

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460

JUI - 7 2010

OFFICE OF CHEMICAL SAFETY AND POLLUTION PREVENTION

Dana Wm. Somesla Chemist Chem Labs Products, Inc. 5160 East Airport Drive Ontario, CA 91761

FILE COPY

Subject:

Kem Tek Kem Klor II

EPA Reg. No. 7616-45

Application Dated: May 25, 2010 Receipt Date: June 10, 2010

Dear Mr. Somesla:

The following notification submitted in connection with registration under the provisions of PR Notice 98-10, is acceptable.

Proposed Notification:

 Revised arrangement of First Aid Statements listing severe routes of exposure first per PR Notice 2001-1

Comments:

Based on a review of the material submitted, the following comments apply:

This application for notification to revise the First Aid Statements, as referenced above, is acceptable. A copy has been placed in our records for future reference.

Should you have any questions concerning this letter, please contact me at <u>Henson.Wanda@epa.gov</u> or call (703) 308-6345.

Sincerely,

Wanda Henson

Acting Product Manager (32)
Regulatory Management Branch II
Antimicrobials Division (7510P)

Please read instructions on r	everse before completin	g form.	Form Approved	. OMB No. 2070-0060	Print Form 2
\$EPA	United States Environmental Protection Agency Westigned BS 20450			Registration Amendment Other	OPP Identifier Number
	A	pplication for	Pesticide - Sectior	ı I	
1. Company/Product Number 7616-45			2. EPA Product Manager Emily Mitchell		roposed Classification
4. Company/Product (Name) Kem Tek Kem Klor II			PM# 32	Ľ	None Restricted
5. Name and Address of App Chem Lab Products, Inc. 5160 East Airport Drive Ontario, CA 91761 Check if this	dicent (Include ZIP Code	: ·	(b)(i), my product is site:	milar or identical in co	n FIFRA Section 3(c)(3) Omposition and labeling
		Sec	tion - II		
Amendment - Explain below. Resubmission in response to Agency letter dated 5/12/2010 Motification - Explain below. Final printed labels in response to Agency letter dated "Me Too" Application. Other - Explain below.					
j		Sac	tion - III		
1. Material This Product Wil	I Do Brokened by		tion - in		
Child-Resistant Packaging Yes* No * Cartification must be submitted	Unit Packaging Yes No If "Yes" Unit Packaging wgt.	No. per If "Ye	Yes No Soluble Packaging Yes No No Soluble Packaging No Soluble Packaging	2. Type of Contains Metal Plastic Glass Paper Other (
3. Location of Net Contents Label C	Information 4 Container	. Size(s) Retail Conte	siner 5.	ocation of Label Directi On Label On Labeling accor	ions mpanying product
6. Manner in Which Label is Affixed to Product Lithog Paper Stend		Lithograph Paper glued Stenciled	Other _		
		Sec	tion - IV		*
1. Contact Point (Complete	items directly below for	identification of indi	vidual to be contacted, if n	ecessary, to process this	s application.)
Name Dana Wm. Somesla		Title Chemis	st	Telephor	ne No. (Include Area Code)
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.					
2. Signature	W Sal	3. Title Dana W	√m. Somesla	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	· ·
4. Typed Name Dana Wm. Somesia		5. Date 5/25/2	2010	0.(00	C C C C C C C C C C C C C C C C C C C



Swimming Pool Chlorinating Liquid

ACTIVE INGREDIENT
Sodium Hypochlorite......10.0%
INERT INGREDIENTS......90.0%
TOTAL 100.0%

NOTIFICATION / 2010
Date Revisived: // NOTIFICATION / 2010
Revisived By: // NOTIFICATION / 2010

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Available Chlorine 10%

	FIRST AID	
If in Eyes	Hold eye open and flush with plenty of 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 On Skin or Clothing	Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. 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. 	
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 immediately.	
Have the	product container or label with you when calling a poison control center or doctor, or going for treatment. For assistance call 1-800-767-7665	

PRECUATIONARY STATEMENTS: HAZARDS TO HUMANS AND DOMESTIC ANIMALS

DANGER: Corrosive, may cause severe skin and eye irritation or chemical burns to broken skin. Causes eye damage. Wear safety glasses or goggles and rubber gloves when handling this product. Wash after handling this product. Wash after handling aports. Vacate poorly ventilated areas as soon as possible. Do not return until vapors have dissipated.

PHYSICAL OR CHEMICAL HAZARDS:

STRONG OXIDIZING AGENT: Mix only with water according to label directions. Mixing this product with chemicals (e.g. ammonia, acids, detergents, etc.) or organic matter (e.g. urine, feces, etc.) will release chlorine gas which is irritating to eyes, lungs, and mucous membranes.

ENVIRONMENTAL HAZARDS:

This product is toxic to fish and aquatic organisms.

DIRECTIONS FOR USE:

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

NOTE; This product degrades with age. Use a chlorine test kit and increase dosage as necessary to obtain the required level of available chlorine.

SWIMMING POOL WATER DISINFECTION: Add 11 oz. of this product for each 10,000 gal. of water to yield an available chlorine residual of 1ppm. Maintain 1.0 to 3.0ppm in unstabilized pools and 1.0 to 1.5ppm in stabilized pools. To start-up or superchlorinate a pool add 52 to 104 oz. of this product for each 10,000 gal. of water to yield 5 to 10ppm chlorine residual. DO NOT enter pool until residual is less than 3.0ppm. Add this product at night after running filter. Check in the morning and adjust as necessary.

IMPORTANT maintain pH between 7.2 to 7.6 maintain alkalinity between 50 to 100 ppm.

STORAGE AND DISPOSAL:

STORAGE: Keep product in tightly closed container when not in use. Store in cool, dry well ventilaged field away from heat or open flame. DISPOSAL: If empty: Nonrefillable container. Do not reuse or refill this container. Place in trash of offer for recycling if available. If partly filled: Call your local solid waste agency or 1-800-CLEANUP for disposal instructions. Never place unused product down any indoor or outdoor drain.