

52374-10

5/19/2009

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460



United States
Environmental Protection
Agency

Office of Pesticide Programs

MAY 19 2009

FILE COPY

Greg Cunningham
Regulatory Compliance Coordinator
Brenntag Southwest, Inc.
206 East Morrow Road
Sand Springs, OK 74063

Subject: Sodium Hypochlorite 10%
EPA Registration No. 52374-10
Application Date: March 23, 2009
Receipt Date: April 24, 2009

Dear Mr. Cunningham:

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 comments apply:

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 52374 / 52374-10	2. EPA Product Manager Emily Mitchell	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Brenntag Southwest, Inc. / Sodium Hypochlorite 10%	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) Brenntag Southwest, Inc. 206 East Morrow Road Sand Springs, OK 74063 <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. 52374-10 Product Name Sodium Hypochlorite 10%	

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.)

SEE ATTACHED ADDITIONAL PAGE FOR EXPLANATION

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	If "Yes" Unit Packaging wgt. No. per container		<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" 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 Greg Cunningham	Title Reg. Compliance Co.	Telephone No. (Include Area Code) 918-246-4615
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 	3. Title Regulatory Compliance Coordinator	
4. Typed Name Greg Cunningham	5. Date Apr 23, 2009	

April 23, 2009

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504P)
US EPA
Room S-4900, One Potomac Yard
2777 South Crystal Drive
Arlington, VA 22202-4501

Re: Response to PR 2007-4
EPA Company: 52374
EPA Registered Product: 52374-10

Dear Sir or Madam:

The following notification is being sent as response to PR 2007-4:

- a. Application for Registration (EPA Form 8570-1)
- b. One copy of draft labeling for containers larger than 5 gallons
- c. One copy of draft labeling for containers with capacity equal to or less than 5 gallons
- d. The only change to the enclosed draft labels from the EPA accepted label dated October 3, 2003 is the addition of the required container statements taken from PR 2007-4. The additions to the label can be found printed in blue ink at the bottom of column two. (These additions will appear in black ink in the final label.)

I can be reached at 918-246-4615 or e-mail to gcunningham@brenntag.com if you have questions regarding the above.

Yours truly,



Greg Cunningham
Regulatory Compliance Coordinator



SODIUM HYPOCHORITE, 10%

Active Ingredient: Sodium Hypochlorite...	10.00%
Other Ingredients:	90.00%
Total:	100.00%

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

PRECAUTIONARY STATEMENTS:

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

DANGER! CORROSIVE. WILL CAUSE SEVERE SKIN AND EYE IRRITATION AND CHEMICAL BURNS TO BROKEN SKIN. DO NOT GET IN EYES, ON SKIN OR ON CLOTHING. WEAR GOGGLES OR FACE SHIELD AND RUBBER GLOVES WHEN HANDLING. AVOID BREATHING VAPORS. VACATE POORLY VENTILATED AREAS AS SOON AS POSSIBLE. DO NOT RETURN UNTIL ODORS HAVE DISSIPATED.

ENVIRONMENTAL HAZARDS:

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 THE 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 ACCORDING TO THE LABEL DIRECTIONS. MIXING THIS PRODUCT WITH CHEMICALS (E.G. AMMONIA, ACIDS, DETERGENTS, ETC.) OR WITH ORGANIC MATTER (E.G. URINE, FECES, ETC.) WILL RELEASE CHLORINE GAS WHICH IS IRRITATING TO EYES, LUNGS, AND MUCOUS MEMBRANES.

FIRST AID:

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 THE EYE.

IF ON SKIN OR CLOTHING:

TAKE OFF CONTAMINATED CLOTHING. RINSE SKIN IMMEDIATELY WITH PLENTY OF WATER FOR 15-20 MINUTES.

IF SWALLOWED:

CALL A 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. MOVE PERSON TO FRESH AIR. IF PERSON IS NOT BREATHING, CALL 911 OR AN AMBULANCE, THEN GIVE ARTIFICIAL RESPIRATION, PREFERABLY MOUTH-TO-MOUTH, IF POSSIBLE. CALL A POISON CONTROL CENTER FOR TREATMENT ADVICE. HAVE THE PRODUCT CONTAINER OR LABEL WITH YOU WHEN CALLING A POISON CONTROL CENTER OR DOCTOR, OR GOING FOR TREATMENT.

NOTES TO PHYSICIANS:

PROBABLE MUCOSAL DAMAGE MAY CONTRAINDICATE THE USE OF GASTRIC LAVAGE.

