



Environmental
Protection Agency

**Confidential Statement of Product
Specifications - DRAFT**

Health
Canada



1. Page of

• Please read the instructions

• Please type or print clearly in black ink

• Leave shaded areas blank

• This form can be saved using Adobe Acrobat

Preliminary Questions	2. Canadian Registration <input type="radio"/> US Registration <input type="radio"/>	3. PMRA Formulation # & Version # <input type="text"/> <input type="text"/>	4. EPA Basic Formulation <input type="radio"/> OR Alternate Formulation No. <input type="text"/>	Date Received YYYY-MM-DD <input type="text"/>	Submission/File No. <input type="text"/>
	5. Is the product a Repack? <input type="radio"/>		6. Is the product a Microbial? <input type="radio"/>		7. Does the product have food uses? <input type="radio"/>
	8. What is the product type? Technical Grade Active Ingredient <input type="radio"/> Integrated Systems Product <input type="radio"/> End Use Product <input type="radio"/> Manufacturing Concentrate <input type="radio"/>				

General Information						
Product	9. Product Name <input type="text"/>		10. Product Regn No. <input type="text"/>	11. Name of Applicant/Registrant <input type="text"/>		
	12. Formulation Type Code <input type="text"/>		13. Specific Gravity/Density Units <input type="text"/> to <input type="text"/>	14. @ Temp Units <input type="text"/> <input type="text"/>	15. Weight/Formulated Piece Units <input type="text"/> <input type="text"/>	
Properties	16. Flash Point Units <input type="text"/> <input type="text"/>		17. Flame Extension Units <input type="text"/> <input type="text"/>		18. Viscosity (mPa(s)) <input type="text"/>	19. pH Range <input type="text"/>

Certification of Approving Official					Company Code <input type="text"/>
"I certify that all the information contained within this form is true and complete"					
20. Is this CSPS being provided on behalf of another Applicant/Registrant (3 rd Party Confidential)? Yes <input type="radio"/> No <input type="radio"/>					
21. Position Title <input type="text"/>		22. Name <input type="text"/>		23. Signature <input type="text"/>	
24. Address <input type="text"/>				25. City <input type="text"/>	
26. Province/State <input type="text"/>				27. Country <input type="text"/>	
28. Postal Code/ZIP <input type="text"/>		29. Date YYYY-MM-DD <input type="text"/>		30. Phone No. XXX-XXX-XXXX <input type="text"/>	
31. Fax XXX-XXX-XXXX <input type="text"/>		32. email <input type="text"/>			

Agency/Office Review						
Screened by	Date YYYY-MM-DD <input type="text"/>	Reviewer <input type="text"/>		Approved by	Date YYYY-MM-DD <input type="text"/>	Reviewer <input type="text"/>

Product Name				Product Registration No.		Date Received YYYY-MM-DD		Submission/File No.		1. Page <input type="checkbox"/> of <input type="checkbox"/>		
Components												
Names	33. Row	34. <input type="radio"/> Active <input type="radio"/> Formulant/Inert <input type="radio"/> Impurity		36. Trade Name		37. Common Name (ISO Proposed or Accepted)		38. Chemical Name (IUPAC or CAS name if applicable)				
		35. Is this a member of a set of multiple active guarantees, or alternate formulants/inerts? <input type="radio"/> Yes Set <input type="checkbox"/>										
Information and Limits	39. Reg. or Sub/File No.		40. %Purity	41. CAS#		42. Purpose in Formulation			43. % LCL	44. % Nominal	45. % UCL	46. %w/w
Label Guarantee	47. Label Guarantee					48. Value	49. Units	Certified Limits of Label Guarantee (for pure active ingredient)		50. LCL	51. UCL	
Microbial and Other	52. Culture Collection Deposit			53. Potency		54. Viability		55. Other information				
Admin.	ACT IN		ACT OUT		NACT	LIST	ACTIONS			PC Codes		
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Admin.	ACT IN		ACT OUT		NACT	LIST	ACTIONS			PC Codes		
											56. Total weight (%)	

Product Name <input style="width:95%;" type="text"/>	Product Registration No. <input style="width:95%;" type="text"/>	Date Received <input style="width:95%;" type="text" value="YYYY-MM-DD"/>	Submission/File No. <input style="width:95%;" type="text"/>	1. Page <input type="checkbox"/> of <input type="checkbox"/>
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Sites & Suppliers

57. <input type="radio"/> Manufacturing Site <input type="radio"/> Formulating Site <input type="radio"/> Formulant Supplier	58. Row Number(s) of the Component(s) <input style="width:95%;" type="text"/>	59. Name <input style="width:95%;" type="text"/>	60. Address <input style="width:95%;" type="text"/>	61. City <input style="width:95%;" type="text"/>	Company Code <input style="width:95%;" type="text"/>
		62. Province/State <input style="width:95%;" type="text"/>	63. Country <input style="width:95%;" type="text"/>	64. Postal Code/ZIP <input style="width:95%;" type="text"/>	
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