SEAL KING INC. 14 MELANIE DR. UNIT 15 BRAMPTON, ON L6T 4L3

SAFETY DATA SHEET

PRODUCT: WATER REPELLENT CONCRETE SEALER

SECTION 1: MATERIAL IDENTIFICATION AND USE

TDG CLASSIFICATION Not regulated
UN NUMBER Flammable Liquid UN1268
PACKING GROUP Packing Group III
WHMIS CLASSIFICATION B2 D2A D2B
CHEMICAL FORMULA Not applicable
CHEMICAL FAMILY Siloxane solution
MOLECULAR WEIGHT Not applicable
MATERIAL USE Concrete Sealer

SECTION 2: HAZARDOUS INGREDIENTS

HAZARDOUS INGREDIE	%	CAS#	LD ₅₀ (species & route)	LC ₅₀ (species & route)
Polymethyl Siloxane	10%	ACR CAS	None	N/A
Mineral Spirits	90%	108-88-3	5500-7300 mg/kg (oral,rat)	8000 ppm/4h

SECTION 4: FIRE AND EXPLOSION DATA

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SECTION 5: REACTIVITY DATA

SECTION 6: TOXICOLOGICAL EFFECTS

ROUTES OF ENTRY:		
	.INGESTION	Harmful if swallowed can cause
	gastro-intestinal track	irritation, nausea, vomiting and
	diarrhea.	
	SKIN ABSORPTION	A single prolonged
	exposure is not likely	to result in the material being
	absorbed through the	skin in harmful amounts.
SKIN CONTACT	Prolonged exposure m	nay cause skin irritation.
	.EYE CONTACT	May cause severe irritation with
	corneal injury. Vapou	rs may irritate eyes. May cause
	lachrymation (tears)	
	.INHALATION	Excessive vapour concentrations
	are attainable and cou	ld be hazardous on single exposure.
		of excessive exposure may be
	anaesthetic or narcotic	c effects. Excessive exposure may
	cause irritation to upp	er respiratory tract, headache,
		iness and drowsiness. Inhalation of
	high solvent vapour or	r mist may cause death.
CARCINOGENICITY	None	
REPRODUCTIVE TOXICITY		us of lab animals
SYSTEMATIC & OTHER EFFECTS		
	cause the following: I	rritation of the respiratory track,
		effects, cardiac sensitization.
EXPOSURE LIMIT OF MATERIAL		
THRESHOLD LIMIT VALUE	50 ppm (ACG111-TLV)	
LD ₅₀ OF MATERIAL		
LC ₅₀ OF MATERIAL		
	. HOLKHOWII	

SECTION 7: PREVENTIVE MEASURES

PERSONAL PROTECTIVE EQUIPMENT:	
GLOVES	
	RESPIRATOR Atmosphere levels should be
	maintained below the exposure guideline. When
	respiratory protection is required for certain operations,
	use an approved air-purifying respirator.
	exposure causes eye irritation, use a full face respirator.
FOOTWEAR	·
CLOTHING	
	OTHER Maintain a sink, eye bath, and safety
	shower in the work area.
ENGINEERING CONTROLS	
	airborne concentrations below the recommended
	exposure guidelines. Local exhaust ventilation should be
	explosion proof with the minimum velocity 100r/min.

LEAK and SPILL PROCEDURES	Soak up spills in absorbent material such as sand and collect suitable containers. Residual resin may be
	removed using steam or hot soapy water. Solvents are not recommended for clean up unless the recommended exposure guidelines and safe handling practices for the specific solvent are followed. For large spills, evacuate upwind of spills and contain dike.
WASTE DISPOSAL	Resin can be disposed of through burning in an adequate incinerator or burying in an approved landfill in accordance with federal, state/provincial and local regulations.
HANDLING PROCEDURES and EQUIPMENT	Treat as flammable liquid: keep heat, flame, or spark inducing equipment away. Protect personnel from vapours. Practice good care and caution to avoid skin and eye contact and to avoid breathing vapours. Eye wash fountain should be located in immediate work area.
STORAGE REQUIREMENTS	Keep containers closed when not in use. Ground all equipment to avoid static accumulation. Do not cut, drill or weld in the storage area.
SPECIAL SHIPPING INFO.	Keep container tightly closed.

SECTION 8: FIRST AID MEASURES

EYE CONTACT	Irrigate with flowing water immediately and continuously
	for 15 minutes. Consult medical professional.
SKIN CONTACT	Remove contaminated clothing. Wash off in flowing water
	and soap or shower.
INGESTION	. Do not induce vomiting. Call a physician and/or transport
	to emergency facility. If breathing is difficult, give oxygen.
	Call a physician.
INHALATION	. Remove to fresh air. If breathing is difficult, oxygen may
	be given. Seek medical attention.
SOURCES USED	Raw materials and suppliers data sheets
ADDITIONAL INFORMATION	••

NOTE TO PHYSICIAN: The decision of whether to induce vomiting or not should be made by the attending physician. Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach. No specific antidote. Supportive care. Treatment based on judgement of the physician in response to the reactions of the patient.

SECTION 9: PREPARATION DATE OF SDS

This information herein is given in good faith but no warranty, expressed or implied, is made.