

46043-2

04/30/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460



United States
Environmental Protection
Agency

Office of Pesticide Programs

APR 30 2009

FILE COPY

Kathy Kollen
EPA Coordinator
Suncoast Chemicals Company
14480 62nd Street North
Clearwater, Florida 33760

Subject: Suncoast 1" Small Stabilized Chlorinating Tablets
EPA Registration No. 46043-2
Application Date: April 2, 2009
Receipt Date: April 9, 2009

Dear Ms. Kollen:

This acknowledges receipt of your notification, submitted under the provision of PR Notice 98-10, FIFRA section 3(c)9.

Proposed Notification:

- Revision to Storage and Disposal Statement per PR Notice 2007-4

General Comments:

Based on a review of the material submitted, the following comment applies:

The notification is acceptable and a copy has been inserted in your file for future reference.

Should you have any questions or comments concerning this letter, please contact me at (703) 308-6345.

Sincerely,

Wanda Y. Henson
Product Reviewer (32)
Regulatory Management Branch II
Antimicrobials Division (7510P)



United States
Environmental Protection Agency
 Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

| | | | | | |
|---|--|--|--|---|--|
| 1. Company/Product Number Suncoast Chemicals Company/46043-2 | | 2. EPA Product Manager Emily Mitchell | | 3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted | |
| 4. Company/Product (Name) Suncoast 1" Small Stabilized Chlorinating Tablets | | PM# 32 | | | |
| 5. Name and Address of Applicant (Include ZIP Code) Suncoast Chemicals Company 14480 62nd Street North Clearwater, FL 33760 <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 2007-4.

Section - III

| | | | | | |
|--|---|---|-------------------|---|----------------------------------|
| 1. Material This Product Will Be Packaged In: | | | | 2. Type of Container | |
| Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No | Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No | Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> Metal | <input type="checkbox"/> Plastic |
| * Certification must be submitted | | If "Yes" Unit Packaging wgt. | No. per container | If "Yes" Package wgt. | No. per container |
| | | | | <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) 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"/> 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 Kathy Kollen | | Title EPA Coordinator | | Telephone No. (Include Area Code) | |
| <p 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 (Stamped) |
| 2. Signature | | 3. Title EPA Coordinator | | | |
| 4. Typed Name Kathy Kollen | | 5. Date 4/2/09 | | | |

April 2, 2009

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504P)
USEPA
1200 Pennsylvania Avenue NW
Washington, DC 20460

RE: Notifications in Response to PR Notice 2007-4

Dear Sir or Madam:

Enclosed are Notification forms, certification statements and master labels to revise the Storage and Disposal section of the label as per PR Notice 2007-4 for the following products:

- | | |
|--|----------|
| Suncoast 1" Small Stabilized Chlorinating Tablets | 46043-2 |
| Suncoast 3" Large Stabilized Chlorinating Tablets | 46043-3 |
| All In One Algaecide | 46043-4 |
| Spot Out | 46043-7 |
| Suncoast Stabilized Chlorinating Pool Sticks | 46043-8 |
| T.I.C.A. 1" Tablets (split label for floating cartridge) | 46043-20 |

All labels have been formatted into master labels: *No changes have been made* other than the addition of the new Storage and Disposal statements. I have highlighted the revisions on the Master Labels for your convenience.

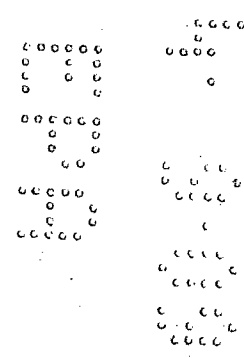
Thank you for your assistance.

Sincerely,



Kathy Kollen
EPA Coordinator

Enclosures



SUNCOAST® CHEMICALS CO.

