Silica Sand
Safety Data Sheet

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

1.1. Product identifier

Product name : Silica Sand

Chemical Name : Quartz, Crystalline Silica

Other means of identification : Ground Silica, Frac Sand, Filtration Sand, Bunker Sand ,Turf Sand, Foundry Sand, 100 Mesh Frac Sand, 12/20 Sand, 16/30 Sand, 20/40 Sand, 30/70 Sand, 40/70 Sand, 30/50 Sand, Golf Course Sand, 75/25 Sand (75% Greens Plus 25% Texas Best, 80/20 Sand (TB 20% & Greens Plus 80%Mix), 90/10 Mix, C-144 White (Mason Sand), C-144 Yesso (Mason Sand), Caylor White (Golf Course Sand), Green Colored Sand, F50 Sand, Greens Mix Greens (mix for golf course), Greens Plus (Golf Course Sand), Klassic White (Mason Sand), Ottowa White 20/40 frac, Ottawa White 40/70 frac, P50 Sand Kosse, Pnna Pore Mix (Mix with Caylor White & Perma Pore), Stone White (Mason Sand), Superior Universal Sand, Texas Best White (Bunker Sand) (Collectively referred to herein as "Crystalline Silica Sand")

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

Use of the substance/mixture : Manufacturing

1.3. Details of the supplier of the safety data sheet

Superior Silica Sands LLC
6000 Western Place, Suite 465
Ft. Worth, TX 76107
T 817-841-8087

1.4. Emergency telephone number

Emergency number : Chemtrec 1 800 424 9300

SECTION 2: Hazards identification

2.1. Classification of the substance or mixture

GHS-US classification

Acute Tox. 4 (Oral)	H302
Carc. 1A	H350
STOT RE 2	H373

2.2. Label elements

GHS-US labelling

Hazard pictograms (GHS-US) :

GHS07 GHS08

Signal word (GHS-US) : Danger

Hazard statements (GHS-US) : H302 - Harmful if swallowed
H350 - May cause cancer
H373 - May cause damage to organs through prolonged or repeated exposure :

Precautionary statements (GHS-US) P201 - Obtain special instructions before use
P202 - Do not handle until all safety precautions have been read and understood
P260 - Do not breathe dust/fume/gas/mist/vapours/spray
P264 - Wash thoroughly after handling
P270 - Do not eat, drink or smoke when using this product
P280 - Wear protective gloves/protective clothing/eye protection/face protection P301+P312 - IF SWALLOWED: call a POISON CENTER or doctor/physician if you feel unwell P308+P313 - IF exposed or concerned: Get medical advice/attention
P314 - Get medical advice and attention if you feel unwell
P330 - If swallowed, rinse mouth
P501 - Dispose of contents/container in accordance with local/regional/national/international regulations.

Additional Information : Superior Silica Sands Sand is a white or tan sand with no odor. It is not flammable, combustible, or explosive. It can cause irritation to the eyes. A single exposure will not result in serious adverse health effects. Crystalline silica is not known to be an environmental hazard.

2.3. Other hazards

No additional information available

2.4. Unknown acute toxicity (GHS-US)

No data available

SECTION 3: Composition/information on ingredients

3.1. Substances

Not applicable

Full text of H-phrases: see section 16

3.2. Mixture

Name	Product identifier	%	GHS-US classification
Quartz	(CAS No) 14808-60-7	90 - 99.9	Acute Tox. 4 (Oral), H302 Carc. 1A, H350 STOT RE2, H373

SECTION 4: First aid measures

4.1. Description of first aid measures

First-aid measures after inhalation : Remove source of contamination or move victim to fresh air. Seek medical attention if necessary. If breathing has stopped, give artificial respiration. If high airborne concentrations are present, take proper precautions to ensure your own safety before attempting rescue. :

First-aid measures after skin contact Wash with soap and water. Seek medical attention if irritation persists.

First-aid measures after eye contact : Quickly and gently blot or brush away sand. Do not rub eyes. Do not attempt to manually remove material stuck to the eye(s). Immediately flush eyes with lukewarm, gently flowing water for at least 15 minutes or until the sand is removed, while holding the eyelid(s) open. Occasionally lift eyelids to ensure thorough rinsing. Beyond flushing, do not attempt to remove material from eyes. Seek medical attention immediately.

