

34704-843

07/25/2005

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Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 11-30-93

| | | | |
|--------------|---|--|-----------------------|
| <h1>EPA</h1> | 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 34704-843 Amplify | 2. EPA Product Manager Andersen PM# | 3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted |
| 5. Name and Address of Applicant (Include ZIP Code) Loveland Products Inc. P.O. Box 1286 Greeley, CO 80632-1286 <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"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below | <input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application <input type="checkbox"/> Other - explain below |
|--|---|

NOTIFICATION
JUL 25 2005

Explanation: Use additional page(s) if necessary. (For Section I and Section II). Notification of changing "squirrel cage fans" to "fans". 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 <input type="checkbox"/> Yes* <input type="checkbox"/> No <small>*Certification must be submitted.</small> | Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," Unit Package Wt. No. Per Container | Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," Package Wt. No. Per Container | 2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <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"/> Other (_____) <input type="checkbox"/> Paper Glued <input type="checkbox"/> Stenciled | | | |

Section IV

| | | |
|--|-------------------------------|---|
| 1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.) | | |
| Name Glenda Haage | Title Registration Manager | Telephone No. (Include Area Code) |
| 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) |
| Signature | 3. Title Glenda Haage | 6. Date Application Received (Stamped) |
| 4. Typed Name Glenda Haage | 5. Date June 29, 2005 | |

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NOTIFICATION

JUL 25 2005



AEROSOL GRADE POTATO SPROUT INHIBITOR.

| | |
|------------------------------------|---------------------|
| ACTIVE INGREDIENT: | BY WEIGHT |
| 2, 6-Diisopropyl-naphthalene | 99.7% |
| OTHER INGREDIENTS: | 0.3% |
| | TOTAL 100.0% |

Covered under U.S. Patent Number 5,622,912

**KEEP OUT OF REACH OF CHILDREN
CAUTION**

EPA REG. NO. 34704-843

EPA EST. NO. 70015-ID-01

NET CONTENTS _____

IHT

06005

**PRECAUTIONARY STATEMENTS
HAZARDS TO HUMANS & DOMESTIC ANIMALS**

CAUTION

Harmful if swallowed, inhaled, or absorbed through skin. Avoid breathing vapors, fog or dust. Avoid contact with eyes, skin and clothing. In case of contact immediately flush with plenty of water. Get medical attention if symptoms persist. Wash thoroughly with soap and water after handling. Remove contaminated clothing and wash clothing before reuse.

FIRST AID

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|--------------------------------|--|
| If swallowed: | <ul style="list-style-type: none"> • Call a poison control center or doctor immediately for treatment advice. • Have a person sip a glass of water if able to swallow. • Do not induce vomiting unless told to do so by the poison control center or doctor. • Do not give anything by mouth to an unconscious person. |
| If in eyes: | <ul style="list-style-type: none"> • Hold eye open and rinse slowly and gently with water for 15 -20 minutes. • Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. • Call a poison control center or doctor for treatment advice. |
| If on skin or clothing: | <ul style="list-style-type: none"> • 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. |
| If inhaled: | <ul style="list-style-type: none"> • Move person to fresh air. • If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth-to-mouth, if possible. • Call a poison control center or doctor for further treatment advice. |

**FOR A MEDICAL EMERGENCY INVOLVING THIS PRODUCT CALL:
1-800-301-7976.**

Have the product container or label with you when calling a poison control center or doctor, or going for treatment.

EMERGENCY INFORMATION

For spill, leak, fire or accident involving this material, call day or night CHEMTREC 1-800-424-9300.

PERSONAL PROTECTIVE EQUIPMENT

When handling Amplify during the application period, personal protective equipment (PPE) including chemical-resistant gloves, long-sleeve shirt, long pants, shoes and socks and a respirator approved for pesticides (MSHA/NIOSH approval number prefix TC-23C), or a canister approved for pesticides (MSHA/NIOSH approval number prefix TC-14G) must be worn. If entry into the storage area is nec-

essary during application or after application and before the ventilation period (defined below) has expired, PPE including long sleeve-shirt, long pants, shoes and socks and a respirator (as described above) must be worn. During cleanup procedures PPE including long-sleeve shirt, long pants, rubber boots and socks, and a respirator (as described above) must be worn.

