



## Section 1 – Identification

SUPPLIER:	Superior Adhesives & Tools	NOTE: Blank spaces are not permitted. If no relevant information is found for any given subheading within a section, the SDS shall clearly indicate that no applicable information is available.	
ADDRESS:	14000 Carlson Parkway Plymouth, MN 55441	Emergency Telephone Number (CHEMTREC)	(800) 424-9300
TELEPHONE:	888-398-6595	Telephone Number for Information	(888) 398-6595
Product Identifier (as used on Label, SDS and list) <b>Epoxy Resin Part "C"</b> Other means of identification: Epoxy glue		Recommended use of the chemical and restrictions on use: This product is used as a mortar to adhere tile to the floor. Avoid dust formation. Do not breathe dust. Avoid contact with acids.	

## Section 2 – Hazard Identification

Classification: This product is classified as a health hazard under 29 CFR 1910.1200. Epoxy Resin Part "C" contains crystalline silica which may be fatal if inhaled. The specific hazards of this product are listed below.

Carcinogenicity (Inhalation) - Quartz	Category: 1A	Signal Word: DANGER
Carcinogenicity (Inhalation) – Titanium Dioxide	Category: 2B	Signal Word: DANGER
Specific Target Organ Toxicity – Repeated Exposure	Category: 1A	Signal Word: DANGER
Specific Target Organ Toxicity – Single Exposure	Category: 3	Signal Word: DANGER
Eye Irritant – Quartz	Category: 2A	Signal Word: DANGER
Skin Irritant – Quartz	Category: 2	Signal Word: DANGER

  	<p><b>Hazard Statements:</b> May cause cancer by inhalation. Causes damage to lungs through prolonged or repeated exposure by inhalation.</p> <p><b>Precautionary Statements:</b></p> <p><b>PREVENTION:</b> Obtain special instructions before use. Do not handle until all safety precautions have been read and understood. Do not breathe dust. Do not eat, drink or smoke when using this product. Wear protective gloves and safety glasses or goggles. In case of inadequate ventilation wear respiratory protection.</p> <p><b>RESPONSE:</b> If inhaled: Remove person to fresh air and keep comfortable for breathing Immediately call a poison control center or doctor If in eyes: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Specific treatment is urgent. (See First Aid Measures) If on skin: Wash with plenty of water. If skin or eye irritation occurs/persists: Get medical advice/attention If exposed or concerned: Call a poison center/doctor. Take off contaminated clothing and wash it before reuse</p> <p><b>STORAGE:</b> Store locked up in a well-ventilated place with container tightly closed.</p> <p><b>DISPOSAL:</b> Dispose of per federal, state, and local regulations.</p>
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## Section 3 – Composition/Ingredients (\* = trade secret)

Chemical Name	Common Name and synonyms	CAS No.	Percentage
Silica, Crystalline – Quartz	Crystalline silica, sand, ground silica, quartz, SiO <sub>2</sub>	14808-60-7	*
Titanium dioxide	Pigment, titanic oxide, titania, oxide	13463-67-1	*

## Section 4 – First Aid Measures

**INHALATION:** If breathed: If irritation develops from breathing dust or breathing is difficult, move the person from the overexposure to fresh air and seek medical attention if needed.

**SKIN CONTACT:** If on skin: Wash with plenty of water for 15-20 minutes. If skin irritation occurs: Seek medical advice/attention.

**EYE CONTACT:** If in eyes: Rinse cautiously with water for 15-20 minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice/attention.

**INGESTION:** If swallowed: Call a poison center/doctor. Do not induce vomiting. Rinse mouth with water and drink two glass of water or milk. Aspiration may cause burns to mouth, throat and stomach. Never give anything my mouth to an unconscious person.

**MOST IMPORTANT SYMPTOMS/EFFECTS:** Acute: May cause severe or delayed irritation to the respiratory tract and even cancer by inhalation. Causes damage to organs through prolonged or repeat exposure from dust.

Delayed: Repeated or prolonged exposure to respirable crystalline silica dust can cause lung damage in the form of silicosis. Acute silicosis can be fatal.

**IMMEDIATE MEDICAL ATTENTION/SPECIAL TREATMENT:** Emergency Medical Services or call Poison Control Center at (800) 222-1222.

