

OCT - 9 1997

Karen S. McLead
Suncoast Chemicals Company
14480 62nd Street N.
Clearwater, FL 34618

Subject: Tri-Chlor 3" Large Tablets
EPA Registration No. 46043-3
Notification Per PR-Notice 95-2

Dear Ms. McLead:

This will acknowledge receipt of your notification, for an alternate brand name (Tornado Tab), submitted under the provisions of FIFRA section 3 (c) 9. Based on a review of the submitted material, the following comments apply.

This notification is acceptable and has been made a part of this file.

Sincerely,

Wanda Y. Mitchell
Notification Coordinator
Regulatory Management Branch II
Antimicrobials Division (7510W)

CONCURRENCES							
SYMBOL	7510W						
SURNAME	Mitchell						
DATE	10-9-97						

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 05-31-98



United States
Environmental Protection Agency
Washington, DC 20460

<input type="checkbox"/>	Registration
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Other

OPP Identifier Number
247427

Application for Pesticide - Section I

1. Company/Product Number Cuncoast Chemicals Company / 46043-3	2. EPA Product Manager Robert Brennis	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Suncoast Tri Chlor 3"Large Tablet	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.)

Per PR Notice 95-2 we are advising of an alternate brand name:
Suncoasttm Value Chlortm
Alternate Brand Name: "Tornado Tab". Large stabilized Chlorinating Tablets

Section - III

1. Material This Product Will Be Packaged In:				2. Type of Container	
Child-Resistant Packaging <input checked="" type="checkbox"/> Yes* <input 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		<input type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
				<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
* Certification must be submitted		if "Yes" Unit Packaging wgt.	No. per container	Other (Specify) _____	
		if "Yes" Package wgt	No. per container		
3. Location of Net Contents Information <input type="checkbox"/> Label <input checked="" type="checkbox"/> Container		4. Size(s) Retail Container 3.5 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 Printed on Container		<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 Karen S. McLead	Title Director of Legal Affairs	Telephone No. (Include Area Code) (813) 531-8913
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 <i>Karen S. McLead</i>	3. Title Director of Legal & Administrative Affairs	
4. Typed Name Karen S. McLead, CLA	5. Date 9/22/97	

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4 lb. VC Giant tab 10/8/97 11:29 AM Page 1

SuncastTM
Value
ChlorTM
Giant Tab



4 Lbs.

**1 Lb. Large Stabilized
Chlorinating Tablets**

Active Ingredients
 TRICHLORO-S-TRIAZINETRIONE* 99%
 INERT INGREDIENTS 1%
 AVAILABLE CHLORINE 90%

*Trichloroisocyanuric Acid, Dry

KEEP OUT OF REACH OF CHILDREN
DANGER

SEE ADDITIONAL PRECAUTIONS ON BACK PANEL
EPA REG. 46043-3
EPA Est. No. 46043-FL-1

**DOUBLE
THICK**



Composite

485



suncastTM

Value ChlorTM



Active Ingredients
 TRICHLORO-S-TRIAZINETRIONE*.....99%
 INERT INGREDIENTS.....1%
 AVAILABLE CHLORINE.....90%
 *Trichloroisocyanuric Acid, Dry

**KEEP OUT OF REACH OF CHILDREN
DANGER**

STATEMENT OF PRACTICAL TREATMENT
IF SWALLOWED: Drink promptly large quantities of water. Do not induce vomiting. Avoid alcohol. Never give anything by mouth to an unconscious person. Call a physician or poison control center immediately.
IF IN EYES: Hold eyelids open and flush with a steady, gentle stream of water for 15 minutes. Get medical attention.
IF ON SKIN: Wash with plenty of soap and water. Get medical attention.
IF INHALED: Remove victim to fresh air. If not breathing, give artificial respiration, preferably, mouth-to-mouth. Get medical attention.
NOTE TO PHYSICIAN: Probable mucosal damage may contraindicate the use of gastric lavage.

SUNCOAST CHEMICAL COMPANY
 14460 62nd St. N., Clearwater, FL 33760
 (813) 531-8913
 IN CASE OF EMERGENCY 1-800-255-3924



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FEATURES

A SOLID GERMICIDE AND ALGAECIDE THAT DISSOLVES SLOWLY PROVIDING EFFECTIVE LONG LASTING TREATMENT

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 1.0-3.0 ppm of free chlorine residual as determined by a reliable test kit. The 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. Using 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. One tablet weighs approximately 8 oz. (227 grams).

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.

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 the EPA.

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

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 flammable or burning material, such as a lit cigarette. Do not use or mix this product with any other product or chemical, such as calcium hypochlorite. Such use may cause fire or explosion.

STORAGE AND DISPOSAL

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 empty container. Rinse empty container thoroughly with water to dissolve all material before discarding. Securely wrap container in several layers of newspaper and discard in trash.

NOTICE

In the event you do not use the entire contents of this package, the remainder must be stored in a childproof container as required by U.S. Federal Government.