

46043-3

09-30-2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460

SEP 30 2009

OFFICE OF  
PREVENTION, PESTICIDES  
AND TOXIC SUBSTANCES

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

**FILE COPY**

Subject: Suncoast 3" Large Stabilized Chlorinating Tablets  
EPA Registration No. 46043-3  
Application Date: September 3, 2009  
Receipt Date: September 8, 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:**

- Addition of marketing claims

**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,

A handwritten signature in black ink that reads "Wanda Y. Henson".

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



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 Suncoast Chemicals Company/46043-3		2. EPA Product Manager Emily Mitchell	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Suncoast Chemicals Co/3" Large Stabilized Chlorinating Tablets		PM#	
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 additional marketing claims.

**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 <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 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)	
<b>Certification</b> 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		3. Title EPA Coordinator			
4. Typed Name Kathy Kollen		5. Date 9/3/09			

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September 3, 2009

Ms. Emily Mitchell  
 Document Processing Desk (NOTIF)  
 Office of Pesticide Programs (7504P)  
 USEPA  
 Ariel Rios Building  
 1200 Pennsylvania Avenue NW  
 Washington, DC 20460

**RE: Notification of Additional Marketing Claims**  
**Suncoast 3" Large Stabilized Chlorinating Tablets**  
**EPA Reg. No. 46043-3**

Dear Ms. Mitchell:

Please accept this Notification to add optional marketing claims to the label for EPA Registration No. 46043-3.

Enclosed are the following documents:

1. The EPA Application marked "Notification";
2. A Certified Statement;
3. 2 copies of the master label with the additional marketing claims highlighted on the first copy.

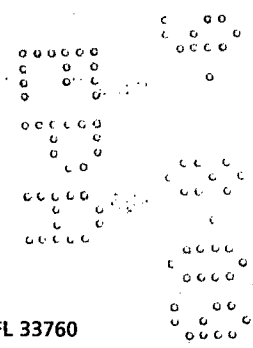
Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script that reads "Kathy Kollen".

Kathy Kollen  
 EPA Coordinator

/Enclosures





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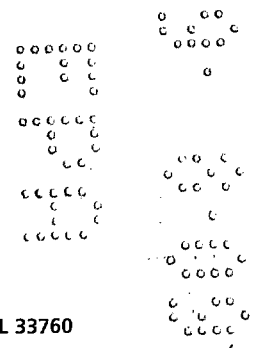
**CERTIFICATION**  
**For Suncoast 3" Large Stabilized Chlorinating Tablets**  
**46043-3**

This notification is consistent with the requirements of EPA's regulations at 40 CFR 156.10, 156.140, 156.144, 156.46 and 156.156. No other changes have been made to the labeling or the Confidential Statement of Formula for this product. I understand that it's a violation of 18 U.S.C. Section 1001 to willfully make any false statement to the EPA. I further understand that if the amended label is not consistent with the requirements of 40 CFR 156.10, 156.140, 156.144, 156.46 and 156.156, 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.

**Suncoast Chemicals Company**

  
\_\_\_\_\_  
Kathy Kollen

Dated September 3, 2009



# SUNCOAST® CHEMICALS CO.

## 3" Large Stabilized Chlorinating Tablets

**Active Ingredient:**  
Trichloro-s-Triazinetrione..... 99%  
**Other Ingredients:**..... 1%  
Available Chlorine..... 90%  
\*Trichloroisocyanuric Acid Dry

**NOTIFICATION**  
Date Reviewed: 9/30/09  
Reviewed By: *[Signature]*

**KEEP OUT OF REACH OF CHILDREN**  
**DANGER**

See First Aid and Additional Precautions on back panel.

Net Wt. \_\_\_\_\_

{Back Panel}

FIRST AID	
<b>IF SWALLOWED:</b>	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.
<b>IF ON SKIN:</b>	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.
<b>IF INHALED:</b>	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.
<b>IF IN EYES:</b>	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.
<b>HOTLINE NUMBER</b> 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.	
<b>NOTE TO PHYSICIAN:</b> 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. The initial startup and weekly maintenance dosage is 1 to 3 tablets per 10,000 gallons although 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.

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. 46043-3**

**EPA Est. No. 46043-FL-1**

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

Manufactured By:

**SUNCOAST CHEMICALS COMPANY**

14480 62<sup>nd</sup> Street N.

Clearwater, FL 33760

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{Marketing Claims}

- [For use in a floater or in-line feeder]
- [For use in a floater or automatic feeder]
- [Slow Dissolving]
- [UV protected against the sun's rays]
- [UV-protected for extended chlorine life]
- [Controls bacteria and algae]
- [Kills bacteria]
- [Good for all pool types]
- [Keeps pool water sparkling clean]
- [Destroys organic contaminants]
- [Long-lasting tablets]
- [Swimming Pool Sanitizer]
- [Leaves no residue]
- [Concentrated]
- [Stabilized Chlorinator]
- [Swimming Pool Sanitizer]
- [Stabilized Slow-Dissolving Chlorinating 7-day Tablets]
- [Stabilized Slow-Dissolving Chlorinating Tablets]
- [Concentrated Swimming Pool Chlorinating Tabs]