

----- 1. PRODUCT IDENTIFICATION -----

TRADE NAME (as labeled): **LATICRETE 335 Rapid Premium Flexible Tile Adhesive**

USE: Fast setting cementitious tile adhesive

MANUFACTURER'S NAME: LATICRETE PTY LTD
29 Telford Street
Virginia. QLD. 4014

For additional information: 1800331012 07 38651599
Web address: www.laticrete.com.au
Poisons Information Number: 131126
Date prepared or revised: 24th Nov 2011

----- 2. HAZARDS IDENTIFICATION -----

Classification: Hazardous according to the criteria of the NOHSC. All components are listed on the AICS. Not classified as a Dangerous Goods substance according to the ADG code. Not classified as a scheduled poison according to the SUSDP.

Risk Phrases: R36 – Irritating to eyes, R37 Irritating to the respiratory system. R38 Irritating to the skin. R49 May cause cancer by inhalation (long term), R66 Repeated exposure may cause skin dryness or cracking.

Safety Phrases: S22 Do not breathe dusts. S24 Avoid contact with the skin. S25 Avoid contact with eyes. S26 In case of contact with eyes, rinse immediately with plenty of water and seek medical advice. S28 After contact with skin wash immediately with plenty of soap suds. S38 In case of insufficient ventilation, wear suitable respiratory protection. S36/37/39 Wear suitable protective clothing, gloves and eye/face protection.

----- 3. COMPOSITION / INFORMATION ON INGREDIENTS -----

CHEMICAL NAMES	CAS NUMBERS	PERCENT
Silica Sand	14808-60-7	40-75
Portland Cement	65997-15-1	5-50
Other ingredients determined as non-hazardous		To 100%

----- 4. FIRST AID -----

SYMPTOMS OF OVEREXPOSURE for each potential route of exposure.

Inhaled: Irritation of nose, cough, labored breathing, expectoration. Prolonged exposure to high dust levels generated by mechanical grinding of cured product or careless handling of the dry powder may lead to serious lung conditions.

Contact with eyes: Irritation of eyes, skin sensitization, alkali burns if not attended to immediately.

Contact with Skin: Alkali burns when in prolonged contact with especially damp skin. Prolonged or repeated exposure may cause drying and cracking of the skin. Prolonged exposure may lead to dermatitis.

Swallowed: Small amounts due to normal handling will have little or no effect. Possible alkali burns around mouth and throat for larger amounts if not attended to immediately.

FIRST AID or EMERGENCY PROCEDURES

Eye Contact: Wash the eyes with large amounts of water for 15 minutes, occasionally lifting the lower and upper lids. Get medical attention immediately.

Skin Contact: Remove contaminated clothing. Promptly wash contaminated skin with soap or mild detergent and water. Seek medical attention if skin has been broken or redness and irritation persist.

Inhaled: Safely move the exposed person to fresh air at once. Provide artificial respiration if breathing stops. Seek medical attention unless recovery is immediate.

Swallowed: If the person is conscious, give large amounts of water. Do not induce vomiting. Get medical attention immediately.

First aid facilities

Provide industrial first aid facilities, eye wash station and safety showers as appropriate.

Notes to Physician

Possible aggravated pre-existing conditions – none reported.

Suggested treatment for acute symptoms, known antidotes – Provide care and treatment based on the patients reaction to the exposure. For further information contact the; Poisons Information Centre 131126 in all states (New Zealand Dial 0800764766)

Health effects or risk from exposure

Acute: Irritation of mucous membranes. Skin irritation.

Chronic: Chronic Bronchitis. Dust may contain respirable crystalline silica. Long term exposure to excessive levels of crystalline silica can lead to silicosis and possibly lung cancer. Prolonged skin contact can lead to alkaline defatting dermatitic effects or chromium (VI) sensitization from traces of chromium in the cement.

----- 5. FIRE AND EXPLOSION -----

Flash Point, °C (give method): Not flammable or combustible

Auto ignition temperature, °C: N/A

Flammable limits in air, volume %: N/A Lower (LEL) _____ Upper (UEL) _____

Fire extinguishing materials: N/A

water spray

foam

carbon dioxide

dry chemical

_____ other:

Hazchem Code: Not allocated

Material is not combustible. Product packaging material may however add to combustible load in the event of a fire.

Special fire fighting procedures: N/A

Unusual fire and explosion hazards: N/A

----- 6. ACCIDENTAL RELEASE MEASURES -----

Emergency Procedures – Spills and Leaks - Include employee protection measures: Wear appropriate equipment to prevent skin and eye contact. Avoid breathing dust and making contact with skin.

