

Section 1 - Chemical Product and Company Identification

Product Name: _____ CAS #: _____

Product Use: _____

Manufacturer Name: _____ Supplier Name: _____

Street Address: _____ Street Address: _____

City: _____ State: _____ City: _____ State: _____

Zip: _____ Emergency Phone: _____ Zip: _____ Emergency Phone: _____

Section 2 - Hazards Identification

Hazard Classification of the Chemical:

Signal Word:

Pictogram:

Hazard Statement:

Precautionary Statement:

Describe any hazards not otherwise classified:

Section 3 - Composition Information and Ingredients

Hazardous Ingredients (specific)	%	CAS Number	Common Names	Synonyms

Section 4 - First Aid Measures

Description of necessary measures, most important symptoms/effects, acute and delayed, indication of immediate medical attention and special treatment needed, if necessary.

Skin Contact: _____

Eye Contact: _____

Inhalation: _____

Ingestion: _____

Section 5 - Fire Fighting Measures

Flammable: Yes No If Yes, Under What Conditions: _____

NFPA Health: _____ Flammability: _____ Reactivity: _____ Other/Misc: _____

Extinguishing Media: _____

Section 6 - Accidental Release Measures

Leak and Spill Procedures:

Personal Precautions, Protective Equipment, and Emergency Procedures:

Methods and Materials for Containment and Cleaning Up:

Section 7 - Handling and Storage

Handling Procedures & Equipment:

Storage Requirements:

Section 8 - Exposure Control/Personal Protection

Exposure Limits: ACGIH TLV _____ OSHA PEL: _____ Other (Specify): _____

Specific Engineering Controls: (Such as Ventilation, Enclosed Process, etc.)

Personal Protective Equipment

Gloves Respirator Eye Footwear Clothing Other If "Other," Specify Type:

Section 9

Physical & Chemical Properties:

Decomposition Temperature: _____ Lower Flammable Limit (% by Volume): _____ Viscosity: _____

Relative Density: _____ Upper Flammable Limit (% by Volume): _____ Color, Odor & Appearance: _____

Physical State: _____ AutoignitionTemp (°C/°F): _____ Odor Threshold (ppm): _____

Specific Gravity: _____ Vapor Density (Air=1): _____ Vapor Pressure (mm Hg): _____

Evaporation Rate: _____ Boiling Point (°C/°F): _____ Freezing Point (°C/°F): _____

pH: _____ Flash Point (°C/°F): _____ Other: _____

Partition Coefficient, n-Octanol/Water: _____ Solubilities: _____

Section 10 - Stability and Reactivity

Chemical Instability: Yes No If Yes, Under What Conditions: _____

Incompatibility with Other Substances: Yes No If Yes, Which Ones: _____

Reactivity Data:

Chemical Stability:

Possibility of Hazardous Reaction:

Conditions to Avoid (Shock, Vibration, Static Spark):

Incompatible Materials:

Hazardous Decomposition Products:

Section 11 - Toxicological Information

Route(s) of Entry: Skin Contact Skin Absorption Eye Contact Inhalation Ingestion

Information on the Likely Routes of Exposure (Inhalation, Ingestion, Skin, and Eye Contact):

Numerical Measures of Toxicity:

LD₅₀ Oral: _____

LD₅₀ Dermal: _____

LC₅₀ Inhalation: _____

Symptoms and Effects of Acute Exposure:

Symptoms and Effects of Chronic Exposure:

Irritancy of Product: _____

Skin Sensitivity: _____ Respiratory Sensitization: _____

Reproductive Toxicity: _____ Carcinogenicity - ACGIH, IARC, OSHA, NIOSH: _____

Embryotoxicity: _____ Teratogenicity: _____

Synergistic Products/Effects: _____ Mutagenicity: _____

Section 12 - Ecological Information

Ecotoxicity (aquatic and terrestrial, where available):

Persistence and Degradability:

Bioaccumulative Potential:

Mobility in Soil:

Other Adverse Effects (such as Hazardous to Ozone Layer):

Section 13 - Disposal Considerations

Waste Disposal:

Section 14 - Transport Information

Transport Type	Proper Shipping Name	Hazard Class	UN/NA Number	Packing Group
Domestic Ground (DOT)				
International Water (IMO)				
International Air (ICAO)				

Environmental Hazards:

Additional/Other Information:

Section 15 - Regulatory Information

WHMIS Classification: _____ OSHA: _____

SARA: _____ TSCA: _____

CERCLA: _____ RCRA: _____

Other:

Section 16 - Other Information

SDS Prepared By: _____ Date Prepared/Changed: _____ Preparer Phone: _____

Other Information:

This form must be completed and accompany the material in transport.