

9198-182

11/3/2011

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460

OFFICE OF
CHEMICAL SAFETY AND
POLLUTION PREVENTION

The Andersons Lawn Fertilizer Division, Inc.
Debbie Ziehr
P.O. Box 119
Maumee, OH 43537

NOV - 3 2011

Product Name: Andersons Golf Products Fungicide V
EPA Reg. No.: 9198-182
Subject: Notification dated September 2, 2011: PRN 2007-4
EPA Decision Number: 455386

Dear Ms. Ziehr:

The Agency is in receipt of your Application for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10. The Registration Division (RD) has conducted a review of this request for its applicability under PRN 98-10 and finds that the action(s) requested falls within the scope of PRN 98-10.

The Agency acknowledges the updated *Storage and Disposal* and *Warranty Disclaimer and Limitation of Liability* sections.

The label submitted with the application has been stamped "Notification" and will be placed in our records. If you have questions concerning this letter, please contact Erin Malone at 703-347-0253 or via email at malone.erin@epa.gov.

Sincerely,

A handwritten signature in cursive script that reads "Mary L. Waller".

Mary L. Waller
Product Manager (21)
Fungicide Branch
Registration Division (7504P)

2009

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 9198-182	2. EPA Product Manager Waller	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Andersons Golf Products Fungicide V	PM# 21	
5. Name and Address of Applicant (Include ZIP Code) The Andersons Lawn Fertilizer Division, Inc. PO Box 119 Maumee, OH 43537 <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 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.)

Notification of Label changes per PR Notice 2007-4.

This notification is consistent with the guidance in PR Notice 2007-4 and the requirements of EPA's regulations at 40 CFR 156.10, 156.140, 156.144, 156.146, 156.156. 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 the amended label is not consistent with the requirements of 40 CFR 156.10, 156.140, 156.144, 156.146, 156.156, 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 type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt	No. per container
				<input checked="" type="checkbox"/> Glass	<input checked="" type="checkbox"/> Paper
				Other (Specify) _____	
3. Location of Net Contents Information <input type="checkbox"/> Label <input checked="" type="checkbox"/> Container		4. Size(s) Retail Container 50 - 1,000 lbs.		5. Location of Label Directions <input checked="" type="checkbox"/> On Label	
6. Manner in Which Label is Affixed to Product		<input checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input checked="" type="checkbox"/> Other Pocket	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Debbie Ziehr	Title Regulatory Administrator	Telephone No. (include Area Code) 419-891-6671
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 	3. Title Regulatory Administrator	
4. Typed Name Debbie Ziehr	5. Date 9/2/2011	

3049

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0080. Approval expires 2-28-95



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 9198-182	2. EPA Product Manager Waller	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Andersons Golf Products Fungicide V	PM# 21	
5. Name and Address of Applicant (Include ZIP Code) The Andersons Lawn Fertilizer Division, Inc. PO Box 119 Maumee, OH 43537 <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 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.)

Notification of Label change per PR Notice 98-10: Revised warranty per EPA guidance. See cover letter for details

this notification is consistent with the guidance of PR Notice 98-10 and the requirements of EPA's regulations at 40 CFR 153.10 and 40 CFR 152.46 and not 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 guidance of PR Notice 98-10 and the requirements of 40 CFR 156.10 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 type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt	No. per container
				<input checked="" type="checkbox"/> Glass	<input checked="" type="checkbox"/> Paper
				Other (Specify) _____	
3. Location of Net Contents Information <input type="checkbox"/> Label <input checked="" type="checkbox"/> Container		4. Size(s) Retail Container 50 - 1,000 lbs.		5. Location of Label Directions <input checked="" type="checkbox"/> On label <input type="checkbox"/> On label accompanying product	
6. Manner in Which Label is Affixed to Product		<input checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input checked="" type="checkbox"/> Other Pocket	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Debbie Ziehr	Title Regulatory Administrator	Telephone No: (include Area Code) 419-891-6671
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 	3. Title Regulatory Administrator	
4. Typed Name Debbie Ziehr	5. Date 9/2/2011	

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Page 2

Per PR Notice 2007-4 enclosed is EPA Form 8570-1, an application notifying the Agency of a revision to the labeling for the subject registration. A copy of the revised labeling is enclosed with the additions underlined and marked in blue.