FOR USE IN BULK STORAGE SITES

AS A DISENFECTANT OR ALGICIDE IN THE TREATMENT OF MUNICIPAL WATER SUPPLIES, SEWAGE AND WASTE PROCESSING OPERATIONS. IN COMMERCIAL LAUNDRY SANITIZERS, AS A SLICICIDE OR COMMERCIAL PESTICIDE.

DIRECTIONS FOR USE - GENERAL CLASSIFICATION:

IT IS A VIOLATION OF FEDERAL LAW TO USE THIS PRODUCT IN A MANNER INCONSISTENT WITH ITS LABELING. AUTHORIZED BY USDA FOR USE IN FEDERALLY INSPECTED MEAT AND POULTRY PLANTS. NOTE: DEGRADES WITH AGE. USE A TEST KIT AND INCREASE DOSAGE AS NECESSARY TO OBTAIN THE REQUIRED LEVEL OF AVAILABLE CHLORINE. ADDITIONAL DIRECTIONS FOR USE AVAILABLE FROM BRENNTAG SOUTHWEST.

STORAGE AND DISPOSAL:

STORE IN COOL, DRY AREA AWAY FROM DIRECT SUNLIGHT AND HEAT TO AVOID DETERIORATION. IN CASE OF SPILL, FLOOD AREAS WITH LARGE QUANTITIES OF WATER. PRODUCT OR RINSATES THAT CANNOT BE USED SHOULD BE DELUTED WITH WATER BEFORE DISPOSAL IN A SANITARY SEWER. NON REFILLABLE CONTAINER. DO NOT REUSE OR REFILL THIS CONTAINER. DO NOT CONTAMINATE FOOD OR FEED BY STORAGE, DISPOSAL OR CLEANING OF EQUIPMENT. DO NOT DUMP PRODUCT OR CONTAINER. OFFER FOR RECONDITIONING, IF APPROPRIATE.

ATTENTION:

THIS CONTAINER IS HAZARDOUS WHEN EMPTY. EMPTY CONTAINER RETAINS VAPOR AND LIQUID RESIDUES; THEREFORE ALL HAZARDS AND PRECAUTIONS MUST BE OBSERVED. DO NOT WELD, CUT, PUNCTURE OR PRESSURIZE. DO NOT REUSE EMPTY CONTAINER WITHOUT COMMERCIAL CLEANING OR RECONDITIONING. STORE EMPTY CONTAINER AWAY FROM HEAT, SPARK OR FLAME. TRIPLE RINSE CONTAINER (OR EQUIVALENT) PROMPTLY AFTER EMPTYING. TRIPLE RINSE AS FOLLOWS: EMPTY THE REMAINING CONTENTS INTO APPLICATION EQUIPMENT OR A MIX TANK. FILL CONTAINER 1/4 FULL WITH WATER. REPLACE AND TIGHTEN CLOSURES. TIP CONTAINER ON ITS SIDE AND ROLL IT BACK AND FORTH, ENSURING AT LEAST ONE COMPLETE REVOLUTION, FOR 30 SECONDS. STAND THE CONTAINER ON ITS END AND TIP IT BACK AND FORTH SEVERAL TIMES. TURN THE CONTAINER OVER ONTO ITS OTHER END AND TIP IT BACK AND FORTH SEVERAL TIMES. EMPTY THE RINSATE INTO APPLICATION EQUIPMENT OR A MIX TANK OR STORE RINSATE FOR LATER USE OR DISPOSAL. REPEAT THIS PROCEDURE TWO MORE TIMES.

FOR EMERGENCY AID CALL: CHEMTREC 1-800-424-9300

PROPERTY OF BRENNTAG

ANY USE OF THIS CONTAINER FOR ANY PURPOSE OTHER THAN THE STORAGE OF PRODUCTS SOLD BY BRENNTAG IS STRICTLY PROHIBITED.

EPA Est. No.	052374-0K-001
EPA Reg. No.	52374-10

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BRENTAG SOUTHWEST
610 FISHER ROAD
LONGVIEW, TX 75604
(903)759-7151

↑ THIS SIDE UP
MSDS #
472916

55
GAL NET

PRODUCT CODE
329471

LOT# _____

TRACK _____



NOTIFICATION
Date Reviewed: 5/19/09
Reviewed By: *William Swift*

DILUTION TABLE FOR 10% NaOCL BY WEIGHT
OUNCES of 10% NaOCL NEEDED PER GALLONS OF WATER

Use level of Available chlorine	10	50	100	500	1000	2500	5000
50 ppm	0.75	3.75	7.5	37.5	75	187.5	375
100 ppm	1.5	7.5	15	75	150	375	750
200 ppm	3	15	30	150	300	750	1500

DOT: HYPOCHLORITE SOLUTIONS, 8, UN1791, PGII