

73049-199

4/13/2004

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Please read instructions on reverse before completing form.

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



United States
Environmental Protection Agency
Washington, DC 20460

☐ Registration
☐ Amendment
☒ Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 73049-199	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Flea and Tick Spray	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Valent BioSciences Corporation 870 Technology Way Libertyville, IL 60048 <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.

NOTIFICATION

APR 13 2004

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Notification of label change relative to PR Notice 2001-6. This notification is consistent with the guidance in PR Notice 2001-6 and the requirements of EPA's regulations at 40 CFR 156.10 and 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 guidance of PR Notice 2001-6 and the requirements of 40 CFR 156.10 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 <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 Janice K. Sharp, Ph.D.		Title Regulatory Manager, ESD		Telephone No. (Include Area Code) (847) 963-4844	
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 Regulatory Manager, ESD			
4. Typed Name Janice K. Sharp, Ph.D.		5. Date April 1, 2004			



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4. Company/Product (Name) Flea and Tick Spray	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Valent BioSciences Corporation 870 Technology Way Libertyville, IL 60048 <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

- ☐ Amendment - Explain below. ☐ Final printed labels in response to Agency letter dated _____
- ☐ Resubmission in response to Agency letter dated _____ ☐ "Me Too" Application.
- ☒ Notification - Explain below. ☐ Other - Explain below.

NOTIFICATION

APR 13 2004

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

This notification is consistent with the provisions of PR Notice 97-5 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. 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 97-5 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 MODIFY INGREDIENTS STATEMENT TO MODIFY COMMON NAME PER PR NOTICE 97-5.

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) _____		
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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 _____			

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1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Janice K. Sharp, Ph.D.	Title Regulatory Manager, ESD	Telephone No. (Include Area Code) (847) 903-4844	
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 Regulatory Manager, ESD		
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4. Company/Product (Name) Flea and Tick Spray	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Valent BioSciences Corporation 870 Technology Way Libertyville, IL 60048 <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

- ☐ Amendment - Explain below.
- ☐ Resubmission in response to Agency letter dated _____
- ☒ Notification - Explain below.
- ☐ Final printed labels in response to Agency letter dated _____
- ☐ "Me Too" Application.
- ☐ Other - Explain below.

NOTIFICATION

APR 13 2004

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Notification of label change per PR Notice 96-6. This notification is consistent with the provisions of PR Notice 96-6 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 96-6 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 <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____		
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Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Janice K. Sharp, Ph.D.	Title Regulatory Manager, ESD	Telephone No. (Include Area Code) (847) 968-4844	
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)
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Section - II

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____	NOTIFICATION APR 13 2004
<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 OF REVISED WARRANTY STATEMENT PER PR NOTICE 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) _____		
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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

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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.			8. Date Application Received (Stamped)
2. Signature 	3. Title Regulatory Manager, ESD		
4. Typed Name Janice K. Sharp, Ph.D.	5. Date April 1, 2004		

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NOTIFICATION
APR 13 2004

FLEA AND TICK SPRAY

* FOR USE ON CATS AND DOGS AND ON PREMISES TO CONTROL FLEAS AND TICKS
* AN AQUEOUS, STABLE, MICRO EMULSION

ACTIVE INGREDIENTS

Pyrethrins	0.06%
Piperonyl Butoxide* Technical	0.60%
INERT <u>OTHER</u> INGREDIENTS	<u>99.34%</u>
	100.00%

*Equivalent to 0.48% (butylcarbityl(6-propylpiperonyl) ether and 0.12% related compounds.

EPA REG. NO. 73049-199

EPA EST. NO.

**KEEP OUT OF REACH OF CHILDREN
CAUTION**

See Side Panel For Additional Precautions

NET CONTENTS:

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READ ENTIRE LABEL BEFORE EACH USE
Pet Use Applies to Use only on Dogs or Cats

In case of Medical emergencies or health and safety inquiries or in case of fire, leaking or damaged containers, information may be obtained by calling 1-877-315-9819.

PRECAUTIONARY STATEMENTS

Hazards To Humans & Domestic Animals

CAUTION: Harmful if swallowed. Avoid inhalation of vapors. Avoid contact with skin. Wash contaminated skin promptly with soap and water. Avoid spraying food or foodstuffs. Remove birds and cover fish aquariums before spraying.

Do not use on dogs or cats under twelve (12) weeks old. Consult a veterinarian before using this product on medicated, 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.

DIRECTIONS FOR USE

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

SHAKE WELL BEFORE USE.

ON PETS: Start spraying at the tail, moving the dispenser rapidly and making sure that the animal's entire body is covered, including the legs and under body. While spraying, fluff the hair so that spray will penetrate to the skin. Make sure spray wets thoroughly. Do not spray into eyes or face. Repeat application weekly if necessary.

ON PREMISES:

TO CONTROL FLEAS AND BROWN DOG TICKS ON PREMISES. Thoroughly spray infested areas, pet beds, resting quarters, nearby cracks and crevices, along and behind baseboards, moldings, window and doorframes, and localized areas of floor and floor coverings. Fresh bedding should be placed in animal quarters following treatment. Concurrent treatment of animals is recommended. Repeat treatment as needed.

STORAGE & DISPOSAL

Storage: Store in original container away from children and pets.

Disposal: 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 or 1-800-CLEANUP for disposal instructions. Never place unused product down any indoor or outdoor drain. Do not reuse container. Wrap container in several layers of newspaper and discard in trash.

IMPORTANT: READ BEFORE USE

Read the entire Directions for Use, Conditions, Disclaimer of Warranties and Limitations of Liability before using this product. If terms are not acceptable, return the unopened product container at once.

By using this product, user or buyer accepts the following conditions, disclaimer of warranties and limitations of liability.

CONDITIONS: The directions for use of this product are believed to be adequate and should be followed carefully.

However, it is impossible to eliminate all risks associated with the use of this product. Ineffectiveness or other unintended consequences may result because of such factors as weather conditions, presence of other materials, or the manner of use or application, all of which are beyond the control of Valent BioSciences Corporation. All such risks shall be assumed by the user or buyer.

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Environmental Science Division
870 Technology Way

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Libertyville, IL 60048
List No. 73049199
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