## Section 5 – Fire-Fighting Measures

**SUITABLE EXTINGUISHING MEDIA:** This product is not combustible. Use extinguishing media appropriate for surrounding fire.

**SPECIAL FIRE-FIGHTING PROCEDURES:** NONE. This product poses no fire-related hazards, a self-contained breathing apparatus is recommended to limit exposure to combustion products when fighting any fire.

**UNUSUAL FIRE AND EXPLOSION HAZARDS:** Product may become slippery when wet

<b>Epoxy Resin Part "C"</b>	
<b>HEALTH</b>	<b>1</b>
<b>FLAMMABILITY</b>	<b>0</b>
<b>PHYSICAL HAZARDS</b>	<b>0</b>

NFPA Rating: Health: 1 Flammability: 0 Reactivity: 0

## Section 6 – Accidental Release Measures

**PERSONAL PRECAUTIONS:** Use dustless methods (vacuum) and place into closable container for disposal, or flush with water. Do not dry sweep.

**PROTECTIVE EQUIPMENT:** In case of exposure to dust above the PEL, wear appropriate respiratory protection. If eye contact while using this product is anticipated, wear ANSI Z87 approved goggles or safety glasses. Wear gloves and protective clothing to minimize skin contact.

**EMERGENCY PROCEDURES:** None

**METHODS AND MATERIALS FOR CONTAINMENT AND CLEANING UP:** Collect dry material using a scoop. Scrape up wet material and place in an appropriate container. Allow the material to dry before disposing. DO NOT attempt to wash down drains.

## Section 7 – Handling and Storage

**PRECAUTIONS FOR SAFE HANDLING:** Do not breath dust. Use adequate ventilation and dust collection. Keep airborne dust concentrations below PEL. Do not rely on your sight to determine if dust is in the air. Silica may be in the air without a visible dust cloud. If dust cannot be kept below permissible limits, wear a respirator approved for silica dust when using, handling, storing or disposing of this product or bag. Practice good housekeeping. Do not permit dust to collect on walls, floors, sills, ledges, machinery, or equipment. Maintain, clean, and fit test respirators in accordance with OSHA regulations. Maintain and test ventilation and dust collection equipment. Wash or vacuum clothing that has become dusty. See also control measures in Section 8.

**CONDITIONS FOR SAFE STORAGE INCLUDING INCOMPATIBILITIES:** Avoid breakage of bagged material or spills of bulk material. See control measures in Section 8.

## Section 8 – Exposure Controls/Personal Protection

Component	OSHA PEL; TWA (8-Hr TWA)	ACGIH TLV
Silica Sand	0.50 ug/m <sup>3</sup>	0.025 mg/m <sup>3</sup> (T)
Titanium dioxide	15 mg/m <sup>3</sup>	10 mg/m <sup>3</sup>

**APPROPRIATE ENGINEERING CONTROLS:** Use sufficient local exhaust to reduce the level of respirable crystalline silica to below the PEL. See ACGIH "Industrial Ventilation, A Manual of Recommended Practice" (latest edition).

**PERSONAL PROTECTIVE EQUIPMENT:** To avoid exposures to silica dust in excess of the OSHA PEL, consider wearing air-purifying respirators with HEPA filters or NIOSH-approved dust respirators. Wear proper protective clothing, e.g. long pants and long-sleeved shirts, to avoid contact with alkaline dust. Use ANSI-approved eye protection and chemical resistant gloves.

**RESPIRATORY PROTECTION:** : Dust is generated when working with dry clay. To minimize exposure to dust and/or crystalline silica, cutting or sanding dry clay products should be conducted with sufficient ventilation. Respirable dust and quartz levels should be monitored regularly. Dust and quartz levels in excess of appropriate exposure limits should be reduced by feasible engineering controls, including (but not limited to) wet sanding, wet suppression, ventilation, and process enclosure. When such controls are not feasible, NIOSH/MSHA approved respirators must be worn in accordance with a respiratory protection program which meets OSHA requirements as set forth at 29 CFR1910.134 and ANSI Z88.2-1080 "Practices for Respiratory Protection". In most cases, a disposable N-95 Particulate Respirator is sufficient.

**EYE/FACE PROTECTION:** Under normal conditions, wear safety glasses with side shields or safety goggles that meet the ANSI Z87.1 standard. In extremely dusty conditions wear ANSI-approved unvented safety goggles. DO NOT wear contact lenses.

