

69470-8

4/20/2004

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April 20, 2004

Robert Rosenwasser
 Manager, Regulatory Affairs
 Clearon Corporation
 2115 Linwood Avenue
 Fort Lee, NJ 07024

Subject: CDB CLEARON MEDIUM
 EPA Registration No. 69470-8
 Application Date: March 24, 2004
 Receipt Date: March 24, 2004

Dear Mr. Rosenwasser:

This acknowledges receipt of your notification, submitted under the provision of PR Notice 98-10, FIFRA section 3(c)9.

Proposed Notification

- addition of hotline number to First Aid Statement

General Comments

Based on a review of the material submitted, the following comments apply:

The notification application 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. Mitchell
 Product Reviewer (32)
 Regulatory Management Branch II
 Antimicrobials Division (7510C)

CONCURRENCES

SYMBOL	7510C	750C						
SURNAME	E. Berg	Mitchell						
DATE	4.20.04	4-20-04						



Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060. Approval expires 2-28-95

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United States
Environmental Protection Agency
Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number
301086

Application for Pesticide - Section I

1. Company/Product Number 69470-8	2. EPA Product Manager W. Mitchell	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) CDB CLEARON MEDIUM	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) Clearon Corporation 2115 Linwood Avenue Fort Lee, NJ 07024 <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.)

"Notification of Addition of Hotline Telephone Number to already amended First Aid Statements per PR Notice 98-10."

"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."

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
* Notification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt.	No. per container
				<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
				<input type="checkbox"/> 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"/> 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 Robert Rosenwasser	Title Manager, Regulatory Affairs	Telephone No. (Include Area Code) (201) 242-6577
2. Signature 		6. Date Application Received (Stamped)
3. Title Manager, Regulatory Affairs		
4. Typed Name Robert Rosenwasser		5. Date March 24, 2004
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.		

KEEP OUT OF REACH OF CHILDREN

DANGER

SEE PRECAUTIONARY STATEMENTS
AND FIRST AID INFORMATION
BELOW

FIRST AID

If in eyes	<ul style="list-style-type: none"> 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 inhaled	<ul style="list-style-type: none"> Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably by mouth-to-mouth, if possible. Call a poison control center or doctor for further treatment advice.
If on skin clothing	<ul style="list-style-type: none"> 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 swallowed	<ul style="list-style-type: none"> Call 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.
<p>Have the product container or label with you when calling a poison control center or doctor, or going for treatment. YOU MAY ALSO CONTACT 1-800-420-9236 FOR EMERGENCY MEDICAL TREATMENT INFORMATION.</p>	
<p>NOTE TO PHYSICIAN "Probable mucosal damage may contraindicate the use of gastric lavage."</p>	

FOR MANUFACTURING USE ONLY

Active Ingredient:
Sodium Dichloro-s-Triazinetrione
Hydrated 99%
Inert Ingredients: 1%
Total: 100%
Available Chlorine: 55.5%

CLEARON CORP.
95 MacCORKLE AVENUE, SW
SOUTH CHARLESTON, WV 25303-1411

EPA REG. NO. 69470-8
EPA EST. NO. 69470-WV-1

PRECAUTIONARY STATEMENTS: HAZARD TO HUMANS AND DOMESTIC ANIMALS:

DANGER:

Corrosive. Causes irreversible eye damage. May be fatal if inhaled. Harmful if swallowed or absorbed through skin. Do not get in eyes, on skin, or on clothing. Do not breathe dust, vapor or spray mist. Wear goggles, face shield, or safety glasses. Wash thoroughly with soap and water after handling. Remove contaminated clothing and wash before reuse.

CHEMICAL HAZARDS. DANGER: Strong oxidizing agent. Use only clean dry utensils. Mix only into water. Contamination with moisture, dirt, organic matter or other chemicals (including other pool chemicals) or any other foreign matter may start a chemical reaction with generation of heat, liberation of hazardous gases and possible generation of fire and explosion. Avoid any contact with flaming or burning material such as a lighted cigarette. Do not use this product in any chlorinating device which has been used with any inorganic or unstabilized chlorinating compounds (e.g., calcium hypochlorite). Such use may cause fire or explosion.

ENVIRONMENTAL HAZARD: This pesticide is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, ponds, streams, estuaries, oceans, or public 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 discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the sewage treatment plant authority. For guidance, contact your State Water Board or Regional Office of the EPA.

EMERGENCY HANDLING: In case of contamination or decomposition do not reseal container. If possible, isolate container in open well-ventilated area. Flood with large volumes of water. Dispose of contaminated material in an approved landfill area.

STORAGE AND DISPOSAL: Keep product dry in tightly closed container when not in use. Store in a cool, dry, well-ventilated area away from heat or open flame. Do not reuse empty container. Rinse empty container thoroughly with water to dissolve all material before discarding. Securely wrap container in several layers of newspaper and discard in trash.

DIRECTIONS FOR USE: It is a violation of Federal Law to use this product in a manner inconsistent with its labeling. Read entire label and use strictly in accordance with precautionary statements and directions.

For formulation into end-use products intended for disinfectants, sanitizers, fungicides, bactericides and algacides for pools, spas, hot tubs, industrial recirculating water cooling towers, air washers and evaporative condensers, sewage treatment, food contact surfaces, laundry and egg sanitizing. Formulators using this product are responsible for obtaining EPA registration of their formulated products.

NET WT. 2,205 LBS.

Made and Printed in U.S.A.

9/01

CLR2/04

CDB® is a registered trademark of Clearon Corp.

NOTIFICATION
Date Reviewed: 4/20/04
Reviewed By: [Signature]

4/20/04

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