First-aid measures after ingestion : Never give anything by mouth if the victim is rapidly losing consciousness, or is unconscious or convulsing. Have victim rinse mouth thoroughly with water. If irritation or discomfort occurs, obtain medical advice immediately.

4.2. Most important symptoms and effects, both acute and delayed

Symptoms/injuries after inhalation : a. Silicosis: Respirable crystalline silica (quartz) can cause silicosis, a fibrosis (scarring) of the lungs. Silicosis may be progressive; it may lead to disability and death.

b. Lung Cancer: Crystalline silica (quartz) inhaled from occupational sources is classified as carcinogenic to humans.

c. Tuberculosis: Silicosis increases the risk of tuberculosis.

d. Autoimmune and Chronic Kidney Diseases: Some studies show excess numbers of cases of scleroderma, connective tissue disorders, lupus, rheumatoid arthritis, chronic kidney diseases and end-stage kidney disease in workers exposed to respirable crystalline silica.

e. Non-Malignant Respiratory Diseases (other than silicosis): Some studies show an increased incidence in chronic bronchitis and emphysema in workers exposed to respirable crystalline silica.

Symptoms/injuries after skin contact : Contact may cause dryness or moderate skin irritation.

Symptoms/injuries after eye contact : May cause moderate to severe irritation of the eyes, including discomfort, pain, redness and swelling. :

Symptoms/injuries after ingestion May be harmful if swallowed.

Acute Effects : One form of silicosis, Acute Silicosis, can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as 6 months. The symptoms of acute silicosis include (but are not limited to) progressive shortness of breath, fever, cough and weight loss. Acute silicosis is fatal.

Chronic Effects : The adverse health effects -- lung disease, silicosis, cancer, autoimmune disease, tuberculosis, and nephrotoxicity -- are chronic effects.

Signs and Symptoms of Exposure	: There are generally no signs or symptoms of exposure to crystalline silica (quartz). Often, chronic silicosis has no symptoms. The symptoms of chronic silicosis, if present, are shortness of breath, wheezing, cough and sputum production. The symptoms of acute silicosis are the same as those associated with chronic silicosis; additionally, weight loss and fever may also occur. The symptoms of scleroderma include thickening and stiffness of the skin, particularly in the fingers, shortness of breath, difficulty swallowing and joint problems.
Medical Conditions Aggravated by Exposure	: The condition of individuals with lung disease (e.g., bronchitis, emphysema, chronic obstructive pulmonary disease) can be aggravated by exposure.

4.3. Indication of any immediate medical attention and special treatment needed

No additional information available

SECTION 5: Firefighting measures

5.1. Extinguishing media

Suitable extinguishing media	: Use extinguishing media appropriate for surrounding fire.
Unsuitable extinguishing media	: None.

5.2. Special hazards arising from the substance or mixture

Fire hazard	: None known.
Explosion hazard	: None known.
Reactivity	: None.

5.3. Advice for firefighters

Protection during firefighting	: Firefighters should wear full protective gear.

SECTION 6: Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

6.1.1. For non-emergency personnel

Avoid generating dust. Wear personal protection as described in Section 8 of this document.

6.1.2. For emergency responders

No additional information available

6.2. Environmental precautions

None.

6.3. Methods and material for containment and cleaning up

For containment	: Stop the flow of material, if this is without risk.
Methods for cleaning up	: Use dustless methods (vacuum equipped with HEPA filters) and place in closable container for disposal or flush with water. Do not dry sweep.

6.4. Reference to other sections

No additional information available

SECTION 7: Handling and storage

7.1. Precautions for safe handling

Precautions for safe handling : Do not use product for abrasive and/or sand blasting. Avoid generating dust. Do not breathe dust. Do not rely on your sight to determine if dust is in the air. Respirable crystalline silica dust may be in the air without a visible dust cloud.

Use adequate exhaust ventilation and dust collection. Maintain and test ventilation and dust collection equipment. Use all available work practices to control dust exposures, such as water sprays. Practice good housekeeping. Do not permit dust to collect on walls, floors, sills, ledges, machinery, or equipment. Keep airborne dust concentrations below permissible exposure limits.

Where necessary to reduce exposures below the PEL or other applicable limit (if lower than the PEL), wear a respirator approved for silica containing dust when using, handling, storing or disposing of this product or bag. See Section 8, for further information on respirators. Do not alter

the respirator. Do not wear a tight-fitting respirator with facial hair such as a beard or mustache that prevents a good face to face piece seal between the respirator and face. Maintain, clean, and fit test respirators in accordance with applicable standards. Wash or vacuum clothing that has become dusty.

