

50510-1

04/03/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460



United States
Environmental Protection
Agency

Office of Pesticide Programs

APR 3 2009

FILE COPY

Robert C. DeBonis
Pentair Residential Filtration L.L.C.
5730 North Clen Park Road
Milwaukee, WI 53209-4454

Subject: **Chlorinating Tablets**
EPA Registration Number: 50510-1
Application Dated: February 25, 2009
Receipt Dated: March 9, 2009

Dear Mr. DeBonis:

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

Proposed Notification:

- Name Change from "GE Osmonics" to "Pentair Residential Filtration L.L.C"

General Comment:

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

This notification is accepted and a copy has been inserted in your file for future reference.

You must update you Container and Disposal Statement per PR Notice 2007-4.

Should you have any questions concerning this letter, please contact Wanda Henson at (703) 308-6345.

Sincerely,

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

<p style="text-align: center;">United States Environmental Protection Agency Washington, DC 20460</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input type="checkbox"/> Registration</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> Amendment</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> Other</td> </tr> </table>	<input type="checkbox"/> Registration	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Other	OPP Identifier Number
<input type="checkbox"/> Registration					
<input checked="" type="checkbox"/> Amendment					
<input type="checkbox"/> Other					

Application for Pesticide - Section I

1. Company/Product Number 50510-1	2. EPA Product Manager 32	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Chlorinating Tablets	PM# _____	
5. Name and Address of Applicant (Include ZIP Code) Pentair Residential Filtration L.L.C. 5730 North Glen Park Road Milwaukee, WI 53209-4454 <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: <input checked="" type="checkbox"/> EPA Reg. No. _____ Product Name _____	

Section - II

<input type="checkbox"/> Amendment - Explain below. <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. <input checked="" type="checkbox"/> Other - Explain below.
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Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Name change from "GE Osmonics" to "Pentair Residential Filtration L.L.C."

Section - III

1. Material This Product Will Be Packaged In:

Child-Resistant Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Unit Packaging wgt. No. per container	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Package wgt 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) _____
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* Certification must be submitted

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 Robert C. DeBonis	Title Facility Manager	Telephone No. (Include Area Code) 262-518-4219
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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.		8. Date Application Received (Stamped) _____ _____ _____ _____ _____
2. Signature 	3. Title Facility Manager	
4. Typed Name Robert C. DeBonis	5. Date February 25, 2009	

PRELIMINARY DRAFT

PRECAUTIONARY STATEMENT: HAZARDS TO HUMANS AND DOMESTIC ANIMALS

DANGER:

Highly corrosive. Causes skin and eye damage. May be fatal if swallowed. Do not get in eyes, on skin or on clothing. Wear goggles or face shield and rubber gloves when handling. Irritating to nose and throat. Avoid breathing dust. Remove and wash all contaminated clothing 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 other 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 local sewage treatment plant authority. For guidance contact your State Water Board or Regional Office of the EPA.

PHYSICAL AND CHEMICAL HAZARDS: STRONG OXIDIZING AGENT:

Mix only with water. Use clean, dry utensils. Do not add this product to any dispensing device containing remnants of any product. Such use may cause a violent reaction leading to fire or explosion. Contamination with moisture, organic matter, or other chemicals may start a chemical reaction, with generation of heat, liberation of hazardous gases, and possible generation of fire or explosion. In case of contamination and/or decomposition, do not reseal the container. If possible, isolate this container in open air or well-ventilated area. Flood with large volumes of water, if necessary.

KEEP OUT OF REACH OF CHILDREN

DANGER

FIRST AID - Oxidizer 5.1	
If Swallowed	<ul style="list-style-type: none"> ■ Call poison control center or doctor immediately for treatment advice. ■ Drink large amounts of water. ■ Do not induce vomiting unless told to so by the poison control center or doctor. ■ Do not give anything by mouth to an unconscious person.
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 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 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.
<p>Have the product container or label with you when calling a poison control center or doctor, or going for treatment. You may also contact 1-800-222-1222 for emergency medical treatment information.</p>	

NOTE TO PHYSICIAN: Probable mucosal damage may contraindicate the use of gastric lavage.

CHLORINATING TABLETS

These tablets can be added directly or by automatic dispensers for the sanitization or shock chlorination of water in wells, storage tanks or cisterns in those areas where treated water supplies are not available.

ACTIVE INGREDIENT:

Calcium Hypochlorite.....72%
OTHER INGREDIENTS.....28%
TOTAL.....100%
(AVL Chlorine 72%)
Pellet Weight: 1 Gram

DIRECTIONS FOR USE

IT IS A VIOLATION OF FEDERAL LAW TO USE THIS PRODUCT IN A MANNER INCONSISTENT WITH ITS LABELING.

This product is intended to be used for treating water in wells, storage tanks or cisterns to sanitize until water is consumed. It is not intended to replace safe, properly constructed wells.

EPA recommends for human consumption: 0.2 to 0.6 ppm to be determined by using a test kit provided by your chlorination dealer. One pellet normally treats 20 gallons of average well water. These pellets are designed to dissolve in less than 1 hour. Consult the manufacturers installation book for the proper dispensing, installation and adjustment so that the required chlorine residual can be maintained at all times. For shock chlorination of water supplies, use three quarters (3/4) pound chlorinating tablets (approximately 340 tablets) for each 100 gallons of water in the system to produce 500 ppm chlorine concentration. Allow the chlorinated water to stand in the system for 8-24 hours. After this, open an outside faucet and flush system until water returns to 0.2 to 0.6 ppm chlorine concentration using a chlorine test kit. Repeat as necessary the flush operation on each faucet in the system.

Always follow the sanitizing procedure required by applicable state or local laws. Shock chlorination does not permanently disinfect a water supply that has an on going contamination problem.

STORAGE AND DISPOSAL

Keep this product DRY in a tightly closed container when not in use. Store in a cool, dry, well-ventilated area, away from heat or open flame. In case of decomposition, isolate the container if possible, and flood the area with large amounts of water to dissolve all material before discarding container. **DO NOT REUSE THE EMPTY CONTAINER**, but place in trash collection. Do not contaminate food or feed by storage or disposal, or cleaning of the equipment. Triple Rinse (or equivalent). Then offer for recycling or reconditioning, OR puncture and dispose of in a sanitary landfill, OR incineration, OR if allowed by state and local authorities, by burning. If this container is burned, stay away from the smoke. Pesticide wastes are acutely hazardous. Improper disposal of excess pesticides, 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 Hazardous Waste representative at the nearest EPA Regional office for your information and guidance.

Pentair Residential Filtration L.L.C.

5730 North Glen Park Road
Milwaukee, WI 53209-4454 USA

QUESTIONS? 1-888-307-6114

E.P.A. Reg. No. 50510-1
E.P.A. Est. 50510-IA-1

NET WEIGHT: --- Lbs.

NOTIFICATION
Date Reviewed: 4/13/09
Reviewed By: Thompson

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