



Fiberlock 8317 Instant Mold Stain Remover

ICP Construction

Version No: 2.3

Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

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S.GHS.USA.EN

SECTION 1 IDENTIFICATION

Product Identifier

Product name	Fiberlock 8317 Instant Mold Stain Remover
Synonyms	Not Available
Proper shipping name	Hypochlorite solutions
Other means of identification	Not Available

Recommended use of the chemical and restrictions on use

Relevant identified uses	Cleaning and removing mold and mildew stains
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Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party

Registered company name	ICP Construction
Address	150 Dascomb Road Massachusetts Andover United States
Telephone	978-623-9980
Fax	Not Available
Website	Not Available
Email	Not Available

Emergency phone number

Association / Organisation	Chemtel
Emergency telephone numbers	1-800-255-3924
Other emergency telephone numbers	1-813-248-0585

SECTION 2 HAZARD(S) IDENTIFICATION

Classification of the substance or mixture

Classification	Serious Eye Damage Category 1, Specific target organ toxicity - single exposure Category 2, Metal Corrosion Category 1, Skin Corrosion/Irritation Category 1A, Acute Aquatic Hazard Category 1, Chronic Aquatic Hazard Category 2
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Label elements

GHS label elements	
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SIGNAL WORD	DANGER
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Hazard statement(s)

H371	May cause damage to organs.
H290	May be corrosive to metals.
H314	Causes severe skin burns and eye damage.
H400	Very toxic to aquatic life.
H411	Toxic to aquatic life with long lasting effects.

Hazard(s) not otherwise specified

Not Applicable

Precautionary statement(s) Prevention

Continued...

P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P234	Keep only in original container.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

Precautionary statement(s) Storage

P405	Store locked up.
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Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS**Substances**

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7681-52-9	5-10	<u>sodium hypochlorite</u>
1310-73-2	0-1	<u>sodium hydroxide</u>
1300-72-7	0-1	<u>sodium xylenesulfonate</u>
1643-20-5	0-1	<u>lauryldimethylamine oxide</u>

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"> ▶ Immediately hold eyelids apart and flush the eye continuously with running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▶ Transport to hospital or doctor without delay. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately flush body and clothes with large amounts of water, using safety shower if available. ▶ Quickly remove all contaminated clothing, including footwear. ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. ▶ Transport to hospital, or doctor.
Inhalation	<ul style="list-style-type: none"> ▶ 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. ▶ Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. ▶ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). ▶ As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. ▶ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. <p>This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)</p>
Ingestion	<ul style="list-style-type: none"> ▶ For advice, contact a Poisons Information Centre or a doctor at once. ▶ Urgent hospital treatment is likely to be needed. ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Transport to hospital or doctor without delay.

Most important symptoms and effects, both acute and delayed

See Section 11

Indication of any immediate medical attention and special treatment needed

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, cricothyrotomy 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]

For acute or repeated exposures to hypochlorite solutions:

- ▶ Release of small amounts of hypochlorous acid and acid gases from the stomach following ingestion, is usually too low to cause damage but may be irritating to mucous membranes. Buffering with antacid may be helpful if discomfort is evident.
- ▶ Evaluate as potential caustic exposure.
- ▶ Decontaminate skin and eyes with copious saline irrigation. Check exposed eyes for corneal abrasions with fluorescein staining.
- ▶ Emesis or lavage and catharsis may be indicated for mild caustic exposure.
- ▶ Chlorine exposures require evaluation of acid/base and respiratory status.
- ▶ Inhalation of vapours or mists may result in pulmonary oedema.

ELLENHORN and BARCELOUX: Medical Toxicology.

Excellent warning properties force rapid escape of personnel from chlorine vapour thus most inhalations are mild to moderate. If escape is not possible, exposure to high concentrations for a very short time can result in dyspnea, haemophysis and cyanosis with later complications being tracheobroncho-pneumonitis and pulmonary oedema. Oxygen, intermittent positive pressure breathing apparatus and aerosolised bronchodilators are of therapeutic value where chlorine inhalation has been light to moderate. Severe inhalation should result in hospitalisation and treatment for a respiratory emergency.

