

## **PLEASE NOTE**

**This image contains more than one label  
approved for this product on this date.**



Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060

	United States <b>Environmental Protection Agency</b> Washington, DC 20460	<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**

<b>1. Company/Product Number</b> 81117-1	<b>2. EPA Product Manager</b> John Hebert	<b>3. Proposed Classification</b> <input type="checkbox"/> None <input type="checkbox"/> Restricted
<b>4. Company/Product (Name)</b> Ropel Bulb Protect.R	<b>PM#</b> 19	
<b>5. Name and Address of Applicant (Include ZIP Code)</b> MCB, LLC 3265 St. James Drive Boca Raton, FL  <input checked="" type="checkbox"/> Check if this is a new address	<b>6. Expedited Review.</b> 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 _____	<b>NOTIFICATION</b> DEC 16 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.) *Basic CSP status 7/2004*  
 Change in Company Name and EPA Reg. No.

**Section - III**

<b>1. Material This Product Will Be Packaged In:</b>				<b>2. Type of Container</b>	
<b>Child-Resistant Packaging</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Unit Packaging</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Water Soluble Packaging</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____	If "Yes" Unit Packaging wgt.	No. per container 12
* Certification must be submitted		If "Yes" Package wgt	No. per container		
<b>3. Location of Net Contents Information</b> <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container		<b>4. Size(s) Retail Container</b> 16, 32, 128 oz, 5 gal		<b>5. Location of Label Directions</b> <input type="checkbox"/>	
<b>6. Manner in Which Label is Affixed to Product</b>				<input checked="" type="checkbox"/> Other <u>sleeve</u>	

**Section - IV**

<b>1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)</b>		
<b>Name</b> Roger Brown	<b>Title</b> President	<b>Telephone No. (Include Area Code)</b> 631-694-9000
<b>Certification</b> 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.		<b>6. Date Application Received (Stamped)</b>
<b>2. Signature</b> 	<b>3. Title</b> Regulatory Compliance Associate	
<b>4. Typed Name</b> Susan Crewey	<b>5. Date</b> 10/28/04	

**DIRECTIONS FOR USE**

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

**USE RESTRICTIONS**

**DO NOT USE THIS PRODUCT ON EDIBLE CROPS. DO NOT USE ON SUGARING MAPLE TREES. ONLY APPLY OUTDOORS.**

**PRE-APPLICATION DIRECTIONS:**

- DAMAGE TO PLANTS (PHYTOTOXICITY):** This product does not cause damage to plant tissues, however, because plant susceptibility varies widely, test RO•PEL on a few leaves or blossoms for plant damage before treating entire plantings and use only on seeds tested first for effects on germination.
- DAMAGE TO PAINTED/STAINED SURFACES, FABRICS & PLASTICS:** Test a small area to determine if RO•PEL will damage these surfaces.
- READY-TO-USE RO•PEL** must be used at full strength. Do not mix this product with any other chemical.
- EQUIPMENT:** Do not use mist blowers or ultra-low volume application equipment to apply this product.
- SURFACE CONDITIONS:** Surfaces to be treated must be dry. Do not apply this product on rainy, snowy or windy days, or if precipitation is predicted within the next 24 hours. Do not irrigate treated plants within 24 hours before or after application.
- TEMPERATURE CONDITIONS:** Do not use this product at temperatures below 32° F or above 90° F.
- COVERAGE:** One gallon of RO•PEL will properly treat 1,000 to 4,000 sq. ft., depending upon surface conditions and porosity of items being treated.

**WARRANTY STATEMENT:** The proper storage, use and disposal are beyond our control. Seller makes no warranty, expressed or implied, concerning the use of this product other than indicated on the label. Buyer assumes all risks of use and handling of this material especially when such use and handling are contrary to label instructions.

Manufactured for  
**GRANT LABORATORIES, INC.**  
Registered and Guaranteed by MCB, LLC  
Boca Raton, FL  
Form 234-01  
Patents Pending  
EPA Reg. No. 81117-1  
EPA Est. No. 16-VA-1A  
063416-MN-001s, 44641-CA-1e  
Subscript used is first letter  
of run code on container.



# RO•PEL

## Bulb Protect•R

ANIMAL, RODENT & BIRD REPELLENT



BIRDS

SQUIRRELS

<b>ACTIVE INGREDIENTS</b>	
Denatitium Saccharite	0.065%
Thymol	0.035%
<b>INERT INGREDIENTS</b>	
TOTAL	100.000%

**KEEP OUT OF REACH  
OF CHILDREN  
CAUTION**

See side panel for additional  
precautionary statements.

