

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

OCT 17 2002

Gail Early  
Regulatory Specialist  
ISK Biocides, Inc  
416 E. Brooks Rd.  
Memphis, TN 38109

Subject: Notification Per PR Notice 98 -10  
Tuff-Brite 2  
EPA Registration No. 71581-6  
Application Dated: September 17, 2002

Dear Ms Gail Early,

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

**Proposed Notification**

- Change of Primary Brand Name Tuff-Brite 2 to Premier

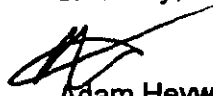
**General Comments**

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

This notification application is acceptable and a copy has been made a part of the records for this file.

Should you have any questions or comments concerning this letter, please contact me at (703) 308-6422.

Sincerely,



Adam Heyward  
Product Manager (34)  
Regulatory Management Branch II  
Antimicrobial Division (7510C)

**CONCURRENCES**

SYMBOL	7510(c)						
SURNAME	A Peters						
DATE	10/17/02						

 <p>United States <b>Environmental Protection Agency</b> 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 71581-6	2. EPA Product Manager Heyward	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Tuff-Brite 2	PMS 34	
5. Name and Address of Applicant (include ZIP Code) ISK Biocides, Inc. 416 E. Brooks Rd. Memphis, TN 38109 <input type="checkbox"/> Check if this is a new address		6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(6), 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 Change of Primary Brand Name to Premier.

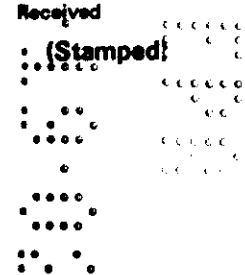

**Section - III**

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 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 Gail Early	Title Regulatory Specialist	Telephone No. (Include Area Code) 901-344-5316
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<b>Certification</b>			6. Date Application Received (Stamped) 
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 	3. Title Regulatory Specialist		
4. Typed Name Gail Early	5. Date Sept. 17, 2002		



NOTIFICATION  
Date Reviewed: 12-17-02  
Reviewed By: [Signature]

### SAPSTAIN / MOLD CONTROL For Fresh Cut Lumber & Wood Products

Effective on softwoods, including Douglas fir, white fir, spruce, hemlock and pines (including southern and western yellow pines & eastern and western white pines) and many hardwoods, including oak, poplar and maple.

#### INGREDIENT STATEMENT

##### ACTIVE INGREDIENTS:

3-Iodo-2-Propynyl Butyl Carbamate .....	6.0%
Propiconazole: 1-[[2-(2,4-dichlorophenyl)-4-propyl-1,3-dioxolan-2-yl]-methyl]-1H-1,2,4-triazole .....	3.0%

OTHER INGREDIENTS: ..... 91.0%

TOTAL 100.0%

KEEP OUT OF REACH OF CHILDREN

### CAUTION

See back panel for additional precautionary statements.

Manufactured for:

ISK Biocides, Inc.  
416 East Brooks Road  
Memphis, TN 38109

EPA Reg. No. 71581-6

EPA Est. No. 1022-TN-1

Net Contents: \_\_\_\_\_

Batch No.: \_\_\_\_\_

Printed in USA.

**DIRECTIONS FOR USE**

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

Do not use water collected from treated wood for potable water.

Premier is a liquid concentrate of 3-Iodo-2-Propynyl Butyl Carbamate (IPBC) and 1-[[2-(2,4-dichlorophenyl)-4-propyl-1,3-dioxolan-2-yl]-methyl]-1H-1,2,4-triazole (Propiconazole) which readily mixes with various diluents to form a preservative solution.

Wood products for use in particle board and veneer production processes may be protected from sapstain and mold by the same treating processes recommended for freshly cut lumber and timber.

**FOR STAIN AND MOLD CONTROL ON FRESHLY CUT LUMBER, TIMBERS, AND PEELED LOGS:** Freshly cut wood should be treated within 24 hours. Otherwise, fungal attack may extend below the surface of the wood beyond the reach of a surface fungicide treatment. Freshly treated lumber should be protected from rain.

The longer the time between falling the log and sawn lumber production, the greater the incidence of pre-infection and the lower the level of stain and mold control will be achieved. This is particularly true of lumber from susceptible tree species such as pine, fir, hemlock, and yellow poplar.

**Dip Tank and Across-the-Chain Applications:**

The most cost effective strength of a Tuff Brite II solution will depend on the environment, the lumber treated, and the duration of control required.

Under **mild** stain and mold conditions, dilutions of 1 gallon of Tuff Brite II to 150 – 200 gallons of dip vat solution are recommended.

