

53883-287

8/20/2012

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF CHEMICAL SAFETY
AND POLLUTION PREVENTION

AUG 20 2012

Ms. Anne Turnbough, PhD
Control Solution, Inc.
5903 Genoa Red Bluff
Pasadena, Texas 77507-1041

Subject: Label Notification(s) for Pesticide Registration Notice 98-10

Dear Dr. Turnbough:

The Agency is in receipt of your Application(s) for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 dated July 31, 2012 for the following product(s):

**CSI Flea and Tick
Home Spray**

EPA Reg. No. 53883-287

The Registration Division (RD) has conducted a review of this request for applicability under PRN 98-10 and finds that the label change(s) requested falls within the scope of PRN 98-10. The label has been date-stamped "Notification" and will be placed in our records.

If you have any questions, please contact Linda A. DeLuise at 703-305-5428.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard J. Gebken".

Richard J. Gebken
Product Manager
Insecticide Branch
Registration Division (7504P)

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0080



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 53883-287	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) CSI Flea and Tick Home Spray	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Control Solutions Inc. 5903 Genoa Red Bluff Pasadena, TX 77507-1041 <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: NOTIFICATION EPA Reg. No. _____ Product Name AUG 20 2012	

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.)

Add Optional Marketing Claim: [up to 7 months (210 days)]

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 Lisa Adamson	Title Regulatory Specialist	Telephone No. (Include Area Code) 281-892-2522
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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.

2. Signature	3. Title Regulatory Specialist	6. Date Application Received (Stamped)
4. Typed Name Lisa Adamson	5. Date 7-31-2012	

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C O N T R O L
S O L U T I O N S
i n c o r p o r a t e d

July 31, 2012

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504C)
U.S. Environmental Protection Agency
401 M Street S.W.
Washington, D.C. 20460-001

Re: CSI Flea and Tick Home Spray
EPA Reg. No. 53883-287
Subject: Notification to add Optional Marketing Claim
To Whom It May Concern:

Control Solutions Inc. (CSI) is notifying the Agency of its intention to add an Optional Marketing Claim to the above reference product.

We certify the following:

This notification is consistent with the provisions of PR Notices 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, 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.

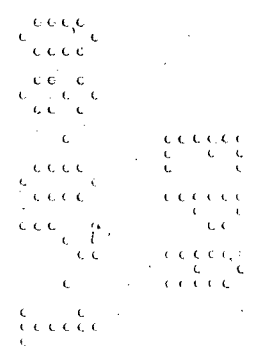
In support of this submission, the following documents are attached:

- Application for Pesticide Registration (EPA Form 8570-1)
- One Copy of annotated labeling highlighting the added text in yellow (page 4 of 4)
- One Copy of the final printed labeling

Should you have any questions about this application, please contact me at 800-242-5562 or email ladamson@controlsolutionsinc.com

Sincerely,

Anne Turnbough Ph.D.
Director, Regulatory Affairs



CSI FLEA AND TICK HOME SPRAY contains pyriproxyfen and permethrin creating a dual action water based product designed to kill pests and eliminate odors in pet bedding, carpets, rugs, upholstered furniture and other areas frequented by pets. CSI FLEA AND TICK HOME SPRAY kills fleas, ticks, flea eggs, and larvae. The insect growth regulator pyriproxyfen in CSI FLEA AND TICK HOME SPRAY will prevent flea eggs from hatching into biting adults for up to 210 days.

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

WARNING: Causes skin irritation and substantial but temporary eye injury. Do not get in eyes, on skin, or on clothing. Wear face shield or goggles. Prolonged or frequently repeated exposure may cause allergic reactions in some individuals. Remove contaminated clothing and wash before reuse. Wash thoroughly with soap and water after handling.

FIRST AID

IF ON SKIN OR CLOTHING: 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: 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 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 the poison control center or doctor. Do not give anything by mouth to an unconscious person.

HOT LINE 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 SafetyCall® International (866) 897-8050 for emergency medical treatment information.

PHYSICAL AND CHEMICAL HAZARDS Do not use this product in or around electrical equipment due to the possibility of shock hazard. Do not allow product to freeze.

DIRECTIONS FOR USE

It is a violation of Federal law to use this product in a manner inconsistent with its labeling. Remove pets, birds and cover fish aquariums before spraying. Do not allow children or pets to contact surface until spray has dried.

HOUSEHOLD TREATMENT: Thoroughly vacuum all carpeting, upholstered furniture, along baseboards, under furniture and in closets. Seal vacuum bag and dispose of in trash outdoors. Mop hard surface floors. Spray all floors and other aforementioned areas thoroughly using a smooth back and forth motion. Provide even treatment but do not soak the areas that you treat. If fleas reappear, repeat treatment or allow the product's residual effect to kill the newly emerged fleas.

KENNELS OR PET SLEEPING QUARTERS: Apply CSI Flea and Tick Home Spray thoroughly to infested areas including pet beds and resting quarters, nearby cracks and crevices, along and behind baseboards, window and door sills, and localized areas of floor and floor covering where fleas, ticks and lice may be present. Old pet bedding should be removed and replaced with fresh bedding after treatment of pet areas. Do not spray surfaces where spotting, staining, or discoloration would be objectionable.

