

69332-4

4.4.2007

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460

OFFICE OF PESTICIDE PROGRAMS
7505 P
WASHINGTON, DC 20460

NOTIFICATION

APR 04 2007

Joe Connealy
Vice President of Finance
Pet Logic, LLC
Division of Sergeant's Pet Care Products, Inc.
2625 South 158th Plaza
Omaha, NE 68130

APR 4 2007

SUBJECT: Applications for Pesticide Notification – U. S. Measures/Storage & Disposal
SPI #8208-55D EPA Reg. No. 69332-3
✓ PL #1001 EPA Reg. No. 69332-4
Applications Dated February 20, 2007

Dear Mr. Connealy:

The Agency is in receipt of your Applications for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 for the above products. The Registration Division (RD) has conducted a review of these requests for their applicability under PRN 98-10 and finds that the actions requested fall within the scope of PRN 98-10. The labels submitted with the applications have been stamped "Notification" and will be placed in our records.

If you have any questions, please me directly at 703-305-6249 or Terri Stowe of my staff at 703-305-6117.

Sincerely,

A handwritten signature in black ink, appearing to be "Linda Arrington".

Linda Arrington
Notifications & Minor Formulations Team Leader
Registration Division (7505P)
Office of Pesticide Programs

 <p>United States Environmental Protection Agency Washington, DC 20460</p>	<input type="checkbox"/> Registration <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Other	OPP Identifier Number
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Application for Pesticide - Section I

1. Company/Product Number <p style="text-align: center;">69332-4</p>	2. EPA Product Manager <p style="text-align: center;">George LaRocca</p>	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) <p style="text-align: center;">PL #1001</p>	PM# <p style="text-align: center;">13</p>	
5. Name and Address of Applicant (Include ZIP Code) Pet Logic, LLC A Div. of Sergeant's Pet Care Products, Inc. 2625 South 158th Plaza Omaha, NE 68130 <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: EPA Reg. No. _____ 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.)

This notification is consistent with the provisions of PR Notice 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.

NOTIFICATION TO ADD U.S. STANDARD UNITS OF MEASURE TO NET CONTENTS; UPDATE OF STORAGE & DISPOSAL LANGUAGE PER PRN 98-10

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 <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 <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"/> 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 <p style="text-align: center;">Mark Levin</p>	Title <p style="text-align: center;">Vice President of Technical Affairs</p>	Telephone No (Include Area Code) <p style="text-align: center;">(402) 938-7024</p>
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 <p style="text-align: center;">Vice President of Technical Affairs</p>		
4. Typed Name <p style="text-align: center;">Mark Levin</p>		5. Date <p style="text-align: center;">February 20, 2007</p>



United States
Environmental Protection Agency
 Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 69332-4	2. EPA Product Manager George LaRocca	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) PL #1001	PM# 13	
5. Name and Address of Applicant (Include ZIP Code) Pet Logic, LLC A Div. of Sergeant's Pet Care Products, Inc. 2625 South 158th Plaza Omaha, NE 68130 <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: EPA Reg. No. _____ Product Name _____

Section - II

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____	NOTIFICATION APR 04 2007
<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.)

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NOTIFICATION TO ADD U.S. STANDARD UNITS OF MEASURE TO NET CONTENTS; UPDATE OF STORAGE & DISPOSAL LANGUAGE PER PRN 98-10

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	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	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) _____
* 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 <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"/> 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 Joe Connealy	Title Vice President of Finance	Telephone No. (Include Area Code) (402) 338-7020
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 Vice President of Finance	
4. Typed Name Joe Connealy	5. Date February 20, 2007	

Sergeant's Master Label

20 February 2007 EPA Notification
Information in [] is optional.

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Editors Note: [Optional proposed text appears in brackets – the final label may include some or all of the optional text]

