

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

APR 16 2003

Penn Champ, Inc.  
Railroad & Lincoln Ave., P.O. Box 55  
East Butler, PA 16029-0055

Attention: Ray Rodriguez  
Vice President of Manufacturing

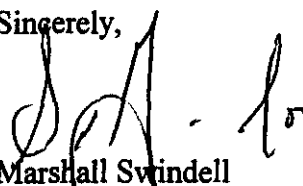
Subject: Bissell One Step Disinfectant Bathroom Cleaner  
EPA Reg. No. 8284-7  
Notification of Alternate Brand Name

This will acknowledge receipt of your notification for the alternate brand name, Bissell Disinfectant Bathroom Cleaner Citrus, submitted under the provision of FIFRA Section 3(c)(9). Based on a review of submitted material, the following comments apply.

The notification is in compliance with PR Notice 98-10 and is acceptable. This information has been made a part of your file.

If you have any questions concerning this letter, please contact Solange Garvey at (703) 308-8911.

Sincerely,



Marshall Swindell  
Product Manager 33  
Regulatory Management Branch  
Antimicrobials Division (7510C)

CONCURRENCES

SYMBOL							
SURNAME							
DATE							

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 2-28-85



United States  
Environmental Protection Agency  
Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number

### Application for Pesticide - Section I

1. Company/Product Number 8284-7	2. EPA Product Manager Marshall Swindell	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Bissell Disinfectant Bathroom Cleaner	PM# PM-33	
5. Name and Address of Applicant (Include ZIP Code) Penn Champ, Inc. Railroad & Lincoln Ave., P. O. Box 55 East Butler, PA 16029-0055 <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 type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

"Notification of alternate brand name - Bissell Disinfectant Bathroom Cleaner Citrus Scent - 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. Sect. 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:				2. Type of Container	
Child-Resistant Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Metal	
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	<input type="checkbox"/> Plastic	
		If "Yes" Package wgt.	No. per container	<input type="checkbox"/> Glass	
3. Location of Net Contents Information <input type="checkbox"/> Label <input checked="" type="checkbox"/> Container		4. Size(s) Retail Container 17 oz. & 25 oz.		5. Location of Label Directions <input type="checkbox"/>	
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input checked="" type="checkbox"/> Other Aerowrap			

### Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Ray Rodriguez	Title Vice president of Manufacturing	Telephone No. (Include Area Code) 724-287-8771 Ext. 110

#### 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 	3. Title Vice President of Manufacturing	6. Date Application Received (Stamped)
4. Typed Name Ray Rodriguez	5. Date 4/4/03	

