

Dunlop Tile-All Liquid

Ardex (Ardex Australia)

Chemwatch: 4639-17 Version No: 3.1.1.1 Safety Data Sheet according to WHS and ADG requirements Chemwatch Hazard Alert Code: *

Issue Date: 01/01/2013 Print Date: 02/06/2014 Initial Date: Not Available S.GHS.AUS.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Dunlop Tile-All Liquid
Chemical Name	Not Applicable
Synonyms	alkyl acrylate-styrene copolymer solution
Proper shipping name	Not Applicable
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Requires that the two parts be mixed by hand or mixer before use, in accordance with manufacturers directions.
	Mix only as much as is required. Do not return the mixed material to the original containers
	, Acrylic binder to be added to Optima Powder., Liquid component of a two-part cementitious based acrylic
	adhesive.

Details of the supplier of the safety data sheet

Registered company name	Ardex (Ardex Australia)	Ardex (Ardex NZ)
Address	20 Powers Road Seven Hills 2147 NSW Australia	32 Lane Street Woolston Christchurch New Zealand
Telephone	1800 224 070	+64 3384 3029
Fax	+61 2 9838 7817	+64 3384 9779
Website	Not Available	Not Available
Email	Not Available	Not Available

Emergency telephone number

Association / Organisation	Not Available	Not Available	
Emergency telephone numbers	1800 222 841	1800 222 841 (General information)	1 1 1 1
Other emergency telephone numbers	1800 222 841	1800 222 841 (General information)	

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

NON-HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the Model WHS Regulations and the ADG Code.

CHEMWATCH HAZARD RATINGS

	Min	Max	
Flammability	0	1	
Toxicity	0	1	0 = Minimum
Body Contact	1	1	1 = Low
Reactivity	0	1	2 = Moderate 3 = High
Chronic	0	1	4 = Extreme

Poisons Schedule

ule Not Applicable

GHS Classification Not Applicable

Label elements

GHS label elements	Not Applicable
SIGNAL WORD	NOT APPLICABLE

Hazard statement(s)

Not Applicable

Precautionary statement(s): Prevention

Not Applicable

Precautionary statement(s): Response

Not Applicable

Precautionary statement(s): Storage

Not Applicable

Precautionary statement(s): Disposal

Not Applicable

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

%[weight]	Name
30-60	alkyl acrylate-styrene copolymer
<1	additives, unregulated
30-60	water
	NOTE: Manufacturer has supplied full ingredient
	information to allow CHEMWATCH assessment
	30-60 <1

NOTE: Manufacturer has supplied full ingredient information to allow CHEMWATCH assessment

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	 If this product comes in contact with eyes: Wash out immediately with water. If irritation continues, seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	 If skin or hair contact occurs: ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	 If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary.
Ingestion	 Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.		
Advice for firefighters			
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. 		
Fire/Explosion Hazard	 Non combustible. Not considered to be a significant fire risk. Expansion or decomposition on heating may lead to violent rupture of containers. Decomposes on heating and may produce toxic/ irritating fumes. 		

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills	 Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite.
Major Spills	 Minor hazard. Clear area of personnel. Alert Fire Brigade and tell them location and nature of hazard. Control personal contact with the substance, by using protective equipment as required.
	Personal Protective Equipment advice is contained in Section 8 of the MSDS.

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	 Limit all unnecessary personal contact. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Avoid contact with incompatible materials.
Other information	 Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers.

Conditions for safe storage, including any incompatibilities

Suitable container	 Polyethylene or polypropylene container. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	Avoid contamination of water, foodstuffs, feed or seed. None known

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Not Available

EMERGENCY LIMITS

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
water	500 ppm	500 ppm	500 ppm	500 ppm

Dunlop Tile-All Liquid

Ingredient	Original IDLH	Revised IDLH
alkyl acrylate-styrene copolymer	Not Available	Not Available
additives, unregulated	Not Available	Not Available
water	Not Available	Not Available

Exposure controls

Appropriate engineering controls	Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment.	
Personal protection		
Eye and face protection	Safety glasses with side shields Chemical goggles. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience.	
Skin protection	See Hand protection below	
Hands/feet protection	Wear general protective gloves, eg. light weight rubber gloves.	
Body protection	See Other protection below	
Other protection	No special equipment needed when handling small quantities. OTHERWISE: • Overalls. • Barrier cream. • Eyewash unit.	
Thermal hazards	Not Available	

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

Dunlop Tile-All Liquid

Material	СРІ
BUTYL	A
NEOPRENE	A
VITON	A

* CPI - Chemwatch Performance Index

B: Satisfactory; may degrade after 4 hours continuous immersion C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance Whitish liquid with a slight odour; mixes with water.

