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Please read Instructions on reverse before completing form.	Form Approved. OMB No. 2070-0060. Approval expires 11-30-93
Office of Pesticide Programs Washington, DC 204	Amendment 166203
Application for P	Olliei
Section	
1. Company/Product Number	2. EPA Product Manager 3. Proposed Classification
$\begin{array}{c} 9630 - 4, 5, 6, 7(\overline{3}) 10, 11, 12, 15, 16, 17, 17, 21, 22, \\ 4. \ \text{Company/Product (Name)}  24, 26, 27, 28, 29, 30, 31 \\ 51, 34, 35, 27, 28, 29, 30, 31 \\ \end{array}$	C. Giles-Parker None Restricted
OMG AMERICAS, INC. (MOONEY CHEMICALS)	,
5. Name and Address of Applicant (Include ZIP Code) OMG Americas, Inc. 2301 Scranton Road	<ul> <li>6. Expedited Review. In accordance with FIFRA Section 3(c)(3)</li> <li>(b)(i), my product is similar or identical in composition and labeling to:</li> </ul>
Cleveland, OH 44113	
	EPA Reg. No
Check if this is a new address	Product Name
Section I	1
Amendment - Explain below	Final printed labels in response to Agency letter dated
Resubmission in response to Agency letter dated	- "Me Too" Application.
XXX Notification - Explain below.	Other - explain below.
Explanation: Use additional page(s) if necessary. (For section I and	Section II )
Our company has officially changed its na	
Americas, Inc. In addition, we have add	led the "Effigure, Discharge Statement"
to all our labels.	ed the "Effigure Discharge Statement"
NOTIFICATION	4UG 1 5 1996
Section III	
1. Material This Product Will Be Packaged In:	
	er Soluble Packaging 2. Type of Container
Yes*	Yes Metal Plastic
	No
If "Yes," No. per If "Yes	es,* No. per Paper Other (Specify)
* Certification must be	Papar
* Certification must be submitted.	es,* No. per Paper Other (Specify)
* Certification must be submitted. 3. Location of Net Contents Information 4. Size(s) of Retail (	es," No. per kage wgt. container Other (Specify)
Certification must be     If "Yes," No. per If "Yes," Container Pack     submitted.     Label Contents Information     Label Container     Label Label Is Affixed To Product Lithograph	es,"     No. per container       Container     5. Location of Label Directions       On Label     On Labeling accompanying product
Certification must be     If "Yes,"     No. per If "Yes,"     Unit Package wgt.     container     Package wgt.     Container     Label     Container     Container     Label     Container     Label     Container     Lithograph     Paper glued	es,"     No. per container       Container     5. Location of Label Directions       On Label     On Labeling accompanying product
Certification must be     If "Yes,"     No. per If "Yes,"     Unit Package wgt.     container     Pack     submitted.     Label     Container     Container     A. Size(s) of Retail     Label     Container     Lithograph     Paper glued     Stenciled     Section	res,"     No. per container       kage wgt.     container       Container     5. Location of Label Directions       On Label       On Labeling accompanying product       Image: Other ()
Certification must be     If "Yes," No. per container     Submitted.     If "Yes," No. per container     If the per cont	ies,*       No. per container       Paper Other (Specify)         Container       5. Location of Label Directions       *         On Label       On Label On Label Directions       *         Other ()       Other ()       *         IV       *       *
	Intermediate       No. per container       Paper Other (Specify)         Container       5. Location of Label Directions       Image: Container         Container       0n Label Directions       Image: Container         Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container         Image: Conta
Certification must be     If "Yes," No. per Container     Submitted.     If "Yes," No. per Container     If the Northele terms directly below for identification of inconset tere     If	ies,*       No. per container       Paper Other (Specify)         Container       5. Location of Label Directions       *         On Label       On Label On Label Directions       *         Other ()       Other ()       *         IV       *       *
* Certification must be       If "Yes," No. per container       If "Yes," Container         * Certification must be       If "Yes," Unit Package wgt.       No. per container       If "Yes," Container         3. Location of Net Contents Information       4. Size(s) of Retail of Container       If "Yes," Container       If "Yes," Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         6. Manner In Which Label Is Affixed To Product       Image: Container       Image: Container       Image: Container         1. Contact Point (Complete items directly below for identification of ind Name       Title       Image: Certification         Laura J. Sydro       Pro       Certification       Image: Certification	Image: No. per container       Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label On Label Directions         Other (       0         Other (       )         IV