Any chlorine inhalation in an individual with compromised pulmonary function (COPD) should be regarded as a severe inhalation and a respiratory emergency. [CCINFO, Dow 1988]

Effects from exposure to chlorine gas include pulmonary oedema which may be delayed. Observation in hospital for 48 hours is recommended

Diagnosed asthmatics and those people suffering from certain types of chronic bronchitis should receive medical approval before being employed in occupations involving chlorine exposure.

If burn is present, treat as any thermal burn, after decontamination.

Depending on the degree of exposure, periodic medical examination is indicated. The symptoms of lung oedema often do not manifest until a few hours have passed and they are aggravated by physical effort. Rest and medical observation is therefore essential. Immediate administration of an appropriate spray, by a doctor or a person authorised by him/her should be considered.

(ICSC24419/24421

SECTION 5 FIRE-FIGHTING MEASURES

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
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Special protective equipment and precautions for fire-fighters

Fire Fighting	
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Non combustible. ▶ Not considered a significant fire risk, however containers may burn. May emit corrosive fumes.

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	<ul style="list-style-type: none"> ▶ Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. ▶ Check regularly for spills and leaks. ▶ 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	#

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area.
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Other information	<ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ Store in a cool, dry, well-ventilated area. ▶ DO NOT store near acids, or oxidising agents ▶ No smoking, naked lights, heat or ignition sources.
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Conditions for safe storage, including any incompatibilities

Suitable container	<p>Liquid inorganic hypochlorites shall not be transported in unlined metal drums. Inner packagings shall be fitted with vented closures and plastics drums and carboys shall have vented closures or be performance tested to a minimum of 250 kPa. All non-vented packagings shall be filled so that the ullage is at least 10% at 21-25 deg.C.</p> <ul style="list-style-type: none"> ▶ Lined metal can, lined metal pail/ can. ▶ Plastic pail. ▶ Polyliner drum. <p>For low viscosity materials</p> <ul style="list-style-type: none"> ▶ Drums and jerricans must be of the non-removable head type. ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure. <p>For materials with a viscosity of at least 2680 cSt.</p>
Storage incompatibility	<ul style="list-style-type: none"> ▶ Contact with acids produces toxic fumes ▶ Presence of rust (iron oxide) or other metal oxides catalyses decomposition of inorganic hypochlorites. ▶ Contact with water can cause heating and decomposition giving off chlorine and oxygen gases. Solid hypochlorites in contact with water or moisture may generate sufficient heat to ignite combustible materials. <p>Contact with acids produces toxic fumes of chlorine</p> <ul style="list-style-type: none"> ▶ Avoid contact with copper, aluminium and their alloys.

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION**Control parameters****OCCUPATIONAL EXPOSURE LIMITS (OEL)****INGREDIENT DATA**

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
US OSHA Permissible Exposure Levels (PELs) - Table Z1	sodium hydroxide	Sodium hydroxide	2 mg/m3	Not Available	Not Available	Not Available
US ACGIH Threshold Limit Values (TLV)	sodium hydroxide	Sodium hydroxide	Not Available	Not Available	2 mg/m3	TLV® Basis: URT, eye, & skin irr
US NIOSH Recommended Exposure Limits (RELs)	sodium hydroxide	Caustic soda, Lye, Soda lye, Sodium hydrate	Not Available	Not Available	2 mg/m3	Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
sodium hypochlorite	Sodium hypochlorite pentahydrate	13 mg/m3	140 mg/m3	290 mg/m3
sodium hypochlorite	Sodium hypochlorite	2 mg/m3	54 mg/m3	630 mg/m3
sodium hydroxide	Sodium hydroxide	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
sodium hypochlorite	Not Available	Not Available
sodium hydroxide	250 mg/m3	10 mg/m3
sodium xylenesulfonate	Not Available	Not Available
lauryldimethylamine oxide	Not Available	Not Available

Exposure controls

Appropriate engineering controls	<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> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure. ▶ Chemical goggles whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted. ▶ Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Elbow length PVC gloves ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ PVC Apron. ▶ PVC protective suit may be required if exposure severe.

