



8/11/2010

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460

AUG 11 2010

OFFICE OF CHEMICAL SAFETY
AND POLLUTION PREVENTION

Altivia Corporation
c/o Christina M. Swick, Agent
Lewis & Harrison
122 C Street N.W., Suite 740
Washington, D.C. 20001

Subject: Notification dated: July 12, 2010
Aquachlor
EPA Registration # 70264-2
Decision 437349

Dear Ms. Swick:

This acknowledges receipt of your Notification submitted in accordance with the provisions of PR Notice 98-10 under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) section 3(c)9.

Proposed Notification

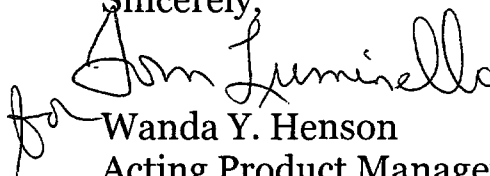
- Revise and Update Storage and Disposal instructions in accordance with Pesticide Registration Notice 2007-4

General Comments

- Based on a review of the material submitted, the notification is acceptable.

Should you have any questions or comments concerning this letter, please contact Tom Luminello at (703) 308-8075.

Sincerely,



Wanda Y. Henson
Acting Product Manager 32
Regulatory Management Branch II
Antimicrobials Division (7510P)

**EPA**

United States
Environmental Protection Agency
Washington, DC 20460

☐ Registration
☐ Amendment
☒ Other: NOTIFICATION

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 70264-2	2. EPA Product Manager Wanda Henson	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Aquachlor	PM# Team 32	
5. Name and Address of Applicant (Include ZIP Code) ALTIVIA Corporation 1100 Louisiana, Ste. 3160 Houston, TX 77002 <u>PLEASE SEND ALL CORRESPONDENCE TO</u> <u>"CONTACT POINT" LISTED BELOW</u> <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 LABEL CHANGE PER PR NOTICE 2007-4**

This notification is consistent with the guidance in PR Notice 2007-4 and the requirements of EPA's regulations at 40 CFR §§ 156.10, 156.140, 156.144, 156.146, and 156.156. No other changes have been made to the labeling or the Confidential Statement of Formula for 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 the amended label is not consistent with the requirements of 40 CFR §§ 156.10, 156.140, 156.144, 156.146, and 156.156, 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.

Signature: Christina M. SwickDate: 7/12/10**THIS SUBMISSION IS NOT SUBJECT TO PRIA FEES****Section - III**

1. Material This Product Will Be Packaged In:				2. Type of Container	
Child-Resistant Packaging <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Metal	
*Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	<input checked="" type="checkbox"/> Plastic	
		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 checked="" type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container Bulk Tank Truck, 15 gal Pail, 55 gal Drum, 275 & 500 gal Tote		5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On labeling accompanying product	
6. Manner in Which Label is Affixed to Product		<input checked="" type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input checked="" type="checkbox"/> Stenciled <input checked="" 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 <u>Christina M. Swick, Lewis & Harrison, LLC, 122 C Street NW, Ste. 740, Washington, DC 20001</u>		Title <u>Agent</u>	
Telephone No. (Include Area Code) <u>202-393-3903 x. 16</u>			
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 <u>Christina M. Swick</u>		3. Title <u>Agent</u>	
4. Typed Name <u>Christina M. Swick</u>		5. Date <u>July 12, 2010</u>	
		6. Date Application Received <u>(Stamped)</u>	

LEWIS & HARRISON

Consultants in Government Affairs

122 C Street, N.W., Suite 740
Washington, D.C. 20001

telephone 202.393.3903
fax 202.393.3906

8064

July 12, 2010

HAND DELIVERED

Antimicrobials Division (Mail Code 7504P)
Office of Pesticide Programs
Document Processing Desk [NOTIFY]
U.S. Environmental Protection Agency
Room S-4900, One Potomac Yard
2777 South Crystal Drive
Arlington, VA 22202

ATTN: Wanda Henson
Product Manager, Team 32

SUBJECT: ALTIVIA Corporation
Chlorine (EPA Reg. No. 70264-1)
Aquachlor (EPA Reg. No. 70264-2)
Aquachlor (EPA Reg. No. 70264-3)
Notification of Label Changes per PR Notice 2007-4

Dear Ms. Henson:

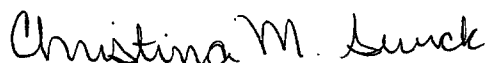
On behalf of ALTIVIA Corporation, we are notifying the Agency of changes to the product labels referenced in the subject line. The changes are in accordance with PR Notice 2007-4. All of the language has been added verbatim from the aforementioned PR Notice. No other changes have been made to the labels.

