 <b>United States</b> <b>Environmental Protection Agency</b> Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number
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**Application for Pesticide - Section I**

1. Company/Product Number <b>4822-167</b>	2. EPA Product Manager <b>Mr. Tavano</b>	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) <b>S. C. Johnson / OFF! Insect Repellent Formula V</b>	PM# <b>10</b>	
5. Name and Address of Application (Include ZIP Code) <b>S. C. Johnson &amp; Son, Inc.</b> <b>1525 Howe St.</b> <b>Racine, WI 53403</b> <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"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. <input type="checkbox"/> Other - Explain below.	<b>NOTIFICATION</b> <b>NOV 29 2002</b>
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Explanation: Use additional page(s) if necessary. (For Section I and Section II.)  
 Notification of label changes per PR Notice 98-10.

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 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 98-10 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.

**Section III**

1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes * <input type="checkbox"/> No <b>*Certification must be submitted</b>	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Unit Packaging wgt. _____ No. Per container _____	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Package wgt. _____ No. Per container _____	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify _____)
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"/> Other <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 <b>Ms. Kelly K. Rahn</b>		Title <b>Registration Specialist</b>	
		Telephone No. (Include Area Code) <b>(262) 260-2686</b>	
<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 statements may be punishable by fine or imprisonment or both under applicable law.			6. Date Application Received (Stamped)
2. Signature 		3. Title <b>Registration Specialist</b>	
4. Typed Name <b>Ms. Kelly K. Rahn</b>		5. Date <b>November 21, 2002</b>	

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OFF! INSECT REPELLENT FORMULA V [master name]  
OFF! Deep Woods Insect Repellent V [alternate brand name, 4-18-97]  
Deep Woods OFF! Insect Repellent V [alternate brand name, 6-21-91]

Unscented  
Fragrance Free  
LONG LASTING PROTECTION from mosquitoes, ticks (including ticks that cause Lyme disease), biting flies, gnats and chiggers  
Keeps bugs off!®  
Always carry [product name]

**x% (MORE) (FREE)**  
**(Bonus)(Value) Size**  
**x (oz)(ounces) at the (same) 6 (oz)(ounce) price**  
**x (oz)(ounces) for the (same) price of 6 (oz)(ounce)**

**\*\*\*Note to reviewer: In the claims directly above x is used to represent any number between 1 and 100.\*\*\***

ACTIVE INGREDIENT:  
DEET..... 25%  
INERT INGREDIENTS:.....75%

KEEP OUT OF REACH OF CHILDREN  
CAUTION  
See Additional Precautions on Back Panel

**NOTIFICATION**

**NOV 29 2002**

NET WT.            OZ.

(back panel)

OFF! INSECT REPELLENT FORMULA V

SPRAYS UPSIDE DOWN TOO!

Provides long lasting protection from mosquitoes, ticks (including ticks that cause Lyme disease) and biting flies: stable flies, black flies, sand flies, and deer flies. Also repels chiggers, fleas, gnats, no-see-ums from treated skin and clothing. OFF! Insect Repellent Formula V gives effective protection and is not greasy, won't stain and resists perspiration.

#### PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS - CAUTION: Harmful if swallowed. Causes eye irritation. Avoid contact with eyes and lips. May cause skin reaction in rare cases.

*(Note to reviewer: Boxed format or bullets may be used in First aid section if label space permits)*

#### FIRST AID

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

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.

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Skin: If you or your child react to this product, wash treated skin and call a poison control center or doctor for treatment advice.

**PHYSICAL & CHEMICAL HAZARDS - FLAMMABLE:** Contents under pressure. Do not use near heat, sparks or open flame. Do not puncture or incinerate containers. Exposure to temperatures above 120° F may cause bursting. Keep treated surfaces away from fire or flame until dry.

#### **DIRECTIONS FOR USE**

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

**Read all directions before using this product.**

Hold container 6 to 8 inches from skin or clothing and spray with a slow sweeping motion. Do not spray in enclosed areas. Do not apply over cuts, wounds, or irritated skin. Do not apply to excessively sunburned or damaged skin. Use sparingly on small children. Do not allow use by small children without close adult supervision. Use just enough repellent to cover exposed skin. Avoid overexposure. Frequent reapplication and saturation are unnecessary for effectiveness. Do not keep product on any longer than necessary. After returning indoors, wash treated skin with soap and water. **FOR MAXIMUM PROTECTION**, spread evenly with hand to moisten all exposed skin. Do not spray directly on face.

**TO APPLY TO FACE:** Spray palm of hand and rub on. Do not apply to eyes and mouth and do not apply to the hands of young children.

**WORKS ON CLOTHING TOO:** Spray shirts, pants, socks, and hats. For ticks and chiggers also spray cuffs, socks and around other openings in outer clothing. Do not apply under clothing. Use just enough repellent to cover clothing. Wash treated clothing. Will not damage cotton, wool or nylon. **DO NOT APPLY ON OR NEAR: ACETATE, RAYON, SPANDEX OR OTHER SYNTHETICS (OTHER THAN NYLON), FURNITURE, PLASTICS, WATCH CRYSTALS, LEATHER AND PAINTED OR VARNISHED SURFACES INCLUDING AUTOMOBILES.**

**STORAGE:** Store away from heat or flame in an area inaccessible to children.

#### **DISPOSAL:**

Do not puncture or incinerate!

If empty: This container may be recycled in the few but growing number of communities where aerosol can recycling is available. Before offering for recycling, empty the container by using the product according to the label. If recycling is not available, place in trash.

If partially filled: Call your local solid waste agency or 1-800-529-3394 for disposal instructions.



*(Note to reviewer: The STEEL recycle symbol might be used on final printed label if space allows.)*

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

Questions? Comments? Call 800-558-5252 Weekdays, 9-9 Eastern Time or write Helen Johnson © 1995 S. C. Johnson & Son, Inc., Racine, WI 53403-2236 U.S.A. All Rights Reserved

EPA Reg. No. 4822-167  
EPA Est. No. 4822-WI-1

S. C. Johnson & Son, Inc.  
1525 Howe Street  
Racine, WI 53403-2236  
262.260.2000

November 21, 2002

Ms. Joyce Edwards  
Document Processing Desk (NOTIF)  
Office of Pesticide Programs (7504C)  
U.S. Environmental Protection Agency  
Room 266A, Crystal Mall 2  
1921 Jefferson Davis Highway  
Arlington, VA 22202

Subject: OFF! Insect Repellent Formula V  
EPA Reg. No. 4822-167  
Notification with regards to product labeling

Dear Ms. Edwards:

On behalf of S.C. Johnson & Son, Inc., I am submitting a notification for the above-mentioned product. We will be adding the following language to the product label:

x% (MORE) (FREE)  
(Bonus)(Value) Size  
x (oz)(ounces) at the (same) 6 (oz)(ounce) price  
x (oz)(ounces) for the (same) price of 6 (oz)(ounce)

In support of this notification, I have included one Application for Pesticide Registration and 2 copies of the product labeling, with the additions noted in ***bold italics***.

Thank you for your attention to this matter. If I can assist you in any way, please do not hesitate to contact me at (262) 260-2686.

Sincerely,

  
Ms. Kelly K. Rahn  
Registration Specialist

Enclosures

