

79427-3

3-7-2007

1/6



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF
PREVENTION, PESTICIDES AND
TOXIC SUBSTANCES

March 7, 2007

Ms. Catherine Rice
c/o Wellman, Inc.
Keller and Heckman LLP
1001 G Street NW
Suite 500 West
Washington, DC 20001

Subject: Notification – Addition of New Claim “Anti-Dust Mite”
Wellcare ADM®
EPA Reg. No. 79427-3
Your Application Dated February 16, 2007

Dear Ms. Rice:

The Agency is in receipt of your Application for Pesticide Notification under Pesticide Registration Notice (PRN) 98-10 for the above mentioned product. The Registration Division (RD) has conducted a review of this request for its applicability under PRN 98-10 and finds that the action(s) requested fall within the scope of PRN 98-10. The labeling submitted with the application has been stamped “Notification” received and will be placed in our records.

If you have any questions, please me directly at 703-305-6249.

Sincerely,

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

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

Please read instructions on reverse before completing form.

Form Approved, OMB No. 2070-0080, Approval expires 2-28-



United States
Environmental Protection Agency
Washington, DC 20460

☐ Registration
☐ Amendment
☒ Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 79427-3	2. EPA Product Manager Richard Gebken	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Wellcare ADM [Finished Article]	PM# 10	
5. Name and Address of Applicant (Include ZIP Code) Wellman, Inc. 1041 521 Corporate Center Drive Fort Mill, SC 29715 <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. NOTIFICATION Product Name MAR 7 2007	

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 a New Claim which is consistent with an Existing Claim per PR Notice 98-10.

Please see attached cover letter for additional information.

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"/> Text <input type="checkbox"/> No		<input type="checkbox"/> Metal	
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container	If "Yes" Package wgt.	No. per container
				<input type="checkbox"/> Plastic	
				<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"/> On Label <input type="checkbox"/> On Labeling accompanying product	
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 Catherine Rice	Title Agent for Wellman, Inc.	Telephone No. (Include Area Code) 202-434-4145
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 Agent for Wellman, Inc.	
4. Typed Name Catherine Rice	5. Date 2-16-2007	

1001 G Street, N.W.
Suite 500 West
Washington, D.C. 20001
tel. 202.434.4100
fax 202.434.4646

February 16, 2007

Via Messenger

Joyce Edwards
Document Processing Desk (NOTIF)
US Environmental Protection Agency
Room S-4900, One Potomac Yard
2777 South Crystal Drive
Arlington, VA 22202-4501

3/6
Writer's Direct Access
Catherine Rice
(202) 434-4145
Rice@khlaw.com

Re: Registrant: Wellman, Inc.
Product: Wellcare ADM[®] [Finished Article] (EPA Reg. No. 79427-3)
Notification of a New Claim consistent with an Existing Claim per PR Notice 98-10

Dear Ms. Edwards:

On behalf of our client, Wellman, Inc., we are notifying the Agency that we are adding a claim that is consistent with an existing marketing claim for the product Wellcare ADM[®] [Finished Article] (EPA Reg. No. 79427-3). The approved label states "Kills Dust mites." In this notification, we are adding the statement "Anti-Dust Mite [Product] [Pillow] [Comforter] [Mattress Pad]." We believe that this new claim is allowed as a notification under PR-Notice 98-10 II.N. (minor label change consistent with 40 CFR Part 156).

We note that the "Anti" claim has been considered consistent with a general control or kills claim as EPA has approved "Antimicrobial," "Anti-Flies," "Anti-Insect," "Anti-Allergen," "Anti-Flea," "Anti-Pest" to name a few. EPA has registered products that use this term in their product names. Examples of these registered products are:

One Drop Anti-Flea & Tick Treatment 2 (EPA Reg. No. 69332-1)
Zoecon Apistan Anti-Varroa Mite Strip (EPA Reg. No. 2724-406)
Bug Guard Anti-Insect Spray (EPA Reg. No. 49596-1)
Misty Anti-Crawl III (EPA Reg. No. 10807-197).

In preparing this notification, we noticed that the label contained a typographical error in the registrant address. The correct address is Fort Mill, SC. The Fort Mill, SC address is consistent the EPA's Registrant Name and Address database.

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

4/16

KELLER AND HECKMAN LLP

Joyce Edwards

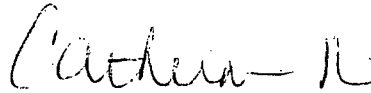
February 16, 2007

Page 2

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.

Attached is a copy of this proposed label with this notification highlighted. Please contact me at the above number if you have any questions.

Sincerely,



Catherine Rice
Scientist

Wellcare ADM[®] Finished Article:

Wellcare ADM[®] [Finished Article]



"Kills Dust mites on the fiber fill that may be a source of home allergens"

Anti-Dust Mites [Product] [Pillow] [Comforter] [Mattress Pad]

ACTIVE INGREDIENT*:

Boron oxide 0.6%

OTHER INGREDIENTS 99.4%

Total..... 100.0%

*Weight percent of boron oxide in fiber fill only

Wellman, Inc.
Fort Mill, SC 29715

EPA Reg. No. 79427-3

EPA Establishment No.

Net Weight: _____ lb (_____ kg)

Wellcare ADM[®]
[Finished Article]

**"The fiber fill in this product kills
dust mites, even after ten
machine washings."**

CAUTION

Active Ingredient:*

boron oxide..... 0.6%

Other ingredients.....99.4%

Total.....100%

*Weight percent of boron oxide in
fiber fill only.

EPA Reg. No. 79427-3

EPA Est. No. 83597-CA-001

Refer to the label accompanying this
product for complete Directions for
Use, Precautionary Statements, and
Disposal Instructions.

5/16

PRECAUTIONARY STATEMENTS

HAZARDS TO HUMANS AND DOMESTIC ANIMALS

CAUTION

CAUTION: Fibers contained in this product can cause moderate physical eye irritation. Avoid contacting fiber in the pillow with eyes.

FIRST AID

If Fibers Get 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 eye.
- Call a poison control center or doctor for treatment advice

Have product container or label with you when calling a poison control center or doctor, or going for treatment. You may also contact 1-800-835-2044 for emergency medical treatment information.

Disposal

Disposal:

Place in trash or offer for recycling if available. Call your local solid waste agency or 1-800-CLEANUP for disposal instructions.

Directions for Use

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

Wash and thoroughly dry separately from other items. If this article is damaged exposing fill fibers, immediately dispose in accordance with the disposal instructions on the label.

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6/10