PL #1001

[[ETOFPENPROX] SPOT-ON [SQUEEZE-ON] [STRIPE-ON]]
[FLEA, (Deer) or (Black Legged) TICK, and MOSQUITO CONTROL FOR CATS]
[for smaller cats over 2.2 lbs and under 5 lbs.]
[For cats 5 lbs and over]
[for cats and kittens over 12 weeks of age and over 2.2 lbs.]
[for cats and kittens over 12 weeks of age]
[WITH NYLAR®]
[[ONE], [TWO], [THREE], MONTH SUPPLY]]
[QUICK ACTING & LONG LASTING]

NOTIFICATION

APR 04 2007

ONE APPLICATION: (choose from the following)

- [Monthly Protection]
- [Reapply Monthly]
- [Repels mosquitoes [for up to 30 days]]
- [KILLS ADULT FLEAS FOR UP TO [28 DAYS] [4 WEEKS] [1 MONTH] [per application]]
- [KILLS FLEAS, (Deer) or (Black legged) TICKS and Repels Mosquitoes [for up to 28 days] [1 MONTH]]
- [MONTHLY FLEA, (Deer) or (Black legged) TICK, and MOSQUITO PROTECTION]
- [3 WAY PROTECTION [Kills fleas, (Deer) or (Black Legged) Ticks, and repels mosquitoes]
- [Quick Acting, [and] Long Lasting]
- [Specially formulated for Cats]
- [KILLS FLEAS, (Deer) or (Black legged) and TICKS for up to [4 WEEKS] [1 MONTH] [28 DAYS] [per application]]
- [KILLS (Deer) or (Black legged) TICKS FOR UP TO [28 DAYS] [4 WEEKS] [1 MONTH] [per application]]
- [KILLS (Deer) or (Black legged) TICKS [BEFORE THEY CAN] [THAT] TRANSMIT LYME DISEASE, FOR UP TO [4 WEEKS] [1 MONTH] [per application]]
- [PREVENTS MOSQUITOES THAT TRANSMIT WEST NILE VIRUS FROM FEEDING ON CATS FOR UP TO ONE MONTH (per application)]
- [Brochure][and][calendar reminder stickers][enclosed][inside]

{Ingredient Statement may be on front or back label}

ACTIVE INGREDIENTS:

Etofenprox..... 55.00%

OTHER INGREDIENTS: 45.00%

TOTAL 100.00%

[Nylar® is a registered trademark of McLaughlin Gormley King Company]

KEEP OUT OF REACH OF CHILDREN

CAUTION

See [Back][or][Side] Label Panel[s] for Additional Precautionary Statements

NET CONTENTS:

[One] [Two][Three] 0.024 oz. (0.7 mL) applicators. [(for small cats between 2.2 lbs and 5 lbs)]

[One] [Two][Three] 0.047 oz. (1.4 mL) applicators. (for large cats over 5 lbs)

[Two] 0.047 oz. (0.7 mL) applicators. (for large cats over 5 lbs)

Sergeant's Master Label

20 February 2007 EPA Notification
Information in [] is optional.

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BACK PANEL

CAT SQUEEZE-ON

Etofenprox

{Product Name}

**READ ENTIRE LABEL BEFORE EACH USE
USE ONLY ON CATS**

NOTIFICATION

APR 04 2007

**PRECAUTIONARY STATEMENTS
HAZARDS TO HUMANS AND DOMESTIC ANIMALS
CAUTION**

HAZARDS TO HUMANS: Causes moderate eye irritation. Avoid contact with eyes and clothing. Wash thoroughly with soap and water after handling, and before eating, drinking, chewing gum, or using tobacco. Repeated exposure to etofenprox can cause skin irritation.

HAZARDS TO DOMESTIC ANIMALS: For External Use Only. Do not use on pets under 12 weeks of age. Do not use on cats under 2.2 pounds. Consult a veterinarian before using this product on debilitated, aged, pregnant, or nursing animals. Sensitivities may occur after using ANY pesticide product for pets. If signs of sensitivity occur, bathe your pet with mild soap and rinse with large amounts of water. If signs continue, consult a veterinarian immediately. Certain medications can interact with pesticides. Consult a veterinarian before using on medicated animals.