Please find enclosed the following documents to support these notifications:

- 1) Pesticide Application Form for each product;
- 2) One (1) copy of each proposed product label with the changes marked; and
- 3) Three (3) copies of each proposed product label.

If you have any questions or comments, please contact me at 202-393-3903 ext. 16 or cswick@lewisharrison.com.

Sincerely,



Christina M. Swick
Agent for ALTIVIA Corporation

PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS AND DOMESTIC ANIMALS

DANGER: Corrosive. May cause severe skin irritation or chemical burns to broken skin. Causes eye damage. Do not get in eyes, on skin or on clothing. Wear goggles or face shield and rubber gloves (PVC or Nitrile) when handling this product. Wash after handling. Avoid breathing vapors. Vacate poorly ventilated areas as soon as possible. Do not return until odors have dissipated.

ENVIRONMENTAL HAZARDS: This pesticide is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, estuaries, oceans, or public waters unless in accordance with the requirements of the National Pollutant Discharge Elimination Systems (NPDES) permit and the Permitting Agency 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.

PHYSICAL AND CHEMICAL HAZARDS: STRONG OXIDIZING AGENT: Mix only with water according to label directions. Mixing this product with gross filth such as feces, urine, etc. or with ammonia, acids, detergents or other chemicals will release hazardous gases irritating to the eyes, lungs and mucous membranes.

STORAGE AND DISPOSAL:

PESTICIDE STORAGE: Store in a cool, dry area away from direct sunlight. In case of spill, flood area with large quantities of water.

PESTICIDE DISPOSAL: Product or rinsates that cannot be used should be diluted with water and disposed of in a sanitary sewer. **CONTAINER HANDLING:** Nonrefillable container. Do not reuse or refill this container. Triple rinse container (or equivalent) promptly after emptying. Triple rinse as follows: Empty the remaining contents into application equipment or a mix tank. Fill the container 1/4 full with water. Replace and tighten closures. Tip container on its side and roll it back and forth, ensuring at least one complete revolution, for 30 seconds. Stand the container on its end and tip it back and forth several times. Turn the container over onto its other end and tip it back and forth several times. Empty the rinsate into application equipment or a mix tank or store rinsate for later use or disposal. Repeat this procedure two more times. Then offer for recycling or reconditioning, or puncture and dispose of in a sanitary landfill, or incineration, or, if allowed by state and local authorities, by burning. If burned, stay out of smoke. Do not contaminate food or feed by storage, disposal or cleaning of equipment.

AQUACHLOR™ () ← Specific end use product designations if necessary

SANITIZER, DISINFECTANT

ACTIVE INGREDIENT: SODIUM HYPOCHLORITE 10%
INERT INGREDIENTS: 90%
TOTAL: 100%

KEEP OUT OF REACH OF CHILDREN

DANGER

FIRST AID	
IF IN EYES:	<ul style="list-style-type: none"> Hold eye open and rinse slowly and gently with water for 15-30 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing the eye. Call poison control center or doctor for treatment advice.
IF ON SKIN OR 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 or 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.
Have the product container or label with you when calling a poison control center or doctor, or going for treatment.	

For 24 hour Emergency Information call CHEMTREC: 800-424-9300



ALTIVIA

Altivia Corporation
1100 Louisiana, Suite 3180, Houston, TX 77002
TELEPHONE: (1-866-ALTIVIA)

EPA Reg. No. 70264-2

EPA Est. No. 70411-()-1

Net Contents: () lbs.)

DIRECTIONS FOR USE

IT IS A VIOLATION OF FEDERAL LAW TO USE THIS PRODUCT IN A MANNER INCONSISTENT WITH ITS LABELING.

Desired Strength Available Chlorine (by Weight)	Gallons Water	Liquid Ounces Sodium Hypochlorite
5 PPM	100	.75
10 PPM	100	1.5
15 PPM	100	2.0
25 PPM	100	3.5
35 PPM	100	4.5
50 PPM	100	6.5
100 PPM	10	1.5
200 PPM	10	3.0
500 PPM	10	6.5
600 PPM	10	8.0
1000 PPM	10	13.0
5000 PPM	10	64.0
10000 PPM	10	128.0

IMPORTANT! ALL SANITIZING APPLICATIONS

FOR ALL FOOD CONTACT SURFACES AND OBJECTS- Remove food particles by flushing, scraping and, when necessary, soaking. Wash thoroughly with a good detergent or compatible cleaner and rinse with potable water before application of AQUACHLOR™ solution. Wet all surfaces thoroughly with AQUACHLOR™ solution by immersion flooding or spraying. Contact time must be at least two minutes. Drain solution and air dry. Do not wash with potable water after sanitizing. AQUACHLOR™ solutions must not be re-used for sanitizing purposes. Prepare a fresh solution daily if the old solution becomes diluted or soiled.

