

# Dunlop Concrete Resurfacer

**Ardex (Ardex Australia)**

**Chemwatch Hazard Alert Code: 3**

Chemwatch: **42-2914**

Issue Date: **21/07/2014**

Version No: **2.1.1.1**

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Safety Data Sheet according to WHS and ADG requirements

Initial Date: **Not Available**

S.GHS.AUS.EN

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

### Product Identifier

<b>Product name</b>	Dunlop Concrete Resurfacer
<b>Chemical Name</b>	Not Applicable
<b>Synonyms</b>	concrete resurfacing compound modified with high performance polymers for exceptional bond strength
<b>Proper shipping name</b>	Not Applicable
<b>Chemical formula</b>	Not Applicable
<b>Other means of identification</b>	Not Available
<b>CAS number</b>	Not Applicable

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

<b>Relevant identified uses</b>	Resurfacing of aged, worn and spalled concrete to give a "new concrete" surface finish.
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### Details of the manufacturer/importer

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

### Emergency telephone number

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

## SECTION 2 HAZARDS IDENTIFICATION

### Classification of the substance or mixture

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

#### CHEMWATCH HAZARD RATINGS

	Min	Max
Flammability	0	
Toxicity	1	
Body Contact	3	
Reactivity	0	
Chronic	0	


0 = Minimum  
1 = Low  
2 = Moderate  
3 = High  
4 = Extreme

<b>Poisons Schedule</b>	Not Applicable
<b>GHS Classification</b> <sup>[1]</sup>	Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, STOT - SE (Resp. Irr.) Category 3

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**Legend:** 1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

### Label elements

GHS label elements	
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SIGNAL WORD	<b>DANGER</b>
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### Hazard statement(s)

H315	Causes skin irritation
H318	Causes serious eye damage
H335	May cause respiratory irritation

### Precautionary statement(s): Prevention

P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.

### Precautionary statement(s): Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider
P321	Specific treatment (see advice on this label).
P302+P352	IF ON SKIN: Wash with plenty of water and soap

### 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 to authorised chemical landfill or if organic to high temperature incineration
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## SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

### Substances

See section below for composition of Mixtures

### Mixtures

CAS No	%[weight]	Name
65997-15-1	30-60	<a href="#">portland cement</a>
14808-60-7.	30-60	<a href="#">graded sand</a>
24937-78-8	1-5	<a href="#">ethylene/ vinyl acetate copolymer</a>

## SECTION 4 FIRST AID MEASURES

### Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>▶ 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.</li> <li>▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> </ul>
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	<ul style="list-style-type: none"> <li>▶ Transport to hospital or doctor without delay.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul> <p>For thermal burns:</p> <ul style="list-style-type: none"> <li>▶ Decontaminate area around burn.</li> <li>▶ Consider the use of cold packs and topical antibiotics.</li> </ul> <p>For first-degree burns (affecting top layer of skin)</p> <ul style="list-style-type: none"> <li>▶ Hold burned skin under cool (not cold) running water or immerse in cool water until pain subsides.</li> <li>▶ Use compresses if running water is not available.</li> <li>▶ Cover with sterile non-adhesive bandage or clean cloth.</li> <li>▶ Do NOT apply butter or ointments; this may cause infection.</li> <li>▶ Give over-the counter pain relievers if pain increases or swelling, redness, fever occur.</li> </ul> <p>For second-degree burns (affecting top two layers of skin)</p> <ul style="list-style-type: none"> <li>▶ Cool the burn by immerse in cold running water for 10-15 minutes.</li> <li>▶ Use compresses if running water is not available.</li> <li>▶ Do NOT apply ice as this may lower body temperature and cause further damage.</li> <li>▶ Do NOT break blisters or apply butter or ointments; this may cause infection.</li> <li>▶ Protect burn by cover loosely with sterile, nonstick bandage and secure in place with gauze or tape.</li> </ul> <p>To prevent shock: (unless the person has a head, neck, or leg injury, or it would cause discomfort):</p> <ul style="list-style-type: none"> <li>▶ Lay the person flat.</li> <li>▶ Elevate feet about 12 inches.</li> <li>▶ Elevate burn area above heart level, if possible.</li> <li>▶ Cover the person with coat or blanket.</li> <li>▶ Seek medical assistance.</li> </ul> <p>For third-degree burns</p> <p>Seek immediate medical or emergency assistance.</p> <p>In the mean time:</p> <ul style="list-style-type: none"> <li>▶ Protect burn area cover loosely with sterile, nonstick bandage or, for large areas, a sheet or other material that will not leave lint in wound.</li> <li>▶ Separate burned toes and fingers with dry, sterile dressings.</li> <li>▶ Do not soak burn in water or apply ointments or butter; this may cause infection.</li> <li>▶ To prevent shock see above.</li> <li>▶ For an airway burn, do not place pillow under the person's head when the person is lying down. This can close the airway.</li> <li>▶ Have a person with a facial burn sit up.</li> <li>▶ Check pulse and breathing to monitor for shock until emergency help arrives.</li> </ul>
<b>Inhalation</b>	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ 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.</li> <li>▶ Transport to hospital, or doctor, without delay.</li> </ul>
<b>Ingestion</b>	<ul style="list-style-type: none"> <li>▶ <b>If swallowed do NOT induce vomiting.</b></li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Seek medical advice.</li> </ul>