AGRICULTURAL USE REQUIREMENTS

Use this product only in accordance with its labeling and with the Workers Protection Standard, 40 CFR Part 170. This Standard contains requirements for the protection of agricultural workers on farms, forests, nurseries and greenhouses, and handlers of agricultural pesticides. It contains requirements for training, decontamination, notification and emergency assistance. It also contains specific instructions and exceptions pertaining to the statements on this label about personal protective equipment (PPE) and restricted-entry interval. The requirements in this box only apply to uses of this product that are covered by the Worker Protection Standard.

Do not enter or allow any person, other than a person equipped with the appropriate handler personal protective equipment including the appropriate respirator (as described above), to enter the treated area until the area has been ventilated. Ventilation may be for either a total of two (2) hours with fans or other mechanical ventilation or four (4) hours with windows, vents, or other passive ventilation, or until such time that there have been 10 complete air exchanges. The ventilation time may be interrupted, i.e., the time may be accumulated at sporadic intervals, such as 15 minutes of ventilation followed by a period with no ventilation, until the total required ventilation time has accumulated.

DIRECTIONS FOR USE

Use of this product in a manner inconsistent with the terms of the label is a violation of Federal law.

NOTICE

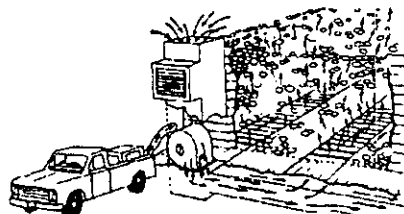
Amplify® is used as an aerosol for treating potatoes for sprout inhibition during storage.

Do not apply in the field.
Do not use on seed potatoes.
Do not allow vapors or fog to come into contact with, or get near to, storage areas used for seed potatoes.

Let six months elapse before using treated storage area for seed potatoes. Air system components (including ducts) and building must be thoroughly cleaned before the area is used for storage of seed potatoes.

TREATMENT OF STORAGE WITH RECIRCULATING AIR SYSTEMS

Assemble unit as shown: place discharge from aerosol generator in the plenum, positioned to allow for thorough mixing and even distribution. Shut down the humidification equipment. Set ventilation system for recirculation and seal storage building. Reduce air flow to deliver up to 5.0 CFM per ton (0.25 CFM per cwt.) or use the lowest air flow available. Check for uniform air distribution throughout the potato pile. Maintain the system on recirculation setting until thermal fog has completely settled. Reactivate the storage ventilation and humidification systems to desired setting.



TREATMENT OF STORAGE OR OTHER AREAS THAT DO NOT HAVE RECIRCULATION AIR SYSTEMS

Prior to placing potatoes in the area to be treated, make the following preparations. On the floor of the area, install an air duct approximately 12 inches by 12 inches running the length or width of the potato pile leaving a space at one end for air circulation. The ducts should be spaced a maximum of 10 feet apart and can be per-

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AMPLIFY® EPA REG. NO. 34704-843

forated metal pipe, slotted wood construction or if the potatoes are in bags, by bridging a 12 inch space between two rows of bags.
At the open end of each duct in the false wall space, where the fog is to be introduced position a fan to force air through the duct and up through the pile. Set fans to deliver up to 5.0 CFM per ton (0.25 CFM per cwt). Check for uniform air distribution throughout the potato pile.

When the area is filled and ready to be treated, the following steps should be taken: Shut down any ventilating and humidification equipment, and seal the structure.

Start the fans.

Introduce the fog as near as possible to the bottom of the false wall space containing the fans.

Continue running fans until the fog has completely settled.

Reactivata ventilation and humidification equipment to the desired settings.

NOTE: When treating a small area such as a trailer truck or railroad car, it is recommended that a low volume aerosol generator be used.

APPLICATION

Potatoes must be treated with Amplify only ONE time during potato storage season.

