

Dunlop Ardit Crack Filler

Ardex (Ardex Australia)

Chemwatch: **85-5515** Version No: **2.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: **19/09/2017** Print Date: **20/09/2017** S.GHS.AUS.EN

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

Product Identifier

Product name	Dunlop Ardit Crack Filler	
Synonyms	Not Available	
Other means of identification	Not Available	

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

Relevant identified uses	28nco
Relevant identified uses	Use according to manufacturer's directions

Details of the supplier of the safety data sheet

Registered company name	Ardex (Ardex Australia)	Ardex (Ardex NZ)
Address	20 Powers Road Seven Hills NSW 2147 Australia	32 Lane Street Woolston Christchurch New Zealand
Telephone	1800 224 070	+64 3373 6928
Fax	1300 780 102	+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 224 070 (Mon-Fri, 9am-5pm)	+64 3373 6900
Other emergency telephone numbers	Not Available	Not Available

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

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

CHEMWATCH HAZARD RATINGS

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

Poisons Schedule	S6
Classification [1]	Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A, Respiratory Sensitizer Category 1, Skin Sensitizer Category 1, Carcinogenicity Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Specific target organ toxicity - repeated exposure Category 2, Acute Aquatic Hazard Category 3, Chronic Aquatic Hazard Category 3
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

Label elements

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SIGNAL WORD

DANGER

Hazard statement(s)

H332	Harmful if inhaled.
H315	Causes skin irritation.
H319	Causes serious eye irritation.
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.
H335	May cause respiratory irritation.
H373	May cause damage to organs through prolonged or repeated exposure.
H412	Harmful to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.	
P260	o not breathe dust/fume/gas/mist/vapours/spray.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.	
P308+P313	IF exposed or concerned: Get medical advice/attention.	
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.	
P362	Take off contaminated clothing and wash before reuse.	

Precautionary statement(s) Storage

P405	Store locked up.	
P403+P233	Store in a well-ventilated place. Keep container tightly closed.	

Precautionary statement(s) Disposal

P501 Dispose of contents/container in accordance with local regulations.

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
		Part A Containing:
9016-87-9	25-50	polymeric diphenylmethane diisocyanate
101-68-8	25-50	4,4'-diphenylmethane diisocyanate (MDI)
6846-50-0	25-50	2,2,4-trimethyl-1,3-pentanediol diisobutyrate
		Part B Containing:
6846-50-0	25-50	2,2,4-trimethyl-1,3-pentanediol diisobutyrate
9003-11-6	5-10	polypropylene/ polyethylene glycol copolymer
111-46-6	5-10	diethylene glycol

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact

If this product comes in contact with the eyes:

- ▶ 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.

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If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Skin Contact Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation. • 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 Inhalation ► Transport to hospital, or doctor, without delay. Following uptake by inhalation, move person to an area free from risk of further exposure. Oxygen or artificial respiration should be administered as needed. Asthmatic-type symptoms may develop and may be immediate or delayed up to several hours. Treatment is essentially symptomatic. A physician should be consulted. ▶ 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. Ingestion 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.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically

To treat poisoning by the higher aliphatic alcohols (up to C7):

- ▶ Gastric lavage with copious amounts of water
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxvgen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe
- ► To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- ▶ Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5)

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- ▶ Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for shock.
- Monitor and treat, where necessary, for pulmonary oedema.
- Anticipate and treat, where necessary, for seizures
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- Give activated charcoal.

ADVANCED TREATMENT

- · Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50%
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Acidosis may respond to hyperventilation and bicarbonate therapy.
- Haemodialysis might be considered in patients with severe intoxication.
- Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- ► Small quantities of water in contact with hot liquid may react violently with generation of a large volume of rapidly expanding hot sticky semi-solid foam.
- Presents additional hazard when fire fighting in a confined space.
- Cooling with flooding quantities of water reduces this risk
- Water spray or fog may cause frothing and should be used in large quantities.
- ▶ Alcohol stable foam.
- Dry chemical powder.
- ▶ BCF (where regulations permit).
- Carbon dioxide.

