

8698-3

01/24/2007

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, D.C. 20460

OFFICE OF  
PREVENTION, PESTICIDES AND  
TOXIC SUBSTANCES

Ms. Allison Mandula  
Eight in One Pet Products  
Division of United Pet Group  
2100 Pacific Street  
Hauppauge, NY 11788-4737

JAN 24 2007

Subject: Notification of Primary Brand Name Change  
Pro Pet Flea & Tick Dog Shampoo (formerly St. Aubrey Perfect Coat Flea & Tick  
Dog Shampoo  
EPA Registration Number 8698-3  
Your Application Dated November 9, 2006

Dear Ms. Mandula:

The Agency is in receipt of your Application for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 dated November 9, 2006 for the product The Registration Division (RD) has conducted a preliminary screen of this request for its applicability under PRN 98-10 and finds that the action(s) requested fall within the scope of PRN 98-10. The label submitted with the application has (have) been stamped "Notification" received but not reviewed and will be placed in our records.

If you have any questions, please me directly at 703-305-6249.

Sincerely,

A handwritten signature in black ink, appearing to be "Linda Arrington".

Linda Arrington  
Notifications & Minor Formulations Team Leader  
Registration Division (7505P)  
Office of Pesticide Programs

SJE



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Please read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0060, Approval expires 2-28-95



United States  
Environmental Protection Agency  
Washington, DC 20460

Registration  
 Amendment  
 Other

OPP Identifier Number

**Application for Pesticide - Section I**

|   |   |  |
|---|---|--|
| 1. Company/Product Number<br>8698-3   | 2. EPA Product Manager<br>Linda Arrington   | 3. Proposed Classification<br><input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted |
| 4. Company/Product (Name)<br>St. Aubrey Veterinary Labs Flea & Tick Dog Shampoo   | PM#<br>10   |  |
| 5. Name and Address of Applicant (Include ZIP Code)<br>EIGHT IN ONE PET PRODUCTS<br>2100 Pacific Street<br>Hauppauge, NY 11788<br><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:<br>EPA Reg. No. 8698-3<br>Product Name Pro Pet Flea & Tick Dog Shampoo |  |

**Section - II**

|  |  |                     |
|--|--|---------------------|
| <input type="checkbox"/> Amendment - Explain below.                      | <input type="checkbox"/> Final printed labels in response to Agency letter dated | <b>NOTIFICATION</b> |
| <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.                                  |                     |

JAN 24 2007

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

|   |  |   |   |
|---|--|---|---|
| Child-Resistant Packaging<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Unit Packaging<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No | Water Soluble Packaging<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | 2. Type of Container<br><input type="checkbox"/> Metal<br><input checked="" type="checkbox"/> Plastic<br><input type="checkbox"/> Glass<br><input type="checkbox"/> Paper<br><input type="checkbox"/> Other (Specify) |
| * Certification must be submitted   |  | If "Yes" Unit Packaging wgt. 20 Fl. Oz. No. per container   | If "Yes" Package wgt. No. per container   |

3. Location of Net Contents Information  
 Label  Container

4. Size(s) Retail Container  
20 Fl. Oz.

5. Location of Label Directions  
 On Label

6. Manner in Which Label is Affixed to Product  
 Lithograph Paper glued Stenciled  Other Pressure Sensitive

**Section - IV**

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)

|                         |                                |   |
|-------------------------|--------------------------------|---|
| Name<br>Harry Schlakman | Title<br>VP Technical Services | Telephone No. (Include Area Code)<br>631-232-1200 |
|-------------------------|--------------------------------|---|

**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<br>                 | 3. Title<br>VP Technical Services | 6. Date Application Received<br>(Stamped) |
| 4. Typed Name<br>Harry Schlakman | 5. Date<br>1-3-07                 |   |







