



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

OFFICE OF
PREVENTION, PESTICIDES AND
TOXIC SUBSTANCES

Quest Chemical Corporation.
12255 FM 529
Northwoods Industrial Park West
Houston, Texas 77041

Attention: Mitch Whitney
Regulatory Manager

Subject: Staf Hospital Spray Disinfectant, EPA Reg. No. 44446-20
Application to Amend Registration - Notification

This will acknowledge receipt of your notification for the aforementioned product label, submitted under the provisions of FIFRA Section 3(c) (9). Based on a review of the submitted material, the following apply:

- To add the wording "This product has been formulated to quickly and effectively remove foul musty odors from automobile air conditioning systems. It will freshen foul-smelling systems by killing odor producing organisms" to the subject product label.

The Notification is in compliance with PR Notice 98-10 and is acceptable. This information has been made a part of your file.

If you have any questions concerning this letter, please contact Demson Fuller at (703) 308-8062.

Sincerely,

A handwritten signature in cursive script that reads "M Swindell".

Marshall Swindell
Product Manager (33)
Regulatory Management Branch 1
Antimicrobials Division (7510C)

2 7 8



August 10, 2006

Mr. Marshall Swindell, PM 33
Regulatory Management Branch
Antimicrobials Division
Document Processing Desk (7504P)
U.S. Environmental Protection Agency
One Potomac Yard, Room S-4900
2777 S. Crystal Drive
Arlington, VA 22202

FED EX: 8568 1532 0742

RE: Staf Hospital Spray Disinfectant, EPA Reg. No. 44446-20
Application to Amend Registration - Notification

Dear Mr. Swindell:

Enclosed you will find an application to amend the above noted registration. This is a notification amendment and is for the purpose of adding some alternate marketing language. The necessary copy of the proposed label with the alternate language is enclosed. The alternate language is set inside brackets, [], and also highlighted for your convenience.

The notification form has the required certification statement.

If you should have any questions, please don't hesitate to contact me at extension 123 or via e-mail to mitchw@questchemicalcorp.com

Sincerely,

QUEST CHEMICAL CORPORATION

Mitch Whitney

MW/mac
Enclosures

378



Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060

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

1. Company/Product Number 44446-20	2. EPA Product Manager Marshall Swindell	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Staf Hospital Spray Disinfectant	PM# 33	
5. Name and Address of Applicant (Include ZIP Code) Quest Chemical Corporation 12255 FM 529 Houston, TX 77041 <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.)

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40CFR152.46, 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. Section 1001 to wilfully 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 40CFR152.46, this product may be in violation of FIFRA and I may be subject of enforcement action and penalties under sections 12 and 14 of FIFRA. The notification is to add alternated marketing language to the label. This alternate language is highlighted on the attached labeling.

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 checked="" type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
* Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt No. per container

3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container 20 oz aerosol can	5. Location of Label Directions <input checked="" type="checkbox"/> _____
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Other Silkscreen <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 Mitch Whitney	Title Vice-President	Telephone No. (Include Area Code) 713-896-8188
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<p style="text-align: center;">Certification</p> <p>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.</p>	6. Date Application Received (Stamp)
2. Signature 	3. Title Vice-President
4. Typed Name Mitch Whitney	5. Date August 10, 2006

STAF
Hospital Spray
Disinfectant

Bactericidal – Staphylocidal
Pseudomonocidal
Eliminates Odors – Fungicidal
Virucidal Against HIV-1 (AIDS Virus)*
Air Sanitizer

ACTIVE INGREDIENTS:

n-Alkyl (60% C14, 30% C16, 5% C12, 5% C18)	
dimethyl benzyl ammonium chloride.....	0.10%
n-Alkyl (68% C12, 32% C14) dimethyl ethylbenzyl	
ammonium chloride	0.10%
Isopropanol.....	40.00%
Triethylene glycol.....	6.00%
OTHER INGREDIENTS.....	<u>53.80%</u>
TOTAL.....	100.00%

EPA Reg. No. 44446-20
EPA Est. No. 44446-TX-1

KEEP OUT OF REACH OF CHILDREN

CAUTION:

See Additional Precautionary Statements on Back Panel

NET WT. 16.5 OZ. (468 g)

DIRECTIONS FOR USE

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

This product is not to be used as a terminal sterilant / high level disinfectant on any surface or instrument that (1) is introduced directly into the human body, either into or in contact with the bloodstream or normally sterile areas of the body, or (2) contacts intact mucous membranes but which does not ordinarily penetrate the blood barrier or otherwise enter the normally sterile areas of the body. This product may be used to preclean or decontaminate critical or semi-critical medical devices prior to sterilization or high level disinfection.

SURFACE DISINFECTION & DEODORIZATION: (1) First remove soil deposits from surface to be treated. (2) Hold can six inches from surface & spray until completely wet, allow the surface to remain wet for 10 minutes.

AIR DEODORIZER, AIR FRESHENER & AIR SANITIZER: Shake well before each use. To reduce airborne odor-causing bacteria and eliminate odors, close all doors, windows, and air vents. Hold can upright, press button and spray towards the center of an average size room (12'x12'x9') for 10 seconds. For maximum effectiveness, relative humidity should be between 45% and 70%. Resume normal room ventilation after spray has settled. Repeat as necessary.