SANITATION OF POROUS FOOD CONTACT SURFACES

SPRAY/FOG METHOD - Pre-clean all surfaces after use. Prepare a 600 ppm available chlorine sanitizing solution of sufficient size by thoroughly mixing the product in a ratio of 8 oz. Product with 10 gallons of water. Use spray or fogging equipment which can resist hypochlorite solutions. Always empty and rinse spray/fog equipment with potable water after use. Thoroughly spray or fog all surfaces until wet allowing excess sanitizer to drain. Vacate area for at least 2 hours. Prior to using equipment, rinse all surfaces with a 200 ppm available chlorine solution. Prepare a 200 ppm sanitizing solution by thoroughly mixing 2.5 oz. Of this product with 10 gallons of water.

SANITATION OF NONPOROUS FOOD CONTACT SURFACES

SPRAY/FOG METHOD - Pre-clean all surfaces after use. Use a 200 ppm available chlorine solution to control bacteria, mold or fungi and a 600 ppm solution to control bacteriophage. Prepare a 200 ppm sanitizing solution of sufficient size by thoroughly mixing the product in a ratio of 2.5 oz. Product with 10 gallons of water. Prepare a 600 ppm solution by thoroughly mixing the product in a ratio of 8 oz. Product with 10 gallons of water. Use spray or fogging equipment which can resist hypochlorite solutions. Always empty and rinse spray/fog equipment with potable water after use. Thoroughly spray or fog all surfaces until wet, allowing excess sanitizer to drain. Vacate area for at least 2 hours. Prior to using equipment, rinse all surfaces treated with a 600 ppm solution with a 200 ppm solution.

SWIMMING POOL WATER DISINFECTION

For a new pool or spring start-up, superchlorinate with a 64 to 128 oz. Of product for each 10,000 gallons of water to yield 5 to 10 ppm available chlorine by weight. Check the level of available chlorine with a test kit. Adjust and maintain pool water pH to between 7.2 and 7.6. Adjust and maintain the alkalinity of the pool to between 50 to 100 ppm.

To maintain the pool, add manually or by a feeder device 13 oz. of this product for each 10,000 gallons of water to yield an available chlorine residual between 0.6 to 1.0 ppm by weight. Stabilized pools should maintain a residual of 1.0 to 1.5 ppm available chlorine. Test the pH, available residual chlorine and alkalinity of the water frequently with appropriate test kits. Frequency of water treatment will depend upon temperature and number of swimmers. Every 7 days, or as necessary, superchlorinate the pool with 64 to 128 oz. of product for each 10,000 gallons of water to yield 5 to 10 ppm available chlorine by weight. Check the level of available chlorine with a test kit. Do not reenter pool until the chlorine residual is between 1.0 to 3.0 ppm.

At the end of the swimming pool season or when water is to be drained from the pool, chlorine must be allowed to dissipate from treated pool water before discharge. Do not chlorinate the pool 24 hours prior to discharge. **WINTERIZING POOLS -** While water is still clear & clean, apply 4 oz. of product per 1000 gallons, while filter is running, to obtain a 3 ppm available chlorine residual, as determined by a suitable test kit. Cover pool, prepare heater, filter and heater components for winter by following manufacturer's instructions.

DISINFECTION OF DRINKING WATER (POTABLE)

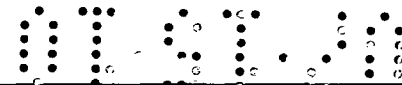
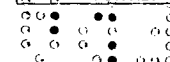
PUBLIC SYSTEMS: Mix a ratio of 1.5 oz. of this product to 100 gallons of water. Begin feeding this solution with a hypochlorinator until a free available chlorine residual of at least 0.2 ppm and no more than 0.6 ppm is attained throughout the distribution system. Check water frequently with a chlorine test kit. Bacteriological sampling must be conducted at a frequency no less than that prescribed by the National Primary Drinking Water Regulations. Contact your local Health Department for further details.

INDIVIDUAL SYSTEMS: DUG WELL

Upon completion of casing (lining) wash the interior of the casing (lining) with a 100 ppm available chlorine solution using a stiff brush. This solution can be made by thoroughly mixing 1.5 oz. of this product into 10 gallons of water. After covering the well, pour sanitizing solution into the well through both the pipesleeve opening and the pipeline. Wash the exterior of the pump cylinder also with the sanitizing solution. Start pump and pump water until strong odor of chlorine is noted. Stop pump and wait at least 24 hours. After 24 hours flush well until all traces of chlorine have been removed from the water. Consult your local Health Department for further details.

NOTE: This product degrades with age. Use chlorine test kit and increase dosage as necessary to obtain the required level of available chlorine

REFER TO THE AQUACHLOR SUPPLEMENTAL BOOKLET FOR ADDITIONAL DIRECTIONS AND USES



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