Participate in training, exposure monitoring, and health surveillance programs to monitor any potential

adverse health effects that may be caused by breathing respirable crystalline silica.

The OSHA Hazard Communication Standard, 29 CFR Sections 1910.1200, 1915.1200, 1917.28, 1918.90, 1926.59 and 1928.21, and state and local worker or community "right-to-know" laws and regulations should be strictly followed.

7.2. Conditions for safe storage, including any incompatibilities

Storage conditions : Use dust collection to trap dust produced during loading and unloading.

7.3. Specific end use(s)

Manufacturing.

SECTION 8: Exposure controls/personal protection

8.1. Control parameters

Exposure Limits (respirable fraction) in air for Crystalline Silica (quartz):

Quartz (14808-60-7)		
USA ACGIH (8-Hour Time Weighted Average)	ACGIH TWA (mg/m³)	0.025 mg/m³
USA MSHA/OSHA (8-Hour Time Weighted Average)	PEL	10 mg/m3 / % SiO2+2
NIOSH (10-Hour Time Weighted Average, 4--hour work week)	TWA	0.05 mg/m3

Note: The OSHA PEL for crystalline silica as tridymite and cristobalite is one-half the PEL for crystalline silica (quartz); the ACGIH TLV for crystalline silica as cristobalite is equal to the TLV for crystalline silica as quartz. In 2005, ACGIH withdrew the TLV for crystalline silica as tridymite. Refer to Section 10 for thermal stability information for crystalline silica (quartz).

8.2. Exposure controls

Appropriate engineering controls : Ventilation: Use local exhaust, general ventilation or natural ventilation adequate to maintain exposures below appropriate exposure limits.

Other control measures: Respirable dust and quartz levels should be monitored regularly. Dust and quartz levels in excess of appropriate exposure limits should be reduced by all feasible engineering controls, including (but not limited to) dust suppression (wetting), ventilation, process enclosure, and enclosed employee work stations.

Hand protection : Use impervious gloves such as neoprene, nitrile, or rubber for hand protection. :

Eye protection Chemical goggles or safety glasses.

Skin and body protection : Wear suitable working clothes.

Respiratory protection : This product is not to be used for abrasive blasting. Consult with OSHA regulations and NIOSH recommendations to determine the appropriate respiratory protection during use of this product. Use only NIOSH-approved respiratory protection equipment. Avoid breathing dust produced during the use and handling of this product. If the workplace airborne crystalline silica concentration is unknown for a given task, conduct air monitoring to determine the appropriate level of respiratory protection. Consult with a certified industrial hygienist, your insurance risk manager, or the OSHA Consultative Services group for detailed information. Ensure appropriate respirators are worn during and following the task, including clean up or whenever airborne dust is present, to ensure worker exposures remain below occupational health limits. Provisions should be made for a respiratory protection training program (see 29 CFR 1910.134 - Respiratory Protection for minimum program requirements). See also ANSI standard Z88.2 (latest revision) "American National Standard for Respiratory Protection," 29 CFR 1910.134 and 1926.103, and 42 CFR 84.

Respirator Recommendations: For respirable quartz levels that exceed or are likely to exceed appropriate exposure limits, a NIOSH-approved 100 series particulate filter respirator must be worn. If respirable quartz levels exceed or are likely to exceed an 8 hour-TWA of 0.5 mg/m3, a NIOSH-approved air purifying, full-face respirator with a 100 series particulate filter must be worn. Respirator use must comply with applicable MSHA or OSHA standards, which include Badger Mining Corporation Last Revised: August 2010 MSDS for Silica provisions for a user training program, respirator maintenance and cleaning, respirator fit testing, and other requirements. For additional information contact NIOSH at 1-800-35-NIOSH or visit website:

	http://www.cdc.gov/niosh/npg (search for crystalline silica). Emergency or planned entry into unknown concentrations or IDLH conditions (50mg/m3 for crystalline silica-quartz): Any self-contained breathing apparatus that has a full-face piece and is operated in a pressure-demand or other positive-pressure mode or any supplied-air respirator that has a full-face piece and is operated in a pressure-demand or other positive-pressure mode in combination with an auxiliary self-contained positive-pressure breathing apparatus. Escape from unknown or IDLH conditions (50mg/m3 for crystalline silica-quartz): Any airpurifying, full-face piece respirator with a high-efficiency particulate filter or any appropriate escape-type, self-contained breathing apparatus.
General Hygiene Considerations	: There are no known hazards associated with this material when used as recommended. The guidelines in this SDS are recognized as good industrial hygiene practices. Avoid breathing dust. Wash dust-exposed skin with soap and water before eating, drinking, smoking, and using toilet facilities.

