


(A) 	United States Environmental Protection Agency Office of Pesticide Programs (H7505C) Washington, DC 20460	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number 161925
	Application for Pesticide:		
	Section I		

1. Company/Product Number 8383-7	2. EPA Product Manager Ruth G. Douglas	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Sporicidin Brand Disinfectant Towelette	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) Sporicidin International 5901 Montrose Road Rockville, MD 20852	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 _____	

Check if this is a new address

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.)

* See Attached Page

Alternate Brand Name

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
	If "Yes," Unit Package wgt.	No. per container	If "Yes," Package wgt.	No. per container	<input type="checkbox"/> Glass
					<input type="checkbox"/> Paper
					<input type="checkbox"/> Other (Specify) _____
3. Location of Net Contents information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) of Retail Container		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 Harold E. Plank, D.D.S.	Title Technical Director	Telephone No. (Include Area Code) 301-231-7700
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 <i>Harold E. Plank</i>	3. Title Technical Director	
4. Typed Name Harold E. Plank, D.D.S.	5. Date June 20, 1995	

BEST COPY AVAILABLE

DIRECTIONS: 1 is a violation of U.S. Federal Law to use this product in a manner inconsistent with its labeling.

PRE-CLEAN surface to remove soil and dirt.

TO DISINFECT AND DEODORIZE: Thoroughly wet surface with towelette. Ensure surface remains moist for a 10 minute contact time at room temperature (20 C/68 F or above).

PRECAUTIONARY STATEMENTS: Hazard to Humans and Domestic Animals.

CAUTION: Avoid direct contact with food. Avoid eye contact. In case of contact, immediately flush with plenty of water. If necessary, consult a physician.

STORAGE AND DISPOSAL: Store at room temperature. Discard used towelettes in an empty container in regular trash.

EPA Reg. No. 3383-7 EPA Est. No. 052757-01-001

GERMICIDAL

NEW!

RESIST AFTER REQUEST
A HOSPITAL DISINFECTANT
NOW AVAILABLE FOR THE HOME

Sporicidin
GERMICIDAL TOWELETTES

Kills Disease and Odor Causing Organisms on Hard Surfaces

- HIV-1 (AIDS virus)
- Oral and Genital Herpes
- Tuberculosis
- Staph and Strep
- Salmonella
- Athlete's Foot Fungus

Continuous Residual Activity for Over 6 Months*

Sporicidin
ANTHONY PRODUCTS CO.
5901 Montrose Road, Rockville, Md. 20852

Active Ingredients:
Phenol 1.50%
Sodium Phosphate 0.00%
Keep Out of Reach of Children
CAUTION!
Inert Ingredients 98.50%
See additional precautions on back panel.
Contents: (12) Towelettes saturated with disinfectant.

An effective disinfectant and active deodorant for hospitals, medical and veterinary facilities, laboratories, industrial clean rooms, nursing homes, ambulances, hotels, restaurants, schools, health spas and toilets.

HOSPITAL DISINFECTION

DISINFECTANT: Acts effectively on germ laden hard surfaces and equipment in patient rooms, operating rooms, emergency rooms, recovery rooms and bathrooms. For use on counter tops, telephones, furniture, sinks, light switches, linen hampers, shower stalls, trash containers and other areas including animal enclosures. Reduces the hazards of cross-contamination on environmental surfaces, including toilet seats.

DEODORANT: Continuous residual bacteriostatic activity against odor-causing

organisms for over 6 months in the presence of adequate moisture. If not removed from surfaces including vinyl, glass and wood.

SPORICIDIN® TOWELETTES are effective when used as directed but differ in comparison from other Sporicidin® products.

PASSES AOC Efficacy STANDARDS FOR INSTITUTIONAL AND HOSPITAL DISINFECTION Tested against *Staphylococcus aureus*, *Streptococcus pyogenes*, *Streptococcus salivarius*, *Salmonella choleraesuis*, *Pseudomonas aeruginosa*, *Escherichia coli*, oral and genital Herpes, Influenza A (Japan 305/57) and Polio type 1 viruses, *Trichophyton mentagrophytes* (Athlete's Foot fungus), *Mycobacterium tuberculosis* and HIV-1 (AIDS virus) on environmental surfaces.



.9375" SEAL

6.754" CUT OFF

.5" SEAL

3/1 9503

.75"

.50"

7" WE WID

1.0625"

.6875" SEAL