

PM132

5813-1

1 of 2

Read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0080, Approval expires 05-31-98



United States
Environmental Protection Agency
Washington, DC 20460

☐ Registration
☐ Amendment
☒ Other

OPP Identifier Number

247935

Application for Pesticide - Section I

Company/Product Number 5813-1	2. EPA Product Manager Ruth Douglas	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
Company/Product (Name) CLOROX	PM# 32	
Name and Address of Applicant (Include ZIP Code) The Clorox Company c/o PS&RC P.O. Box 493 Pleasanton, CA 94566-0803 <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 _____
<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.)

Addition of the following text on previously approved service bulletin:
see directions in the Clorox Service Bulletin entitled "Special Instructions for Using CLOROX to Clean and Decontaminate Against HIV on Surfaces/Objects with Blood/Body Fluids"

Section - III

Material This Product Will Be Packaged In:			
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	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) _____
Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt. No. per container
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
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

Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name J. Evelyn Lawson	Title Regulatory Compliance Specialist	Telephone No. (Include Area Code) (510) 847-6842
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)
Signature J. Evelyn Lawson	3. Title Regulatory Compliance Specialist	
Typed Name J. Evelyn Lawson	5. Date October 2, 1995	



SERVICE BULLETIN

CLOROX (5.25% Sodium hypochlorite, EPA Reg. No. 5813-1)

VIRUCIDAL EFFICACY

CLOROX®, when used as directed below, is effective against the following viruses:

<i>Adenovirus Type 2</i>	<i>Rotavirus</i>
<i>Hepatitis A</i>	<i>Cytomegalovirus</i>
<i>Human Immunodeficiency Virus Type 1(HIV-1)*</i>	<i>Influenza A2</i>
<i>Respiratory syncytial virus</i>	<i>Varicella zoster virus</i>
<i>Herpes simplex virus 2</i>	<i>Rhinovirus Type 17</i>
<i>Rubella virus</i>	<i>Canine parvovirus**</i>
<i>Feline parvovirus**</i>	

Directions for use:

Hard Non-porous Surfaces:

To disinfect hard non-porous surfaces, clean surface by removing gross filth (loose dirt, debris, food materials, etc.). Prepare a solution of 3/4 cup (6 oz) CLOROX® per gallon water (~2400 ppm available chlorine). Thoroughly wet surface with the solution and allow it to remain in contact with the surface for 5 minutes. Rinse with clean water and dry.

*see directions in the Clorox Service Bulletin entitled "Special Instructions for Using CLOROX® to Clean and Decontaminate Against HIV on Surfaces/ Objects Soiled with Blood/Body Fluids"

**For Canine and Feline parvovirus use the same instructions as above but keep the solution in contact with the surface for 10 minutes.

Toilet Bowls:

Flush toilet to remove gross filth. Add 1 cup Regular CLOROX® Bleach to the bowl and brush surfaces thoroughly. Let stand 5 minutes before flushing again.

Use Sites

CLOROX® can be used on hard non-porous surfaces in commercial, institutional, hospital and household premises (including kitchens, bathrooms, nurseries, sick rooms, laundry rooms, garbage containers and diaper pails), eating establishments, pet kennels and veterinary premises.

THE CLOROX COMPANY
Consumer Services Department
Oakland, California 94612-1888

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