	es,"       No. per container         Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label         On Label       On Labeling accompanying product         Other ()         IV         Compliance Specialist       216-575+3679         if eceived         if eceived
Certification must be     If "Yes," No. per Container     Submitted.     If "Yes," No. per Container     It contact Point Contents Information     I contact Point (Complete items directly below for identification of ind     Name     I contact Point (Complete items directly below for identification of ind     Name     I contact Point (Complete items directly below for identification     I contify that the statements I have made on this form and all attachm     I acknowledge that any knowingly false or misleading statement matboth under applicable law.	Image: No. per container       Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label On Label Directions         On Label       On Labeling accompanying product         Image: Other ()       Other ()         Image: Other ()       Image: Other ()         Image: Other (
Certification must be     If "Yes," No. per Container     Submitted.     If "Yes," No. per Container     It contact Point Contents Information     I contact Point (Complete items directly below for identification of ind     Name     I contact Point (Complete items directly below for identification of ind     Name     I contact J. Sydro     Certification     I cortify that the statements I have made on this form and all attachm     I acknowledge that any knowingly false or misleading statement mate both under applicable law.	Image: No. per container       Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label On Label Directions         On Label       On Labeling accompanying product         Image: Other ()       Other ()         Image: Other ()       Image: Other ()         Image: Other (
* Certification must be       If "Yes," No. per container       If "Yes," Container         * Certification must be       If "Yes," Unit Package wgt.       No. per container       If "Yes," Container         3. Location of Net Contents Information       4. Size(s) of Retail of Container       If "Yes," Container       If "Yes," Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container       Image: Container       Image: Container         Image: Container       Image: Container       Image: Container	Paper Other (Specify)         Container         5. Location of Label Directions On Label On Labeling accompanying product         Other ()         IV         Cividual to be contacted, if necessary, to process this application.)         Telephone No. (Include Area Code)         oduct Compliance Specialist         216-575+3679         Image: Specialist of the contacted of the con
* Certification must be       If "Yes," No. per container       If "Yes," Container         * Certification must be       If "Yes," No. per container       If "Yes," Container         3. Location of Net Contents Information       4. Size(s) of Retail of Container         6. Manner In Which Label Is Affixed To Product       Lithograph Paper glued Stenciled         1. Contact Point (Complete items cirectly below for identification of ind Name       Title         Laura J. Sydro       Pro         Certify that the statements I have made on this form and all attachm I acknowledge that any knowingly false or misleading statement ma both under applicable law.       3. Title         2. Signature       3. Title	Image wgt.       No. per container       Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label         On Label       On Labeling accompanying product         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process the contacted, if necessary.         Image of the contacted, if necessary.         Image of the contacted of the contacted.         Image of the contacted of th
* Certification must be       If "Yes," No. per unit Package wgt.       If "Yes," Container         3. Location of Net Contents Information       4. Size(s) of Retail of Label         Image: Label       Container         6. Manner In Which Label Is Affixed To Product       Lithograph Paper glued Stenciled         1. Contact Point (Complete items directly below for identification of ind Name       Title         Laura J. Sydro       Pro         Certify that the statements I have made on this form and all attachm I acknowledge that any knowingly false or misleading statement matoth under applicable law.       3. Title         2. Signature       3. Title         Aura       Aura       5. Date	Image wgt.       No. per container       Paper Other (Specify)         Container       5. Location of Label Directions         On Label       On Label         On Label       On Labeling accompanying product         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process this application.)         Image of the contacted, if necessary, to process the contacted, if necessary.         Image of the contacted, if necessary.         Image of the contacted of the contacted.         Image of the contacted of th

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