For best inhibition of sprouting, Amplify must applied in combination with Sprout Nip 7 Aerosol or CIPC 98A (Sprout Nip Briquettes). Apply at or about the same time as CIPC is typically applied. Apply prior to end of the natural dormancy period of the potato and before sprouting occurs. Amplify must be used after bruises and cuts have healed (normally a minimum of two weeks).

Amplify has been demonstrated to have a synergistic effect when applied with CIPC products such as SPROUT NIP 7 AEROSOL or CIPC 98A (Sprout Nip Briquettes). Apply prior to end of the natural dormancy period of the potato and before sprouting occurs.

Apply SPROUT NIP 7 AEROSOL or CIPC 98A (Sprout Nip Briquettes) at a rate of 8.33-24 ppm or 0.50 - 1.45 lb. ai per 600 cwt. of potatoes. The range of CIPC does vary due to potato variety. Refer to the SPROUT NIP 7 AEROSOL or the CIPC 98A (Sprout Nip Briquettes) labels for specific directions for proper use of these products.

Amplify is to be applied on all potatoes used for processing or fresh market.

Potatoes treated with Amplify must be held in storage for 30 days after the last treatment.

1 cwt. = 1.67 bu. = 2.5 cubic ft and 1 bu. = 60 lb. = 1.5 cubic ft

Use Amplify alone only if some sprouting is acceptable. Amplify, when used alone, will suppress sprouting short term. Apply prior to end of the natural dormancy period of the potato and before sprouting occurs. Amplify must only be used after bruises and cuts have healed (normally a minimum of two weeks).

Apply a single application of 16.6 ppm or 1.0 lb. active ingredient (ai) per 600 cwt. of potatoes.

STORAGE AND DISPOSAL

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

PESTICIDE STORAGE: Keep container closed. This product may inhibit germination of seed potatoes.

PESTICIDE DISPOSAL: Pesticide wastes are toxic. Improper disposal of excess product, spray mixture, or rinsate is a violation of Federal law. If these wastes cannot be disposed of by use according to label instructions, contact your State Pesticide or Environmental Control Agency, or the Hazardous Waste representative at the nearest EPA Regional Office for guidance.

CONTAINER DISPOSAL: Do not reuse as a container. Triple rinse (or equivalent). Then offer for recycling or reconditioning, or puncture and dispose of in a sanitary landfill, or procedures allowed by state and local authorities.

WARRANTY DISCLAIMER AND NOTICE

THE DIRECTIONS FOR USE OF THIS PRODUCT ARE BELIEVED TO BE ADEQUATE AND SHOULD BE FOLLOWED CAREFULLY. IT IS IMPOSSIBLE TO ELIMINATE ALL RISKS INHERENTLY ASSOCIATED WITH THE USE OF THIS PRODUCT. CROP INJURY, INEFFECTIVENESS, OR OTHER UNINTENDED CONSEQUENCES MAY RESULT DUE TO SUCH FACTORS AS WEATHER CONDITIONS, PRESENCE OR ABSENCE OF OTHER MATERIALS, OR THE MANNER OF USE OR APPLICATION, ALL OF WHICH ARE BEYOND THE CONTROL OF LOVELAND PRODUCTS, INC., THE MANUFACTURER OR SELLER.

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FORMULATED FOR



P.O. BOX 1286, GREELEY, COLORADO 80632-1286

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| | | |
|--------------------|----------------|--------------|
| <i>Performance</i> | <i>Quality</i> | <i>Value</i> |
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June 29, 2005

Document Processing Desk (**NOTIFICATION**)
U.S. Environmental Protection Agency
1801 Bell St.
Arlington, VA 22202

Subject: Amplify (34704-843)
Notification changing "squirrel cage fans" to "fans"

Dear Sir or Madam:

Loveland Products Inc. is submitting an application for notification changing "squirrel cage fans" to "fans". This notification is allowed per PR- Notice 98-10. Enclosed please find my application containing the notification statement and one (1) copy labeling.

Should you need anything else for your review or have any questions, please contact me at 712-548-5213 or email me at glenda.haage@uap.com.

Sincerely,

A handwritten signature in cursive script that reads "Glenda Haage".

Glenda Haage
Registration Manager