

# Referral to the Coordination Group under Article 35 of Regulation (EU) No 528/2012

## Executive summary

**Type of referral:** Referral to the Coordination Group of a disagreement on Mutual recognition (MR) in accordance with Article 35(2) of the Regulation (EU) No 528/2012 (BPR).

**Product name in the refMS:** Ameisen Köderdose (AEROXON)

**Case type:** Mutual recognition in sequence (MRS)

**Reference Member State (rMS):** AT

**Initiating concerned Member State (icMSs):** FR, UK

**Other Concerned Member States (cMSs):** DK, RO, PL, BG, HR, SI, SK, CZ, HU, FI, NO, SE, EL, NL, BE, PT, CY, IT, ES, IE, LU, LV, EE, CH, LT, DE

**Product type(s):** 18

**Active substance(s):** Spinosad

### Brief summary of the points of disagreement:

1. As no surface water assessment has been provided, one of the following phrases should be used to mitigate potential risks to surface water:
  - a) *"Protect bait boxes from rain. Put the bait boxes only in places where they are protected from rainfall events to avoid release of the product into the environment."* OR
  - b) *"When used around buildings, if the treated zone is connected to rainwater collection or sewer, use only in areas that are not liable to submersion or becoming wet, i.e. protected from rain, floods and cleaning water."*
2. Since the storage stability studies show more than 10% decrease of the active substance (a.s.) and there is no information on the a.s. degradation products, the shelf life should be limited to the point where the degradation does not exceed 10% of the initial a.s. content, i.e., 6 month.

### Outcome of the discussion within the Coordination Group (CG):

The CG members agreed by consensus on 3 February 2020 that:

1. The existing RMMs included in the provided assessment are acceptable in order mitigate risks from the emissions via sewer. Thus there is no need to include an additional RMM.
2. The shelf life of the product will be set to 24 months.

The product meets the condition for granting an authorisation in accordance with Article 19(1)(d), 19(1)(iv) of the BPR. This formal referral is therefore closed.