Respiratory protection

Not Applicable

A: Best Selection

Physical state	Liquid	Relative density (Water = 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	100	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	63-67 approx.
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution(1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.	
Ingestion	The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health).	
Skin Contact	The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.	
Eye	The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.	
Chronic	Long-term exposure to the product is not thought to produce chronic effects adverse to health (as classified by EC Directives using animal models); nevertheless exposure by all routes should be minimised as a matter of course.	
	TOXICITY	

	TOXICITY	IRRITATION
Dunlop Tile-All Liquid	Not Available	Not Available

water	ΤΟΧΙΟΙΤΥ	IRRITATION
	Not Available	Not Available

* Value obtained from manufacturer's msds

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances

Dunlop Tile-All Liquid	Not available for mixture or identified for ingredient(s).		
WATER	No significant acute toxicological data identified in literature search.		
Acute Toxicity	0	Carcinogenicity	0
Skin Irritation/Corrosion	0	Reproductivity	0
Serious Eye Damage/Irritation	0	STOT - Single Exposure	0
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	0
Mutagenicity	\otimes	Aspiration Hazard	\otimes

CMR STATUS

Not Applicable

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
Not Available	Not Available	Not Available
Bioaccumulative potential		

Ingredient	Bioaccumulation
Not Available	Not Available

Mobility in soil

Ingredient	Mobility
Not Available	Not Available

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal	 Recycle wherever possible. Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or incineration in a licenced apparatus (after admixture with suitable combustible material). Decontaminate empty containers.
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SECTION 14 TRANSPORT INFORMATION

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

SECTION 15 REGULATORY INFORMATION

Safety, health and environmental regulations / legislation specific for the substance or mixture

	"WHO Model List of Essential Medicines - Adults","Australia Inventory of Chemical Substances (AICS)","OECD
water(7732-18-5) is found on the following regulatory lists	List of High Production Volume (HPV) Chemicals", "OSPAR National List of Candidates for Substitution –
	Norway","IMO IBC Code Chapter 18: List of products to which the Code does not apply","Sigma-AldrichTransport
	Information","Australia High Volume Industrial Chemical List (HVICL)","International Fragrance Association (IFRA)
	Survey: Transparency List"

SECTION 16 OTHER INFORMATION

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references

The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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Hazard Alert Code: HIGH

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME Dunlop Tile-All Powder

SYNONYMS "cement based adhesive"

PRODUCT USE

Cementitious adhesive.

SUPPLIER

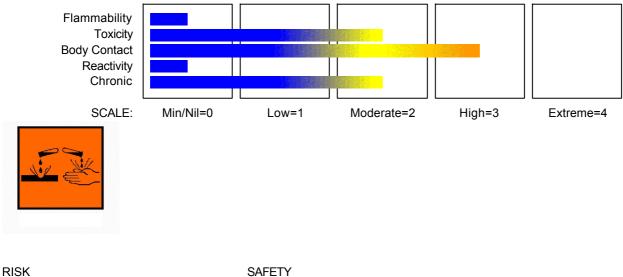
Company: Ardex Australia Pty Ltd Address: 20 Powers Road Seven Hills NSW, 2147 Australia Telephone: 1800 224 070 Emergency Tel:**1800 222 841** Fax: +61 2 9838 7817

Section 2 - HAZARDS IDENTIFICATION

STATEMENT OF HAZARDOUS NATURE

HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS. According to the Criteria of NOHSC, and the ADG Code.

CHEMWATCH HAZARD RATINGS



Causes burns.

SAFETY • Keep locked up.

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- Risk of serious damage to eves.
- Inhalation may produce health damage*.
- Cumulative effects may result following exposure*.
- lonowing exposure .
- Limited evidence of a carcinogenic effect*.
- Possible respiratory and skin sensitiser*.
- * (limited evidence).

- Do not breathe dust.
- Avoid contact with skin.
- Avoid contact with eyes.
- Wear suitable protective clothing.
- Wear suitable gloves.
- Wear eye/face protection.
- Use only in well ventilated areas.
- Keep container in a well ventilated place.
- To clean the floor and all objects contaminated by this
- material, use water and detergent.
- Take off immediately all contaminated clothing.
- In case of contact with eyes, rinse with plenty of water and
- contact Doctor or Poisons Information Centre.
- In case of accident or if you feel unwell IMMEDIATELY contact
- Doctor or Poisons Information Centre (show label if possible).
- In case of accident by inhalation: remove casualty to fresh air and keep at rest.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS							
CAS RN	%						
65997-15-1	30-60						
14808-60-7.	30-60						
7631-86-9	10-30						
13463-67-7	1-5						
	1-5						
	<1						
	CAS RN 65997-15-1 14808-60-7. 7631-86-9	CAS RN % 65997-15-1 30-60 14808-60-7. 30-60 7631-86-9 10-30 13463-67-7 1-5 1-5					

Section 4 - FIRST AID MEASURES

SWALLOWED

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Transport to hospital or doctor without delay.

