

HPP Lunds

Version No: 1.2.18.11

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Issue Date: 11/11/2020 Print Date: 09/21/2021 S.GHS.AUS.EN

SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier	
Product name	SuperWeld Extreme
Chemical Name	Not Applicable
Synonyms	33400
Other means of identification	Not Available

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

Relevant identified uses Use according to manufacturer's directions.

Details of the supplier of the safety data sheet

Registered company name	HPP Lunds
Address	1/195 Jackson Rd Sunnybank Hills, Qld 4109 Australia
Telephone	1300-306-781
Fax	903-885-5911
Website	www.hpplunds.com.au & www.jbweld.com.au
Email	Sales@hpplunds.com.au

Emergency telephone number

Linergency telephone number	
Association / Organisation	InfoTrac
Emergency telephone numbers	Transportation Emergencies (24 hour): 1300-366-961
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	Not Applicable	
Classification ^[1]	Serious Eye Damage/Eye Irritation Category 2A, Hazardous to the Aquatic Environment Acute Hazard Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Skin Corrosion/Irritation Category 2	
Legend:	1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	

Label elements

Hazard pictogram(s)	
Signal word	Warning
Hazard statement(s)	

H319	Causes serious eye irritation.
H402	Harmful to aquatic life.
H335	May cause respiratory irritation.
H315	Causes skin irritation.

P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.
P261	Avoid breathing mist/vapours/spray.
P273	Avoid release to the environment.
P272	Contaminated work clothing should not be allowed out of the workplace.

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.
P312	Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.
P337+P313	If eye irritation persists: Get medical advice/attention.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P332+P313	If skin irritation occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it 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 to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7085-85-0	90-100	ethyl cyanoacrylate
123-31-9	0.1-1	hydroquinone
Legend:	1. Classified by Chemwatch; 2. Classification drawn from Classification drawn from C&L * EU IOELVs available	n HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4.

SECTION 4 First aid measures

Description of first aid measures		
Eye Contact	 Eyelid Adhesion Wash thoroughly with water and apply moist pad; maintain in position. DO NOT force separation. Transport to hospital, or doctor without delay. Minor eye contamination should be treated by copious washing with water or 1% sodium carbonate solution. The eye will generally open without further action, typically in one to two days. there should be no residual damage. Adhesive introduced Removal of contact lenses after eye injury should only be undertaken by skilled personnel. Adhesive in the Eye: Adhesive will attach itself to eye proteins and will disassociate from these over intermittent periods, usually within several hours. This will result in weeping until clearance of the protein complex. It is important to understand that disassociation will normally occur within a matter of hours even with gross contamination. 	
Skin Contact	Cyanoacrylate adhesives is a very fast setting and strong. they bond human tissues including skin in seconds. Experience shows that accidents involving cyanoacrylates are best handled by passive, non-surgical first aid. Skin Contact: Remove excessive adhesive. Soak in warm water - the adhesive should loosen from the skin in several hours. Dried adhesive does not present a health hazard. Contact with clothes, fabric, rags or tissues may generate heat, and strong irritating odours; skin burns may also ensue. Skin Adhesion: IMMEDIATELY immerse affected areas in warm soapy water. Do NOT force bonded surfaces apart. Use a gentle rolling action to peel surfaces apart if possible. It may be necessary to use a blunt edge such as a spatula or spoon handle. Do NOT attempt to pull the surfaces apart with a direct opposing action. Remove any cured material with warm, soapy water. Seek medical attention without delay. A solvent such as acetone may be used (with care!) to separate bonded skin surfaces. NEVER use solvent near eyes, mouth, cuts, or abrasions.	
Inhalation	 If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary. 	

	 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, without delay.
Ingestion	 IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means.
	 For material bonded in the mouth seek medical/dental attention. If lips are accidentally stuck together apply lots of warm water and encourage maximum wetting and pressure from saliva inside the mouth. Peal or roll lips apart. Do NOT attempt to pull the lips with direct opposing action. It is almost impossible to swallow cyanoacrylates. The adhesive solidifies and adheres in the mouth. Saliva will lip the adhesion in one or two days.

