

3/21/97

PM 23

62719-259

pg 1/3

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

☐ Registration  
☐ Amendment  
☒ Other Notif

OPP Identifier Number  
247760

## Application for Pesticide - Section I

|   |  |  |
|---|--|--|
| 1. Company/Product Number<br>DowElanco/62719-259  | 2. EPA Product Manager<br>J. Miller  | 3. Proposed Classification<br><input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted |
| 4. Company/Product (Name)<br>DowElanco/Transline  | PM#<br>23  |  |
| 5. Name and Address of Applicant (Include ZIP Code)<br>DowElanco<br>9330 Zionsville Road<br>Indianapolis, IN 46268<br><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:<br>EPA Reg. No. _____<br>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

Notification of Advisory Statement per PR Notice 95-2...

MAR 21 1997

## Section - III

|   |   |  |                   |  |                   |
|---|---|--|-------------------|--|-------------------|
| 1. Material This Product Will Be Packaged In:   |   |  |                   | 2. Type of Container   |                   |
| Child-Resistant Packaging<br><input type="checkbox"/> Yes*<br><input type="checkbox"/> No   | Unit Packaging<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | Water Soluble Packaging<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   | <input type="checkbox"/> Metal<br><input type="checkbox"/> Plastic<br><input type="checkbox"/> Glass<br><input type="checkbox"/> Paper<br><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<br><input type="checkbox"/> Label <input type="checkbox"/> Container  |   | 4. Size(s) Retail Container  |                   | 5. Location of Label Directions<br><input type="checkbox"/> On Label<br><input type="checkbox"/> On Labeling accompanying product  |                   |
| 6. Manner in Which Label is Affixed to Product<br><input type="checkbox"/> Lithograph<br><input type="checkbox"/> Paper glued<br><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<br>Dennis H. Lade, Ph.D.  |  | Title<br>Product Registration Manager    |  | Telephone No. (Include Area Code)<br>(317) 337-4685 |   |
| <b>Certification</b><br>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<br>(Stamped)<br> |
| 2. Signature<br>Dennis H. Lade   |  | 3. Title<br>Product Registration Manager |  |   |   |
| 4. Typed Name<br>Dennis H. Lade, Ph.D.   |  | 5. Date<br>March 7, 1997                 |  |   |   |

Q2A/Transline/Notif+FPL-Supp/03-06-97  
file: 123-20-018

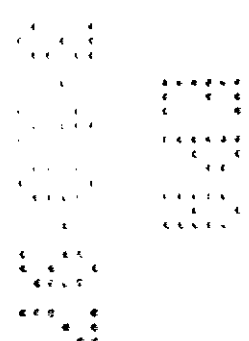
**Transline**

EPA Reg. No. 62719-259

**Registration Notes:**

Final Printed Supplemental label based on Notification coded:  
"Q2A/Transline/Notif+FPL-Supp/03-06-97"

\*Trademark of DowElanco



# Supplemental Labeling



DowElanco

9330 Zionsville Road

Indianapolis, IN 46268-1054 USA

## Transline

EPA Reg. No. 62719-259

### Transline Not For Use on Plants Grown for Agricultural/Commercial Production in Arizona

(For Distribution and Use in the State of Arizona)

#### ATTENTION

- It is a violation of Federal law to use this product in a manner inconsistent with its labeling.
- Read the label affixed to the container for Transline before applying. Carefully follow all precautionary statements and applicable use directions.
- Except as described below, use of Transline is subject to all other use precautions and limitations imposed by the label affixed to the container for Transline.

#### Directions for Use

**In Arizona:** The state of Arizona has not approved Transline\* specialty herbicide for use on plants grown for agricultural/commercial production; such as on designated grazing areas.

**NOTIFICATION**

MAR 21 1997

\*Trademark of DowElanco  
Q2A/Transline/Notif+FPL-Supp/003-06-97  
123-20-018  
Issued 03/06/97  
Initial printing.

#### Amendments:

1. Use in commercial production of plants excluded in the state of Arizona.