EYE

If this product comes in contact with the eyes:

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- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

- If skin or hair contact occurs:
- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly remove all contaminated clothing, including footwear.
- Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.
- Transport to hospital, or doctor.

INHALED

- If dust is inhaled, remove from contaminated area.
- Encourage patient to blow nose to ensure clear breathing passages.
- Ask patient to rinse mouth with water but to not drink water.
- Seek immediate medical attention.
- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor.

NOTES TO PHYSICIAN

Treat symptomatically.

For acute or short-term repeated exposures to highly alkaline materials:

- Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue.

Alkalis continue to cause damage after exposure.

INGESTION:

· Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- Neutralising agents should never be given since exothermic heat reaction may compound injury.
- * Catharsis and emesis are absolutely contra-indicated.
- * Activated charcoal does not absorb alkali.

* Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:

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Injury should be irrigated for 20-30 minutes.
 Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology].

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves in the event of a fire.
- Prevent, by any means available, spillage from entering drains or water courses.
- Use fire fighting procedures suitable for surrounding area.
- DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- Equipment should be thoroughly decontaminated after use.

FIRE/EXPLOSION HAZARD

- Non combustible.
- Not considered a significant fire risk, however containers may burn.
- Decomposition may produce toxic fumes of: hydrogen fluoride, metal oxides.

May emit poisonous fumes.

May emit corrosive fumes.

FIRE INCOMPATIBILITY

None known.

HAZCHEM

None

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- · Remove all ignition sources.
- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- · Control personal contact with the substance, by using protective equipment.
- Use dry clean up procedures and avoid generating dust.
- · Place in a suitable, labelled container for waste disposal.

MAJOR SPILLS

Moderate hazard.

- CAUTION: Advise personnel in area.
- Alert Emergency Services and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic

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bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.

• ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.

• If contamination of drains or waterways occurs, advise Emergency Services.

Personal Protective Equipment advice is contained in Section 8 of the MSDS.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- · Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- DO NOT allow material to contact humans, exposed food or food utensils.
- · Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- · Always wash hands with soap and water after handling.
- Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- Use good occupational work practice.
- Observe manufacturer's storage and handling recommendations contained within this MSDS.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.

SUITABLE CONTAINER

- Polyethylene or polypropylene container.
- Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

None known.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storage and handling recommendations contained within this MSDS.
- For major quantities:
- Consider storage in bunded areas ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams}.
- Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



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+: May be stored together

- O: May be stored together with specific preventions
- X: Must not be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROL	LS								
Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Peak ppm	Peak mg/m³	TWA F/CC	Notes
Australia Exposure	portland cement (Portland cement		10					. <u></u>	(see Chapter 14)
Standards	(a))								
Australia	silica amorphous		2						(see Chapter 14)
Exposure	(Silica -								
Standards	Amorphous Fumed								
	silica								
	(respirable								
	dust))								
The following materia	Is had no OELs on our	records							
• graded sand:		1000140		CAS	S:14808-	60- 7			
0									
EMERGENCY E	EXPOSURE LIMITS								
Material	Revised IDLH	l Value (r	ng/m3)	Revi	sed IDLH	Value (p	opm)		
portland cement 1376									
graded sand 85014	50								
silica amorphous 104									
titanium dioxide 1097	1 5,000								

MATERIAL DATA

PORTLAND CEMENT: SILICA AMORPHOUS:

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 μ m (+-) 0.3 μ m and with a geometric standard deviation of 1.5 μ m (+-) 0.1 μ m, i.e..generally less than 5 μ m.

DUNLOP TILE-ALL POWDER:

None assigned. Refer to individual constituents.

PORTLAND CEMENT: for calcium silicate: containing no asbestos and <1% crystalline silica ES TWA: 10 mg/m3 inspirable dust TLV TWA: 10 mg/m3 total dust (synthetic nonfibrous) A4 Although in vitro studies indicate that calcium silicate is more toxic than substances described as "nuisance dusts" is thought that adverse health effects which might occur following exposure to 10-20 mg/m3

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are likely to be minimal. The TLV-TWA is thought to be protective against the physical risk of eye and upper respiratory tract irritation in workers and to prevent interference with vision and deposition of particulate in the eyes, ears, nose and mouth.

NOTE: This substance has been classified by the ACGIH as A4 NOT classifiable as causing Cancer in humans. For calcium oxide:

The TLV-TWA is thought to be protective against undue irritation and is analogous to that recommended for sodium hydroxide.