## Indication of any immediate medical attention and special treatment needed

	<p>Treat symptomatically.</p> <p>For acute or short term repeated exposures to iron and its derivatives:</p> <ul style="list-style-type: none"> <li>▶ Always treat symptoms rather than history.</li> <li>▶ In general, however, toxic doses exceed 20 mg/kg of ingested material (as elemental iron) with lethal doses exceeding 180 mg/kg.</li> <li>▶ Control of iron stores depend on variation in absorption rather than excretion. Absorption occurs through aspiration, ingestion and burned skin.</li> <li>▶ Hepatic damage may progress to failure with hypoprothrombinaemia and hypoglycaemia. Hepatorenal syndrome may occur.</li> </ul>
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- ▶ Iron intoxication may also result in decreased cardiac output and increased cardiac pooling which subsequently produces hypotension.
  - ▶ Serum iron should be analysed in symptomatic patients. Serum iron levels (2-4 hrs post-ingestion) greater than 100 ug/dL indicate poisoning with levels, in excess of 350 ug/dL, being potentially serious. Emesis or lavage (for obtunded patients with no gag reflex) are the usual means of decontamination.
  - ▶ Activated charcoal does not effectively bind iron.
  - ▶ Catharsis (using sodium sulfate or magnesium sulfate) may only be used if the patient already has diarrhoea.
  - ▶ Deferoxamine is a specific chelator of ferric (3+) iron and is currently the antidote of choice. It should be administered parenterally. [Ellenhorn and Barceloux: Medical Toxicology]
- 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:
- ▶ Injury should be irrigated for 20-30 minutes.
- Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

## 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 a significant fire risk, however containers may burn.
- ▶ , silicon dioxide (SiO<sub>2</sub>) May emit poisonous fumes May emit corrosive fumes.

## SECTION 6 ACCIDENTAL RELEASE MEASURES

### Personal precautions, protective equipment and emergency procedures

#### 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.

#### Major Spills

- Moderate hazard.
- ▶ **CAUTION:** Advise personnel in area.
  - ▶ Alert Emergency Services and tell them location and nature of hazard.

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▶ Control personal contact by wearing protective clothing.

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

**SECTION 7 HANDLING AND STORAGE**

**Precautions for safe handling**

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ Prevent concentration in hollows and sumps.</li> </ul>
<b>Other information</b>	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ Store in a cool, dry area protected from environmental extremes.</li> <li>▶ Store away from incompatible materials and foodstuff containers.</li> </ul>

**Conditions for safe storage, including any incompatibilities**

<b>Suitable container</b>	<ul style="list-style-type: none"> <li>▶ Polyethylene or polypropylene container.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
<b>Storage incompatibility</b>	<ul style="list-style-type: none"> <li>▶ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.</li> <li>▶ Avoid contact with copper, aluminium and their alloys.</li> </ul>

**PACKAGE MATERIAL INCOMPATIBILITIES**

Not Available

**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	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	This value is for inspirable dust containing no asbestos and < 1% crystalline silica (see Chapter 14)
Australia Exposure Standards	graded sand	Silica - Crystalline Quartz (respirable dust) / Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	(see Silica - Crystalline) / (see Chapter 14)


**EMERGENCY LIMITS**

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
graded sand	0.3 ppm	0.3 ppm	0.3 ppm	50 ppm
ethylene/ vinyl acetate copolymer	10 ppm	30 ppm	50 ppm	250 ppm

Ingredient	Original IDLH	Revised IDLH
portland cement	N.E. mg/m3 / N.E. ppm	5,000 mg/m3
graded sand	N.E. mg/m3 / N.E. ppm	50 mg/m3
ethylene/ vinyl acetate copolymer	Not Available	Not Available

**Exposure controls**

<b>Appropriate engineering controls</b>	<p>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.</p> <p>The basic types of engineering controls are:</p> <ul style="list-style-type: none"> <li>Process controls which involve changing the way a job activity or process is done to reduce the risk.</li> <li>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker</li> </ul>
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	and ventilation that strategically "adds" and "removes" air in the work environment.
<b>Personal protection</b>	
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>▶ Safety glasses with side shields.</li> <li>▶ Chemical goggles.</li> <li>▶ 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.</li> </ul>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<p>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.</p> <p>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.</p> <p>Suitability and durability of glove type is dependent on usage.</p>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<ul style="list-style-type: none"> <li>▶ Overalls.</li> <li>▶ P.V.C. apron.</li> <li>▶ Barrier cream.</li> </ul>
<b>Thermal hazards</b>	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:

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Material	CPI

\* 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

Particulate. (AS/NZS 1716 & 1715, EN 143:000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	- -	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

\* - Negative pressure demand \*\* - Continuous flow

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(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

## SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

### Information on basic physical and chemical properties

<b>Appearance</b>	Grey powder; insoluble in water.		
<b>Physical state</b>	Divided Solid	<b>Relative density (Water = 1)</b>	Not Available
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Applicable	<b>Decomposition temperature</b>	Not Applicable
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Applicable
<b>Initial boiling point and boiling range (°C)</b>	Not Applicable	<b>Molecular weight (g/mol)</b>	Not Applicable

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Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water (g/L)	Immiscible	pH as a solution(1%)	Not Applicable
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

## SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
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	Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
Ingestion	The material has <b>NOT</b> 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	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.
Eye	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Chronic	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases.