Thermal hazards	Not Available
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Respiratory protection

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

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)	14	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	100	Molecular weight (g/mol)	Not 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)	1.60	Gas group	Not Available
Solubility in water (g/L)	Immiscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	<p>The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane. The material has NOT been classified by EC Directives or other classification systems as "harmful by inhalation". This is because of the lack of corroborating animal or human evidence.</p>
Ingestion	<p>Ingestion of alkaline corrosives may produce burns around the mouth, ulcerations and swellings of the mucous membranes, profuse saliva production, with an inability to speak or swallow. Both the oesophagus and stomach may experience burning pain; vomiting and diarrhoea may follow. The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence.</p> <p>Ingestion of hypochlorites may cause burning in the mouth and throat, abdominal cramps, nausea, vomiting, diarrhoea, pain and inflammation of the mouth and stomach, fall of blood pressure, shock, confusion, and delirium. Severe poisonings may lead to convulsion, coma and death. Ingestion irritates the mouth, throat, and stomach.</p> <p>The material can produce severe chemical burns within the oral cavity and gastrointestinal tract following ingestion.</p>
Skin Contact	<p>The material can produce severe chemical burns following direct contact with the skin.</p> <p>Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.</p> <p>Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic;</p>

Fiberlock 8317 Instant Mold Stain Remover

	<p>tissue destruction may be deep.</p> <p>Contact may cause severe itchiness, skin lesions and mild eczema.</p> <p>A 5.25% solution of sodium hypochlorite applied to intact human skin for 4 hours and observed at 4, 24 and 48 hours resulted in exudation and slight sloughing of the skin on 4 of 7 subjects.</p> <p>Two patients were reported with chronic allergic dermatitis of the hand related to sensitisation to sodium hypochlorite as the active component of laundry bleach. Open cuts, abraded or irritated skin should not be exposed to this material.</p> <p>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.</p>
Eye	<p>If applied to the eyes, this material causes severe eye damage.</p> <p>Direct eye contact with corrosive bases can cause pain and burns. There may be swelling, epithelium destruction, clouding of the cornea and inflammation of the iris. Mild cases often resolve; severe cases can be prolonged with complications such as persistent swelling, scarring, permanent cloudiness, bulging of the eye, cataracts, eyelids glued to the eyeball and blindness.</p> <p>Hypochlorite in pool water at concentrations of 1 ppm chlorine or less is non irritating to eyes if the pH is higher than 7.2 (slightly alkaline); At lower pH sensation of stinging, smarting of eyes with transient reddening may occur but generally no injury.</p> <p>Eye contact with a 5% hypochlorite solution may produce a temporary burning discomfort and slight irritation of the corneal epithelium with no injury.</p> <p>The material can produce severe chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.</p>
Chronic	<p>Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue.</p> <p>Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems.</p> <p>Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.</p> <p>Reduced respiratory capacity may result from chronic low level exposure to chlorine gas. Chronic poisoning may result in coughing, severe chest pains, sore throat and haemoptysis (bloody sputum). Moderate to severe exposures over 3 years produced decreased lung capacity in a number of workers.</p> <p>There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.</p>

Fiberlock 8317 Instant Mold Stain Remover	TOXICITY	IRRITATION
	Oral (Human) LC50: 0 mg/kg ^[2]	Not Available
sodium hypochlorite	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >10000 mg/kg ^[1]	Eye (rabbit): 10 mg - moderate
	Oral (rat) LD50: >237 mg/kg ^[1]	Eye (rabbit): 100 mg - moderate
		Skin (rabbit): 500 mg/24h-moderate
sodium hydroxide	TOXICITY	IRRITATION
	Oral (rabbit) LD50: 325 mg/kg ^[1]	Eye (rabbit): 0.05 mg/24h SEVERE
		Eye (rabbit): 1 mg/24h SEVERE
		Eye (rabbit): 1 mg/30s rinsed-SEVERE
		Skin (rabbit): 500 mg/24h SEVERE
sodium xylenesulfonate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Not Available
	Oral (rat) LD50: >3000 mg/kg ^[1]	
lauryldimethylamine oxide	TOXICITY	IRRITATION
	Oral (mouse) LD50: 2700 mg/kg ^[2]	Eye (rabbit): 50 ug/24h - SEVERE
		Skin (rabbit): 2 mg/24h - SEVERE
Legend:	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	