SECTION 9: Physical and chemical properties

9.1. Information on basic physical and chemical properties

Physical state	: Solid
Appearance	: Granular, crushed or ground sand
Color	: White or tan
Odor	: Odorless.
Odor threshold	: No data available
pH	: No data available
Relative evaporation rate (butylacetate=1)	: No data available
Melting point	: 3110 °F
Freezing point	: No data available
Boiling point	: 4046 °F
Flash point	: No data available
Self ignition temperature	: No data available
Decomposition temperature	: No data available
Flammability (solid, gas)	: No data available
Vapor pressure	: No data available
Relative vapor density at 20 °C	: No data available
Specific gravity	: 2.66
Solubility	: Insoluble
Log Pow	: No data available
Log Kow	: No data available
Viscosity, kinematic	: No data available
Viscosity, dynamic	: No data available
Explosive properties	: No data available
Oxidising properties	: No data available
Explosive limits	: No data available

9.2. Other information

No additional information available

SECTION 10: Stability and reactivity

10.1. Reactivity

None.

10.2. Chemical stability

The product is stable at normal handling and storage conditions.

10.3. Possibility of hazardous reactions

Will not occur.

10.4. Conditions to avoid

Dust generation.

10.5. Incompatible materials

Contact with powerful oxidizing agents such as fluorine, boron trifluoride, chlorine trifluoride, manganese trixode, oxygen difluoride, hydrogen peroxide, and others may cause fires and/or explosions. Heating a mixture of powdered magnesium with slightly wet silica may cause a violent explosion .A violent reaction may result from combination of manganese trifluoride and silica. Finely divided silica will often react with burning sodium. Combination with xenon hexafluoride may form the explosive zenon trioxide.

10.6. Hazardous decomposition products

Silica will dissolve in hexafluoric acid and produce a corrosive gas (silicon tetrafluoride).

SECTION 11: Toxicological information

11.1. Information on toxicological effects

Acute toxicity : Harmful if swallowed.

Silica Sand	
ATE (oral)	500.000 mg/kg bodyweight

Quartz (14808-60-7)	
LD50 oral rat	500 mg/kg
ATE (oral)	500.000 mg/kg

Skin corrosion/irritation : Not classified

Serious eye damage/irritation : Not classified

Respiratory or skin sensitisation : Not classified

Germ cell mutagenicity : Not classified

Carcinogenicity : May cause cancer.

IARC - The International Agency for Research on Cancer ("IARC") concluded that “crystalline silica in the form of quartz or cristobalite dust is carcinogenic to humans (Group 1)”. For further information on the IARC evaluation, see IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, Volume 100C,"A Review of Human Carcinogens: Arsenic, Metals, Fibres and Dusts " (2011).

The American College of Occupational and Environmental Medicine (“ACOEM”) notes: “In 1996, [IARC] re-classified silica as a Class I human lung carcinogen, based on sufficient animal and human data. Although the degree of increased risk varies (with relative risks ranging from 1.3 to 6.9), the risk appears to be greatest in workers with silicosis who smoke. The cancer risk to silica-exposed workers without silicosis (especially if they are not smokers) is less clear despite continuing research, some of which has yielded disparate results.” ACOEM, “Medical Surveillance of Workers Exposed to Crystalline Silica”, June 2005.

The EU Scientific Committee for Occupational Exposure Limits (SCOEL) concluded in June 2002 (SCOEL Sum Doc. 94-final): “The main effect in humans of inhalation of respirable silica dust is silicosis. There is sufficient information to conclude that the relative risk of lung cancer is increased in persons with silicosis (and apparently, not in employees without silicosis exposed to silica dust in quarries and in the ceramic industry). Therefore preventing the onset of silicosis will also reduce the cancer risk.”

Quartz (14808-60-7)	
IARC group	1 - Carcinogenic to humans
National Toxicology Program (NTP) Status	2 - Known Human Carcinogens

Reproductive toxicity : Not classified

Specific target organ toxicity (single exposure) : Not classified

Specific target organ toxicity (repeated exposure) : May cause damage to organs through prolonged or repeated exposure.