**HAND PROTECTION:** Use gloves and/or protective clothing if abrasion or allergic reactions are experienced.

**PROTECTIVE CLOTHING:** Wear long pants and long-sleeved shirts while working with this material.

## Section 9 – Physical and Chemical Properties

APPEARANCE: White Solid Aggregate	ODOR: None
pH: 6-8	MELTING PT/FREEZING PT: 3110°F (1710°C)
BOILING POINT: 4046°F/2230°C	FLASH POINT: N/A
FLAMMABILITY: N/A	EVAPORATION RATE: N/A
VAPOR DENSITY: N/A	RELATIVE DENSITY: 1442kg/m <sup>3</sup>
VAPOR PRESSURE: N/A	EXPLOSIVE LIMITS: N/A
PARTITION COEFFICIENT: n-OCTANOL/WATER: N/A	VISCOSITY: N/A
DECOMPOSITION TEMPERATURE: Calcium sulfate, 1340°C	SOLUBILITY IN WATER: Insoluble in water

## Section 10 – Stability and Reactivity

**REACTIVITY:** None

**CHEMICAL STABILITY:** Stable

**POSSIBILITY OF HAZARDOUS REACTIONS:** Avoid mixing with powerful oxidizing agents

**CONDITIONS TO AVOID:** Releasing dust

**HAZARDOUS DECOMPOSITION PRODUCTS:** Silica will dissolve in hydrofluoric acid and produce a corrosive gas - silicon tetrafluoride.

## Section 11 – Toxicological Information

**Routes of Entry:** Inhalation: YES    Ingestion: YES    Eye: YES    Skin: YES

**SYMPTOMS RELATED TO THE PHYSICAL, CHEMICAL AND TOXICOLOGICAL CHARACTERISTICS:** The major concern is silicosis, caused by the inhalation and retention of respirable crystalline silica dust. Silicosis can exist in several forms, chronic (or ordinary), accelerated, or acute. Chronic or Ordinary Silicosis (often referred to as Simple Silicosis) is the most common form of silicosis and can occur after many years of exposure to 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, wheezing, cough and sputum production.

## Section 11 – Toxicological Information (cont.)

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 (corpumonale). Accelerated Silicosis can occur with exposure to high concentrations of respirable crystalline silica over a relatively short period; the lung lesions can appear within five (5) years of the initial exposure. The progression can be rapid. Accelerated silicosis is similar to chronic or ordinary silicosis, except that the lung lesions appear earlier and the progression is more rapid. Acute Silicosis can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as a few months. The symptoms of acute silicosis include progressive shortness of breath, fever, cough and weight loss. Acute silicosis is fatal.

**CHRONIC EFFECTS FROM SHORT-TERM AND LONG-TERM EXPOSURE:** There is evidence that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis is associated with the increased incidence of several autoimmune disorders, -- scleroderma, systemic lupus erythematosus, rheumatoid arthritis and diseases affecting the kidneys. Individuals with silicosis are at increased risk to develop pulmonary tuberculosis. There is evidence that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis is associated with the increased incidence of kidney diseases, including end stage renal disease.

Crystalline Silica Quartz: Oral rat LD50 >22,500 mg/kg

Titanium dioxide: Oral rat LD50 >25,000mg/kg

Titanium dioxide: Dermal rabbit LD50 >10,000mg/kg

Titanium dioxide: Oral rat LC50 >6,820mg/m<sup>3</sup>

**Carcinogenicity:** IARC - The International Agency for Research on Cancer ("IARC") concluded that there was "sufficient evidence in humans for the carcinogenicity of crystalline silica in the forms of quartz or cristobalite from occupational sources", and that there is "sufficient evidence in experimental animals for the carcinogenicity of quartz and cristobalite." The overall IARC evaluation was that "crystalline silica inhaled in the form of quartz or cristobalite from occupational sources is carcinogenic to humans (Group 1)." The IARC evaluation noted that "carcinogenicity was not detected in all industrial circumstances studies. Carcinogenicity may be dependent on inherent characteristics of the crystalline silica or on external factors affecting its biological activity or distribution of its polymorphs." For further information on the IARC evaluation, see IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, Volume 68, "Silica, Some Silicates..." (1997). NTP - The National Toxicology Program, in its Ninth Annual Report on Carcinogens, classified "silica, crystalline (respirable)" as a known human carcinogen. OSHA - Crystalline silica (quartz) is not regulated by the U. S. Occupational Safety and Health Administration as a carcinogen.

