

Checklist for Requesting a Section 18 Emergency Exemption from Registration in Wisconsin

Instructions:

This checklist is a companion piece to the *Guide to Requesting Section 18 Emergency Exemptions in the State of Wisconsin*. The Guide provides a detailed discussion of the information needed for your request. The checklist is used ensure that all required information is submitted and presented in organized manner. Complete this checklist and attach all required documents.

Note- <u>Use of this checklist is **NOT** required to submit an application</u>, however by utilizing this checklist, an applicant will ensure that all required information is included and presented in organized manner.

Submit all required information to Alyssa Foss at alyssa.foss@wisconsin.gov. If your application materials will exceed 10 MB, submit clearly identified separate e-mails with smaller attachments. Any questions about a Section 18 request can be submitted to Alyssa Foss at 608-224-4547 or at alyssa.foss@wisconsin.gov.

If at any time the provided space is not large enough to accommodate your full and complete description, please add an attachment labeled with the corresponding section. For example "Attachment A-4" corresponds to the description of the postposed use.

A. General Information Required For All Emergency Exemptions - 40 CFR 166.20(a).

1. Type of Exemption. (The lettered sections refer to the *Guide to Requesting Section 18 Emergency Exemptions.*)

Specific - Complete Sections A and B
Repeat Request - Complete Only Section C
Public Health - Complete Sections A and D
Quarantine - Complete Sections A and E

Crisis - Complete Sections A and F in addition to either B, C, or D.

- 2. Contact Persons (If the same person is representing multiple roles, only fill in the name field for subsequent contact information)
 - a. Technical/Scientific Aspects Contact

•	Name:
•	Job title or Business Unit:
•	Company name:
•	Mailing address:
•	City, State ZIP:
•	Phone number:
•	F-mail address:

		b. Economic Aspects Contact				
		Name:				
		Job title or Business Unit:				
		Company name:				
		Mailing address:				
		City, State ZIP:				
		Phone number:				
		E-mail address:				
		c Porticido Pogistrant Contact				
		c. Pesticide Registrant Contact				
		Name: lob title or Business Unit:				
		Job title or Business Unit: Company name:				
		Company name: Mailing address:				
		Mailing address:				
		City, State ZIP: Dhaga a green had.				
		Phone number:				
		E-mail address:				
3.	Descri	Description of the Pesticide				
	a.	Active Ingredient:				
		Trade Name:				
		Formulation:				
		EPA Registration Number:				
		Registrant/Manufacturer:				
4.	Descri	ption of the Proposed Use				
		Sites to be Treated:				
	b.	Method of Application:				
		Rate of Application:				
		Maximum Number of Applications:				
		Total Acreage to be Treated:				
	f.	Total Amount of Pesticide to be used:				
	g.	Use Season:				
		Earliest Possible Harvest Dates:				
	i	Other Restrictions User Precautions and Requirements:				

j. Attach a proposed Section 18 supplemental label for this use.

5. Alternate Methods of Control

- a. A discussion of why registered alternative pesticides are not effective.
- b. A discussion of why alternative cultural control practices are not effective.

6. Efficacy of the Proposed Use

Attach data, a discussion of field trials, or other evidence that provide the basis for the conclusion that the proposed pesticide treatment will be effective in dealing with the emergency.

7. Discussion of Residues for Food Uses

- a. Existing EPA Tolerance under 40 CFR 180. ______
- b. No food uses for this request
- c. Time limited tolerance required
 - i. List the food(s) likely to contain pesticide residues along with an estimate of the maximum amount of residue to occur based on the proposed use. Provide information on how the estimates are determined.