The method of exposure that can lead to the adverse health effects described below is inhalation.

Silicosis: The major concern is silicosis, caused by the inhalation of respirable crystalline silica dust. Silicosis can exist in several forms, chronic (or ordinary), accelerated, or acute.

Chronic or Ordinary Silicosis is the most common form of silicosis, and can occur after many

years (15 to 20 or more) of prolonged repeated inhalation of relatively low levels of airborne respirable crystalline silica dust. It is further defined as either simple or complicated silicosis. Simple silicosis is characterized by lung lesions (shown as radiographic opacities) less than 1 centimeter in diameter, primarily in the upper lung zones. Often, simple silicosis is not associated with symptoms, detectable changes in lung function or disability. Simple silicosis may be progressive and may develop into complicated silicosis or progressive massive fibrosis (PMF). Complicated silicosis or PMF is characterized by lung lesions (shown as radiographic opacities) greater than 1 centimeter in diameter. Although there may be no symptoms associated with complicated silicosis or PMF, the symptoms, if present, are shortness of breath and cough. Complicated silicosis or PMF may be associated with decreased lung function and may be disabling. Advanced complicated silicosis or PMF may lead to death. Advanced complicated silicosis or PMF can result in heart disease secondary to the lung disease (cor pumonale).

Accelerated Silicosis can occur with prolonged repeated inhalation of high concentrations of respirable crystalline silica over a relatively short period; the lung lesions can appear within five (5) years of initial exposure. Progression can be rapid. Accelerated silicosis is similar to chronic or ordinary silicosis, except that lung lesions appear earlier and progression is more rapid.

Acute Silicosis can occur after the repeated inhalation of very high concentrations of respirable crystalline silica over a short time period, sometimes as short as a few months. The symptoms of acute silicosis include progressive shortness of breath, fever, cough, weakness and weight loss. Acute silicosis is fatal.

Autoimmune Diseases: Several studies have reported excess cases of several autoimmune disorders, -- scleroderma, systemic lupus erythematosus, rheumatoid arthritis -- among silica-exposed workers).

Tuberculosis: Individuals with silicosis are at increased risk to develop pulmonary tuberculosis, if exposed to tuberculosis bacteria. Individuals with chronic silicosis have a three-fold higher risk of contracting tuberculosis than similar individuals without silicosis.

Kidney Disease: Several studies have reported excess cases of kidney diseases, including end stage renal disease, among silica-exposed workers. For additional information on the subject, the following may be consulted: "Kidney Disease and Silicosis", Nephron, Volume 85, pp. 14-19 (2000).

Non-Malignant Respiratory Diseases: The reader is referred to Section 3.5 of the NIOSH Special Hazard Review cited below, for information concerning the association between exposure to crystalline silica and chronic bronchitis, emphysema and small airways disease. There are studies that disclose an association between dusts found in various mining occupations and non-malignant respiratory diseases, particularly among smokers. It is unclear whether the observed associations exist only with underlying silicosis, only among smokers, or result from exposure to mineral dusts generally (independent of the presence or absence of crystalline silica, or the level of crystalline silica in the dust).

Sources of information:

The NIOSH Hazard Review - Occupational Effects of Occupational Exposure to Respirable Crystalline Silica published in April 2002 summarizes and discusses the medical and epidemiological literature on the health risks and diseases associated with occupational exposures to respirable crystalline silica. The NIOSH Hazard Review should be consulted for additional information, and citations to published studies on health risks and diseases associated with occupational exposure to respirable crystalline silica. The NIOSH Hazard Review is available from NIOSH - Publications Dissemination, 4676 Columbia Parkway, Cincinnati, OH 45226, or through the NIOSH web site, www.cdc.gov/niosh/topics/silica, then click on the link "NIOSH Hazard Review: Health Effects of Occupational Exposure to Respirable Crystalline Silica".

Aspiration hazard : Not classified

SECTION 12: Ecological information

12.1. Toxicity

No additional information available

12.2. Persistence and degradability

No additional information available

12.3. Bioaccumulative potential

No additional information available

12.4. Mobility in soil

No additional information available

12.5. Other adverse effects

No additional information available

SECTION 13: Disposal considerations

13.1. Waste treatment methods

Waste disposal recommendations : Dispose of contents/container in accordance with local/regional/national/international regulations.