For aluminium oxide:

The experimental and clinical data indicate that aluminium oxide acts as an "inert" material when inhaled and seems to have little effect on the lungs nor does it produce significant organic disease or toxic effects when exposures are kept under reasonable control.

[Documentation of the Threshold Limit Values], ACGIH, Sixth Edition.

for chrome(VI) containing substances:

Some jurisdictions require that health surveillance be carried on workers occupationally exposed to inorganic chromium. Such surveillance should emphasise

- demography, occupational and medical history and health advice
- physical examination with emphasis on the respiratory system and skin

• weekly skin inspection of hands and forearms by a "responsible person".

Portland cement is considered to be a nuisance dust that does not cause fibrosis and has little potential to induce adverse effects on the lung.

GRADED SAND:

These "dusts" have little adverse effect on the lungs and do not produce toxic effects or organic disease. Although there is no dust which does not evoke some cellular response at sufficiently high concentrations, the cellular response caused by P.N.O.C.s has the following characteristics:

• the architecture of the air spaces remain intact,

• scar tissue (collagen) is not synthesised to any degree,

• tissue reaction is potentially reversible.

Extensive concentrations of P.N.O.C.s may:

seriously reduce visibility

• cause unpleasant deposits in the eyes, ears and nasal passages,

• contribute to skin or mucous membrane injury by chemical or mechanical action, per se, or by the

rigorous skin cleansing procedures necessary for their removal. [ACGIH]

This limit does not apply:

• to brief exposures to higher concentrations

• nor does it apply to those substances that may cause physiological impairment at lower concentrations but for which a TLV has as yet to be determined.

This exposure standard applies to particles which

• are insoluble or poorly soluble* in water or, preferably, in aqueous lung fluid (if data is available) and

• have a low toxicity (i.e.. are not cytotoxic, genotoxic, or otherwise chemically reactive with lung tissue, and do not emit ionizing radiation, cause immune sensitization, or cause toxic effects other than by inflammation or by a mechanism of lung overload).

NOTE: This product contains negligible amount of respirable dust.

SILICA AMORPHOUS:

For amorphous crystalline silica (precipitated silicic acid):

Amorphous crystalline silica shows little potential for producing adverse effects on the lung and exposure standards should reflect a particulate of low intrinsic toxicity. Mixtures of amorphous silicas/ diatomaceous earth and crystalline silica should be monitored as if they comprise only the crystalline forms.

The dusts from precipitated silica and silica gel produce little adverse effect on pulmonary functions and are not known to produce significant disease or toxic effect.

IARC has classified silica, amorphous as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.

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TITANIUM DIOXIDE:

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

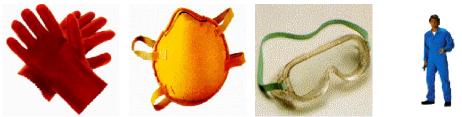
OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- · cause increased susceptibility to other irritants and infectious agents
- · lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and

 acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Animals exposed by inhalation to 10 mg/m3 titanium dioxide show no significant fibrosis, possibly reversible tissue reaction. The architecture of lung air spaces remains intact.

PERSONAL PROTECTION



EYE

- Chemical goggles.
- Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent].

HANDS/FEET

- Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber.

NOTE:

The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing

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gloves and other protective equipment, to avoid all possible skin contact.

• Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

OTHER

• Overalls.

- P.V.C. apron.
- Barrier cream.
- Skin cleansing cream.
- Eye wash unit.

RESPIRATOR

•Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific CHEMWATCH data (if available), or your Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

■ Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Welldesigned engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. An approved self contained breathing apparatus (SCBA) may be required in some situations.

Provide adequate ventilation in warehouse or closed storage area.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

Fine off-white powder; insoluble in water.

PHYSICAL PROPERTIES

Does not mix with water. Alkaline.

- State Melting Range (°C) Boiling Range (°C) Flash Point (°C) Decomposition Temp (°C) Autoignition Temp (°C) Upper Explosive Limit (%)
- Divided Solid Not Available Not Applicable Not Applicable Not Available Not Applicable Not Applicable
- Molecular Weight Viscosity Solubility in water (g/L) pH (1% solution) pH (as supplied) Vapour Pressure (kPa) Specific Gravity (water=1)
- Not Applicable Not Applicable Immiscible 11 (paste form) Not Applicable Not Applicable Not Available

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Lower Explosive Limit (%) Volatile Component (%vol)

Not Applicable

Not Applicable

Relative Vapour Density (air=1) Evaporation Rate Not Applicable

Section 10 - STABILITY AND REACTIVITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

■ The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.

EYE

■ The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.

SKIN

The material can produce chemical burns following direct contact with the skin.

Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

INHALED

■ Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual.