SODIUM HYPOCHLORITE	<p>Hypochlorite salts are classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans.</p> <p>Evidence of carcinogenicity may be inadequate or limited in animal testing.</p> <p>The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>Hypochlorite salts are extremely corrosive and can cause severe damage to the eyes and skin. A number of skin cancers have been observed in mice, when applied to their skin.</p> <p>as sodium hypochlorite pentahydrate</p>
SODIUM XYLENESULFONATE	<p>No significant acute toxicological data identified in literature search.</p> <p>for alkyl sulfates; alkane sulfonates and alpha-olefin sulfonates</p> <p>Most chemicals of this category are not defined substances, but mixtures of homologues with different alkyl chain lengths. Alpha-olefin sulfonates are mixtures of alkene sulfonate and hydroxyl alkane sulfonates with the sulfonate group in the terminal position and the double bond, or hydroxyl group, located at a position in the vicinity of the sulfonate group.</p> <p>Common physical and/or biological pathways result in structurally similar breakdown products, and are, together with the surfactant properties, responsible for similar environmental behavior and essentially identical hazard profiles with regard to human health.</p> <p>Toxicological data is available and well documented for representative toluene, xylene and cumene sulfonates (including sodium, potassium, ammonium and calcium salts). These data show that hydrotropes have low toxicity for all routes, do not cause genetic damage, show no evidence of causing cancer in long-term skin studies, and have not caused birth defects, developmental defects or reduced fertility.</p>
LAURYL DIMETHYLAMINE OXIDE	<p>Amine oxides are readily metabolised and excreted after oral intake. They produced no mortality or skin sensitization on exposure but caused reversible irritation of the eyes, skin and airways. They may also cause cataracts.</p>
SODIUM HYPOCHLORITE & SODIUM HYDROXIDE & SODIUM XYLENESULFONATE & LAURYL DIMETHYLAMINE	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant.</p>

OXIDE			
SODIUM HYDROXIDE & LAURYL DIMETHYLAMINE OXIDE		The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.	
SODIUM HYDROXIDE & LAURYL DIMETHYLAMINE OXIDE		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.	
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: ✗ – Data available but does not fill the criteria for classification
 ✓ – Data available to make classification
 ⊖ – Data Not Available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
sodium hypochlorite	LC50	96	Fish	0.032mg/L	4
sodium hypochlorite	EC50	48	Crustacea	0.026mg/L	2
sodium hypochlorite	EC50	72	Algae or other aquatic plants	0.0183mg/L	2
sodium hypochlorite	EC50	0.08	Crustacea	0.002mg/L	4
sodium hypochlorite	NOEC	72	Algae or other aquatic plants	0.0054mg/L	2
sodium hydroxide	LC50	96	Fish	4.16158mg/L	3
sodium hydroxide	EC50	96	Algae or other aquatic plants	1034.10043mg/L	3
sodium hydroxide	EC50	384	Crustacea	27901.643mg/L	3
sodium hydroxide	NOEC	96	Fish	56mg/L	4
sodium xylenesulfonate	LC50	96	Fish	>=1580mg/L	2
sodium xylenesulfonate	EC50	48	Crustacea	>400mg/L	1
sodium xylenesulfonate	EC50	96	Algae or other aquatic plants	>=758mg/L	2
sodium xylenesulfonate	EC50	48	Crustacea	>400mg/L	1
lauryldimethylamine oxide	LC50	96	Fish	1.235mg/L	3
lauryldimethylamine oxide	EC50	72	Algae or other aquatic plants	0.076mg/L	2
lauryldimethylamine oxide	EC50	72	Algae or other aquatic plants	0.159mg/L	2
lauryldimethylamine oxide	NOEC	672	Algae or other aquatic plants	>=0.067mg/L	2

Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

Very toxic 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.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For Chlorine:

Atmospheric Fate: Atmospheric chlorine forms hydrochloric or hypochlorous acid in the atmosphere, either through reactions with hydroxyl radicals or, other trace species, such as hydrocarbons.