Net Contents  
1 qt. (946 ml)

**PRECAUTIONARY STATEMENTS**

**CAUTION**

Because of extremely unpleasant, bitter taste, avoid contact with mouth, eyes, skin, clothing, and food. Avoid breathing spray. Discard contaminated food. Wash hands with soap and water before eating, drinking, chewing gum, using tobacco or using the toilet.

**ENVIRONMENTAL HAZARD**

Do not apply directly to water. Do not contaminate water when disposing of equipment washwaters or rinsate.

**STORAGE & DISPOSAL**

**STORAGE:** Store in original container, in a dry place inaccessible to 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 call CHEMTREC AT 1-800-424-9300 for disposal instructions. Never place unused product down any indoor or outdoor drain.

**TO PREVENT GRAZING, NIBBLING, BITING, EATING, LICKING, CHEWING, GNAWING AND BROWSING DAMAGE:** inflicted by deer (*Odocoileus*), beaver (*Castor*), rats (*Rattus spp.*), dogs (*Canis*), and cats (*Felis catus*): Apply RO•PEL full strength. Do not mix with any other chemicals. Do not apply on rainy or windy days. Treat surfaces you wish to protect until ALL surfaces are completely wet. Allow surfaces to dry, then apply as a second treatment.

Apply RO•PEL by the following methods.

**TO PROTECT TREES, POLES, FENCES, SIDING, OUTDOOR FURNITURE AND SIMILAR OBJECTS:** Treat all surfaces to be protected with a coarse sprayer (such as a tank sprayer) or by painting with a brush until treated surfaces are completely wet.

**TO PROTECT SHRUBS, ORNAMENTAL PLANTS, GRASS & FLOWERS:** Treat all surfaces (including both sides of leaves) with a coarse sprayer until wet.

**TO PROTECT GARBAGE:** Treat bags of garbage and exposed garbage with a coarse sprayer on all surfaces to be protected, including the trash container, until all surfaces are wet. Allow to dry before handling.

**TO PROTECT SEEDS OR BULBS FROM BIRDS AND SQUIRRELS:** Soak in RO•PEL for one minute and allow to dry. (Use rubber gloves.) Plant in normal manner.

**RE-APPLICATION DIRECTIONS:** To improve effectiveness, make a second application in 2-7 days.

**NOT FOR USE ON EDIBLE CROPS!**

4-3/8"

10"

NOTIFICATION  
DEC 1 6 2004

2/3

# MCB, LLC

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## TRANSMITTAL LETTER

November 15, 2004

MCB, LLC  
3265 SAINT JAMES DR.  
BOCA RATON, FL 33434-3374

Mr. John Hebert  
Insecticide-Rodenticide Branch  
Registration Division  
US Environmental Protection Agency  
Office of Pesticide Programs  
1921 Jefferson Davis Highway  
Arlington, VA 22202

Dear Mr. Hebert,

Subject: Product 81117-1 Ropel Animal Rodent and Bird Repellent Notification, form 8570-1 of Confidential Statement of Formula (CSF), Form 8570-4, Product Label, changing the information to the new company name, MCB, LLC EPA Reg number 81117-1

Please refer to the enclosed:

1. Completed Notification Application, Form 8570-1; (1 page)
2. Completed Confidential Statement of Formula (CSF), Form 8570-4; (1 page)
3. A copy of the labeling with changes highlighted; (1 page)

Company Official: \_\_\_\_\_

Name: Roger Brown

Signature: [Handwritten Signature]

Company Name: \_\_\_\_\_

MCB LLC

Company Contact: \_\_\_\_\_

Roger Brown pres

Phone: \_\_\_\_\_

561-367-7997

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3265 SAINT JAMES DR • BOCA RATON, FL 33434-3374

TEL: 561-367-7997 • FAX: 561-892-8500

**NEXT**

**LABEL**



81117-1

12-16-2004

1/4

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060



United States  
Environmental Protection Agency  
Washington, DC 20460

Registration  
 Amendment  
 Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 81117-1	2. EPA Product Manager John Hebert	3. Proposed Classification <input type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Ropel Animal, Rodent, and Bird Repellent	PM# 19	
5. Name and Address of Applicant (Include ZIP Code) MCB, LLC 3265 St. James Drive Boca Raton, FL <input checked="" 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 _____	NOTIFICATION DEC 16 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.)  
Change in Company Name and EPA Reg. No. *Basic CSF label 9-27-04*