Effects on lungs are significantly enhanced in the presence of respirableparticles.

CHRONIC HEALTH EFFECTS

Overexposure to respirable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity, chest infections

Repeated exposures, in an occupational setting, to high levels of fine- divided dusts may produce a condition known as pneumoconiosis which is the lodgement of any inhaled dusts in the lung irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion (exertional dyspnea), increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucous, vital capacity decreases further and shortness of breath becomes more severe. Other signs or symptoms include altered breath sounds, diminished lung capacity, diminished oxygen uptake during exercise, emphysema and pneumothorax (air in lung cavity) as a rare complication.

Removing workers from possibility of further exposure to dust generally leads to halting the progress of the

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lung abnormalities. Where worker-exposure potential is high, periodic examinations with emphasis on lung dysfunctions should be undertaken

Dust inhalation over an extended number of years may produce pneumoconiosis.. Pneumoconiosis is the accumulation of dusts in the lungs and the tissue reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.

There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

Respiratory sensitisation may result in allergic/asthma like responses; from coughing and minor breathing difficulties to bronchitis with wheezing, gasping.

Long term exposure to titanium and several of its compounds produces lung scarring and chronic bronchitis. Breathing is impaired and cardiac changes with right heart enlargements occur. There is an increased chance of developing cancers of the respiratory tract.

TOXICITY AND IRRITATION

■ unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

GRADED SAND:

PORTLAND CEMENT:

■ No significant acute toxicological data identified in literature search.

DUNLOP TILE-ALL POWDER:

Not available. Refer to individual constituents.

PORTLAND CEMENT:

The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

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SILICA AMORPHOUS: TOXICITY Oral (rat) LD50:3160 mg/kg Dermal (rabbit) LD50:>5000 mg/kg * Inhalation (rat) LC50:>0.139 mg/l/14h * * [Grace]

IRRITATION Skin (rabbit):non- irritating * Eye (rabbit):non- irritating *

For silica amorphous:

When experimental animals inhale synthetic amorphous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, the vast majority of SAS is excreted in the faeces and there is little accumulation in the body. Following absorption across the gut, SAS is eliminated via urine without modification in animals and humans. SAS is not expected to be broken down (metabolised) in mammals. After ingestion, there is limited accumulation of SAS in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated, but appears to be insignificant in animals and humans. SASs injected subcutaneously are subjected to rapid dissolution and removal. There is no indication of metabolism of SAS in animals or humans based on chemical structure and available data. In contrast to crystalline silica, SAS is soluble in physiological media and the soluble chemical species that are formed are eliminated via the urinary tract without modification.

Both the mammalian and environmental toxicology of SASs are significantly influenced by the physical and chemical properties, particularly those of solubility and particle size. SAS has no acute intrinsic toxicity by inhalation. Adverse effects, including suffocation, that have been reported were caused by the presence of high numbers of respirable particles generated to meet the required test atmosphere. These results are not representative of exposure to commercial SASs and should not be used for human risk assessment. Though repeated exposure of the skin may cause dryness and cracking, SAS is not a skin or eye irritant, and it is not a sensitiser.

Repeated-dose and chronic toxicity studies confirm the absence of toxicity when SAS is swallowed or upon skin contact.

Long-term inhalation of SAS caused some adverse effects in animals (increases in lung inflammation, cell injury and lung collagen content), all of which subsided after exposure.

Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted with SAS in a number of species, at airborne concentrations ranging from 0.5 mg/m3 to 150 mg/m3. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m3. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m3. The difference in values may be explained by different particle size, and therefore the number of particles administered per unit dose. In general, as particle size decreases so does the NOAEL/LOAEL.

Neither inhalation nor oral administration caused neoplasms (tumours). SAS is not mutagenic in vitro. No genotoxicity was detected in in vivo assays. SAS does not impair development of the foetus. Fertility was not specifically studied, but the reproductive organs in long-term studies were not affected.

In humans, SAS is essentially non-toxic by mouth, skin or eyes, and by inhalation. Epidemiology studies show little evidence of adverse health effects due to SAS. Repeated exposure (without personal protection) may cause mechanical irritation of the eye and drying/cracking of the skin.

There is no evidence of cancer or other long-term respiratory health effects (for example, silicosis) in workers employed in the manufacture of SAS. Respiratory symptoms in SAS workers have been shown to correlate with smoking but not with SAS exposure, while serial pulmonary function values and chest radiographs are not adversely affected by long-term exposure to SAS.