AUTOMATIC DISPENSER: Remove protective cap from top of can and insert can into dispenser in accordance with instructions on machine. **IMPORTANT:** When used with the dispenser, one unit should be installed for each 6,000 cubic foot area to be treated. It is usually advisable to mount the dispenser 7-8 feet from the floor and at a point where wind flow will carry the particles throughout the room. The dispenser automatically actuates the special metered valve every 15 minutes, treating the air against odors. One unit lasts approximately 30 days.

MILDEWSTAT: To control mold and mildew on hard non-porous surfaces (such as floors, walls, table tops) spray the surface to be treated, making sure to wet completely. Let air dry. Repeat application at weekly intervals or when mildew growth reappears.

For use in automobile air conditioning systems, with engine running and air conditioner on maximum speed and cooling, spray the product into the air intake vent. Hold can eight to twelve inches above the vent while spraying four to six seconds. Make sure the spray tip is pointed directly at the intake vent before spraying. The recirculating system will pick up the product and the entire system will be deodorized in seconds. Shut off engine and air conditioner after applying the product.

SPECIAL INSTRUCTIONS FOR CLEANING AND DECONTAMINATION AGAINST HIV-1 (AIDS VIRUS) OF SURFACES/ OBJECTS SOILED WITH BLOOD/BODY FLUIDS.

Personal Protection: Disposable latex or vinyl gloves, gowns, face masks, or eye coverings as appropriate, must be worn during all cleaning of body fluids, blood and decontamination procedures.

Cleaning procedures: Blood and body fluids must be thoroughly cleaned from surfaces and objects before application of disinfectant.

Contact Time: Effective against HIV-1 (AIDS virus) on hard non-porous surfaces in the presence of a moderate amount of organic soil (5% blood serum) providing 1800 ppm of active quaternary water for a contact time of 10 minutes at room

temperature (20-25°C). Use a ten (10) minute contact time for disinfection against all other bacteria and fungi claimed (listed on labeling).

Disposal of Infectious Materials: blood and other body fluids should be autoclaved and disposed of according to federal, state, and local regulations for infectious waste disposal.

STORAGE AND DISPOSAL

Do not Puncture or Incinerate! If empty: Place in trash or offer for recycling if available. If partially full: Call your local solid waste agency or 1-800-CLEANUP for disposal instructions.

GENERAL INFORMATION

This product has been designed specifically for Homes, Hospitals, Nursing Homes, Institutions, Offices, Schools, Motels & Hotels as a disinfectant deodorant & air refresher. It is recommended for disinfection of telephones, bed springs, door knobs, linen carts, hampers, wheelchairs, light switches, garbage pails & other clean hard non-porous inanimate surfaces. It will also remove foul musty odors from automobile air conditioning systems caused by mildew and other odor producing organisms. [This product has been formulated to quickly and effectively remove foul musty odors from automobile air conditioning systems]. [It will freshen foul-smelling systems by killing odor-producing organisms.] Powerful deodorizers keep the automobile interiors smelling fresh and clean. In addition, this product deodorizes those areas which generally are hard to keep fresh smelling (such as garbage storage areas, empty garbage bins & cans, restrooms, shower stalls & other areas which are prone to odors caused by micro-organisms). This product may also be applied directly to ash trays, food spills, etc., in automobiles to eliminate odors from these sources. When used as directed, this product demonstrates effective disinfection against Staphylococcus aureus, Salmonella choleraesuis, Pseudomonas aeruginosa & Trichophyton mentagrophytes. This product is fungicidal against Pathogenic fungi (Athletes Foot Fungus), when used as directed on hard surfaces found in the bathroom, shower stalls & locker rooms or other clean hard non-porous surfaces commonly contacted by the bare feet.

10/10
(omphs)

***Kills HIV-1 (AIDS virus)** on precleaned environmental surfaces/objects previously soiled with blood/body fluids in healthcare settings or other settings in which there is an expected likelihood of soiling of inanimate surfaces/objects with blood or body fluids, and in which the surfaces/objects likely to be soiled with blood or body fluids can be associated with the potential for transmission of human immunodeficiency virus Type 1 (HIV-1) (associated with AIDS).

MOLD & MILDEWSTAT: This product controls mold, mildew & the odors they cause on hard non-porous inanimate surfaces when used as directed.

PRECAUTIONARY STATEMENTS
HAZARDS TO HUMANS & DOMESTIC ANIMALS

CAUTION: Keep out of reach of children. Causes moderate eye irritation. Avoid contact with eyes or clothing. Wash hands before eating, drinking, chewing gum, using tobacco, or using the toilet. Harmful if swallowed. Flammable! Contents under pressure. Do not use near fire, sparks or flame. Do not puncture or incinerate container. Exposure to temperatures above 130°F may cause bursting.

FIRST AID

If Inhaled:

- 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.

If on skin or clothing:

- 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 in eyes:

- 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 swallowed:

- Call poison control center or doctor immediately for treatment advice.
- Have 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.

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

NOTE TO PHYSICIAN: Probable mucosal damage may contraindicate the use of gastric lavage. Measures against circulatory shock, respiratory depression and convulsion may be needed.

INGREDIENTS: Isopropyl Alcohol (CAS# 67-63-0), Propane-Isobutane (CAS# 68476-85-7), Water (CAS# 7732-18-5), Triethylene Glycol (CAS# 112-27-6), Quaternary Compound (CAS# N/A)

HMIS RATING: HEALTH-1, FLAMMABILITY-2, REACTIVITY-1, PERSONAL-A.

Alternate label text is located within brackets: []

ITEM 329