These acids are believed to be removed from the atmosphere primarily through precipitation washout/dry deposition. When chlorine, hypochlorous acid or hydrogen chloride mixes in the atmosphere with water vapor, dilute solutions of strong mineral acids form which fall to earth as acid rain, snow, fog, or acidified dry particles.

In freshwater, the hypochlorites break down rapidly into non-toxic compounds when exposed to sunlight. While chlorine levels decline rapidly in seawater, hypobromite (which is acutely toxic to aquatic organisms) is formed. Sodium and calcium hypochlorite exhibit low levels of toxicity to birds, but they are highly toxic to freshwater fish and invertebrates.

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium hydroxide	LOW	LOW
lauryldimethylamine oxide	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
sodium hydroxide	LOW (LogKOW = -3.8796)
lauryldimethylamine oxide	HIGH (LogKOW = 4.673)

Mobility in soil

Ingredient	Mobility
sodium hydroxide	LOW (KOC = 14.3)
lauryldimethylamine oxide	LOW (KOC = 18660)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Containers may still present a chemical hazard/ danger when empty. ▶ Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> ▶ 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. ▶ 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. ▶ Recycle wherever possible. ▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. ▶ Treat and neutralise at an approved treatment plant.
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SECTION 14 TRANSPORT INFORMATION

Labels Required

	
Marine Pollutant	

Land transport (DOT)

UN number	1791				
UN proper shipping name	Hypochlorite solutions				
Transport hazard class(es)	<table border="0"> <tr> <td>Class</td> <td>8</td> </tr> <tr> <td>Subrisk</td> <td>Not Applicable</td> </tr> </table>	Class	8	Subrisk	Not Applicable
Class	8				
Subrisk	Not Applicable				
Packing group	III				
Environmental hazard	Not Applicable				
Special precautions for user	<table border="0"> <tr> <td>Hazard Label</td> <td>8</td> </tr> <tr> <td>Special provisions</td> <td>386, IB3, N34, T4, TP2, TP24</td> </tr> </table>	Hazard Label	8	Special provisions	386, IB3, N34, T4, TP2, TP24
Hazard Label	8				
Special provisions	386, IB3, N34, T4, TP2, TP24				

Air transport (ICAO-IATA / DGR)

UN number	1791														
UN proper shipping name	Hypochlorite solution														
Transport hazard class(es)	<table border="0"> <tr> <td>ICAO/IATA Class</td> <td>8</td> </tr> <tr> <td>ICAO / IATA Subrisk</td> <td>Not Applicable</td> </tr> <tr> <td>ERG Code</td> <td>8L</td> </tr> </table>	ICAO/IATA Class	8	ICAO / IATA Subrisk	Not Applicable	ERG Code	8L								
ICAO/IATA Class	8														
ICAO / IATA Subrisk	Not Applicable														
ERG Code	8L														
Packing group	III														
Environmental hazard	Not Applicable														
Special precautions for user	<table border="0"> <tr> <td>Special provisions</td> <td>A3A803</td> </tr> <tr> <td>Cargo Only Packing Instructions</td> <td>856</td> </tr> <tr> <td>Cargo Only Maximum Qty / Pack</td> <td>60 L</td> </tr> <tr> <td>Passenger and Cargo Packing Instructions</td> <td>852</td> </tr> <tr> <td>Passenger and Cargo Maximum Qty / Pack</td> <td>5 L</td> </tr> <tr> <td>Passenger and Cargo Limited Quantity Packing Instructions</td> <td>Y841</td> </tr> <tr> <td>Passenger and Cargo Limited Maximum Qty / Pack</td> <td>1 L</td> </tr> </table>	Special provisions	A3A803	Cargo Only Packing Instructions	856	Cargo Only Maximum Qty / Pack	60 L	Passenger and Cargo Packing Instructions	852	Passenger and Cargo Maximum Qty / Pack	5 L	Passenger and Cargo Limited Quantity Packing Instructions	Y841	Passenger and Cargo Limited Maximum Qty / Pack	1 L
Special provisions	A3A803														
Cargo Only Packing Instructions	856														
Cargo Only Maximum Qty / Pack	60 L														
Passenger and Cargo Packing Instructions	852														
Passenger and Cargo Maximum Qty / Pack	5 L														
Passenger and Cargo Limited Quantity Packing Instructions	Y841														
Passenger and Cargo Limited Maximum Qty / Pack	1 L														