Under **moderate** stain and mold conditions, dilutions of 1 gallon of Premier with 100 to 125 gallons of dip vat solution are recommended.

Under **severe** stain and mold conditions, a dilution of 1 gallon of Premier to 50 to 75 gallons of dip vat solution are recommended.

**Low Volume Spray Application:**

For individual boards which are treated in low volume spray machines, add 1 gallon of Premier to 15 – 50 gallons of water. Smooth surfaced lumber normally retains only about one-half as much fungicide solution as rough cut wood and, therefore, needs the higher rate to deposit the necessary amount of fungicide on the wood.

(Directions for Use Continued)

Addition of a corrosion inhibitor is not required with Premier, as the formulation contains a built-in corrosion-inhibiting system.

**PRECAUTIONARY STATEMENTS**

**HAZARDS TO HUMANS AND DOMESTIC ANIMALS**

**CAUTION**

Harmful if inhaled. Avoid breathing vapor or spray mist. Causes moderate eye irritation. Avoid contact with eyes or clothing. Wash thoroughly with soap and water after handling. Remove contaminated clothing and wash before reuse.

Personal Protective Equipment (PPE):

Applicators and other handlers must wear:

- Coveralls worn over long sleeved shirt and long pants
- Chemical resistant footwear plus socks
- Goggles or face shield
- Chemical resistant gloves (such as: barrier laminate, butyl rubber, neoprene rubber, nitrile rubber, polyvinyl chloride (PVC) and viton)

For Cleaning Equipment:

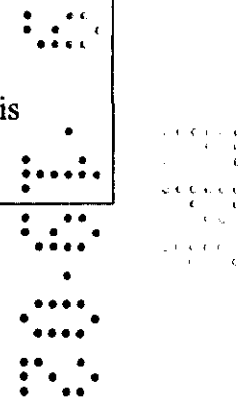
- Chemical-resistant apron

**User Safety Requirements:**

Follow manufacturer's instructions for cleaning / maintaining PPE. If no such instructions exist for washables, use detergent and hot water. Keep and wash PPE separately from other laundry.

**User Safety Recommendations:**

- Users should wash hands before eating, drinking, chewing gum, using tobacco or using the toilet.
- Users should remove clothing immediately if pesticide gets inside. Then wash thoroughly and put on clean clothing.
- User should remove personal protective equipment immediately after handling this product. Wash outside of gloves before removing. As soon as possible, wash thoroughly.



**ENVIRONMENTAL HAZARDS**

This pesticide is toxic to fish. 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 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 local sewage treatment plant authority. For guidance, contact your State Water Board or Regional Office of the Environmental Protection Agency.

**PHYSICAL OR CHEMICAL HAZARDS**

Combustible. Do not use near heat or open flame.

<b>STORAGE &amp; DISPOSAL</b>	
Do not contaminate water, food or feed by storage or disposal.	
<b>PESTICIDE DISPOSAL:</b> Wastes resulting from the use of this product may be disposed of on site or at an approved waste disposal facility.	
<b>CONTAINER DISPOSAL:</b> Triple rinse (or equivalent). 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.	

<b>FIRST AID</b>	
<b>IF IN EYES</b>	<ul style="list-style-type: none"> <li>• 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.</li> <li>• Call a poison control center or doctor for treatment advice.</li> </ul>
<b>IF INHALED</b>	<ul style="list-style-type: none"> <li>• Move person to fresh air.</li> <li>• If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth if possible.</li> </ul>
In case of emergency call Chemtrec at 1-800-424-9300.	
Have the product container or label with you when calling a Poison Control Center or doctor or going in for treatment.	

**WARRANTY AND LIMITATION OF DAMAGES**

Seller warrants to those persons lawfully acquiring title to this product that at the time of the first sale of this product by seller that this product conformed to its chemical description and was reasonably fit for the purposes stated on the label when used in accordance with Seller's directions under normal conditions of use and Buyers and users of this product assume the risk or any use contrary to such directions. **SELLER MAKES NO OTHER EXPRESS OR IMPLIED WARRANTY, INCLUDING ANY OTHER EXPRESS OR IMPLIED WARRANTY OF FITNESS OR OF MERCHANTABILITY, AND NO AGENT OF SELLER IS AUTHORIZED TO DO SO.** In no event shall Seller's liability for any breach of warranty exceed the purchase price of the material as to which a claim is made.

Buyers and users of this product are responsible for all loss or damage from use or handling of this product which results from conditions beyond the control of Seller, including, but not limited to, incompatibility with other products unless otherwise expressly provided in the Directions for Use of this product, weather conditions, moisture conditions or other environmental conditions outside the ranges that are generally recognized as being conducive to good industrial and/or application practices.