8. Discussion of Risk Information

- a. Human Health
 - i. SDS Sheet
 - ii. Risks to Groundwater
 - iii. Residential Uses (if any)
 - iv. Information on the Pesticide's Mode of Action
 - v. Proposed worker protection language such as personal protective equipment, restricted entry interval, etc. (Note: only required if the pesticide is currently unregistered, if the pesticide is already registered with the EPA, reference the worker protection section of the federal label)
 - vi. A discussion of how this proposed use will not cause unreasonable harm to human health.

b. Environmental Risks

- i. Discussion of how endangered and threatened species will not be adversely affected by this emergency use.
- ii. List of endangered and threatened species in proposed use area.
- iii. Risks to beneficial organisms such as pollinators and a discussion of what steps will be taken to minimize risk to beneficial organisms.
- iv. Risks to fish and aquatic species and a discussion of what steps will be taken to minimize risk to fish and aquatic species.
- v. A discussion of any other environmental risks that may be applicable to this proposed use.

9. Coordination with Other Agencies

a. **No action required by the requestor**. DATCP will coordinate with relevant agencies and will include the following statement in the application to EPA:

"The Wisconsin DNR and the Wisconsin Fish and Wildlife Office of the U.S. Fish and Wildlife Service may be given a copy of this request. Any comments received will be forwarded to the U.S. EPA."

10. Registrant Support Letter

11. Enforcement Program

a. **No action required by the requestor**. DATCP will include the following statement in the application to EPA:

"The Wisconsin Department of Agriculture, Trade and Consumer Protection (WDATCP) has adequate authorities for enforcing provisions of Section 18 emergency exemptions. WDATCP will require the registrant (or manufacturer, if unregistered) of [the requested pesticide], XYZ Corporation, to prepare and make available to end users supplemental labeling that complies with WDATCP and EPA requirements for the emergency use, if approved."

12. Repeat Uses

- a. First Time Use
- b. Repeat Use
 - i. Repeat Use Details
 - ii. Attach Interim or Final Report

13. Progress Towards Registration

B. Additional Information Required for a Specific Exemption - 40 CFR 166.20(b)

N/A (Check N/A if requesting another type of exemption)

1. Pest to be Contro	olled
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a.	Common Name:	
h	Scientific Name	

- 2. Discussion of Emergency Condition
- 3. Environmental Benefits Information

N/A (Check N/A if not applicable)

- a. Benefits of the proposed exemption to endangered or threatened species
- b. Benefits of the proposed exemption to beneficial organisms
- c. Benefits of the proposed exemption to the environment

4. Discussion of Economic Loss Analysis

- a. Discussion of the anticipated significant economic loss. The EPA determines that a loss is significant if at least one of the following tiers is met. Attach supporting analysis to demonstrate economic loss. For additional guidance see pages 17-19 of the *Guide to Requesting Section 18 Emergency Exemptions in the State of Wisconsin*.
 - i. Tier 1- Yield loss of at least 20%
 - ii. Tier 2– Total economic loss of at least 20% of gross revenue
 - iii. Tier 3– Total economic loss of at least 50% of net operating revenue
- b. Any other information explaining the economic consequences of the emergency.

C. Information for Repeat Requests for a Specific Exemption - 40 CFR 166.20(b) (5)

N/A (Check N/A if requesting another type of exemption)

- 1. Emergency Condition Still Exists
- 2. Previous Information Still Accurate
- 3. Proposed Use Conditions Identical
- 4. Re-Certification Conditions and Limitations Satisfied
- 5. Continued Lack of Alternatives
- 6. Interim Report to EPA Submitted

	al Information Required for a Quarantine Exemption - 40 CFR 166.20(c) Check N/A if requesting another type of exemption)
	a. Common Name:
2. Ori	gin of Pest and the Means of its Introduction or Spread if Known
3. Ant	ticipated Impact of Not Controlling the Pest
	Il Information Required for a Public Health Exemption - 40 CFR 166.20(d) Check N/A if requesting another type of exemption)
i	a. Common Name:
2. Ved	ctored Disease Transmission
3. Ma	gnitude of Health Problems
4. Tre	atment for the Health Problem
F. Additiona	I Information Required for a Crisis Exemption - 40 CFR 166.43(b)
1. Dis	cussion of the Dire, Unpredictable, and Sudden Situation
2. Pes	ticide Use Timing