

 United States Environmental Protection Agency Office of Pesticide Programs Registration Division (TS-767) Washington, DC 20460		For State Use Only	
		Registration No. Assigned	
		Date Registration Issued	
Application for/Notification of State Registration of a Pesticide To Meet a Special Local Need <i>(Pursuant to Section 24(C) of the Federal Insecticide, Fungicide, and Rodenticide Act, as Amended)</i>			
1. Name and Address of Applicant for Registration		2. Product is (Check one)	
		☐ EPA Registered ☐ New (not EPA-registered) Attach EPA Form 8570-4, Confidential Statement of Formula, fix now products.	
		EPA Registration Number	
		EPA Company Number	
3. Active Ingredient(s) in Product			
4. Product Name		5. If this is a food/feed use, a tolerance or other residue clearance is required. Cite appropriate regulations in 40 CFR Part 180, 185, and/or 186.	
6. Type of Registration (Give details in Item 13 or on a separate page, property identified and attached to this form).		7. Nature of Special Local Need (check one)	
a. To permit use of a new product.		☐ There is no pesticide product registered by EPA for such use.	
b. To amend EPA registrations for one or more of the following purposes:		☐ There is no EPA-registered pesticide product which, under the conditions of use within the State, would be as safe and/or as efficacious for use within the terms and condition of EPA registration	
☐ (1) To permit use on additional crops or animals.		☐ An appropriate EPA-registered pesticide product is not available.	
☐ (2) To permit use at additional sites.			
☐ (3) To permit use against additional pests.		8. If this registration is an amendment to an EPA-registered product, is it for a "new use" as defined in 40 CCFR 152.3?	
☐ (4) To permit use of additional application techniques or equipment.		☐ Yes (discuss in item 12 below) ☐ No	
☐ (5) To permit use at different application rates.		9. Has an EPA Registration or Experimental Use Permit for this chemical ever been (check applicable box(es), if known):	
☐ (6) Other (specify below).		☐ Sought ☐ Issued ☐ Denied ☐ Canceled ☐ Suspended ☐ Registration ☐ Experimental Use Permit ☐ No Previous Permit Action	
10. Has FIFRA section 24(c) registration for this use of the product ever, by another State, been (check appropriate box(es), if known):		11. Endangered Species Act: (Give details in Item 13 or on a separate page, properly identified and attached to this form)	
☐ Sought ☐ Issued ☐ Denied ☐ Revoked If any of the above are checked, list States in item 13 below ☐ No FIFRA section 24(c) Action		Identify the counties where this pesticide will be used. If Statewide, Indicate "all". Provide a list of Federally protected endangered/threatened species which occur in the areas of proposed use.	
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.		12. Indicate use statue of Special Local Need, i.e., planned dates of use:	
Signature of Applicant or Authorized Representative		From: _____ To: _____	
Title		13. Comments (attach additional sheet, if needed)	
Telephone Number			
Date			
Determination by State Agency			
This registration is for a Special Local Need and is being issued in accordance with section 24(c) of FIFRA as amended. To the best of our knowledge, the information above is correct, except as noted in "Comments" below or in attachments.			
Name, Title, and Address of State Agency Official		Comments (by State Agency Only)	
Title			
Telephone Number			
Date			
		Received by EPA	