PHYSICAL OR CHEMICAL HAZARDS: Combustible: Do not use or store near heat or open flame.

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. Call a poison control center or doctor for treatment advice.

Have the product container or label with you when calling a poison control center or doctor or going for treatment. You may also contact 1-800-224-PETS for emergency medical treatment information.

DIRECTIONS FOR USE

It is a violation of Federal Law to use this product in a manner inconsistent with its labeling.

Do not get this product in your pet's eyes or mouth. Do not apply more often than once every 30 days. Use only on Cats. Do not bathe pet within the first 24 hours after squeeze-on has been applied. Households with more than one cat should not allow cats to groom each other until solution has dried.

FOR USE ON CATS:

Weighing 2.2 pounds to 5 pounds - Apply contents of one 0.024 oz. (0.7 mL) tube [vial] of {Product Name} as a spot high on the back of the cat's neck behind its head.

Weighing 5 pounds or more - Apply contents of two 0.024 oz. (0.7 mL) tubes [vial] of {Product Name} solution as a spot or stripe, starting high on the back of the cat's neck to in front of the shoulder blades.

Or Apply one 0.047 oz. (1.4 mL) tube [vial] of {Product Name} solution as a spot or stripe, starting high on the back of the cat's neck to in front of the shoulder blades.

(INSERT DIAGRAM THAT DEPICTS APPLICATION OF PRODUCT ON THE CAT)

HOW TO APPLY:

Remove product tube [vial] from the package. Holding tube [vial] with notched end pointing up and away from the face and body, cut or tear off the narrow end at the notches. While holding the animal with one hand, use the other hand to apply the solution. Invert the tube [vial] and use the narrow end to part the animal's hair while gently squeezing to apply to the animal's skin. Hold the animal for a few seconds to give the solution time to be absorbed into the animal's coat. When finished, wrap the tube [vial] in paper and put into the trash.

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Sergeant's Master Label

20 February 2007 EPA Notification
Information in [] is optional.

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STORAGE AND DISPOSAL

Do not contaminate water, food, or feed by storage or disposal.

Storage: Store in a cool, dry place.

Disposal: Securely wrap original container in several layers of newspaper and discard in trash.

Container Disposal: ~~Do not reuse empty container. Wrap and put in trash.~~ *If empty: Do not reuse this container. Place in trash or offer for recycling if available. If partly filled: Call your local solid waste agency for disposal instructions. Never place unused product down any indoor or outdoor drain.*

[NOTICE OF WARRANTY Sergeant's Care Pet Products, Inc. makes no warranty of merchantability, fitness for any particular purpose, or otherwise expressed or implied concerning this product or its uses which extend beyond the use of the product under normal conditions in accordance with the statements made on this label.]

[Sergeant's Care Pet Products, Inc. is committed to providing high quality products. If you have questions or comments about this product, please write: Sergeant's Consumer Response, P.O. Box 540399, Omaha, NE 68154-0399.]

In Case of Emergency, call: 1-800-781-4738
Non-Emergency call 1-800-224-PETS (7387)

[For more information] [Visit us at:] www.sergeants.com
Made in USA

Distributed by:
Pet Logic, LLC, A Division of
Sergeant's Pet Care Products, Inc.
Omaha, NE 68130
{END - BACK / SIDE PANEL}

EPA Reg. No. 69332-4
EPA Est. No. XXXXXXXX
{date & label code}

NOTIFICATION

APR 04 2007

TUBE / VIAL LABEL

Front Label

{Product Name}
Etofenprox55.0% W/W

0.024 oz. (0.7 mL) (or) 0.047 oz. (1.4 mL) {label code}

Back Label

KEEP OUT OF REACH OF CHILDREN
CAUTION: Read directions and precautions before using.

EPA REG. No. 69332-4 {label code}