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
* Certification must be submitted		If "Yes" Unit Packaging wgt.	No. per container 12	<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
		If "Yes" Package wgt	No. per container	<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 16, 32, 128 oz, 5 gal		5. Location of Label Directions <input type="checkbox"/>	
6. Manner in Which Label is Affixed to Product <input checked="" type="checkbox"/> Lithograph Paper glued Stenciled				<input checked="" type="checkbox"/> Other sleeve	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)			
Name Roger Brown	Title President	Telephone No. (Include Area Code) 631-694-9000	
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 (Stampcd)	
2. Signature <i>Susan Crewey</i>	3. Title Regulatory Compliance Associate		
4. Typed Name Susan Crewey	5. Date 10/28/04		

2/4

FCRM: 2001 Front  
NAME: RO-PEL Animal Repellent  
KIND: Pressure Sensitive  
DATE: 10-27-04

PRODUCT SIZE: 1 gal. (3.8 liters)  
FINISHED SIZE: 5-1/2" (5.5") W x 6" (6.00)" H  
UPC: 0 50518 96753 1  
TEMPLATE: CCL

RO-PEL

OCT 28 2004

10/28/04 11:14:18

Process Magenta  
Process Black  
PMS 485 M=100 Y=100

NOTIFICATION

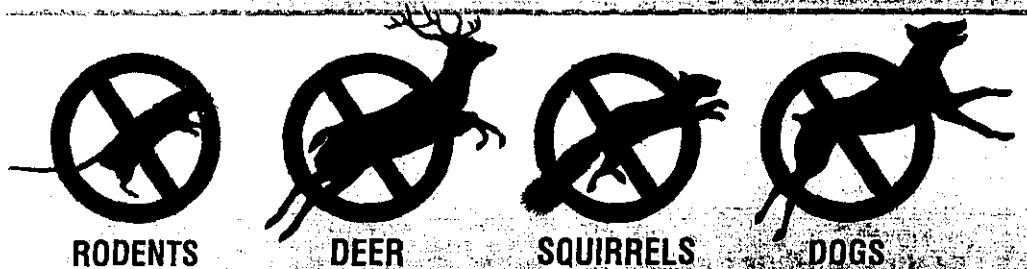
DEC 16 2004

6"

# RO-PEL

## Animal Repellent

RODENT & BIRD



***Stops specified animals and birds\* from chewing, gnawing, licking, nibbling and biting***

<b>ACTIVE INGREDIENTS:</b>	
Denatonium Saccharide	0.065%
Thymol	0.035%
<b>INERT INGREDIENTS:</b>	
	99.900%
<b>TOTAL</b>	<b>100.000%</b>

**KEEP OUT OF REACH OF CHILDREN**  
**CAUTION**

See back panel for additional precautionary statements

Net Contents  
(1 gal / 3.78L)

5-1/2"

3/4

FORM: 237-01 Back  
NAME: RO•PEL Animal Repellent  
KIND: Pressure Sensitive  
DATE: 10-27-04

PRODUCT SIZE: 1 gal. (3.8 liters)  
FINISHED SIZE: 5-1/2" (5.5") W x 6" (6.00") H  
UPC: 0 50518 96753 1  
TEMPLATE: CCL

Process Magenta  
Process Black  
PMS 485 M=100 Y=100

PERFECT

007 9 6 2005

IPCO TRAINING

# RO•PEL Animal Repellent

## PRECAUTIONARY STATEMENTS

### CAUTION

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Manufactured for  
**GRANT LABORATORIES, INC.**  
Registered and Guaranteed by MCB, LLC  
Boca Raton, FL Patents Pending  
Form 232-04  
EPA Reg. No. 81117-1  
EPA Est. No. 18-VA-1A  
083418-MN-001a, 44641-CA-1E  
Subscript used is first letter  
of run code on container.



6"

5-1/2"



# MCB, LLC

4/4

## TRANSMITTAL LETTER

November 15, 2004

MCB, LLC  
3265 SAINT JAMES DR.  
BOCA RATON, FL 33434-3374

Mr. John Hebert  
Insecticide-Rodenticide Branch  
Registration Division  
US Environmental Protection Agency  
Office of Pesticide Programs  
1921 Jefferson Davis Highway  
Arlington, VA 22202

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3. A copy of the labeling with changes highlighted; (1 page)

Company Official:

Roger Brown  
Name:

[Signature]  
Signature

Company Name:

MCB LLC

Company Contact:

Roger Brown pres

Phone:

561-367-7997

3265 SAINT JAMES DR • BOCA RATON, FL 33434-3374  
TEL: 561-367-7997 • FAX: 561-892-8500