Special hazards arising from the substrate or mixture

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Fire Incompatibility ▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result Advice for firefighters ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear full body protective clothing with breathing apparatus. Fire Fighting ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Use water delivered as a fine spray to control fire and cool adjacent area. Combustible. ▶ Moderate fire hazard when exposed to heat or flame. ▶ When heated to high temperatures decomposes rapidly generating vapour which pressures and may then rupture containers with release of flammable and highly toxic isocyanate vapour. ▶ Burns with acrid black smoke and poisonous fumes. Combustion products include: carbon dioxide (CO2) isocyanates Fire/Explosion Hazard and minor amounts of hydrogen cyanide nitrogen oxides (NOx) other pyrolysis products typical of burning organic material. May emit corrosive fumes. When heated at high temperatures many isocyanates decompose rapidly generating a vapour which pressurises containers, possibly to the point of rupture. Release of toxic and/or flammable isocyanate vapours may then occur HAZCHEM Not Applicable

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	Slippery when spilt. Framove all ignition sources. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment.
Major Spills	 Liquid Isocyanates and high isocyanate vapour concentrations will penetrate seals on self contained breathing apparatus - SCBA should be used inside encapsulating suit where this exposure may occur. For isocyanate spills of less than 40 litres (2 m2): Evacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible. Notify supervision and others as necessary. Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots). Control source of leakage (where applicable). Slippery when spilt. Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. DO NOT reseal container if contamination is suspected. Open all containers with care. DO NOT touch the spill material Moderate hazard. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe hand	ling
Safe handling	 DO NOT allow clothing wet with material to stay in contact with skin 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.
Other information	for commercial quantities of isocyanates: Isocyanates should be stored in adequately bunded areas. Nothing else should be kept within the same bunding. Pre-polymers need not be segregated. Drums of isocyanates should be stored under cover, out of direct sunlight, protected from rain, protected from physical damage and well away from moisture, acids and alkalis. Rotate all stock to prevent ageing. Use on FIFO (First In-First Out) basis Store in original containers.

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- ▶ Keep containers securely sealed.
- ▶ No smoking, naked lights or ignition sources.
- Store in a cool, dry, well-ventilated area.

Conditions for safe storage, including any incompatibilities

Suitable container

- Metal can or drum
- Packaging as recommended by manufacturer.
- ▶ Check all containers are clearly labelled and free from leaks.

Storage incompatibility

- Avoid reaction with oxidising agents
- Avoid strong acids, bases.

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate (MDI)	Not Available	Not Available	Not Available	Not Available
Australia Exposure Standards	diethylene glycol	2,2'-Oxybis[ethanol]	100 mg/m3 / 23	Not Available	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
polymeric diphenylmethane diisocyanate	Polymethylene polyphenyl isocyanate; (Polymeric diphenylmethane diisocyanate)	0.15 mg/m3	3.6 mg/m3	22 mg/m3
4,4'-diphenylmethane diisocyanate (MDI)	Methylene diphenyl diisocyanate; (Diphenylmethane diisocyanate; MDI)	0.45 mg/m3	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Methylenebis(isocyanato-benzene), 1,1'-; (Diphenyl methane diisocyanate)	29 mg/m3	40 mg/m3	240 mg/m3
polypropylene/ polyethylene glycol copolymer	Polypropylene-polyethylene glycol; (Pluronic L-81)	6.9 mg/m3	76 mg/m3	460 mg/m3
diethylene glycol	Diethylene glycol	6.9 ppm	140 ppm	860 ppm

Ingredient	Original IDLH	Revised IDLH
polymeric diphenylmethane diisocyanate	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3	Not Available
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	Not Available	Not Available
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	Not Available	Not Available
polypropylene/ polyethylene glycol copolymer	Not Available	Not Available
diethylene glycol	Not Available	Not Available

Exposure controls

Appropriate engineering

controls

- ▶ All processes in which isocyanates are used should be enclosed wherever possible.
- ▶ Total enclosure, accompanied by good general ventilation, should be used to keep atmospheric concentrations below the relevant exposure standards.
- If total enclosure of the process is not feasible, local exhaust ventilation may be necessary. Local exhaust ventilation is essential where lower molecular weight isocyanates (such as TDI or HDI) is used or where isocyanate or polyurethane is sprayed.

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.

Skin protection

See Hand protection below

NOTE:

Hands/feet protection

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

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The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice Personal hygiene is a key element of effective hand care. ▶ Do NOT wear natural rubber (latex gloves) Isocvanate resistant materials include Teflon, Viton, nitrile rubber and some PVA gloves. Protective gloves and overalls should be worn as specified in the appropriate national standard. Contaminated garments should be removed promptly and should not be re-used until they have been decontaminated. ► NOTE: Natural rubber, neoprene, PVC can be affected by isocyanates DO NOT use skin cream unless necessary and then use only minimum amount Isocyanate vapour may be absorbed into skin cream and this increases hazard. ▶ Polyethylene gloves **Body protection** See Other protection below All employees working with isocyanates must be informed of the hazards from exposure to the contaminant and the precautions necessary to prevent damage to their health. They should be made aware of the need to carry out their work so that as little contamination as possible is produced, and of the importance of the proper use of all safeguards against exposure to themselves and their fellow workers. Adequate training, both in the proper execution of the task and in the use

Other protection

of all associated engineering controls, as well as of any personal protective equipment, is essential.

high standard of personal cleanliness Overalls

- P.V.C. apron
- Barrier cream.
- 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 computergenerated selection:

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Material	CPI
BUTYL	С
NITRILE	С
PE/EVAL/PE	С
##diethylene	glycol

^{*} CPI - Chemwatch Performance Index

A: Best Selection

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.