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

Reports indicate high/prolonged exposures to amorphous silicas induced lung fibrosis in experimental animals; in some experiments these effects were reversible. [PATTYS]

TITANIUM DIOXIDE:

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TOXICITY

Oral (Rat) LD50:>20000 mg/kg * Oral (Mouse) LD50:>10000 mg/kg * IRRITATION Skin (human):0.3 mg /3D (int)- Mild *

The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

Exposure to titanium dioxide is via inhalation, swallowing or skin contact. When inhaled, it may deposit in lung tissue and lymph nodes causing dysfunction of the lungs and immune system. Absorption by the stomach and intestines depends on the size of the particle. It penetrated only the outermost layer of the skin, suggesting that healthy skin may be an effective barrier. There is no substantive data on genetic damage, though cases have been reported in experimental animals. Studies have differing conclusions on its cancercausing potential.

* IUCLID

CARCINOGEN					
graded sand	International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs	Group	1	Carcinogenic to humans	
silica amorphous	International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs	Group	3	Not classifiable as to its carcinogenicity to humans	
titanium dioxide	International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs	Group	2B	Possibly carcinogenic to humans	
SKIN					
silica amorphous	GESAMP/EHS Com Profiles	posite List - GES	AMP Hazard	D1: skin irritation/corrosion	(0)
titanium dioxide	GESAMP/EHS Com Profiles	posite List - GES	AMP Hazard	D1: skin irritation/corrosion	1

Section 12 - ECOLOGICAL INFORMATION

TITANIUM DIOXIDE:

PORTLAND CEMENT:

For Metal:

Atmospheric Fate - Metal-containing inorganic substances generally have negligible vapour pressure and are not expected to partition to air.

Environmental Fate: Environmental processes, such as oxidation, the presence of acids or bases and microbiological processes, may transform insoluble metals to more soluble ionic forms. Environmental processes may enhance bioavailability and may also be important in changing solubilities.

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Aquatic/Terrestrial Fate: When released to dry soil, most metals will exhibit limited mobility and remain in the upper layer; some will leach locally into ground water and/ or surface water ecosystems when soaked by rain or melt ice. A metal ion is considered infinitely persistent because it cannot degrade further. Once released to surface waters and moist soils their fate depends on solubility and dissociation in water. A significant proportion of dissolved/ sorbed metals will end up in sediments through the settling of suspended particles. The remaining metal ions can then be taken up by aquatic organisms. Ionic species may bind to dissolved ligands or sorb to solid particles in water.

Ecotoxicity: Even though many metals show few toxic effects at physiological pH levels, transformation may introduce new or magnified effects.

SILICA AMORPHOUS: TITANIUM DIOXIDE: PORTLAND CEMENT: DO NOT discharge into sewer or waterways.

PORTLAND CEMENT:

Marine Pollutant

Yes

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters. Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

SILICA AMORPHOUS:

For Amorphous Silica: Amorphous silica is chemically and biologically inert. It is not biodegradable. Aquatic Fate: Due to its insolubility in water there is a separation at every filtration and sedimentation process. On a global scale, the level of man-made synthetic amorphous silicas (SAS) represents up to 2.4% of the dissolved silica naturally present in the aquatic environment and untreated SAS have a relatively low water solubility and an extremely low vapour pressure. Biodegradability in sewage treatment plants or in surface water is not applicable to inorganic substances like SAS.

Terrestrial Fate: Crystalline and/or amorphous silicas are common on the earth in soils and sediments, and in living organisms (e.g. diatoms), but only the dissolved form is bioavailable. On the basis of these properties it is expected that SAS released into the environment will be distributed mainly into soil/sediment. Surface treated silica will be wetted then adsorbed onto soils and sediments.

Atmospheric Fate: SAS is not expected to be distributed into the air if released. Ecotoxicity: SAS is not toxic to environmental organisms (apart from physical desiccation in insects). SAS

presents a low risk for adverse effects to the environment.

Environmental Fate: Most documentation on the fate of silica in the environment concerns dissolved silica, in the aquatic environment, regardless of origin, (man-made or natural), or structure, (crystalline or amorphous).

Terrestrial Fate: Silicon makes up 25.7% of the Earth's crust, by weight, and is the second most abundant element, being exceeded only by oxygen. Silicon is not found free in nature, but occurs chiefly as the oxide and as silicates. Once released into the environment, no distinction can be made between the initial forms of silica.

Aquatic Fate: At normal environmental pH, dissolved silica exists exclusively as monosilicic acid. At pH 9.4, amorphous silica is highly soluble in water. Crystalline silica, in the form of quartz, has low solubility in water. Silicic acid plays an important role in the biological/geological/chemical cycle of silicon, especially in the ocean. Marine organisms such as diatoms, silicoflagellates and radiolarians use silicic acid in their skeletal structures and their skeletal remains leave silica in sea sediment Ecotoxicity: Silicon is important to plant and animal life and is practically non-toxic to fish including zebrafish, and Daphnia magna water fleas.

