

9404-55

05/15/1997

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Please read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0080, Approval expires 05-31-98

	United States Environmental Protection Agency Washington, DC 20460	<input type="checkbox"/> Registration <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Other	OPP Identifier Number 251944
	Application for Pesticide - Section I		

1. Company/Product Number 9404-55	2. EPA Product Manager Philip V. Errico Luis Sugiyama	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) our best quality Weed & Feed"	PM# 25	OPP ID # 251944
5. Name and Address of Applicant (Include ZIP Code) SUNNILAND CORPORATION P.O. BOX 8001 SANFORD, FL 32771 <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. > N/A Product Name > N/A	

Section - II		NOTIFICATION
<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated	MAY 15 1997
<input type="checkbox"/> Resubmission in response to Agency letter dated	<input type="checkbox"/> "Me Too" Application.	
<input checked="" type="checkbox"/> Notification - Explain below. Add descriptive phrases Additional Brand Names	<input type="checkbox"/> Other - Explain below.	

Explanation: Use additional page(s) if necessary. (For section I and Section II.)
 > Notification Amendment to add the following phrases to the front panel
 "Lawn Food for-Bitter Blue-Seville-Raleigh and all St. Augustine Grass Lawns"
 "Grow with a Winner - For Quality Nitrogen "NITROFORM".
 Additional names: 1. SUNNI-GREEN FLORATAM SPECIAL "S" WEED & FEED 18-4-10
 2. "SUNNI-GREEN FLORATAM SPECIAL 'S' WEED & FEED. 3. SUNNI-GREEN FLORATAM WEED & FEED"

Section - III			
1. Material This Product Will Be Packaged In:			
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	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Glass <input type="checkbox"/> Paper <input checked="" type="checkbox"/> Other (Specify)
* Certification must be submitted	If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt.
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3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container 15; 30; 35 lbs.	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product
6. Manner in Which Label is Affixed to Product Litho-		<input checked="" 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 H. R. MCLANE, INC. By H. R. McLane;	Title Authorized Agent Sunniland Corp.	Telephone No. (Include Area Code) 305 661 1706 800 432 1130
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 Authorized Agent	
4. Typed Name Clyde L. Cline Assist. Mgr. Operations	5. Date APR 30 1997	

KEEP OUT OF REACH OF CHILDREN CAUTION

STATEMENT OF PRACTICAL TREATMENT

SWALLOWED: Call a physician or Poison Control Center immediately. Induce vomiting by giving victim 1 or 2 glasses of water and touching back of throat with finger. Do not induce vomiting or give anything by mouth to an unconscious or convulsing person.

IN EYES: Flush eyes with plenty of water. Get medical attention
IF ON SKIN: Remove contaminated clothing and wash affected area with soap and water.

SEE SIDE PANEL FOR ADDITIONAL PRECAUTIONARY STATEMENTS

PRECAUTIONARY STATEMENTS HAZARDS TO HUMAN AND DOMESTIC ANIMALS

CAUTION: Harmful if swallowed. Avoid inhalation or contact with eyes. Wash after handling or using. Keep away from feed or food products.

ENVIRONMENTAL HAZARDS

Atrazine can travel (seep or leach) through soil and can enter ground water which may be used as drinking water. Atrazine has been found in ground water. Users are advised not to apply Atrazine to sand and loamy soils where the water table (ground water) is close to the surface and where these soils are very permeable, i.e. well-drained. Your local agricultural agencies can provide further information on the type of soil in your area and the location of ground water.

This product is toxic to aquatic invertebrates. Do not apply directly to water or wetlands. Runoff and drift from treated areas may be hazardous to aquatic organisms in neighboring areas. Do not contaminate water when disposing of equipment washwaters. Do not apply on or under ornamental trees, shrubs, bedding plants, flowers or garden plants since injury may result.

NOTICE: Buyer and user assumes all risk and liability of use, storage, and/or handling of this material not in accordance with the terms of this label.

DIRECTIONS FOR USE

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

SUNNI-GREEN FLORATAM "S" IS A PREMIUM QUALITY LAWN FOOD. IT CONTAINS ALL THE INGREDIENTS, INCLUDING SECONDARY PLANT FOOD ELEMENTS TO MAINTAIN A BEAUTIFUL LAWN WHILE CONTROLLING WEEDS AS LISTED. SUNNI-GREEN FLORATAM SPECIAL "S" CAN BE APPLIED TO ALL ST. AUGUSTINE LAWNS.

