

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)

Company Name

Product Name

-25b-
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: Include phone number or e-mail contact information (same for active and inert). List primary supplier on this form and additional suppliers for an ingredient on the supplemental form.

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