## Section 12 – Ecological Information (Non-mandatory)

Crystalline silica (quartz) is not known to be ecotoxic; i.e., there is no data which suggests that crystalline silica (quartz) is toxic to birds, fish, invertebrates, microorganisms or plants. For additional information on crystalline silica (quartz), see Sections 9 (physical and chemical properties) and 10 (stability and reactivity) of this SDS.

## Section 13 – Disposal Considerations (Non-mandatory)

**WASTE DISPOSAL OF SUBSTANCE:** The packaging and material may be landfilled; however, material should be covered to minimize generation of airborne dust.

**CONTAINER DISPOSAL:** Dispose of in accordance with federal, state and local regulations.

**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.

The material may be contaminated during use, and it is the responsibility of the user to assess the appropriate disposal of the used material.

## Section 14 – Transport Information (Non-mandatory)

### DOT SHIPPING INFORMATION

This material is not a hazardous material for purposes of transportation under the U. S. Department of Transportation Table of Hazardous Materials, 49 CFR §172.101.

## Section 15 – Regulatory Information (Non-mandatory)

U.S. SARA REPORTING REQUIREMENTS: The components of this mixture are not subject to the reporting requirements of Sections 302, 304 and 313 of Title II of the Superfund Amendments and Reauthorization Act.	
SARA 311/312: Immediate and Delayed Health effects; Yes      Fire Hazard; No      Pressure; No	
U.S. SARA THRESHOLD PLANNING QUANTITY: There are no specific Threshold Planning Quantities for the components of this product. The default Federal SDS submission and inventory requirement filing threshold of 10,000 lbs (4,540 kg) therefore applies, per 40 CFR 370.20	
U.S. CERCLA REPORTABLE QUANTITY (RQ): None	
U.S. TSCA INVENTORY STATUS: Crystalline silica (quartz), CAS# 14808-60-7; Titanium dioxide, CAS# 13463-67-1 are listed on the TSCA inventory	
TSCA SIGNIFICANT NEW USE RULE: None of the chemicals in this mixture have a SNUR under TSCA.	
CLEAN AIR ACT: This material does not contain any hazardous air pollutants This material does not contain any Class 1 Ozone depletors This material does not contain any Class 2 Ozone depletors	
CLEAN WATER ACT: None of the chemicals in this mixture are listed as Hazardous Substances under the CWA  None of the chemicals in this mixture are listed as Priority Pollutants under the CWA  None of the chemicals in this mixture are listed as Toxic Pollutants under the CWA	
OSHA: None of the chemicals in this mixture are considered highly hazardous by OSHA	
CALIFORNIA SAFE DRINKING WATER AND TOXIC ENFORCEMENT ACT (PROPOSITION 65): This product contains a chemical, crystalline silica (airborne particles of respirable size), classified as a substance known to the state of California to be a carcinogen.	
California No Significant Risk Level: None of the chemicals in this product are listed. California Inhalation Reference Exposure Level (REL): California established a chronic REL of 3 ug 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.	
OTHER STATE SPECIFIC REGULATIONS: Massachusetts Right to Know Act: Silica, crystalline – quartz and titanium dioxide are listed on the RTK list Pennsylvania Worker and Community Right to Know Act: Silica, crystalline - Quartz and titanium dioxide is a hazardous substance under the Act but it is not a special hazardous substance or an environmental hazardous substance. New Jersey Worker and Community Right to Know Act: Silica, crystalline – quartz and titanium dioxide are listed on the RTK list	

## Section 16 – Other Information

PREPARED BY: Bryan Cleavenger      DATE PREPARED: September 23, 2019	
EMAIL ADDRESS: Bryan@Cleavengercompliance.com	
TRAINING NECESSARY:	Yes. Training under the OSHA HazCom GHS requirements (29 CFR 1910.1200) must be completed upon initial assignment for new employees.
INTENDED USE OF THIS PRODUCT:	This product is intended for use by skilled individuals at their own risk. The information contained herein is based on data considered accurate based on current state of knowledge and experience. However, no warranty is expressed or implied regarding the accuracy of this data or the results to be obtained from the use thereof.

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