1.) We have added the following statements to our Storage and Disposal section:

"Nonrefillable container. Do not reuse or refill this container. Offer for recycling, if available."

If there are any questions or comments regarding this notification, please contact me.

Sincerely,

The Andersons Lawn Fertilizer Division, Inc.

Debbie Ziehr
Regulatory Administrator
Phone: 419-891-6671
Fax: 419-891-2745
Email: debbie_ziehr@andersonsinc.com

Enclosures



leaf 9

Andersons™ Golf Products Fungicide V

- Prevents and controls Pythium blight and gray snow mold on golf course greens and fairways

ACTIVE INGREDIENTS:

Chloroneb (1,4-dichloro-2, 5-dimethoxybenzene)..... 6.25%

INERT INGREDIENTS: 93.75%

Total 100.00%

EPA Reg. No. 9198-182

EPA Est. 9198-OH-1M, 9198-OH-2B, 9198-AL-001A

Underlined letter is first letter used in run code on bag

NOTIFICATION

NOV 3 - 2011

KEEP OUT OF REACH OF CHILDREN CAUTION

FIRST AID	
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 treatment advice.
If in eyes	Hold eye open and rinse slowly and gently with water for 15-20 minutes. Remove contacts, if present, after the first 5 minutes, then continue rinsing. Call a poison control center or doctor for treatment advice.
If swallowed	Call a poison control center or doctor for treatment advice. Have person sip a glass of water if able to swallow. Do not induce vomiting unless told to by a poison control center or doctor. Do not give anything by mouth to an unconscious person.
If on skin	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.
Have the product container or label with you when calling a poison control center or doctor or going for treatment. You may also contact 1-800-757-8951 for emergency medical treatment information.	

PRECAUTIONARY STATEMENTS

Hazards to Humans and Domestic Animals: May irritate eyes, nose, throat and skin. Avoid breathing dust. Avoid contact with skin, eyes, and clothing. Wash thoroughly with soap and water after handling. Remove contaminated clothing and wash before reuse. Do not graze or feed clippings from treated areas to livestock.

Environmental Hazards: Do not apply directly to water, to areas where surface water is present or to intertidal areas below mean high water mark. Do not contaminate water when disposing of equipment washwaters. Apply this product only as specified on this label.

GUSSETS: [Note: gusset information is optional, depending on bag type]

RIGHT GUSSET

Andersons Golf Products Fungicide X

{product code}

LEFT GUSSET

7049

Andersons Golf Products Fungicide X TOP GUSSET	{product code}
Andersons Golf Products Fungicide X BOTTOM GUSSET	{product code}
Andersons Golf Products Fungicide X	{product code}

Directions for Use

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

Not for use on turf being grown for sale or other commercial use as sod, or for commercial seed production, or for research purposes.

Prevents and controls:

- Pythium blight
- gray snow mold

Whenever used on greens and fairways, apply to moist foliage in the morning or evening. Sprinkle lightly just before traffic resumes to avoid pickup of material on shoes, golf balls, or maintenance equipment.

To prevent Pythium blight -- apply at the RECOMMENDED RATE to moist foliage when high temperature and humidity favor development. Repeat at 5-7 day intervals as long as these weather conditions persist.

To control Pythium blight -- apply at the RECOMMENDED RATE to moist foliage as soon as disease activity is observed; repeat at 5-7 day intervals during high temperature and humidity conditions.

In case of severe disease attack, apply at the DOUBLE RATE to moist foliage and continue RECOMMENDED RATE applications at 5-7 day intervals during high temperature and humidity conditions.