Indication of any immediate medical attention and special treatment needed

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

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 pulmonary oedema. ۲
- Monitor and treat, where necessary, for shock.
- Anticipate 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.

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. ٠
- ۶ 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.
- Drug therapy should be considered for pulmonary oedema. Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

It should never be necessary to use surgical means to separate tissues which become accidentally bonded. The action of physiological fluids or warm soapy water will cause this adhesive to eventually fail.

Treat symptomatically

SECTION 5 Firefighting measures

Extinguishing media

Foam

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Dry chemical powder.

Special hazards arising from the substrate or mixture

Fire Incompatibility Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result Advice for firefighters

Fire Fighting	 Alert Fire Department and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus.
Fire/Explosion Hazard	 Combustible. Slight fire hazard when exposed to heat or flame. Combustion products include: carbon dioxide (CO2) nitrogen oxides (NOx) other pyrolysis products typical of burning organic material.

	May emit poisonous fumes. May emit corrosive fumes.
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	 If cloth has been used to wipe up spills, immediately soak the cloth in water to produce polymerisation and prevent possibility of autoignition. Remove all ignition sources. Clean up all spills immediately.
Major Spills	Moderate hazard. Clear area of personnel and move upwind.

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

SECTION 7 Handling and storage

Precautions for safe handling	
Safe handling	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. DO NOT allow clothing wet with material to stay in contact with skin
Other information	 Store in original containers. Keep containers securely sealed.

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	 For cyanoacrylates: Avoid contact with acids, bases, amines. Avoid contact with clothes, fabric, rags (especially cotton and wool) rubber or paper; contact may cause polymerisation. Segregate from alcohol, water. Avoid reaction with oxidising agents

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	hydroquinone	Hydroquinone		2 mg/m3	Not Available	Not Available	Not Available
Emergency Limits							
Ingredient	TEEL-1		TEEL	-2		TEEL-3	
hydroquinone	3 mg/m3		20 mg/m3		120 mg/m3		
Ingredient	Original IDLH				Revised IDLH		
ethyl cyanoacrylate	Not Available			Not Available	Not Available		
hydroquinone	50 ma/m3		Not Available				

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit		
ethyl cyanoacrylate	E	≤ 0.1 ppm		
Notes:	Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.			

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.

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SuperWeld Extreme

Personal protection	
Eye and face protection	 Safety glasses with side shields. Chemical goggles.
Skin protection	See Hand protection below
Hands/feet protection	 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 gloves and other protective equipment, to avoid all possible skin contact. 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. Polyethylene gloves
Body protection	See Other protection below
Other protection	 Overalls. P.V.C apron.

Respiratory protection

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

- 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.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Not Available		
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)	Not Available	Molecular weight (g/mol)	Not Available
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 Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (%)	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.
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 can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. In low humidity, cyanoacrylate vapours are irritating to the respiratory system and eyes. High concentrations may cause inflammation of the lungs and other complications.				
Ingestion	Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. Uncured cyanoacrylates are difficult to swallow as saliva cures the surface of the adhesive with negligible bonding. The cured material is considered to be non-hazardous.				
Skin Contact	This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition Small n-alkyl cyanoacrylates cause burns and irritation on skin contact. Exposure to their vapours can cause irritation, but usually only in dry conditions. 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.				
Eye	This material can cause eye irritation and damage in some persons. Exposure to cyanoacrylate vapours can cause discomfort and tears, nas	al discharge, and blurred vision.	The eyelids may be glued shut.		
Chronic	Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Dermatitis may result from prolonged exposures. On repeated and prolonged exposure by skin contact or inhalation, a small proportion of individuals develop allergic sensitivities. Chronic exposure to cyanides and certain nitriles may result in interference to iodine uptake by thyroid gland and its consequent enlargement. This occurs following metabolic conversion of the cyanide moiety to thiocyanate.				
SuperWeld Extreme	ΤΟΧΙΟΙΤΥ	IRRITATION			
	Not Available	Not Available			
ethyl cyanoacrylate	TOXICITY Dermal (rabbit) LD50: 233.2 mg/kg ^[2] Inhalation(Rat) LC50; 5.278 mg/L4h ^[2] Oral(Rat) LD50; 190.8 mg/kg ^[2]		IRRITATION Not Available		

