



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, DC 20460

JAN - 7 2011

OFFICE OF CHEMICAL SAFETY
AND POLLUTION PREVENTION

Catherine M. Byrd
Agent for ZappaTec, LLC
Wagner Regulatory Associates, Inc.
7460 Lancaster Pike
Suite 9
Hockessin, DE 19707

FILE COPY

Subject: Zap-Out
EPA Reg. No. 87708-1
Application Dated: December 16, 2010
Receipt Date: December 17, 2010

Dear Ms. Byrd:

The following notification submitted in connection with registration under the provisions of PR Notice 98-10, Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) section 3(c)9 is acceptable.

Proposed Notification:

- Labeling revision to update Storage and Disposal Statement per PR Notice 2007-4

Comments:

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

This application for notification to revise the label, as referenced above, is acceptable.

Should you have any questions concerning this letter, please contact me at Henson.Wanda@epa.gov or call (703) 308-6345.

Sincerely,

A handwritten signature in black ink that reads "Wanda Henson".

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

<p>United States Environmental Protection Agency Washington, DC 20460</p>		Registration	OPP Identifier Number
		Amendment	
	<input checked="" type="checkbox"/>	Other	

Application for Pesticide - Section I

1. Company/Product Number 87708-1	2. EPA Product Manager Wanda Henson	3. Proposed Classification <input checked="" type="checkbox"/> None Restricted
4. Company/Product (Name) Zappa-Tec LLC/Zap-Out	PM# 32	
5. Name and Address of Applicant (Include Zip Code) Zappa-Tec LLC c/o Wagner Regulatory Associates, Inc. P.O. Box 640 Hockessin, DE 19707 <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.

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
* Certification must be submitted		If "Yes" Unit Packaging wgt. 96 oz	No. per container 24	If "Yes" Package wgt.	No. per container
				<input type="checkbox"/> Metal	<input checked="" type="checkbox"/> Plastic
				<input type="checkbox"/> Glass	<input type="checkbox"/> Paper
				<input type="checkbox"/> Other (Specify) HDPE lined bags	

3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container 4.2 oz (122.1g)	5. Location of Label Directions <input type="checkbox"/> On Label <input checked="" type="checkbox"/> On Labeling accompanying product
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6. Manner in Which Label is Affixed to Product	<input type="checkbox"/> Lithograph	<input type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> Paper glued	
	<input type="checkbox"/> Stenciled	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Catherine M. Byrd	Title Agent for Zappa-Tec LLC	Telephone No. (Include Area Code) (302) 234-2780

<p style="text-align: center;">Certification</p> <p>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.</p>		6. Date Application Received _____ (Stamped)
2. Signature 	3. Title Agent for Zappa-Tec LLC	
4. Typed Name Catherine M. Byrd	5. Date 12/16/2010	

Zappa-Tec, LLC
www.zappa-tec.com

ZAP-OUT

THE EFFICACY OF THIS PRODUCT HAS BEEN DEMONSTRATED IN THE PRESENCE OF 20% BLOOD SERUM

ACTIVE INGREDIENT:

Sodium Dichloro-s-triazinetriane dihydrate 10.2%

OTHER INGREDIENTS **89.8%**

TOTAL **100.0%**

(Available Chlorine 5.6%)

EPA Reg. No. 87708-1

EPA Est. No. _____

Net Weight: 4.2 oz (122 g)

KEEP OUT OF REACH OF CHILDREN

DANGER

FIRST AID

Have the product container or label with you when you call a poison control center or doctor, or when going for treatment.

IF IN EYES:

- Hold eye open and rinse slowly and gently with water for 15-20 minutes.
- Remove contact lenses, if present, after the first five minutes, then continue rinsing eye.
- Call a poison control center or doctor for treatment advice.

IF ON SKIN OR CLOTHING:

- 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:

- Call poison control center or doctor immediately for treatment advice.
- Have person sip a glass of water, if able to swallow.
- Do not induce vomiting unless told to by poison control center or doctor.
- Do not give anything by mouth to an unconscious person.

IF INHALED:

- Move person to fresh air.
- If person is not breathing, call 911 or ambulance, then give artificial respiration, preferable mouth to mouth.
- Call poison control center or doctor for further treatment advice.