Respiratory protection

Employees exposed to contamination hazards should be educated in the need for, and proper use of, facilities, clothing and equipment and thereby maintain a

Type A-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 5 x ES	A-AUS / Class 1 P2	-	A-PAPR-AUS / Class 1 P2
up to 25 x ES	Air-line*	A-2 P2	A-PAPR-2 P2
up to 50 x ES	-	A-3 P2	-
50+ x ES	-	Air-line**	-

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content. The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate

For spraying or operations which might generate aerosols:

Full face respirator with supplied air.

- ▶ In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard.
- ▶ However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate nationals standard must be used.
- Organic vapour respirators with particulate pre- filters and powered, air-purifying respirators are NOT suitable.
- Personal protective equipment must be appropriately selected, individually fitted and workers trained in their correct use and maintenance. Personal protective equipment must be regularly checked and maintained to ensure that the worker is being protected.
- Air- line respirators or self-contained breathing apparatus complying with the appropriate national standard should be used during the clean-up of spills and the repair or clean-up of contaminated equipment and similar situations which cause emergency exposures to hazardous atmospheric concentrations of isocvanate.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance

Part A: Dark brown to black liquid with slight musty odour; reacts slowly with water to liberate CO2 gas.|Part B: Light grey liquid with slight mousty odour; does not mix with water.

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Physical state	Liquid	Relative density (Water = 1)	0.98
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	<0 (freezing point)	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	207.78	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	129-199 (PMCC)	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Negligible	Gas group	Not Available
Solubility in water (g/L)	Reacts	pH as a solution (1%)	Not Applicable
Vapour density (Air = 1)	8.5 (MDI)	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. Presence of elevated temperatures.
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

Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Aliphatic alcohols with more than 3-carbons cause headache, dizziness, drowsiness, muscle weakness and delirium, central depression, coma, seizures and behavioural changes. Secondary respiratory depression and failure, as well as low blood pressure and irregular heart rhythms, may follow. Inhaled Inhalation hazard is increased at higher temperatures. The vapour/mist may be highly irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning for several hours after exposure Accidental ingestion of the material may be seriously damaging to the health of the individual; animal experiments indicate that ingestion of less than 40 gram may be fatal Ingestion Nonionic surfactants may produce localised irritation of the oral or gastrointestinal lining and induce vomiting and mild diarrhoea. Overexposure to non-ring alcohols causes nervous system symptoms. These include headache, muscle weakness and inco-ordination, giddiness, confusion, delirium and coma The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering. Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. **Skin Contact** Non-ionic surfactants cause less irritation than other surfactants as they have less ability to denature protein in the skin. Most liquid alcohols appear to act as primary skin irritants in humans. Significant percutaneous absorption occurs in rabbits but not apparently in man. Open cuts, abraded or irritated skin should not be exposed to this material 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. This material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation. Moderate inflammation may be expected with redness; conjunctivitis may occur with prolonged exposure. Eye Non-ionic surfactants can cause numbing of the cornea, which masks discomfort normally caused by other agents and leads to corneal injury. Irritation varies depending on the duration of contact, the nature and concentration of the surfactant. There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Chronic Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Harmful: danger of serious damage to health by prolonged exposure through inhalation.

This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe

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defects.

Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

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

There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby.

Persons with a history of asthma or other respiratory problems or are known to be sensitised, should not be engaged in any work involving the handling of isocyanates. [CCTRADE-Bayer, APMF]

Prolonged or repeated skin contact may cause degreasing, followed by drying, cracking and skin inflammation.

Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia. Respiratory sensitisation may result in allergic/asthma like responses; from coughing and minor breathing difficulties to bronchitis with wheezing, gasping.

