toXcel

Toxicology & Regulatory Affairs
7140 Heritage Village Plaza
Gainesville, VA 20155-3061
USA

Phone: (703) 754-0248 **Fax: (703) 310-6950**

January 8, 2018

Document Processing Desk (DCI/AD)
ATTN: Mr. Richard Fehir, PM 36
US Environmental Protection Agency (7510P)
One Potomac Yard (South Building)
2777 South Crystal Drive
Arlington, VA 22202-4501

Re: 90-Day Response to #GDCI-043901-1668 (Glutaraldehyde) In Support of 74712-5, 74712-6, 74712-7, 74712-8, 74712-9, and 74712-10.

Dear Mr. Fehir,

On behalf of our client, Special Materials Company, we are hereby submitting our 90-day response to #GDCI-043901-1668 (Glutaraldehyde) in support of the following EPA registered products:

EPA Reg. No.	Product Name
74712-5	Avancid GL 45M
74712-6	Avancid GL 25
74712-7	Avancid GL 45
74712-8	Avancid GL50M
74712-9	Avancid GL50
74712-10	Avancid GL15

Special Materials Company intends on fulfilling the data requirements listed in the GDCI by submitting the required studies or waivers based on modelling data.

If you have any questions or require any additional information, I can be reached via e-mail at Connie.Welch@toxcel.com or by phone at (703) 754-0248 x 8118.

Sincerely,

Dr. Connie Welch
Vice President, Authorized Representative
toXcel, LLC

cc: Adam Feldman, CEO
Special Materials Company

United States Environmental Protection Agency
Washington, D.C. 20460

REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-3

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary.

1. Company Name and Address	2. Case # and Name	3. Date and Type of DCI and Number
SPECIAL MATERIALS COMPANY 7140 HERITAGE VILLAGE PLAZA GAINESVILLE, VA 20155	2315 - Glutaraldehyde Chemical # and Name: 043901 Glutaraldehyde	21-Sep-2017 GENERIC ID # GDCI-043901-1668

4. Guideline Requirement Number	5. Study Title	PROTOCOL	Progress Reports 1	2	3	6. Use Pattern	7. Test Substance	8. Time Frame (Months)	9. Registrant Response
	Applicator Exposure Data Requirements (Conventional Chemical)								
875.1400	Inhalation exposure–indoor (1, 2)	Y				R,S,X,Z,T,U,V	TGAI	24	9
	Nontarget Plant Protection Data Requirements (Conventional Chemical)								
850.4400	Aquatic Plant Toxicity Using Lemna spp (6)	N				R,S,X,Z,T,U,V	TGAI	12	1
	Post-Application Exposure Data Requirements (Conventional Chemical)								
875.2500	Inhalation exposure (1, 2)	Y				R,S,X,Z,T,U,V	TGAI	24	9
850.4500	Algal Toxicity (3, 4, 6)	N				R,S,X,Z,V,T,U	TGAI	12	1
SS-Migration	Migration studies (1, 5)	Y				R,S,X,Z,T,U,V	TGAI	12	9

10. Certification. I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law.

Signature and Title of Company's Authorized Representative D. Caldwell, VP, Tox Authorized Representative for Special Materials Company

11. Date 1/8/18

12. Name of Company Special Materials Company

13. Phone Number 703-754-0248

United States Environmental Protection Agency
Washington, D.C. 20460
DATA CALL-IN RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-4

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheet(s) if necessary.

1. Company Name and Address	2. Case # and Name	3. Date and Type of DCI and Number
SPECIAL MATERIALS COMPANY 7140 HERITAGE VILLAGE PLAZA GAINESVILLE, VA 20155	2315 - Glutaraldehyde Chemical # and Name: 043901 Glutaraldehyde	21-Sep-2017 GENERIC ID # GDCI-043901-1668

4. EPA Product Registration	5. I wish to cancel this product registration voluntarily	6. Generic Data		7. Product Specific Data	
		6a. I am claiming a Generic Data Exemption because I obtain the active ingredient from the source EPA registration number listed below.	6b. I agree to satisfy Generic Data Requirements as indicated on the attached form entitled "Requirements Status and Registrant's Response."	7a. My product is an MUP and I agree to satisfy the MUP requirement on the attached form entitled "Requirements Status and Registrant's Response."	7b. My product is an EUP and I agree to satisfy the EUP requirement on the attached form entitled "Requirements Status and Registrant's Response."
74712-10			x	N/A	N/A
74712-5			x	N/A	N/A
74712-6			x	N/A	N/A
74712-7			x	N/A	N/A
74712-8			x	N/A	N/A
74712-9			x	N/A	N/A

8. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law.

Signature and Title of Company's Authorized Representative Dr. Chris Wolf, VP, Toxcel Authorized Representative for Special Materials Company

9. Date 1/8/18

10. Name of Company Special Materials Company

11. Phone Number 703-754-0248