

Alternative Product Label Application RENEWALS ONLY

<u>Disclaimer</u>: This application is only intended to renew existing Alternative Approval Numbers and is not to be used for new alternative label applications. In some cases, updated models of products covered by a previously approved Alternative Approval Number may be added during the renewal process, provided they fall under the same product category, have the same justification, and employ identical labeling. However, the IMERC Member States reserve the right to require a new Alternative Product Label Application for any product(s) they determine to be outside the scope of the original approval.

IMPORTANT NOTES:

- All application materials must be submitted through the online reporting system (instructions here).
- Alternative renewals must be submitted at least 90 days prior to expiration to utilize this renewal form.
- Prepare a separate submission for each Alternative Approval Number to be renewed.
- Questions regarding this application should be directed to <u>IMERC@newmoa.org</u>.

date, and the specific products covered by the alternative.

1. Reporting Entity Information

Organization Name:	
Address:	
City/Town:	State/Province:
Country:	Zip:
Contact Person:	
Title:	
Telephone:	E-mail:
 Renewal Requirements a. IMERC Alternative App 	roval Number (e.g., IMERC 25-01-050 L, LAB, or SEN)
IMEI	RC
b. Expiration date of curre	ent Alternative Approval Number:
c. Upload a copy of your p	previous approval letter confirming the Alternative Approval Number, expira

d.	Have any products previously covered	d under this alternative been discontinued? ☐ Yes ☐ No			
	If <u>YES</u> , list the discontinued product identifier(s) below (e.g., model number, series, name) as written in the approval letter uploaded for part (c).				
e.	Are there any additional products to be included under this Alternative Approval Number that are \underline{not} listed in the approval letter uploaded for part (c)? \square Yes \square No				
	If <u>YES</u> , read the disclaimer on the first	t page before answering questions (i.) and (ii.) below.			
	 i. Do the additional products have too hot, limited space)? ☐ Yes 	e the same justification as the previously approved products (e.g.,			
	ii. Do the additional products use approval? ☐ Yes ☐ No	identical labeling to those listed in the current alternative			
	If you answered <u>NO</u> to both questions above (i. and ii.), you must submit a new Alternative Product Label Application to be reviewed and assigned a separate Alternative Approval Number.				
	If you answered YES to both questions above (i. and ii.), complete the table below.				
	<u>Table Instructions</u> : List each additional product identifier below (e.g., model number, series, name) and provide a link to a webpage demonstrating compliance with prior-to-purchase notice requirements for				
	mercury content and disposal. Attach an additional sheet if more space is needed. For any product				
	without an available webpage, upload a separate attachment showing how the product meets these requirements.				
	Product Identifier(s)	Product Webpage URL			

f. (Optional) Upload a separate attachment with any supplemental information you would like to provide for consideration during review of this application.

3. Certification Statement

I have personally examined and am familiar with the information submitted in this document and all attachments thereto. I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate, and complete to the best of my knowledge and belief. I certify that this application is on a complete and accurate Form as prescribed by the member states of the Interstate Mercury Education Reduction Clearinghouse Committee (IMERC) without alteration of text. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with the applicable IMERC members' state laws.

In addition, I attest that this renewal application proposes an alternative label identical to the expiring alternative – both in terms of the label specifications and the product or product categories included. Any additional product(s) as identified in (2)(d) above must be reviewed and approved by states before the product can be included in an existing alternative renewal.

ignature (of an Authorized Senior Management Official or Designee)	Date