WEEDS CONTROLLED OR SUPPRESSED

- | | |
|-----------------------------------|--|
| Annual Bluegrass (Poa Annu) | Florida Pusley |
| Annual Sowthistle | Fragrant Cudweed (Rabbit Tobacco) Henbit |
| Annual Clover | Knotweed |
| Black Medic | Lespedeza |
| Blue Toadflax | Mat Lippia (Matchweed) |
| Bull Paspalum | Moneywort |
| Buckhorn Plantain | Narrowleaf Vetch |
| Bur Clover | Oxalis (Common and Yellow Woodsorrel) |
| Carolina Geranium (Cranesbill) | Parsley-Piert |
| Chickweed (Common and Mouse Ear) | Red Sorrel |
| Common Dandelion | Rescuegrass |
| Common Purslane | Sandspur |
| Crabgrass | Shepards Purse |
| Cudweed | Spurweed |
| Cutleaf Evening Primrose | Stinging Nettle |
| Dichondra | Swinecrest |
| Dollar Weed | Venus Looking Glass |
| Florida Betony (Rattlesnake Weed) | Virginia Creeper |
| | Wild Mustard |



SUNNILAND CORPORATION

P.O. BOX 8001 - SANFORD, FL 32771

IMPORTANT USE PRECAUTIONS

DO NOT APPLY THIS PRODUCT ON OR OVER THE ROOT ZONE OF ORNAMENTAL TREES, SHRUBS, BEDDING PLANTS, FLOWERS, OR GARDEN PLANTS OR INJURY TO THESE PLANTS MAY RESULT. Do not apply to lawns containing grasses or mixtures of grasses other than those listed on the label or injury to these grasses may result. Do not apply to newly seeded Zoysia, Centipede, and Carpetgrass lawns until after the new grass has been mowed at least twice.

Do not plant sprigs for one month, or sow new grass seed for six months following application of this product. May be applied to newly sprigged St. Augustine and Zoysia lawns one week after sprigging to prevent competition from germinating weeds. Do not plant any crop (flower or vegetable gardens) to treated areas for 18 months or injury may result. Apply this product only when grass blades are dry. When daytime temperatures are 80 degrees F or above, water sufficiently to rinse particles off the grass blades.

HOW TO SET YOUR SPREADER

Ortho Broadcast	4 1/2	Scott's Drop	6
Ortho Drop	7	Cyclone	4 1/2
Precision Broadcast	12	Central Broadcast	4
Scott's Broadcast	1	Central Drop	8

NOTE: The above suggested spreader settings are only approximate. Age and condition of your spreader can cause wide variations. Be sure to calibrate your spreader with each application. Close spreader when filling, stopping and turning. Avoid getting on concrete, stucco or asbestos siding, as the composition of certain fertilizers elements can cause treatment stains.

GUARANTEED ANALYSIS*

- Total Nitrogen (N) - - - - - 18.00%
- 5.00%Ammoniacal Nitrogen
- 11.88%Water Soluble Organic Nitrogen
- 1.42% Water Insoluble Nitrogen
- Available Phosphate (P₂O₅) - - - - - 4.00%
- Soluble Potash (K₂O) - - - - - 10.00%
- Chlorine not more than 2.00 %

Derived from Sulfate of Ammonia, Ammonium Phosphate, Muriate of Potash, Sulphate-Potash-Magnesium. Potential Acidity Equiv. to ___ lbs. of Calcium Carbonate per ton.

Statement of Secondary Plant Foods

Total Magnesium as Mg - 1.0%; Boron as B -.02%; Copper as Cu -.05%; Iron as Fe -1.50%; Manganese as Mn -.50%; Molybdenum as Mo -.005%; Zinc as Zn -.05%

Derived from: Manganese Sulphate, Iron Oxide, Manganese Oxide, Copper Oxide, Zinc Oxide, Borax, Sodium Molybdate.

**fertilizer analyses for this product may vary to suit the needs of different geographical communities*

STORAGE AND DISPOSAL

Do not contaminate water, food or feed by storage or disposal. **STORAGE:** Store product in original labeled container in a cool, dry, locked place out of reach of children.

PESTICIDE DISPOSAL: Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility.

CONTAINER DISPOSAL: Completely empty bag into application equipment. Then dispose of empty bag in a sanitary landfill or by incineration, or, if allowed by State and local authorities, by burning. If burned stay out of smoke. **HOUSEHOLD:** Do not reuse empty bag. Securely wrap original container in several layers of newspaper and discard in trash.

NOTICE: The Seller makes no implied warranty of merchantability nor any other warranties which extend beyond the description on this label. (9404-55.PM501-20-8704-01-87notif-emd)