	TOXICITY	IRRITATION
hydroquinone	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Skin (human): 2% - mild
	Oral(Rat) LD50; 367.3 mg/kg ^[1]	Skin (human): 5% - SEVERE
Legend:	 Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* specified data extracted from RTECS - Register of Toxic Effect of chemical Substances 	Value obtained from manufacturer's SDS. Unless otherwise ances

ETHYL CYANOACRYLATE	* [AIHAAP]		
HYDROQUINONE	The material may cause severe 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. Repeated exposures may produce severe ulceration. Animal testing shows that hydroquinone is rapidly and extensively absorbed from the gut and lung. Absorption via the skin is slow, but may accelerated with alcohols. 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.		y produce on contact skin redness, swelling, the e severe ulceration. Id lung. Absorption via the skin is slow, but may be
SuperWeld Extreme & ETHYL CYANOACRYLATE	Asthma-like symptoms may continue for months or ev known as reactive airways dysfunction syndrome (RA For methyl cyanoacrylate (MCA) and ethyl cyanoacryl Studies show that the key toxicological features of MC cause eye and skin irritation on repeated exposure bu	en years after exposure to the materia DS) which can occur after exposure to ate (ECA) CA and ECA are as a result of local ac t inconclusive evidence of skin sensiti	al ends. This may be due to a non-allergic condition b high levels of highly irritating compound. tivity at the site of contact. Liquid MCA and ECA may zation and asthma causing effect.
SuperWeld Extreme & HYDROQUINONE	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.		
Acute Toxicity	×	Carcinogenicity	×

Skin Irritation/Corrosion	✓	Reproductivity	×
Serious Eye Damage/Irritation	*	STOT - Single Exposure	×
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×
Mutagenicity	×	Aspiration Hazard	×
		Legend: X – Data either n	ot available or does not fill the criteria for classification le to make classification

SECTION 12 Ecological information

	Endpoint	Test Duration (hr)		Species	Value		Source	
Superweid Extreme	Not Available	Not Available Not Available		Not Available	Not Available	Not Available		
	Endpoint	Test Duration (hr)		Species	Value		Source	
ethyl cyanoacrylate	Not Available	Not Available Not Available Not Available		Not Available	Not Available			
	Endpoint	Test Duration (hr)	Spe	cies		Value		Sourc
	ErC50	72h	Alga	e or other aquatic plan	s	0.335mg	/I	1
	EC50	72h	Alga	e or other aquatic plan	s	<0.033m	g/l	2
nyaroquinone	LC50	96h	Fish		0.044mg	/I	2	
	EC50	48h	Crus	tacea		0.061mg	/I	2
		706	Alaa	e or other aquatic plan	s	0.002mg	/1	2

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

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.

Substances containing unsaturated carbons are ubiquitous in indoor environments. They result from many sources (see below).

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
ethyl cyanoacrylate	LOW	LOW
hydroquinone	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
ethyl cyanoacrylate	LOW (LogKOW = 1.4174)
hydroquinone	LOW (BCF = 65)

Mobility in soil

Ingredient	Mobility
ethyl cyanoacrylate	LOW (KOC = 6.847)
hydroquinone	LOW (KOC = 434)

SECTION 13 Disposal considerations

Waste treatment methods	
Product / Packaging disposal	 Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. 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. Recycle wherever possible or consult manufacturer for recycling options. Consult State Land Waste Authority for disposal.

SECTION 14 Transport information

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

Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
ethyl cyanoacrylate	Not Available
hydroquinone	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
ethyl cyanoacrylate	Not Available
hydroquinone	Not Available

SECTION 15 Regulatory information

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

ethyl cyanoacrylate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

hydroquinone is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -Schedule 2

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4 $\ensuremath{\mathsf{4}}$

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5 $\,$

Australian Inventory of Industrial Chemicals (AIIC)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule $\mathbf{6}$

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (ethyl cyanoacrylate; hydroquinone)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	11/11/2020
Initial Date	11/11/2020

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.

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.