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TOXICITY

IRRITATION

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	Not Available	Not Available
<b>portland cement</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Not Available	Not Available
<b>graded sand</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Not Available	Not Available
<b>ethylene/ vinyl acetate copolymer</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Not Available	Not Available

Not available. Refer to individual constituents.

<b>PORTLAND CEMENT</b>	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.
<b>GRADED SAND, ETHYLENE/ VINYL ACETATE COPOLYMER</b>	No significant acute toxicological data identified in literature search.

<b>Acute Toxicity</b>	⊘	<b>Carcinogenicity</b>	⊘
<b>Skin Irritation/Corrosion</b>	✓	<b>Reproductivity</b>	⊘
<b>Serious Eye Damage/Irritation</b>	✓	<b>STOT - Single Exposure</b>	✓
<b>Respiratory or Skin sensitisation</b>	⊘	<b>STOT - Repeated Exposure</b>	⊘
<b>Mutagenicity</b>	⊘	<b>Aspiration Hazard</b>	⊘

**Legend:** ✓ – Data required to make classification available  
 ✗ – Data available but does not fill the criteria for classification  
 ⊘ – Data Not Available to make classification

**CMR STATUS**

Not Applicable

**SECTION 12 ECOLOGICAL INFORMATION**

**Toxicity**

**DO NOT discharge into sewer or waterways.**

**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**

<b>Product / Packaging disposal</b>	▶ Recycle wherever possible or consult manufacturer for recycling options.
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- ▶ Consult State Land Waste Management Authority for disposal.
- ▶ Bury residue in an authorised landfill.
- ▶ Recycle containers if possible, or dispose of in an authorised landfill.

## 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 73 / 78 and the IBC code

Source	Ingredient	Pollution Category
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	ethylene/ vinyl acetate copolymer	Y

## SECTION 15 REGULATORY INFORMATION

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

portland cement(65997-15-1) is found on the following regulatory lists	"Australia - New South Wales Protection of the Environment Operations (Waste) Regulation 2005 - Waste transported within NSW or interstate and required to be tracked", "Australia Exposure Standards", "Australia - Tasmania - Work Health and Safety Regulations 2012 - Restricted hazardous chemicals", "Australia - Northern Territories Work Health and Safety National Uniform Legislation Regulations- Restricted hazardous chemicals", "Australia - South Australia - Work Health and Safety Regulations 2012 - Restricted hazardous chemicals", "OECD List of High Production Volume (HPV) Chemicals", "Australia Inventory of Chemical Substances (AICS)", "Australia - Queensland Work Health and Safety Regulation - Restricted hazardous chemicals", "Australia Hazardous Waste Act - List A Wastes", "International Society of Automotive Engineers (SAE) Declarable Substances Chemical List - ARP9536", "Australia - New South Wales - Work Health and Safety Regulation 2011 Restricted hazardous chemicals", "Australia National Pollutant Inventory", "UNECE - Kiev Protocol on Pollutant Release and Transfer Registers - Annex II", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Hazardous Substances Information System - Consolidated Lists", "Australia Work Health and Safety Regulations 2011 - Restricted hazardous chemicals"
graded sand(14808-60-7.) is found on the following regulatory lists	"Australia Hazardous Substances Requiring Health Surveillance", "Australia Exposure Standards", "Australia - Tasmania Hazardous Substances Prohibited for Specified Uses", "Australia - Northern Territories Work Health and Safety National Uniform Legislation Regulations- Restricted hazardous chemicals", "FisherTransport Information", "United Nations Consolidated List of Products Whose Consumption and/or Sale Have Been Banned, Withdrawn, Severely Restricted or Not Approved by Governments", "OECD List of High Production Volume (HPV) Chemicals", "Australia Inventory of Chemical Substances (AICS)", "Australia - Queensland Work Health and Safety Regulation - Restricted hazardous chemicals", "International Society of Automotive Engineers (SAE) Declarable Substances Chemical List - ARP9536", "OECD Existing Chemicals Database", "Sigma-AldrichTransport Information", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Hazardous Substances Information System - Consolidated Lists", "Australia Work Health and Safety Regulations 2011 - Restricted hazardous chemicals", "Australia - New South Wales Hazardous Substances Prohibited for Specific Uses"
ethylene/ vinyl acetate copolymer(24937-78-8) is found on the following regulatory lists	"IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk", "FisherTransport Information", "IMO MARPOL 73/78 (Annex II) - List of Other Liquid Substances", "Australia Inventory of Chemical Substances (AICS)", "Sigma-AldrichTransport Information", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "International Fragrance Association (IFRA) Survey: Transparency List", "IMO IBC Code Chapter 17: Summary of minimum requirements"

## 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](http://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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