In case of accidental exposure, call CHEMTREC at 1-800-424-9300

NOTE TO PHYSICIAN: Probable mucosal damage may contraindicate the use of gastric lavage.

**PRECAUTIONARY STATEMENTS
HAZARDS TO HUMANS AND DOMESTIC ANIMALS**

DANGER. Corrosive. Causes irreversible eye damage. Causes skin irritation. Harmful if swallowed, inhaled, or absorbed through skin. Do not get in eyes, on skin or on clothing. Wear goggles, face shield or safety glasses and rubber gloves when handling. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, using tobacco, or using the toilet. Remove and wash contaminated clothing before reuse.

ENVIRONMENTAL HAZARDS

This product is toxic to fish and aquatic organisms. Do not discharge into lakes, streams, ponds, or other waters unless in accordance with requirements of a National Pollutant Discharge Elimination System (NPDES) permit. 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 U.S. Environmental Protection Agency.

PHYSICAL OR CHEMICAL HAZARDS: This product is an oxidizer. Do not mix with acids. Avoid breathing dust from powder.

DIRECTIONS FOR USE

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

Liquid Medical Waste
Encapsulation and Treatment
For Use Only in Health Care and Veterinary Facilities

This product treats 3000cc of fluid.

This product is intended for use with suction canisters.

Always wear hand and eye protection when handling infectious waste.

For Zap-Out Bottle

- Shake well to thoroughly mix the Zap-Out powder.
- Turn off suction and remove patient tubing.
- Remove the top of the access port.
- Remove the top from the Zap-Out bottle.
- Allow the contents to pour into the canister. Be sure all Zap-Out powder is poured into the suction canister.
- Remove the Zap-Out bottle and cap the open access port.
- Allow sufficient time for solidification.
- Dispose of encapsulated material according to institutional procedures and Federal, State and Local regulations.

For Zap-Out Pak (dissolvable pack)

- Prior to beginning the procedure drop the Zap-Out Pak into the vessel.
- As fluid is introduced into the vessel the Zap-Out Pak powder is released.
- Allow sufficient time for solidification.
- Dispose of encapsulated material according to institutional procedures and Federal, State and Local regulations.

See side panel for additional precautionary statements.

STORAGE AND DISPOSAL

Do not contaminate water, food or feed by storage or disposal.

STORAGE: Keep in a cool, dry place. Keep container tightly closed. Maintaining a spill kit and fire extinguisher on hand and having emergency phone numbers posted will allow you to prepare for emergencies.

PESTICIDE DISPOSAL: Pesticide wastes are toxic. Improper disposal of excess pesticide is a violation of Federal law. If these wastes cannot be disposed of by use according to label instruction, contact your state pesticide or environmental control agency, or hazardous waste representative of the nearest EPA Regional Office for guidance.

CONTAINER DISPOSAL:

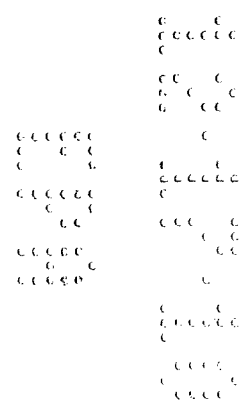
Nonrefillable container (Plastic Bottle). Do not reuse or refill this container. Triple rinse container (or equivalent) promptly after emptying. Triple rinse as follows. Empty the remaining contents into suction canister. Fill the container ¼ full with water and recap. Shake for 10 seconds. Pour rinsate into suction canister or store rinsate for later use or disposal. Drain for 10 seconds after the flow begins to drip. Repeat this procedure two more times. Offer for recycling, if available 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.

Nonrefillable container (Water Soluble Packet). Do not reuse or refill this container. Offer for recycling, if available or dispose of the empty outer plastic or foil pouch in the trash as long as the water soluble packet is unbroken.

Zap-Out is a trademark of Zappa-Tec, LLC

**Manufactured by:
Zappa-Tec, LLC
828 Knox Road
McLeansville, NC 27301**

Made in the U.S.A.



Batch code: _____

REORDER NO. ZAPOUT 3000