

PM 03

4306-11

4/13/98

Page 1 of 2

Please read instructions on reverse before completing form.

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



Environmental Protection Agency
Washington, DC 20460

Registration
Amendment
Other

OPP Identifier Number

263317

Application for Pesticide Section I

1. Company/Product Number 4306-11	2. EPA Product Manager George LaRocca	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Scratchex Flea & Tick Spray for Dogs & Cats	PM# 43	
5. Name and Address of Applicant (Include ZIP Code) Combe Incorporated 1101 Westchester Avenue White Plains, NY 10604 <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: 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 _____	NOTIFICATION APR 13 1998
<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.) Notification to modify ingredients statement to substitute common name for chemical name. This notification is consistent with PRN 97-5 and 40CFR152.46, and no other changes have been made to the labeling or CSF. I understand it is a violation of 18USC1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with PRN 97-5 and 40CFR152.46, it may be in violation of FIFRA and subject to enforcement action and penalties under Sections 12 and 14 of FIFRA.

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	<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" Unit Packaging wgt.	No. per container	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	
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 Amy Plato Roberts		Title Regulatory Consultant		
		Telephone No. (Include Area Code) (202) 828-8964		
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 		3. Title Regulatory Consultant		
4. Typed Name Amy Plato Roberts		5. Date April 6, 1998		

APR 13 1998

KEEP OUT OF REACH OF CHILDREN
CAUTION: See Back Panel for important safety instructions.
NET WT 7 OZ (198 g)