SECTION 14: Transport information

In accordance with DOT

Crystalline Silica (quartz) is not a hazardous material for purpose of transportation under the U.S. Department of Transportation Table of Hazardous Materials, 49 CFR 172.101.

SECTION 15: Regulatory information

15.1. US Federal regulations

Quartz (14808-60-7)

Listed on the United States TSCA (Toxic Substances Control Act) inventory

TSCA No.: Crystalline silica (quartz) appears on the EPA TSCA inventory under the CAS No. 14808-60-7.

RCRA: Crystalline silica (quartz) is not classified as a hazardous waste under the Resource Conservation and Recovery Act, or its regulations, 40 CFR §261 et seq.

CERCLA: Crystalline silica (quartz) is not classified as a hazardous substance under regulations of the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), 40 CFR §302.

Emergency Planning and Community Right to Know Act (SARA Title III): Crystalline silica (quartz) is not an extremely hazardous substance under Section 302 and is not a toxic chemical subject to the requirements of Section 313.

Clean Air Act: Crystalline silica (quartz) mined and processed by Superior Silica Sands, LLC is not processed with or does not contain any Class I or Class II ozone depleting substances.

FDA: Silica is included in the list of substances that may be included in coatings used in food contact surfaces, 21 CFR §175.300(b)(3)(xxvi).

NTP: Silica, crystalline (respirable size) is classified as Known to be a Human Carcinogen.

OSHA Carcinogen: Crystalline silica (quartz) is not listed.

15.2. US State regulations

Quartz (14808-60-7)

U.S. - California - Proposition 65 - Carcinogens List	U.S. - California - Proposition 65 - Developmental Toxicity	U.S. - California - Proposition 65 - Reproductive Toxicity - Female	U.S. - California - Proposition 65 - Reproductive Toxicity - Male	No significance risk level (NSRL)
Yes				

Quartz (14808-60-7)

U.S. - Massachusetts - Right To Know List
U.S. - Minnesota - Hazardous Substance List
U.S. - New Jersey - Right to Know Hazardous Substance List
U.S. - Pennsylvania - RTK (Right to Know) List

California Proposition 65: Crystalline silica (airborne particles of respirable size) is classified as a substance known to the State of California to be a carcinogen.

California Inhalation Reference Exposure Level (REL): California established a chronic REL of 3 µg for silica (crystalline, respirable). A chronic REL is an airborne level of a substance at or below which no adverse health effects are anticipated in individuals indefinitely exposed to the substance at that level.

Massachusetts Toxic Use Reduction Act: Silica, crystalline (respirable size, <10 microns) is “toxic” for purposes of the Massachusetts Toxic Use Reduction Act.

Pennsylvania Worker and Community Right to Know Act: Quartz is a hazardous substance under the Act, but it is not a special hazardous substance or an environmental hazardous substance.

Other:
EINECS No.: 238-878-4

EEC Label (Risk/Safety Phrases): R 48/20, S22, S38

CLP Label (Hazard Class/Hazard Statement/Precaution Statements): STOT RE 1/ H372/ P260, P285, P501

IARC: Crystalline silica (quartz) is classified in IARC Group 1.

Australian Inventory of Chemical Substances (AICS): All of the components of this product are listed on the AICS inventory or exempt from notification requirements.

Japan Ministry of International Trade and Industry (MITI): All of the components of this product are existing chemical substances as defined in the Chemical Substance Control Law Registry Number 1-548.

Korea Existing Chemicals Inventory (KECI) (set up under the Toxic Chemical Control Law): Listed on the ECL with registry number 9212-5667.

Philippines Inventory of Chemicals and Chemical Substances (PICCS): Listed for PICCS.

National, state, provincial or local emergency planning, community right-to-know or other laws, regulations or ordinances may be applicable--consult applicable national, state, provincial or local laws.

SECTION 16: Other information

Full text of H-phrases:

Acute Tox. 4 (Oral)	Acute toxicity (oral), Category 4
Carc. 1A	Carcinogenicity, Category 1A
STOT RE 2	Specific target organ toxicity — Repeated exposure, Category 2
H302	Harmful if swallowed
H350	May cause cancer
H373	May cause damage to organs through prolonged or repeated exposure

This information is based on our current knowledge and is intended to describe the product for the purposes of health, safety and environmental requirements only. It should not therefore be construed as guaranteeing any specific property of the product