Ecotoxicity

continued...

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la sua dia st	Dereistansei	Dereistense: Air	Discoursulation	Mability
Ingredient	Persistence:	Persistence: Air	Bioaccumulation	Mobility
	Water/Soil			
portland cement	No Data	No Data	No Data	No Data
	Available	Available	Available	Available
graded sand	No Data	No Data	No Data	No Data
	Available	Available	Available	Available
silica amorphous	HIGH	No Data	LOW	HIGH
		Available		
titanium dioxide	HIGH	No Data	LOW	HIGH
		Available		

Section 13 - DISPOSAL CONSIDERATIONS

- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.
- Otherwise:
- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and MSDS and observe all notices pertaining to the product.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

Section 14 - TRANSPORTATION INFORMATION

HAZCHEM:

None (ADG7)

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: ADG7, IATA, IMDG

Section 15 - REGULATORY INFORMATION

Indications of Danger:

C Corrosive

POISONS SCHEDULE None

REGULATIONS

Regulations for ingredients

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portland cement (CAS: 65997-15-1) is found on the following regulatory lists;

"Australia Exposure Standards", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Inventory of Chemical Substances (AICS)", "OECD List of High Production Volume (HPV) Chemicals"

graded sand (CAS: 14808-60-7) is found on the following regulatory lists;

"Australia - New South Wales - Work Health and Safety Regulation 2011 - Reguirements for health monitoring -Hazardous chemicals (other than lead) requiring health monitoring", "Australia - New South Wales - Work Health and Safety Regulation 2011 Restricted hazardous chemicals", "Australia - New South Wales Hazardous Substances Prohibited for Specific Uses", "Australia - New South Wales Hazardous Substances Requiring Health Surveillance", "Australia - Northern Territories Work Health and Safety National Uniform Legislation Regulations- Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health monitoring", "Australia - Queensland Work Health and Safety Regulation - Hazardous chemicals (other than lead) requiring health monitoring", "Australia - Queensland Work Health and Safety Regulation - Restricted hazardous chemicals", "Australia - South Australia - Hazardous Substances Requiring Health Surveillance", "Australia - South Australia - Work Health and Safety Regulations 2012 - Requirements for health monitoring -Hazardous chemicals (other than lead) requiring health monitoring", "Australia - South Australia - Work Health and Safety Regulations 2012 - Restricted hazardous chemicals", "Australia - Tasmania Hazardous Substances Prohibited for Specified Uses", "Australia - Tasmania Hazardous Substances Requiring Health Surveillance", "Australia - Western Australia Hazardous Substances Prohibited for Specified Uses or Methods of Handling", "Australia - Western Australia Hazardous Substances Requiring Health Surveillance", "Australia Hazardous Substances", "Australia Hazardous Substances Requiring Health Surveillance", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Inventory of Chemical Substances (AICS)", "Australia Occupational Health and Safety (Commonwealth Employment) (National Standards) Regulations 1994 - Hazardous Substances Requiring Health Surveillance", "Australia Work Health and Safety Regulations 2011 - Hazardous chemicals (other than lead) requiring health monitoring", "Australia Work Health and Safety Regulations 2011 -Restricted hazardous chemicals", "FisherTransport Information", "International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs", "International Fragrance Association (IFRA) Survey: Transparency List", "OECD List of High Production Volume (HPV) Chemicals", "Sigma-AldrichTransport Information", "United Nations Consolidated List of Products Whose Consumption and/or Sale Have Been Banned, Withdrawn, Severely Restricted or Not Approved by Governments"

silica amorphous (CAS: 7631-86-9, 112945-52-5, 67762-90-7, 68611-44-9, 68909-20-6, 112926-00-8, 61790-53-2, 60676-86-0, 91053-39-3, 69012-64-2) is found on the following regulatory lists;

"Acros Transport Information", "Australia - New South Wales - Work Health and Safety Regulation 2011 -Requirements for health monitoring -Hazardous chemicals (other than lead) requiring health monitoring", "Australia - New South Wales - Work Health and Safety Regulation 2011 Restricted hazardous chemicals", "Australia - New South Wales Hazardous Substances Requiring Health Surveillance", "Australia - Northern Territories Work Health and Safety National Uniform Legislation Regulations- Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health

