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

SAFETY DATA SHEET

PRODUCT: IMPRESSED 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	**Acrylic Resin Solution**
MOLECULAR WEIGHT	**Not applicable**
MATERIAL USE	**Impressed Concrete Sealer**

SECTION 2: HAZARDOUS INGREDIENTS

HAZARDOUS INGREDIENTS	%	CAS#	LD_{50} (species & route)	LC_{50} (species & rou
Acrylic Resin	22-27% High Gloss 10-15% Semi Gloss	ACR CAS	-	-
Toluene	73-90%	108-88-3	5500-7300 mg/kg (oral, rat)	8000 ppm/4h

SECTION 3: PHYSICAL DATA

APPEARANCE	**Water white, viscous liquid**
ODOUR	**Solvent odour**
FREEZING POINT (°C)	**Not available**
BOILING POINT (°C)	**232 °F**
ODOUR THRESHOLD (ppm)	**Not available**
VAPOUR PRESSURE (mm HG)	**54 mm/llg at 70**°F (Toluene)
VAPOUR DENSITY (air=1)	**3.2**
PERCENT VOLATILE	**Not available**
EVAPORATION RATE (nBuAc=1)	**Not available**
pH	**Not available**
SPECIFIC GRAVITY (water=1)	**0.9**
COEFF. OF WATER/OIL DISTRIBUTION	**Not available**
SOLUBILITY IN WATER	**Insoluble**

SECTION 4: FIRE AND EXPLOSION DATA

EXTINGUISHING MEDIA	**Water spray, foam, alcohol foam, CO_2, dry chemical.**
SPECIAL PROCEDURES	**Wear googles and positive pressure, self-contained breathing apparatus.**
FIRE and EXPLOSION HAZARDS	**Explosive mixtures can form with air, toxic fumes are released in fire situation, vapours may travel to the source of ignition and then flash back.**
FLASHPOINT (°C) and METHOD	**7°C TCC**
AUTO-IGNITION TEMPERATURE (°C)	**480°C**
LOWER FLAMMABLE LIMIT	**1.2% vol.**
UPPER FLAMMABLE LIMIT	**7.1% vol.**
HAZARDOUS COMBUSTION PRODUCTS	**Not available**
SENSITIVITY TO STATIC DISCHARGE	**Not available**

SENSITIVITY TO MECHANICAL IMPACT	**Not available**

SECTION 5: REACTIVITY DATA

CHEMICAL STABILITY	**Stable under normal storage conditions. Avoid excessive heat, open flames, ignition sources.**
INCOMPATABILITY	**(Specific Materials To Avoid) Oxidizing materials.**
HAZARDOUS DECOMPOSITION PRODUCTS	**Thermal decomposition may yield acrylic monomers**
HAZARDOUS POLYMERIZATION	**Will not occur.**

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 may cause skin irritation.**
EYE CONTACT	**May cause severe irritation with corneal injury. Vapours may irritate eyes. May cause lachrymation (tears)**
INHALATION	**Excessive vapour concentrations are attainable and could be hazardous on single exposure. Signs and symptoms of excessive exposure may be anaesthetic or narcotic effects. Excessive exposure may cause irritation to upper respiratory tract, headache, nausea, vomiting, dizziness and drowsiness. Inhalation of high solvent vapour or mist may cause death.**

CARCINOGENICITY	**None**
REPRODUCTIVE TOXICITY	**Showed effects on fetus of lab animals**
SYSTEMATIC & OTHER EFFECTS	**Prolonged or repeated overexposure to solvents can cause the following: Irritation of the respiratory track, enlarged liver, kidney effects, cardiac sensitization.**

EXPOSURE LIMIT OF MATERIAL

THRESHOLD LIMIT VALUE	**50 ppm (ACG111-TLV & OSHA PEL)**
LD_{50} OF MATERIAL..	**Not known**
LC_{50} OF MATERIAL..	**Not known**

SECTION 7: PREVENTIVE MEASURES

PERSONAL PROTECTIVE EQUIPMENT:

GLOVES	**Rubber or PVA 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.**
EYE	**Use chemical goggles. If vapour exposure causes eye irritation, use a full face respirator.**
FOOTWEAR	**Neoprene boots**
CLOTHING	**Wear impervious protective clothing.**
OTHER	**Maintain a sink, eye bath, and safety shower in the work area.**
ENGINEERING CONTROLS	**Provide general and/or local exhaust ventilation to control 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

ORIGINAL PREPARATION BY	**LINO TATONE**
DATE	**JANUARY 01, 2016**

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