

California Air Resources Board (ARB)
CONSUMER PRODUCT DETERMINATION APPLICATION FORM

Note: Please refer to the attached instructions before completing this form.

PART I. APPLICANT INFORMATION:

1. Responsible party?: Yes ☐ , No ☐
If "No", please provide an explanation in the cover letter.
2. Is an enforcement action in progress for the subject product? Yes ☐ , No ☐
Please be advised that ARB staff will not act on an application while an enforcement action is in progress for the product in question.
3. Company Name:
4. Mailing Address:
City: State: Zip Code: Country:
5. Contact Name and Title:
6. Contact Email Address:
7. Contact Telephone Number:
8. Contact Fax Number:
9. Company Website Address:

Part II. COVER LETTER:

Submit a signed letter on company letterhead requesting that ARB staff determine the category for a specific product currently marketed or proposed for marketing in California.

Part III. PRODUCT INFORMATION:

1. Product name:
2. Company name:
3. Product description:
4. Delivery or packaging system:
 - a. Impregnated wipes/towels/cloths/sheets/pads
 - b. Pressurized aerosol container:
 - c. Pump spray (i.e. spray/foam/liquid/trigger/tank):
 - d. Barrier pack or compartmentalized dispenser:
 - e. Jar/can/tub/box/bag/drum/pourable bottle:
 - f. Squeeze tube/squeeze bottle/cartridge:
 - g. Other (specify):
5. Dispensed form:
 - a. Post-foaming gel:
 - b. Foam/mousse:
 - c. Liquid:
 - d. Semisolid:
 - e. Solid:
 - f. Mist/dispersed spray:
 - g. Other (specify):
6. Dilution: Per product label, is this product sold as a concentrate and/or to be diluted?
Yes: No:

Email copy to joe.calavita@arb.ca.gov or mail to Joe Calavita, Manager, Implementation Section,
California Air Resources Board, Air Quality Planning & Science Division, 1001 I Street,
Sacramento, California 95814

- a. If yes, provide the following: Diluent:
- b. Most concentrated dilution ratio:
- c. Least concentrated dilution ratio:

7. Proposed category: _____; and/or unregulated (check if unregulated): ☐ *
8. Provide rationale for proposed category or unregulated status:

9. Attach product formula.

*NOTE: If the determination is for a product "form" for a new delivery or packaging system, complete information regarding the intended use must be submitted in this application.

Part IV. PRODUCT LABEL (FRONT AND BACK):

1. Attach product label.
2. File name:

Part V. PLANNED DATE OF INITIAL CALIFORNIA SALES:

1. Currently sold in California: Yes No
2. If "no", provide estimated date of sale in California:
3. If submitted product is not currently sold in California and an estimated date of sale is not known, please provide an explanation:

As the responsible party, I certify that all information submitted with this product determination application is true, accurate and correct.

Name _____ Date _____

Title _____

INSTRUCTIONS

APPLICATION FOR CONSUMER PRODUCT DETERMINATION

Parties who sell, supply, offer for sale, or manufacture for sale consumer products in California are responsible for complying with State and local regulations for consumer products. The California Air Resources Board (ARB) staff can help guide responsible parties to appropriate sections of the State of California consumer product regulation which pertain to their products or raw material components of their products. Responsible parties may also request formal determinations for specific products by submitting this form and necessary materials for each product.*

The purpose of the application form is to provide initial information to ARB staff in order to make the consumer product determination most efficient. In order to process the request efficiently, the application form and the required documentation (e.g., cover letter and label) should be complete upon submittal to ARB. The form and all supporting documentation should be scanned and emailed to joe.calavita@arb.ca.gov or mailed to Joe Calavita, Manager, Implementation Section, California Air Resources Board, Air Quality Planning & Science Division, 1001 I Street, Sacramento, California 95814.

If you have questions regarding the completion of this form, please contact robert.barrera@arb.ca.gov for assistance. You can download this form from the ARB website at: http://www.arb.ca.gov/consprod/regact/prod_determine/prod_determine.htm

Additional guidance on the product determination process can also be found here: http://www.arb.ca.gov/consprod/regact/prod_determine/pd_guide.pdf

*NOTE: Please be advised that ARB staff will not act on an application while enforcement action is in progress for the product in question.

PART I. APPLICANT INFORMATION

- Provide responsible party's name and contact information.
 - If applicant is not the responsible party of subject product, please provide an explanation in the cover letter.
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PART II. COVER LETTER

Submit a signed letter on company letterhead requesting a product determination. If necessary, provide additional information or clarification not covered by this form.

PART III. PRODUCT INFORMATION

In accordance with Title 17, California Code of Regulations (CCR), sections 91000 to 91022, and the California Public Records Act (Government Code Sections 6250 et seq.).

Instructions:

1. **Product Name-** Name of product as shown on principal display panel of product label.
2. **Company Name-** Company name as it appears on label.
3. **Product Description-** Provide information regarding detailed functions and attributes of product.

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4. **Delivery or Packaging System-** Check the box that describes the delivery or packaging system. If the provided options do not describe your product, indicate “other” and specify the delivery or packaging method.
5. **Dispensed Form-** Check the box that describes the form of this product as it is dispensed, or as it leaves the delivery or packaging system. If the options provided do not describe your product, indicate “other” and specify the dispensed form.
6. **Dilution Ratios-** Indicate by checking “yes” or “no” if this product is sold as a concentrate that requires dilution according to the product label. If “yes”, list the diluent and the dilution ratios for the most and least concentrated dilutions as specified on the product label.
7. **Proposed Category or Unregulated Status-** Consult regulatory definitions to determine proposed category, if any, for product. Current regulations can be found here:
<http://www.arb.ca.gov/consprod/regs/regs.htm>.
NOTE: If the determination is for a product “form” for a new delivery or packaging system, complete information regarding the intended use must be submitted in this application.
8. **Rationale for Proposed Category or Unregulated Status-** Provide a brief explanation for the proposed regulatory status of the submitted product.
9. **Attach product formula-** Attach a copy of the product formulation to the application.

PART IV. PRODUCT LABEL

Submit one copy of the camera-ready product label (front and back), including all label graphics, usage instructions, and other label information.

PART V. PLANNED DATE OF INITIAL CALIFORNIA SALES

Provide planned date of sale in California if not already sold in California.

For additional information refer to the following link:

<http://www.arb.ca.gov/consprod/consprod.htm>

If you require a special accommodation or need this information in an alternate format or language, please contact candace.clawson@arb.ca.gov or call 916-322-6021 as soon as possible. TTY/TDD/Speech to Speech users may dial 711 for the California Relay Service.