monitoring", "Australia - Queensland Work Health and Safety Regulation - Hazardous chemicals (other than lead) requiring health monitoring", "Australia - South Australia - Hazardous Substances Requiring Health Surveillance", "Australia - South Australia - Work Health and Safety Regulations 2012 - Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health monitoring", "Australia - South Australia - Work Health and Safety Regulations 2012 - Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health monitoring", "Australia - South Australia - Work Health and Safety Regulations 2012 - Restricted hazardous chemicals", "Australia - South Australia - Work Health and Safety Regulations 2012 - Restricted hazardous chemicals", "Australia - Tasmania Hazardous Substances Requiring Health Surveillance", "Australia - Victoria Occupational Health and Safety Regulations - Schedule 5 Hazardous Substances: Substances Prohibited for Specified Uses", "Australia - Western Australia Hazardous Substances Prohibited for Specified Uses or Methods of Handling", "Australia - Western Australia Hazardous Substances Requiring Health Surveillance", "Australia Drinking Water Guideline Values For Physical and Chemical Characteristics", "Australia Exposure Standards", "Australia Hazardous Substances (AICS)", "Australia National Pollutant Inventory", "Australia Occupational Health and Safety (Commonwealth Employment) (National Standards) Regulations 1994 - Hazardous Substances Requiring Health Surveillance", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix C",

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"Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4", "Australia Therapeutic Goods Administration (TGA) Substances that may be used as active ingredients in Listed medicines", "Australia Work Health and Safety Regulations 2011 - Hazardous chemicals (other than lead) requiring health monitoring", "CODEX General Standard for Food Additives (GSFA) - Additives Permitted for Use in Food in General, Unless Otherwise Specified, in Accordance with GMP", "FisherTransport Information", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs", "International Council of Chemical Associations (ICCA) - High Production Volume List", "International Fragrance Association (IFRA) Survey: Transparency List", "International Numbering System for Food Additives", "OECD List of High Production Volume (HPV) Chemicals", "OSPAR National List of Candidates for Substitution – Norway", "Sigma-AldrichTransport Information"

titanium dioxide (CAS: 13463-67-7, 1317-70-0, 1317-80-2, 12188-41-9, 1309-63-3, 100292-32-8, 101239-53-6, 116788-85-3, 12000-59-8, 12701-76-7, 12767-65-6, 12789-63-8, 1344-29-2, 185323-71-1, 185828-91-5, 188357-76-8, 188357-79-1, 195740-11-5, 221548-98-7, 224963-00-2, 246178-32-5, 252962-41-7, 37230-92-5, 37230-94-7, 37230-95-8, 37230-96-9, 39320-58-6, 39360-64-0, 39379-02-7, 416845-43-7, 494848-07-6, 494848-23-6, 494851-77-3, 494851-98-8, 55068-84-3, 55068-85-4, 552316-51-5, 62338-64-1, 767341-00-4, 97929-50-5, 98084-96-9) is found on the following regulatory lists;

"Australia Australian Pesticides and Veterinary Medicines Authority (APVM) Record of approved active constituents", "Australia Exposure Standards", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Inventory of Chemical Substances (AICS)", "Australia Therapeutic Goods Administration (TGA) Substances that may be used as active ingredients in Listed medicines", "Australia Therapeutic Goods Administration (TGA) Sunscreening agents permitted as active ingredients in listed products", "CODEX General Standard for Food Additives (GSFA) - Additives Permitted for Use in Food in General, Unless Otherwise Specified, in Accordance with GMP", "FisherTransport Information", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "IMO IBC Code Chapter 17: Summary of minimum requirements", "International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs", "International Fragrance Association (IFRA) Survey: Transparency List", "International Numbering System for Food Additives", "OECD List of High Production Volume (HPV) Chemicals", "Sigma-AldrichTransport Information"

No data for Dunlop Tile-All Powder (CW: 4639-18)

Section 16 - OTHER INFORMATION

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name CAS

silica amorphous 7631-86-9, 112945-52-5, 67762-90-7, 68611-44-9, 68909-20-6, 112926-00-8, 61790-53-2, 60676-86-0, 91053-39-3, 69012-64-2

titanium dioxide 13463-67-7, 1317-70-0, 1317-80-2, 12188-41-9, 1309-63-3, 100292-32-8, 101239-53-6, 116788-85-3, 12000-59-8, 12701-76-7, 12767-65-6, 12789-63-8, 1344-29-2, 185323-71-1, 185828-91-5, 188357-76-8, 188357-79-1, 195740-11-5, 221548-98-7, 224963-00-2, 246178-32-5, 252962-41-7, 37230-92-5, 37230-94-7, 37230-95-8, 37230-96-9, 39320-58-6, 39360-64-0, 39379-02-7, 416845-43-7, 494848-07-6, 494848-23-6, 494851-77-3, 494851-98-8, 55068-84-3, 55068-85-4, 552316-51-5, 62338-64-1, 767341-00-4, 97929-50-5, 98084-96-9

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

A list of reference resources used to assist the committee may be found at: www.chemwatch.net/references.

The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors

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determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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Issue Date: 25-Jan-2013 Print Date: 5-Jun-2013

This is the end of the MSDS.