1" Small Stabilized Chlorinating Tablets

Active Ingredient:

Trichloro-s-Triazinetrione*.....99%

Other Ingredients:.....1%

Available Chlorine.....90%

*Trichloroisocyanuric Acid Dry

NOTIFICATION
Date Reviewed: 4/30/09
Reviewed By: [Signature]

KEEP OUT OF REACH OF CHILDREN
DANGER

See First Aid and Additional Precautions on back panel.

Net Wt. {amount} Lbs.

{Back Panel}

| FIRST AID | |
|--|---|
| 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 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. |
| 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. Call a poison control center or doctor for further 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. |
| HOTLINE NUMBER | |
| Have the product container or label with you when calling a poison control center or doctor, or going for treatment. You may also contact 1-800-255-3924 for emergency treatment information. | |
| NOTE TO PHYSICIAN: | |
| Probable mucosal damage may contraindicate the use of gastric lavage. | |

DIRECTIONS FOR USE

It is a violation of federal law to use this product in a manner inconsistent with its labeling. **DO NOT HANDLE THIS PRODUCT WITH BARE HANDS. USE GLOVES OR THOROUGHLY CLEAN, DRY UTENSILS.**

DAILY

Adjust the chlorine dispensing rate of the floater or in-line feeder to provide 2.0-4.0 ppm of free chlorine residual as determined by a reliable test kit. This dosage may vary due to unusual conditions such as heavy bather loads, wind, heavy rains, and high temperatures; therefore, frequent use of a reliable test kit is recommended. Use the test kit as a guide to maintain the pH at 7.4-7.6 and total alkalinity at 80-130 ppm. Pool chlorinating tablets are intended for use in a floater or in-line feeder only. Do not add these tablets directly to the pool or mix with any other chemicals.

5/5

Reentry into treated swimming pools is prohibited above levels of 3 ppm of chlorine.

PRECAUTIONARY STATEMENTS
HAZARDS TO HUMANS AND DOMESTIC ANIMALS
DANGER

CORROSIVE: Causes irreversible eye damage and skin burns. May be fatal if absorbed through skin. May be fatal if inhaled. Do not breathe dust or spray mists. Irritating to nose and throat. Harmful if swallowed. Do not get in eyes, on skin, or on clothing. Wear goggles or face shield, protective clothing and rubber gloves when handling this product. Wash thoroughly with soap and water after handling and before eating, drinking or using tobacco. Remove contaminated clothing and wash before reuse.

ENVIRONMENTAL HAZARD

{For 50 pounds and less;} [This pesticide is toxic to fish and aquatic organisms.]

{For larger than 50 pounds;} [This pesticide is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans or public waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) permit and the permitting authority has been notified in writing prior to discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the sewage treatment plant authority. For guidance, contact your State Water Board or Regional Office of EPA.]

CHEMICAL HAZARDS:

DANGER: STRONG OXIDIZING AGENT. Use only clean, dry utensils. Mix only with water. Contamination with moisture, dirt, organic matter, or other chemicals (including other pool chemicals), or any other foreign matter may start a chemical reaction with generation of heat, liberation of hazardous gases, and possible generation of fire and explosion. Avoid any contact with flaming or burning material, such as a lighted cigarette. Do not use this product with any other product or chemical, such as calcium hypochlorite. Such use may cause fire or explosion.

STORAGE AND DISPOSAL

STORAGE: Keep product dry in a tightly closed container when not in use. Store in a cool, dry, well-ventilated area away from heat or open flames. Do not reuse or refill empty container.

DISPOSAL:

If empty: Nonrefillable container. Do not reuse or refill this container. Place in trash or offer for recycling, if available.

If partly filled: Call your solid waste agency or 1-800-CLEANUP (800-253-2687) for disposal instructions. Never place unused product down any indoor or outdoor drain.

EPA REG. 46043-2
EPA Est. No. 46043-FL-1

IN CASE OF EMERGENCY CALL 1-800-255-3924

Manufactured By:
SUNCOAST CHEMICALS COMPANY
14480 62nd Street N.
Clearwater, FL 33760

