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United States
Environmental Protection Agency
Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number
215221

Application for Pesticide - Section I

1. Company/Product Number 64864-8	2. EPA Product Manager PM#	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Pace N-136 B	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. 64864-8 Product Name Pace N-136 B	
5. Name and Address of Applicant (Include ZIP Code) Pace International LP P.O. Box 558 Kirkland, WA 98033 <input type="checkbox"/> Check if this is a new address		

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.)

In accordance with PR Notice 93-10.

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
* Certification must be submitted	If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt	Other (Specify) _____	
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"/>	
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Litho, graph <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 Connie Steimle		Title Regulatory Analyst		Telephone No. (Include Area Code) (206) 827-8711	
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 Connie Steimle		3. Title Regulatory Analyst			
4. Typed Name Connie Steimle		5. Date 9/28/95			

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PACE N-130

Industrial Bactericide and Deodorant for Cutting Fluids

EPA Reg No. 64864-8

EPA Est. No. 64864-WA-1

ACTIVE INGREDIENTS:

Hexahydro-1, 3, 5-tris
(2-hydroxyethyl)-s-triazine 11.

INERT INGREDIENTS 88.

TOTAL 100.

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

CAUTION: Harmful if swallowed. May cause skin and eye irritation. Avoid contact with skin or eyes. Avoid contamination of food. In case of contact, immediately flush eyes or skin with plenty of water. Get medical attention if irritation persists.

ENVIRONMENTAL HAZARDS

This pesticide is toxic to fish. Do not apply directly to water or wetlands. 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 Eliminations 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.

KEEP OUT OF REACH OF CHILDREN CAUTION

STATEMENT OF PRACTICAL TREATMENT

If Swallowed: Dilute by giving 2 glasses of water. Induce vomiting by touching finger to back of throat or by giving Syrup of Ipecac as directed on the package. Call a physician. Do not induce vomiting or give anything by mouth to an unconscious person.

If In Eyes: Wash eyes thoroughly with water for at least 15 minutes. Get medical attention immediately.

If On Skin: Wash with soap and water.

If Inhaled: Provide fresh air.

See additional precautions on left side panel

NET CONTENTS: 55 Gallons