



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
Washington, D.C. 20460

OFFICE OF  
PREVENTION, PESTICIDES  
AND TOXIC SUBSTANCES

**May 12, 2008**

Linda Campbell  
Director of Registration Compliance  
Carroll Company  
2900 W. Kingsley Road  
Garland, TX 75041

Subject: Product Name: Pure Pine Oil Disinfectant  
EPA Reg. No.: 4313-9  
Application Date: 23-April-2008  
Receipt Date: 29-April-2008

Dear Ms. Collins:

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

**Proposed Amendment:**

- Minor label revisions:

**General Comments:**

Based on a review of the material submitted, the notification application is acceptable. If you have further questions concerning this letter, please contact me by telephone at (703) 308-6422 or by e-mail at [heyward.adam@epa.gov](mailto:heyward.adam@epa.gov) during the hours of 8:00 am to 4:00 pm EST. When submitting information or data in response to this letter, a copy of this letter should accompany the submission to facilitate processing.

Sincerely,

Adam Heyward  
Product Manager 34  
Regulatory Management Branch II  
Antimicrobials Division (7510P)

	United States <b>Environmental Protection Agency</b> Washington, DC 20460	<input type="checkbox"/> Registration	OPP Identifier Number
		<input type="checkbox"/> Amendment	
		<input checked="" type="checkbox"/> Other	

**Application for Pesticide - Section I**

1. Company/Product Number 4313-9	2. EPA Product Manager Adam Heyward	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Pure Pine Oil Disinfectant	PM# 34	
5. Name and Address of Applicant (Include ZIP Code) Carroll Company 2900 W. Kingsley Road Garland, TX 75041 <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.)

See attached notification statement  
One highlighted label copy for changes and one non-highlighted label copy for EPA stamping (if appropriate)

**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 <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 Linda Campbell	Title Director Reg. Compliance	Telephone No. (Include Area Code) (972) 278-1364
<b>Certification</b> 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 Director of Reg. Compliance	
4. Typed Name Linda Campbell	5. Date Apr 23, 2008	

"Notification of label change per PR Notice 2007-4 and PR Notice 95-1. This notification is consistent with the guidance in PR Notice 2007-4 and PR Notice 95-1 and the requirements of EPA's regulations at 40 CFR §§ 152.46, 156.10, 156.140, 156.144, 156.146, and 156.156. No other changes have been made to the labeling or the Confidential Statement of Formula for 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 the amended label is not consistent with the requirements of 40 CFR §§152.46, 156.10, 156.140, 156.144, 156.146, and 156.156, 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."

U.S. DEPARTMENT OF AGRICULTURE  
OFFICE OF THE ASSISTANT SECRETARY FOR  
REGISTRATION AND COMPLIANCE  
PLANT INDUSTRY DIVISION  
WASHINGTON, D.C. 20250  
TELEPHONE (301) 703-7000  
FAX (301) 703-7001  
WWW.AS-RC.PID.USDA.GOV

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

**CAUTION:** May be harmful if swallowed. Keep out of eyes. Avoid contamination of feed and foodstuffs.

**FIRST AID**

**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 treatment advice. **IF**

**SWALLOWED:** Call a poison control center or doctor immediately for treatment advice. Have person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by a poison control center or doctor. Do not give anything by mouth to an unconscious person.

Have the product container or label with you when calling a poison control center or doctor or going for treatment.

**NOTE TO PHYSICIAN:** Probable mucosal damage may contraindicate the use of gastric lavage.

*(For 5 gallon size or larger)*

**ENVIRONMENTAL HAZARDS**

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.

**Pure Pine Oil**

Disinfectant

**LIMITED DISINFECTANT AGAINST  
BACTERIA OF INTESTINAL ORIGIN**

**ACTIVE INGREDIENT:**

Pine Oil .....80%

**INERT INGREDIENTS** .....20%

**KEEP OUT OF REACH OF CHILDREN**

**CAUTION**

**SEE LEFT/SIDE/RIGHT/BACK PANEL FOR  
ADDITIONAL PRECAUTIONARY STATEMENTS  
AND FIRST AID**

EPA Reg. No. 4313-9

EPA Est. No. *(as indicated on container)*

Net Contents *(as indicated on container)*

Carroll Company  
2900 West Kingsley Road  
Garland, TX 75041

**NOTIFICATION**

Date Reviewed:

Reviewed By: *RSW*

**Pure Pine Oil Disinfectant  
EPA Reg. No. 4313-9  
EPA Draft 04/22/08**

**DIRECTIONS FOR USE**

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

This disinfectant is made with 80% pure distilled pine oil, 10% soap and 10% water, and meets all requirements of Commercial Standard for pine oil disinfectants CS 69-38. It blooms to a snow white emulsion when poured into water, and remains stable for at least 24 hours.

For best results, clean surface to be disinfected, then mop or apply solution of 1½ oz. disinfectant per gal. of water (12ml/l). It is best to keep surfaces wet for at least 10 minutes.

This disinfectant at use dilutions of 1½ oz. per gal. of water is effective in killing Salmonella typhosa on environmental surfaces, and when used, leaves a pleasant aroma of pine. Suggested for use in rest homes, motels, hotels, schools, public and commercial buildings, service stations. Use above solution on toilet seats and exterior toilet and urinal surfaces, shower stalls, lavatories, floors and walls in restrooms. For disinfecting toilet and urinal bowls, force water through trap, using mop or force cup, then pour 1 oz. disinfectant in bowl; mop all surfaces, allow to stand at least 10 minutes. Flush.

**LAUNDRY:** Spot heavily soiled and greasy spots with undiluted disinfectant. Allow to stand a few minutes, then wash using normal laundry products. Adding up to 6 oz. disinfectant helps deodorize most laundry.

A solution of 3 oz. disinfectant per gal. of water helps disinfect and deodorize hard surfaces in stables and pet quarters. Remove all litter and gross filth from surfaces prior to application of solution. Flush surfaces with water after disinfecting.

This disinfectant is a superb solvent for many soils. Added to most any floor cleaner, it helps clean and deodorize. It finds usage in dissolving caked-on grease and soils, or used undiluted it often can soften hardened paint brushes in just a few days.

**STORAGE AND DISPOSAL**

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

Keep container closed when not in use. Do not store near heat or open flame.

**Container disposal:**

Nonrefillable container. Do not reuse or refill this container. Offer for recycling, if available.

Triple rinse container promptly after emptying

*(For rigid, nonrefillable containers small enough to shake – equal to less than 5 gallons)*

Triple rinse as follows: Empty the remaining contents into application equipment or a mix tank and drain for 10 seconds after the flow begins to drip. Fill the container ¼ full with water and recap. Shake for 10 seconds. Pour rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Drain for 10 seconds after the flow begins to drip. Repeat this procedure two more times.

*(For rigid, nonrefillable containers that are too large to shake – equal to greater than 5 gallons)*

Triple rinse as follows: Empty the remaining contents into application equipment or a mix tank. Fill the container ¼ full of water. Replace and tighten closures. Tip container on its side and roll it back and forth, ensuring at least one complete revolution, for 30 seconds. Stand the container on its end and tip it back and forth several times. Empty the rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Repeat this procedure two more times.