



United States
Environmental Protection Agency
Washington, DC 20460

Registration
Amendment
Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 5978-13	2. EPA Product Manager George La Rocca	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) KONK INSECTICIDE FOAM	PM# 13	
5. Name and Address of Applicant (Include ZIP Code) AIR GUARD CONTROL CORPORATION <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 MAR 24 2004
<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.)

→ modifications to label as highlighted in yellow

Section - III

1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Unit Packaging <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Water Soluble Packaging <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2. Type of Container <input checked="" 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. 17.502	No. per container 1
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container 211 x 713, 17.5oz	5. Location of Label Directions <input checked="" type="checkbox"/> Label Back Panel
6. Manner in Which Label is Affixed to Product <input checked="" 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 Kent Horne	Title Technical Resource Mgr	Telephone No. (Include Area Code) 905-669-9876 x206	
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 Kent Horne	3. Title Technical Resource Manager		
4. Typed Name KENT HORNE	5. Date March 12, 2004		

DIRECTIONS FOR USE:

It is a violation of Federal law to use this product in a manner inconsistent with its labelling. Do not apply directly to food. In the home, all food processing surfaces and utensils should be covered during the treatment, or thoroughly washed before use. Remove pets, birds and cover fish aquariums before spraying. Do not allow children or pets to contact treated surfaces until they are dry.

GENERAL:

Use this contact & residual spray as a Hornet & Wasp Spray or as a Crack and Crevice treatment to control cockroaches, waterbugs, silverfish, ticks, fleas and other insects listed below. Apply this product only as a crack and crevice treatment to localized areas where pests are found or may occur. Non-food areas of commercial food handling establishments and similar commercial buildings where the product can be applied are areas such as garbage rooms, lavatories, floor drains (to sewer entries and vestibules), offices, locker rooms, machine rooms, garages, map closets and storage (after canning and bottling). Sites for non-food use in homes and motels: Spray into cracks and crevices around baseboards and other places. Apply behind and beneath cabinets, refrigerators, sinks, stoves and in the waste containers. Contact directly as many insects as possible. For ants, spray trails and places where ants enter premises.

CONTROL OF WASPS AND HORNETS:

It is preferable to apply this after dark when all the insects have returned to the nest. Shake container before spraying. Insert attached extension tube into actuator to enable you to deliver a pin stream. Aim extension tube at the nest and depress actuator, continuing to spray until the nest is all covered with the Insecticide foam. The insects will now not be able to leave the nest so insert the extension into the nest and fill the nest with the Insecticide foam.

CONTROL OF CRAWLING INSECTS:

To Kill Ants, Cockroaches, Crickets, Silverfish, Sowbugs, Spiders, Brown Dog Ticks, Fleas, Earwigs and Carpet Beetles: Shake container before spraying. Apply spray directly into cracks and crevices. Insert attached extension tube into actuator to enable you to deliver a pin stream in points between different elements of construction, between equipment and floors, openings leading to voids and hollow spaces in walls, equipment legs and bases where the above insects hide.

STORAGE AND DISPOSAL

STORAGE: Store in a cool, dry area away from heat or open flame. Do not store where children or pets may gain access. Keep from freezing. **DISPOSAL:** Do not Puncture or Incinerate! **If empty:** Place in trash or offer for recycling if available. **If partly filled:** Call your local solid waste agency or 1800-CLEANUP for disposal instructions.

PHYSICAL OR CHEMICAL HAZARDS

Contents under pressure. Do not puncture or incinerate container. Exposure to temperatures above 130°F may cause bursting. Do not use this product in or on electrical equipment due to the possibility of shock hazard.

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMAN AND DOMESTIC ANIMALS

CAUTION

May be harmful if swallowed, inhaled or absorbed through skin. Avoid breathing vapors of spray mist. Avoid contact with skin, eyes and clothing. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum or using tobacco. Remove contaminated clothing and wash clothing before reuse.

FIRST AID

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. **If Inhaled:** Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible. Call a poison control center or doctor for further treatment advice. **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. **HOT LINE NUMBER-** Have the product container or label with you when calling a poison control center or doctor, or going for treatment. For emergency information, call 1-800-222-1222, 24 hours, 7 days a week.

NOTICE TO USER

Sellers guarantee shall be limited to the terms of the label and subject thereto the buyer assumes any risk to persons or property arising out of use of handling and accepts the product on these conditions.

KONK® INSECTICIDE FOAM

Contact as well as Residual Insecticide Spray

FOR HORNET & WASP CONTROL: For use in both Indoors (Attics and other Places Nests are Built) and Outdoors on Wasp and Hornet Nests on Sites such as Homes, Apartments, Cottages, Commercial Buildings. (SHOOTS A STREAM 8 TO 10 FEET)

FOR CRAWLING INSECT CONTROL: For use in Homes and Non-food Areas of Kennels, Commercial Buildings, Warehouses, Theatres, Office Buildings, Schools, Motels, Hotels, Restaurants, Food Processing Facilities and Other Industrial and Agricultural Establishments.

This formulation kills the insects listed on contact.

ACTIVE INGREDIENTS:

d-trans allethrin	0.054%
*N-octyl bicycloheptene dicarboximide	0.250%
Permethrin [**(3-Phenoxyphenyl)methyl(±) cis-trans-3-(2,2-dichloroethyl)2, 2-dimethyl cyclopropanecarboxylate] [chemical name of permethrin-optional]	0.200%
Related Compounds	0.020%
INERT INGREDIENTS	<u>99.476%</u>
	100.000%

*MGK ®, Insecticide Synergist [optional]

** cis-trans isomer ratio: Min. 35% (±) cis Max. 65% (±) trans [optional]

KEEP OUT OF REACH OF CHILDREN

CAUTION

See Back Panel for Additional Precautionary Statements
Net Weight 17.5 ounces (496 grams)

EPA Reg. No. 5978-13

EPA Est. No. 46813-CN-03 Made in Canada

Manufactured for:
Air Guard® Control Corporation
310 East Railroad Avenue
Independence, LA USA 70443

888-324-KONK(5665) International: 905-669-9876 www.airguardcontrol.com

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AIR GUARD CONTROL

KONK Insecticides & Odor Control Products

March 8, 2004

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504C)
US Environmental Protection Agency
Room 266A, Crystal Mall 2
1921 Jefferson Davis Highway
Arlington, VA 22202-4501

US Office (mailings)

Air Guard Control Corporation
310 East Railroad Avenue
Independence, LA USA 70443

Canadian Office (questions on notification)

Air Guard Control (Canada) Ltd.
125 Buttermilk Avenue
Concord, ON, Canada L4K 3X5
Ph: 905-669-9876 Ext 206

Re: Notification for EPA 5978-13 KONK INSECTICIDE FOAM

This notification was sent in February without a 8570-1. Please accept our notification to the EPA that Air Guard Control is making minor changes to a recently stamped label. See highlighted areas.

Please fax a copy of stamped label to fax number below.

If you have any questions, please contact me in our Canadian office or by email at khorne@ag-konk.com.

Regards,

Kent Horne
Technical Resource Manager
Air Guard Control
Fax: 905-669-7021