Prevent from entering drains and waterways.

Minor Spills: Slippery when wet. Bury in approved landfill.

Major Spills: Clear area of personnel and move upwind. Collect solid residues without producing excess dust and seal in labeled drums for disposal. Wash area and prevent runoff into drains. Advise emergency services of any contamination of drains or waterways.

Disposal: Recycle wherever possible or consult manufacturer for recycling options. Dispose of in an authorized landfill.

----- 7. HANDLING AND STORAGE -----

Handle with suitable protective clothing.

Avoid skin or eye contact.

Suitable Containers

Check all containers are clearly labeled and free from leaks.

Storage Requirement

Store in original containers, keep containers securely sealed when not in use. Store in a cool, dry ventilated place. Protect containers against physical damage and check regularly for leaks. Observe manufacturers storing and handling recommendations.

----- 8. EXPOSURE CONTROLS & PERSONAL PROTECTION-----

No exposure standards for this product have been established. The standard for some of the ingredients has been set:

Substance	TWA	STEL
Crystalline Silica	0.1 mg/m3	Not established
Portland Cement	10mg/m3	Not established

Ventilation and engineering controls: Use mechanical exhaust ventilation if at risk of excessive dust exposure or levels above the TWA. Outdoor use and open areas is usually adequate.

Respiratory protection (type): Use a high quality, well fitting dust mask during normal use or a respirator with particulate filters to AS1715 & AS1716 in very dusty conditions.

Eye protection (type): Use a chemical goggle or safety glasses with side shields or safety glass to AS1337.

Gloves (specify material): Use impervious gloves, vinyl or rubber to AS2161.2

Other clothing and equipment: Wear clean, long-sleeved, body covering clothing and have eye wash on hand.

Work practices, hygienic practices: Familiarize the employees with the special handling procedures in this section; also encourage prompt removal of contaminated clothing and clearing of contaminated areas.

----- 9. PHYSICAL PROPERTIES-----

Vapor density (air=1): N/A

Melting point or range, °C: N/A

Specific gravity: 1.25

Boiling point or range, °C: N/A

Solubility in water: Insoluble

Evaporation rate (butyl acetate = 1): N/A

Vapor pressure, mmHg at 20 ° C: 0mm

Appearance and odour: Cement coloured powder, no odour

----- 10. REACTIVITY DATA -----

Stability: X Stable Unstable

Conditions to avoid: Keep dry until used

Incompatibility (materials to avoid): None

Hazardous decomposition products (including combustion products): (from burning, heating or reaction with other material): None

Hazardous polymerization: _____ May occur _____ Will not occur

----- 11 . TOXICOLOGICAL INFORMATION -----

Inhalation; Breathing silica dust may not cause noticeable injury or illness even though permanent lung damage may be occurring. Inhalation of dust may have the following serious chronic health effects:

Silicosis: Excessive inhalation of respirable crystalline silica dust may cause a progressive, disabling and sometimes fatal lung disease called silicosis. Symptoms include cough, shortness of breath. Wheezing, non-specific chest illness and reduced pulmonary function. This disease is exacerbated by smoking. Individuals with silicosis are predisposed to develop mycobacterial infections, (tuberculous and non-tuberculous) and fungal infections. Inhalation of air with a very high concentration of respirable silica dust can cause the most serious forms of silicosis in a matter of months or a few years. Some epidemiologic studies have concluded that there is significant risk of developing silicosis even at airborne exposure levels that are equal to the recommended NIOSH, REL, the ACGIH TLV, the OSHA PEL, and the MSHA Exposure Limit.

Then: is some evidence that breathing respirable crystalline silica or the disease silicosis is associated with an increased incidence of significant disease endpoints such as scleroderma (an immune system disorder manifested by fibrosis of the lungs, skin and other internal organs) rheumatoid arthritis, systemic lupus, erythematosus, sarcoidosis, chronic bronchitis, chronic obstructive pulmonary disease (COPD), emphysema, chronic kidney disease and end-stage renal disease.

----- 12. ECOLOGICAL CONSIDERATIONS-----

Will block drains or small waterways as product cures in contact with water.

----- 13. DISPOSAL CONSIDERATIONS-----

Dispose of all wastes in accordance with federal, state and local regulations.

----- 14. TRANSPORT CONSIDERATIONS-----

Requirements under the ADG code, IMDG code, or the IATA DG code do not apply to this product

----- 15. REGULATORY INFORMATION-----

Label in accordance with the National Code of Practice for the Labeling of Workplace Substance (NOHSC: 2012 (1994)); Labeling under the SUSDP or the ADG Code is not required.

----- 16. OTHER INFORMATION-----

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