Sea transport (IMDG-Code / GGVSee)

UN number	1791
UN proper shipping name	HYPOCHLORITE SOLUTION

Transport hazard class(es)	IMDG Class	8
	IMDG Subrisk	Not Applicable
Packing group	III	
Environmental hazard	Marine Pollutant	
Special precautions for user	EMS Number	F-A, S-B
	Special provisions	223
	Limited Quantities	5 L

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****SODIUM HYPOCHLORITE(7681-52-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

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

US - Massachusetts - Right To Know Listed Chemicals

US - Pennsylvania - Hazardous Substance List

US AIHA Workplace Environmental Exposure Levels (WEELs)

US CWA (Clean Water Act) - List of Hazardous Substances

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

SODIUM HYDROXIDE(1310-73-2) IS FOUND ON THE FOLLOWING REGULATORY LISTS

US - Alaska Limits for Air Contaminants

US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELS)

US - California Permissible Exposure Limits for Chemical Contaminants

US - Hawaii Air Contaminant Limits

US - Idaho - Limits for Air Contaminants

US - Massachusetts - Right To Know Listed Chemicals

US - Michigan Exposure Limits for Air Contaminants

US - Minnesota Permissible Exposure Limits (PELs)

US - Oregon Permissible Exposure Limits (Z-1)

US - Pennsylvania - Hazardous Substance List

US - Rhode Island Hazardous Substance List

US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants

US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants

US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants

US - Washington Permissible exposure limits of air contaminants

US - Washington Toxic air pollutants and their ASIL, SQER and de minimis emission values

US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants

US ACGIH Threshold Limit Values (TLV)

US CWA (Clean Water Act) - List of Hazardous Substances

US NIOSH Recommended Exposure Limits (RELS)

US OSHA Permissible Exposure Levels (PELs) - Table Z1

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

SODIUM XYLENESULFONATE(1300-72-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

LAURYL DIMETHYLAMINE OXIDE(1643-20-5) IS FOUND ON THE FOLLOWING REGULATORY LISTS

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

Federal Regulations**Superfund Amendments and Reauthorization Act of 1986 (SARA)****SECTION 311/312 HAZARD CATEGORIES**

Immediate (acute) health hazard	Yes
Delayed (chronic) health hazard	No
Fire hazard	No
Pressure hazard	No
Reactivity hazard	No

US. EPA CERCLA HAZARDOUS SUBSTANCES AND REPORTABLE QUANTITIES (40 CFR 302.4)

Name	Reportable Quantity in Pounds (lb)	Reportable Quantity in kg
Sodium hypochlorite	100	45.4
Sodium hydroxide	1000	454

State Regulations**US. CALIFORNIA PROPOSITION 65**

None Reported

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y
Canada - NDSL	N (lauryldimethylamine oxide; sodium xylenesulfonate; sodium hypochlorite; sodium hydroxide)
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y

Fiberlock 8317 Instant Mold Stain Remover

Japan - ENCS	Y
Korea - KECI	Y
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
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

CONTACT POINT

PLEASE NOTE THAT TITANIUM DIOXIDE IS NOT PRESENT IN CLEAR OR NEUTRAL BASES

Other information

Ingredients with multiple cas numbers

Name	CAS No
sodium hypochlorite	7681-52-9, 10022-70-5
sodium hydroxide	1310-73-2, 12200-64-5
sodium xylenesulfonate	1300-72-7, 30587-85-0

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.

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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