallowed, drink egg whites, getatin solution, or if these are not available, drink large quantities of water. Call a physician. NOTE TO PHYSICIAN Probable mucosal damage may contraindicate the use of gastric lavage. Measures against circulatory shock, respiratory depression, and convulsion may be needed.

PHYSICAL OR CHEMICAL HAZARDS
FLAMMABLE. Contents under pressure. Keep away from heal, sparks, and open flame. Do not puncture crincinerate container. Exposure to temperatures above 120°F may cause bursting.

STORAGE AND DISPOSAL

Do not contaminate water, food, or feed by storage or disposal. Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility. Replace cap and discard container in

EPA EST. NO. 4170-OH-1 EPA REG. NO. 4170-38



Contains no CFCs or other ozone depleting substances. Federal regulations prohibit CFC propellants in aerosols.





Manufactured By:





Kills HIV-1 on precleaned environmenta previously soiled with blood/body fluid:

- Effective against Herpes Simplex Type 1 and Type 2 (See side panel)
- ** Five day residual self-sanitizing activ

Authorized by the USDA for use in fede inspected meat and poultry plants.

ACTIVE INGREDIENTS: n-Alkyl (C₁₄60%, C₁₄30%, C₁₇5%, C₁₄5%) dimethyl benzyl ammonium chlorides.....

chlorides..... n-Alkyl (C₁₂68%, C₁₄32%) dimethyl ethylbenzyl ammonium chlorides INERT INGREDIENTS: TOTAL

Sodium Nitrite Contains:

KEEP OUT OF REACH OF CHILDRE

ARNING:
acic panel for additional precaution
additional use only

Wi 14 ounces (