	TOXICITY	IRRITATION
Dunlop Ardit Crack Filler	Not Available	Not Available
	TOXICITY	IRRITATION
polymeric diphenylmethane	Dermal (rabbit) LD50: >9400 mg/kg ^[2]	Eye (rabbit): 100 mg - mild
diisocyanate	Inhalation (rat) LC50: 0.00049 mg/L/4h ^[2]	
	Oral (rat) LD50: 43000 mg/kg $^{[2]}$	
	TOXICITY	IRRITATION
4,4'-diphenylmethane diisocyanate (MDI)	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Dermal Sensitiser *
,	Oral (rat) LD50: >2000 mg/kg ^[1]	Skin (rabbit): 500 mg /24 hours
	TOXICITY	IRRITATION
2,2,4-trimethyl-	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Eye (rabbit): very slight**
1,3-pentanediol diisobutyrate	Inhalation (rat) LC50: >7.95 mg/l/6h***[2]	Skin (guinea pig): 5000mg/kg-mild
	Oral (rat) LD50: >2000 mg/kg ^[1]	
	TOXICITY	IRRITATION
2,2,4-trimethyl-	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Eye (rabbit): very slight**
1,3-pentanediol diisobutyrate	Inhalation (rat) LC50: >7.95 mg/l/6h***[2]	Skin (guinea pig): 5000mg/kg-mild
	Oral (rat) LD50: >2000 mg/kg ^[1]	
	TOXICITY	IRRITATION
polypropylene/ polyethylene glycol copolymer	Inhalation (rat) LC50: 0.00032 mg/L/4H ^[2]	Eye (rabbit): 500 mg/24h - mild
giyooroopoiyiila	Oral (rat) LD50: 2300 mg/kg ^[2]	Skin (rabbit): 500 mg/24h - mild
	TOXICITY	IRRITATION
distindent of the l	Dermal (rabbit) LD50: 11890 mg/kg ^[2]	Eye (rabbit) 50 mg mild
diethylene glycol	Oral (rat) LD50: 12000 mg/kg ^[2]	Skin (human): 112 mg/3d-l mild
		Skin (rabbit): 500 mg mild
l egend:	1 Value obtained from Furance ECHA Posicionard Substances	- Acute toxicity 2 * Value obtained from manufacturer's SDS. I Inless otherwise specified data

Legend:

DIISOCYANATE &

1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

POLYMERIC DIPHENYLMETHANE DIISOCYANATE	product
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate
POLYPROPYLENE/ POLYETHYLENE GLYCOL COPOLYMER	The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. * Varies - dependent on degree of ethoxylation.
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	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.
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia.
POLYMERIC DIPHENYLMETHANE DISOCYANATE &	Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other

irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.

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4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)		
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflar	mmation, asthma and eczema.
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the involved. Such allergy is of the delayed type with onset up to four hours following exposure.	lgG type; cell-mediated reactions (T lymphocytes) may be
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance,	
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged	exposure to irritants may produce conjunctivitis.
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers a several members of diisocyanates tested on experimental animals by inhalation and oral exposure, outcome. This group of compounds has therefore been classified as cancer-causing.	
POLYMERIC DIPHENYLMETHANE DIISOCYANATE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	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.	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE & POLYPROPYLENE/ POLYETHYLENE GLYCOL COPOLYMER & DIETHYLENE GLYCOL	The material may cause skin irritation after prolonged or repeated exposure and may produce on one scaling and thickening of the skin.	contact skin redness, swelling, the production of vesicles,
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	For 2,2,4-trimethyl-1,3-pentanediol diisobutyrate (TXIB) Laboratory testing showed that TXIB does not cause genetic toxicity. It may damage the kidneys of	developing animals but only at levels that also affect the adult.
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	NOAEL oral (rat), 103 days = 1% in diet ***	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	NOEL oral (dog), 90 days = 1% in diet ***	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	Mutagenicity/Genotoxicity Data: ***	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	Chromosomal aberration assay: Negative (+/- activation)	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	CHO/HGPRT assay: Negative (+/- activation)	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	Salmonella-E.coli reverse mutation assay (Ames test): Negative (+/- activation)	
2,2,4-TRIMETHYL- 1,3-PENTANEDIOL DIISOBUTYRATE	*,**,*** Various suppliers MSDS	
Acute Toxicity	✓ Carcinogenicity	~
Skin Irritation/Corrosion	Reproductivity	0
Serious Eye Damage/Irritation	✓ STOT - Single Exposure	✓
Respiratory or Skin sensitisation	✓ STOT - Repeated Exposure	✓
Mutagenicity	○ Aspiration Hazard	0
		Data available but does not fill the criteria for classification