On new seedings, apply at the RECOMMENDED RATE after sowing seed; at first signs of disease, apply to moist foliage of newly germinated grass and repeat at 7-10 intervals if evidence of disease persists.

When treating to control Pythium blight, do not fertilizer or water heavily until disease activity is arrested; prolonged contact with foliage enhances effectiveness.

Gray snow mold -- apply at the RECOMMENDED RATE to dry or moist foliage prior to the first heavy snow (early Winter). Repeat in mid-Winter if turf is free of snow. A final treatment in late Winter as the snow melts extends protection.

In areas where snow cover is present the entire Winter, apply at the DOUBLE RATE prior to the first snow and at the RECOMMENDED RATE snow melts in the Spring.

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Storage and Disposal

Do not contaminate water, food, or feed by storage and disposal.

STORAGE: Store in clean, dry place. Reseal opened bag by folding top down and securing.

PESTICIDE DISPOSAL: Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility. Call your local or state solid waste agency or call 1-800-CLEANUP if you have questions.

CONTAINER DISPOSAL: Nonrefillable container. Do not reuse or refill this container. Offer for recycling if available. Completely empty bag into application equipment. Then dispose of empty bag in a sanitary landfill or be incineration, or, if allowed by State and local authorities, by burning. If burned, stay out of smoke.

IMPORTANT: READ BEFORE USE:

Read the entire Directions for Use and the Warranty Disclaimer and Limitation of Liability before using this product. If terms are not acceptable, return the unopened product container at once. By using this product, user or Buyer accepts the following Warranty Disclaimer and Limitation of Liability:

WARRANTY DISCLAIMER and LIMITATION of LIABILITY:

Manufacturer warrants that this product conforms to the chemical description on the label and is reasonably fit for the purposes stated on the label when used in strict accordance with the directions. Manufacturer makes NO OTHER EXPRESS OR IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. To the extent consistent with applicable law, it is Manufacturer's intent to LIMIT ANY LIABILITY FOR SPECIAL, CONSEQUENTIAL OR INCIDENTAL ECONOMIC DAMAGES to refund of purchase price or replacement of product, at Buyer's choice. To the extent consistent with applicable law, Manufacturer DISCLAIMS ANY LIABILITY FOR COMPENSATORY OR OTHER DAMAGES ARISING OUT OF ANY USE CONTRARY TO LABEL DIRECTIONS. Use contrary to label directions is not permitted.

LEGAL RIGHTS:

THIS LIMITED WARRANTY GIVES YOU SPECIFIC LEGAL RIGHTS; YOU MAY HAVE OTHER RIGHTS THAT VARY FROM STATE/JURISDICTION TO STATE/JURISDICTION.

Suggested Spreader Settings

To provide proper distribution calibrate spreader before application.

32.75 lbs. treats 11,000 ft² at the RECOMMENDED RATE

32.75 lbs. treats 5,500 ft² at the DOUBLE RATE

SPREADER	GROUND OR PTO SPEED	WIDTH OF COVERAGE	SPREADER SETTING	
			RECOMMENDED	DOUBLE
Scotts Drop Type	X mph	Overlap wheels	X	X
Scotts Rotaries	X mph	XX feet	X	X
Lely Models (see below)	X mph	XX feet	X	X

Lely models WTR, WFR, HR and 1250. PTO at 450 rpm.

Note to EPA: actual spreader models may vary depending on market demand and availability

Note to EPA: Metric information is optional, depending on market:

Metric coverage: 14.86 kg treats 1022m² at the RECOMMENDED RATE and 511 m² at the DOUBLE RATE

9049

Net Weight 32.75 lbs. (14.86 kg)
Covers up to 11,000 Sq. Ft.

Manufactured by:
The Andersons Lawn Fertilizer Division, Inc.
PO Box 119
Maumee, OH 43537

{product code}

Date Printed	08/19/11
Date Approved	9/26/02
Supersedes	transfer
Label Changes	Notification - container statement, warranty
Filename	9198-182
Label Code	RVnot081911