

Please read instructions on reverse before completing form. Form Approved. OMB No. 2070-0060. Approval expires 05-31-98



United States
Environmental Protection Agency
Washington, DC 20460

Registration
Amendment
☒ Other

OPP Identifier Number
247981

Application for Pesticide - Section I

1. Company/Product Number 5813-1	2. EPA Product Manager Ruth Douglas	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) CLOROX	PM# 32	
5. 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.)

The sentence "Prepare a dilution of 1 part Clorox bleach to 9 parts water..." ~~has been~~ ~~corrected to reflect the data previously submitted in 1994.~~ ~~The service bulletin had been~~ ~~previously accepted 11/22/94.~~

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			
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container <input type="checkbox"/> 1 qt <input type="checkbox"/> 1/2 qt <input type="checkbox"/> 1/4 qt <input type="checkbox"/> 1/8 qt <input type="checkbox"/> 1/16 qt	
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 _____	

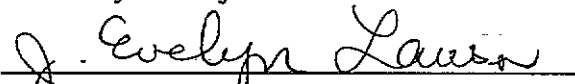
Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name 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)
2. Signature J. Evelyn Lawson	3. Title Regulatory Compliance Specialist	
4. Typed Name J. Evelyn Lawson	5. Date January 31, 1996	

(for accompanying OPP 247982)
CLOROX
EPA Reg. No. 5813-1

Notification of labeling additions and text clarification per PR Notice 95-2

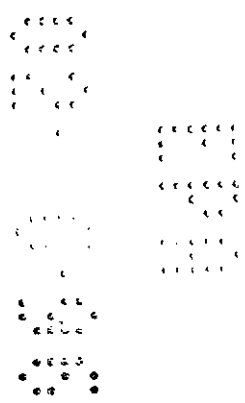
This notification is consistent with the provisions of PR Notice 95-2 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula for this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 95-2 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.


Signature of Official

(J. Evelyn Lawson)
Regulatory Compliance Specialist

for:
The Clorox Company
c/o PS&RC
P.O. Box 493
Pleasanton, CA 94566-0803

January 31, 1996





SERVICE BULLETIN

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

TUBERCULOCIDAL EFFICACY

CLOROX® bleach, when used as directed below, is effective against *Mycobacterium bovis*.

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 dilution of 1 part CLOROX® bleach to 9 parts water (13 oz/gallon) (~5000 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.

Use Sites

CLOROX® bleach 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