O – Data Not Available to make classification

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Toxicity

Dunlop Ardit Crack Filler	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	Not Available	Not Available	Not Available	Not Available	Not Available
. Palanta di	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
polymeric diphenylmethane diisocyanate	Not Available	Not Available	Not Available	Not Available	Not Available
4,4'-diphenylmethane	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
diisocyanate (MDI)	LC50	96	Fish	>0.500mg/L	6
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
2,2,4-trimethyl-	EC50	48	Crustacea	>1.46mg/L	1
1,3-pentanediol diisobutyrate	EC50	72	Algae or other aquatic plants	>7.49mg/L	2
unsobutyrate	NOEC	504	Crustacea	0.7mg/L	2
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
2,2,4-trimethyl-	EC50	48	Crustacea	>1.46mg/L	1
1,3-pentanediol diisobutyrate	EC50	72	Algae or other aquatic plants	>7.49mg/L	2
·	NOEC	504	Crustacea	0.7mg/L	2
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
polypropylene/ polyethylene glycol copolymer	Not Available	Not Available	Not Available	Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
Padadan ahard	LC50	96	Fish	>1000mg/L	1
diethylene glycol	EC50	48	Crustacea	=84000mg/L	1
	NOEC	168	Algae or other aquatic plants	=100mg/L	1
Legend:	(QSAR) - Aquat		egistered Substances - Ecotoxicological Information - Aq otox database - Aquatic Toxicity Data 5. ECETOC Aquati entration Data 8. Vendor Data		

DO NOT discharge into sewer or waterways.

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	HIGH	HIGH
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	HIGH	HIGH
diethylene glycol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	LOW (BCF = 1)
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	LOW (BCF = 1)
diethylene glycol	LOW (BCF = 180)

Mobility in soil

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	LOW (KOC = 607.5)
2,2,4-trimethyl-1,3-pentanediol diisobutyrate	LOW (KOC = 607.5)

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HIGH (KOC = 1) diethylene glycol

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

- ▶ 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 SDS and observe all notices pertaining to the product.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas certain wastes must be tracked

A Hierarchy of Controls seems to be common - the user should investigate:

Product / Packaging disposal

- Reduction Reuse
- Recycling
- ► Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use.

- DO NOT allow wash water from cleaning or process equipment to enter drains
- It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.
- DO NOT recycle spilled material
- Consult State Land Waste Management Authority for disposal.
- ▶ Neutralise spill material carefully and decontaminate empty containers and spill residues with 10% ammonia solution plus detergent or a proprietary decontaminant prior to disposal.
- ▶ DO NOT seal or stopper drums being decontaminated as CO2 gas is generated and may pressurise containers.

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

Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

SECTION 15 REGULATORY INFORMATION

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

POLYMERIC DIPHENYLMETHANE DIISOCYANATE(9016-87-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards	Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead)
Australia Hazardous Substances Information System - Consolidated Lists	requiring health monitoring
Australia Inventory of Chemical Substances (AICS)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
	Monographs

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)(101-68-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards	Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead)
Australia Hazardous Substances Information System - Consolidated Lists	requiring health monitoring
Australia Inventory of Chemical Substances (AICS)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
	Monographs

2,2,4-TRIMETHYL-1,3-PENTANEDIOL DIISOBUTYRATE(6846-50-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

2,2,4-TRIMETHYL-1,3-PENTANEDIOL DIISOBUTYRATE(6846-50-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

POLYPROPYLENE/ POLYETHYLENE GLYCOL COPOLYMER(9003-11-6) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

DIETHYLENE GLYCOL(111-46-6) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards	Australia Inventory of Chemical Substances (AICS)
Australia Hazardous Substances Information System - Consolidated Lists	

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y

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Canada - NDSL	N (diethylene glycol; 4,4'-diphenylmethane diisocyanate (MDI); polypropylene/ polyethylene glycol copolymer; 2,2,4-trimethyl-1,3-pentanediol diisobutyrate; polymeric diphenylmethane diisocyanate)
China - IECSC	Υ
Europe - EINEC / ELINCS / NLP	N (polypropylene/ polyethylene glycol copolymer; polymeric diphenylmethane diisocyanate)
Japan - ENCS	Υ
Korea - KECI	Υ
New Zealand - NZIoC	Υ
Philippines - PICCS	Υ
USA - TSCA	Υ
Legend:	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Other information

Ingredients with multiple cas numbers

Name	CAS No
4,4'-diphenylmethane diisocyanate (MDI)	101-68-8, 26447-40-5

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.

The 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.

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average

PC-STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

IDLH: Immediately Dangerous to Life or Health Concentrations

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value LOD: Limit Of Detection

OTV: Odour Threshold Value

BCF: BioConcentration Factors

BEI: Biological Exposure Index

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