

## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460

## **DATA CALL-IN RESPONSE**

Form Approved.

OMB Control Nos. 2070-0057; 2070-0107; 2070-0122; 2070-0164

Paperwork Reduction Act Notice: The public reporting burden for this collection of information is estimated to average XXXX hour per response for reregistration and special review activities, including time for reading the instructions and completing the necessary forms. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Director, Collection Strategies Division (2822T), U.S. Environmental Protection Agency, Washington, DC 20460. Do not send the form to this address. INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form. Use additional sheets if necessary. 2. Case # and Name 3. Date and Type of DCI 1. Company Name and Address Chemical # and Name 4. EPA Product Registration 5. I wish to cancel this 6. Generic Data 7. Product Specific Data product registration voluntarily 6a. I am claiming a Generic Data 6b. I agree to satisfy Generic 7a. My product is an MUP and I 7a. My product is an EUP and I Exemption because I obtain the Data requirements as indicated agree to satisfy the MUP agree to satisfy the EUP on the attached for entitled requirements as indicated on the requirements as indicated on active ingredient from the source EPA registration number listed "Requirements Status and attached for entitled "Requirements the attached for entitled below. Registrant's Response." Status and Registrant's Response." "Requirements Status and Registrant's Response." 8. Certification 9. Date 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 fin or imprisonment or both under applicable law. Signature of Company's Authorized Representative 10. Name and Title (Please Print or Type) 11. Phone Number