|  |  |
| --- | --- |
| **Universal Form**  Form is accepted by certain state agencies. | **FIFRA 25(b) Minimum Risk Pesticide Statement of Formula**  \*\*ALL FIELDS ARE REQUIRED\*\* |

Submitted to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Page \_\_\_\_ of \_\_\_\_

(Specific State)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_-25b-\_\_\_\_\_\_\_\_**

**Company Name Product Name Product REG Number**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Active Ingredients (components in formulation):** | | | | | |
| **Common Chemical Name** | **CAS #** | **Name of Supplier** | **Contact Information (Telephone, E-mail)** | **Function** | **% by Weight** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Percentage of Active Ingredients** | | | | |  |
| **Inert Ingredients:** | | | | | |
| **Common Chemical Name** | **CAS #** | **Name of Supplier** | **Contact Information (Telephone, E-mail)** | **Function** | **% by Weight** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Percentage of Inert Ingredients** | | | | |  |
| **Total Percentage of All Ingredients (must equal 100%)** | | | | |  |

By signing this Statement of Formula, I understand that it may be shared with both other state pesticide lead agencies that regulate FIFRA 25(b) products exempt from EPA regulation and interested EPA officials.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name and Title Signature Date

|  |  |  |
| --- | --- | --- |
| **Explanation of Terms:**  **Product REG Number:** This number is made up of the following information: EPA Company Number – 25b – the number of this product in the state registration. For example: if this is the 5th 25b product registration submitted by your company the number would be XX-25b-5  **Common Chemical Name and Chemical Abstract Service (CAS) Number:** Active ingredients must be listed in 40 CFR 152.25 (f)(1) as exempt. Inert ingredients must be listed in Inert Ingredients Eligible for FIFRA 25(b) Pesticide Products 77 FR 76979.  **Name of Supplier:** List primary supplier on this form and additional suppliers for an ingredient on the supplemental form.  **Contact Information:** Include phone number or e-mail contact information (same for active and inert).  **Function:** Include the purpose of the ingredient as performed in the formulation. Ingredient may have multiple functions. For example: Cedarwood Oil is a repellent, Water is a diluent.  **Percent by Weight:** List a specific value for each ingredient in the formulation. A range of values will not be accepted. | | **State Use Only** |
| **Universal Form**  Form is accepted by certain state agencies. | **FIFRA 25(b) Minimum Risk Pesticide Statement of Formula**  \*\*ALL FIELDS ARE REQUIRED\*\* | | |

Submitted to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Page \_\_\_\_ of \_\_\_\_

(Specific State)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_-25b-\_\_\_\_\_\_\_\_**

**Company Name Product Name Product REG Number**

**Supplemental Form for Multiple Suppliers**

|  |  |  |
| --- | --- | --- |
| Common Chemical Name | CAS # | Name of Supplier |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |