

Hazardous, Dangerous Goods

1. MATERIAL AND SUPPLY COMPANY IDENTIFICATION

Product name: Vulkem 171 Primer

Recommended use: Primer

Tremco CPG Australia Pty Ltd Supplier:

ABN: 25 000 024 064 Street Address:

12/4 Southridge Street Eastern Creek NSW 2766

Telephone: 02 9638 2755 Facsimile: 02 9638 2955

Emergency Telephone number: 02 9037 2994 (Aus) +1 703-741-5500 (Worldwide)

2. HAZARDS IDENTIFICATION

This material is hazardous according to the criteria of Safe Work Australia GHS 7.







Signal Word

Danger

Hazard Classifications

Flammable Liquids - Category 3

Acute Toxicity - Inhalation - Category 4

Skin Corrosion/Irritation - Category 2

Eye Damage/Irritation - Category 2A

Sensitisation - Respiratory - Category 1

Sensitisation - Skin - Category 1

Specific Target Organ Toxicity (Single Exposure) - Category 3 Respiratory Tract Irritation

Specific Target Organ Toxicity (Repeated Exposure) - Category 2

Hazard Statements

H226	Flammable liquid and vapour.
H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.
H332	Harmful if inhaled.
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H335	May cause respiratory irritation.
H373	May cause damage to organs through prolonged or repeated exposure.

Prevention Precautionary Statements

P102	Keep out of reach of children.
P103	Read carefully and follow all instructions.
P210	Keep away from heat/sparks/open flames/hot surfaces. No smoking.
P233	Keep container tightly closed.
P240	Ground and bond container and receiving equipment.
P241	Use explosion-proof electrical, ventilating, lighting and all other equipment.
P242	Use non-sparking tools.

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P243	rake action to prevent static discharges.
P260	Do not breathe dust, fume, gas, mist, vapours or spray.
P264	Wash hands, face and all exposed skin thoroughly after handling.
P271	Use only outdoors or in a well-ventilated area.
P272	Contaminated work clothing should not be allowed out of the workplace.
P280	Wear protective gloves/protective clothing including eye/face protection.
P284	In case of inadequate ventilation wear respiratory protection.

Response Precautionary Statements

	inally continued
P101	If medical advice is needed, have product container or label at hand.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or shower].
P304+P341	IF INHALED: If breathing is difficult, remove victim to fresh air and keep at rest in a position comfortable for breathing.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P314	Get medical advice/attention if you feel unwell.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P337+P313	If eye irritation persists: Get medical advice/attention.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTRE or doctor/physician.
P362+P364	Take off contaminated clothing and wash it before reuse

In case of fire: Use (insert appropriate media) to extinguish.

Storage Precautionary Statements

P403+P233	Store in a	well-ventilated	l place. Keep	container tightly closed	

P403+P235 Store in a well-ventilated place. Keep cool.

P405 Store locked up.

Disposal Precautionary Statement

P501 Dispose of contents/container in accordance with local, regional, national and

international regulations.

Poison Schedule:

P370+P378

DANGEROUS GOOD CLASSIFICATION

Classified as Dangerous Goods by the criteria of the "Australian Code for the Transport of Dangerous Goods by Road & Rail" and the "New Zealand NZS5433: Transport of Dangerous Goods on Land".

Dangerous Goods Class: 3

3. COMPOSITION INFORMATION

CHEMICAL ENTITY	CAS NO	PROPORTION
Xylene Solvent naphtha, petroleum, light aromatic 4, 4' - diphenylmethane diisocyanate (MDI) Benzene, 1,1'-methylenebis[4-isocyanato-, homopolymer Benzene, 1-isocyanato-2-[(4-isocyanatophenyl)methyl]- Ingredients determined to be Non-Hazardous	1330-20-7 64742-95-6 101-68-8 25686-28-6 5873-54-1	% % % % % Balance
		100%

4. FIRST AID MEASURES

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If poisoning occurs, contact a doctor or Poisons Information Centre (Phone Australia 131 126, New Zealand 0800 764 766).

Inhalation: Effects may be delayed. Remove victim from exposure - avoid becoming a casualty. Remove contaminated clothing and loosen remaining clothing. Allow patient to assume most comfortable position and keep warm. Keep at rest until fully recovered. If breathing laboured and patient cyanotic (blue), ensure airways are clear and have a qualified person give oxygen through a facemask. If breathing has stopped apply artificial respiration at once. In the event of cardiac arrest, apply external cardiac massage. Seek immediate medical advice.

Skin Contact: Effects may be delayed. If skin or hair contact occurs, immediately remove contaminated clothing and flush skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre or a Doctor; or for 15 minutes and transport to Doctor or Hospital. For gross contamination, immediately drench with water and remove clothing. Continue to flush skin and hair with plenty of water (and soap if material is insoluble). For skin burns, cover with a clean, dry dressing until medical help is available. If blistering occurs, do NOT break blisters. If swelling, redness, blistering, or irritation occurs seek medical assistance.

Eye contact: If in eyes, hold eyelids apart and flush the eyes continuously with running water. Continue flushing until advised to stop by the Poisons Information Centre or a Doctor; or for at least 15 minutes and transport to Doctor or Hospital.

Ingestion: Rinse mouth with water. If swallowed, do NOT induce vomiting. Give a glass of water to drink. Never give anything by the mouth to an unconscious patient. If vomiting occurs give further water. Seek medical advice.

PPE for First Aiders: Wear rubber boots, overalls, gloves, respirator. Use with adequate ventilation. If inhalation risk exists wear organic vapour/particulate respirator meeting the requirements of AS/NZS 1715 and AS/NZS 1716. Available information suggests that gloves made from should be suitable for intermittent contact. However, due to variations in glove construction and local conditions, the user should make a final assessment. Always wash hands before smoking, eating, drinking or using the toilet. Wash contaminated clothing and other protective equipment before storing or re-using.

Notes to physician: Treat symptomatically. Effects may be delayed.

5. FIRE FIGHTING MEASURES

Hazchem Code: •3Y

Suitable extinguishing media: If material is involved in a fire use alcohol resistant foam or dry agent (carbon dioxide, dry chemical powder).

Specific hazards: Flammable liquid and vapour. May form flammable vapour mixtures with air. Flameproof equipment necessary in area where this chemical is being used. Nearby equipment must be earthed. Electrical requirements for work area should be assessed according to AS3000. Vapour may travel a considerable distance to source of ignition and flash back. Avoid all ignition sources. All potential sources of ignition (open flames, pilot lights, furnaces, spark producing switches and electrical equipment etc) must be eliminated both in and near the work area. Do NOT smoke.

Fire fighting further advice: Heating can cause expansion or decomposition leading to violent rupture of containers. If safe to do so, remove containers from path of fire. Keep containers cool with water spray. On burning or decomposing may emit toxic fumes. Fire fighters to wear self-contained breathing apparatus and suitable protective clothing if risk of exposure to vapour or products of combustion or decomposition.

6. ACCIDENTAL RELEASE MEASURES

SMALL SPILLS

Remove all ignition sources. Clean up all spills immediately. Avoid breathing vapours and contact with skin and

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eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb small quantities with vermiculite or other absorbent material. Wipe up. Collect residues in a flammable waste container.

LARGE SPILLS

Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. DO NOT reseal container if contamination is suspected. Open all containers with care. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water course. Consider evacuation (or protect in place). No smoking, naked lights or ignition sources. Increase ventilation. Stop leak if safe to do so. Water spray or fog may be used to disperse /absorb vapour. Contain spill with sand, earth or vermiculite. Use only spark-free shovels and explosion proof equipment. Collect recoverable product into labelled containers for recycling. Absorb remaining product with sand, earth or vermiculite. Collect solid residues and seal in labelled drums for disposal. Wash area and prevent runoff into drains. If contamination of drains or waterways occurs, advise emergency services

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7. HANDLING AND STORAGE

Handling: Containers, even those that have been emptied, may contain explosive vapours.Do NOT cut, drill, grind, weld or perform similar operations on or near containers.DO NOT allow clothing wet with material to stay in contact with skinAvoid all personal contact, including inhalation.Wear protective clothing when risk of overexposure occurs.Use in a well-ventilated area.Prevent concentration in hollows and sumps.DO NOT enter confined spaces until atmosphere has been checked.Avoid smoking, naked lights or ignition sources.Avoid generation of static electricity.DO NOT use plastic buckets.Earth all lines and equipment.Use spark-free tools when handling.Avoid contact with incompatible materials.When handling, DO NOT eat, drink or smoke.Keep containers securely sealed when not in use.Avoid physical damage to containers.Always wash hands with soap and water after handling.Work clothes should be laundered separately.Use good occupational work practice.Observe manufacturer's storage and handling recommendations contained within this SDS.Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions

Storage: Store in original containers in approved flammable liquid storage area. Store away from incompatible materials in a cool, dry, well-ventilated area.DO NOT store in pits, depressions, basements or areas where vapours may be trapped. No smoking, naked lights, heat or ignition sources. Storage areas should be clearly identified, well illuminated, clear of obstruction and accessible only to trained and authorised personnel -adequate security must be provided so that unauthorised personnel do not have access. Store according to applicable regulations for flammable materials for storage tanks, containers, piping, buildings, rooms, cabinets, allowablequantities and minimum storage distances. Use non-sparking ventilation systems, approved explosion proof equipment and intrinsically safe electrical systems. Have appropriate extinguishing capability in storage area (e.g. portable fire extinguishers - dry chemical, foam or carbon dioxide) andflammable gas detectors. Keep adsorbents for leaks and spills readily available. Protect containers against physical damage and check regularly for leaks. Observe manufacturer's storage and handling recommendations contained within this SDS. In addition, for tank storages (where appropriate):Store in grounded, properly designed and approved vessels and away from incompatible materials. For bulk storages, consider use of floating roof or nitrogen blanketed vessels; where venting to atmosphere is possible, equip storage tankvents with flame arrestors; inspect tank vents during winter conditions for vapour/ ice build-up. Storage tanks should be above ground and diked to hold entire contents for commercial quantities of isocyanates: Isocyanates should be stored in adequately bunded areas. Nothing else should be kept within the same bunding. Pre-polymers need not besegregated. Drums of isocyanates should be stored under cover, out of direct sunlight, protected from rain, protected from physical damage andwell away from moisture, acids and alkalis. Where isocyanates are stored at elevated temperatures to prevent solidifying, adequate controls should be installed to prevent the hightemperatures and precautions against fire should be taken. Where stored in tanks, the more reactive isocyanates should be blanketed with a non-reactive gas such as nitrogen and equipped withabsorptive type breather valve (to prevent vapour emissions)... Transfer systems for isocyanates in bulk storage should be fully enclosed and use pump or vacuum systems. Warning signs, in appropriatelanguages, should be posted where necessary. Areas in which polyurethane foam products are stored should be supplied with good general ventilation. Residual amounts of unreactedisocyanate may be present in the finished foam, resulting in hazardous atmospheric concentrations. Ideal storage temperature range is dependent on the specific polymer due to viscosity and melting point differences between the polymers. Use25 deg C (77 deg F) to 30 deg C (86 deg F) as a guideline to most liquid isocyanates for optimum storage

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temperature. If some isocyanates are stored at or below a temperature of 25 deg C (77 deg F), crystallization and settling of the isocyanate may occur. Storage in a cold warehousecan cause crystals to form. These crystals can settle to the bottom of the container. If crystals do form, they can be melted easily with moderateheat. It is suggested that a container the size of a drum be warmed for 16-24 hours at sufficient temperature to melt the crystals. When the crystals are melted, the container should be agitated by rolling or stirring, until the contents are homogenous. Since heated isocyanate willgenerate vapors more rapidly than product stored at 25 deg C (77 deg F), be sure to follow the precautions under the Personal Protection.

This material is classified as a Class 3 Flammable Liquid as per the criteria of the "Australian Code for the Transport of Dangerous Goods by Road & Rail" and/or the "New Zealand NZS5433: Transport of Dangerous Goods on Land" and must be stored in accordance with the relevant regulations.

8. EXPOSURE CONTROLS / PERSONAL PROTECTION

National occupational exposure limits:

	TWA		STEL		NOTICES
	ppm	mg/m3	ppm	mg/m3	
Methylene bisphenyl isocyanate (MDI)	00	250	450	055	
Xylene	80	350	150	655	

As published by Safe Work Australia.

TWA - The time-weighted average airborne concentration over an eight-hour working day, for a five-day working week over an entire working life.

STEL (Short Term Exposure Limit) - the average airborne concentration over a 15 minute period which should not be exceeded at any time during a normal eight-hour workday.

These Exposure Standards are guides to be used in the control of occupational health hazards. All atmospheric contamination should be kept to as low a level as is workable. These exposure standards should not be used as fine dividing lines between safe and dangerous concentrations of chemicals. They are not a measure of relative toxicity.

If the directions for use on the product label are followed, exposure of individuals using the product should not exceed the above standard. The standard was created for workers who are routinely, potentially exposed during product manufacture.

Biological Limit Values: As per the "National Model Regulations for the Control of Workplace Hazardous Substances (Safe Work Australia)" the ingredients in this material do not have a Biological Limit Allocated.

Engineering Measures: Ensure ventilation is adequate to maintain air concentrations below Exposure Standards. Use only in well ventilated areas. Use with local exhaust ventilation or while wearing appropriate respirator.

Personal Protection Equipment: RUBBER BOOTS, OVERALLS, GLOVES, RESPIRATOR.

Personal protective equipment (PPE) must be suitable for the nature of the work and any hazard associated with the work as identified by the risk assessment conducted.

Wear rubber boots, overalls, gloves, respirator. Use with adequate ventilation. If inhalation risk exists wear organic vapour/particulate respirator meeting the requirements of AS/NZS 1715 and AS/NZS 1716. Available information suggests that gloves made from should be suitable for intermittent contact. However, due to variations in glove construction and local conditions, the user should make a final assessment. Always wash hands before smoking, eating, drinking or using the toilet. Wash contaminated clothing and other protective equipment before storing or re-using.

RECOMMENDATIONS FOR CONSUMER USE:

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All employees working with isocyanates must be informed of the hazards from exposure to the contaminant and



the precautions necessary toprevent damage to their health. They should be made aware of the need to carry out their work so that as little contamination as possible isproduced, and of the importance of the proper use of all safeguards against exposure to themselves and their fellow workers. Adequate training, both in the proper execution of the task and in the use of all associated engineering controls, as well as of any personal protective equipment, is essential. Employees exposed to contamination hazards should be educated in the need for, and proper use of, facilities, clothing and equipment and thereby maintain a high standard of personal cleanliness. Special attention should be given to ensuring that all personnel understand instructions, especially newly recruited employees and those with local-language difficulties, where they are known. Overalls. PVC Apron. PVC protective suit may be required if exposure severe. Eyewash unit. Ensure there is ready access to a safety shower.

Hygiene measures: Keep away from food, drink and animal feeding stuffs. When using do not eat, drink or smoke. Wash hands prior to eating, drinking or smoking. Avoid contact with clothing. Avoid eye contact and skin contact. Avoid inhalation of vapour, mist or aerosols. Ensure that eyewash stations and safety showers are close to the workstation location.

9. PHYSICAL AND CHEMICAL PROPERTIES

Form: Liquid

Density: 0.98 Flash Point (°C): 23

Flammability Limits (%): flammable Boiling Point/Range (°C): 136

(Typical values only - consult specification sheet) N Av = Not available, N App = Not applicable

10. STABILITY AND REACTIVITY

Chemical stability: Presence of elevated temperatures. Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.

Conditions to avoid: Avoid reaction with oxidising agents Avoid strong bases. Reacts vigorously with alkalis

Incompatible materials: see section 7

Hazardous decomposition products: see section 5

Hazardous reactions: see section 7

11. TOXICOLOGICAL INFORMATION

No adverse health effects expected if the product is handled in accordance with this Safety Data Sheet and the product label. Symptoms or effects that may arise if the product is mishandled and overexposure occurs are:

Acute Effects

Inhalation: Harmful if inhaled. Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number ofindividuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising theirritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tractirritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. Inhalation hazard is increased at higher temperatures. The vapour/mist may be highly irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis and pulmonary oedema. Possible neurological

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symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxietyneurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation mayproduce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposureor may develop without warning for several hours after exposure. Sensitized people can react to very low doses, and should not be allowed towork in situations allowing exposure to this material. Continued exposure of sensitised persons may lead to possible long term respiratoryimpairment. Inhalation hazard is increased at higher temperatures. Acute effects from inhalation of high concentrations of vapour are pulmonary irritation, including coughing, with nausea; central nervous systemdepression - characterised by headache and dizziness, increased reaction time, fatigue and loss of coordinationInhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. A respiratory sensitiser. Can cause possible allergic reactions.

Skin contact: The material produces moderate skin irritation; evidence exists, or practical experience predicts, that the material eitherproduces moderate inflammation of the skin in a substantial number of individuals following direct contact, and/orproduces significant, but moderate, inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammationbeing present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). Thedermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling andthickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) andintracellular oedema of the epidermis. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. The material may accentuate any pre-existing dermatitis condition Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected. A skin sensitiser. Repeated or prolonged skin contact may lead to allergic contact dermatitis.

Ingestion: Accidental ingestion of the material may be damaging to the health of the individual.Ingestion of petroleum hydrocarbons may produce irritation of the pharynx, oesophagus, stomach and small intestine with oedema and mucosalulceration resulting; symptoms include a burning sensation in the mouth and throat. Large amounts may produce narcosis with nausea andvomiting, weakness or dizziness, slow and shallow respiration, swelling of the abdomen, unconsciousness and convulsions. Myocardial injurymay produce arrhythmias, ventricular fibrillation and electrocardiographic changes. Central nervous system depression may also occur. Lightaromatic hydrocarbons produce a warm, sharp, tingling sensation on contact with taste buds and may anaesthetise the tongue. Aspiration into the lungs may produce coughing, gagging and a chemical pneumonitis with pulmonary oedema and haemorrhage

Eye contact: Evidence exists, or practical experience predicts, that the material may cause severe eye irritation in a substantial number of individuals and/ormay produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Eyecontact may cause significant inflammation with pain. Corneal injury may occur; permanent impairment of vision may result unless treatment isprompt and adequate. Repeated or prolonged exposure to irritants may cause inflammation characterised by a temporary redness (similar towindburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur. The liquid produces a high level of eye discomfort and is capable of causing pain and severe conjunctivitis. Corneal injury may develop, withpossible permanent impairment of vision, if not promptly and adequately treated.

Acute toxicity

Inhalation: This material has been classified as a Category 4 Hazard. Acute toxicity estimate (based on ingredients): $10.0 < LC_{50} \le 20.0$ mg/L for vapours or $1.0 < LC_{50} \le 5.0$ mg/L for dust and mist.

Xylene LC50 (Rat): 5000 ppm4h[2] (Method: inhalation) naphtha petroleum, light aromatic solvent LC50 (Rat): >4.42 mg/L4h[1] (Method: inhalation) 4,4'-diphenylmethane diisocyanate (MDI) LC50 (Rat): 0.368 mg/L4h[1] (Method: inhalation)

Skin contact: This material has been classified as not hazardous for acute dermal exposure. Acute toxicity estimate (based on ingredients): $LD_{50} > 2,000 \text{ mg/Kg bw}$

Xylene LD50 (Rabbit): >1700 mg/kg[2] (Method: dermal) naphtha petroleum, light aromatic solvent LD50 (Rabbit): >1900 mg/kg[1] (Method: dermal) 4,4'-diphenylmethane diisocyanate (MDI) LD50 (Rabbit): >1900 mg/kg[1] (Method: dermal)

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Ingestion: This material has been classified as not hazardous for acute ingestion exposure. Acute toxicity estimate (based on ingredients): $LD_{50} > 2,000 \text{ mg/Kg}$ bw

Xylene LD50 (Mice): 2119 mg/kg[2] (Method: oral)

4,4'-diphenylmethane diisocyanate (MDI) LD50 (Mice): 2200 mg/kg[2] (Method: oral) naphtha petroleum, light aromatic solvent LD50 (Rat): >4500 mg/kg[1] (Method: oral)

MDI homopolymer LD50 (Rat): >5000 mg/kg[1] (Method: oral)

Corrosion/Irritancy: Eye: this material has been classified as a Category 2A Hazard (reversible effects to eyes). Skin: this material has been classified as a Category 2 Hazard (reversible effects to skin).

Sensitisation: Inhalation: this material has been classified as a Category 1 Hazard (respiratory sensitiser). Skin: this material has been classified as a Category 1 Hazard (skin sensitiser).

Aspiration hazard: This material has been classified as not an aspiration hazard.

Specific target organ toxicity (single exposure): This material has been classified as a Category 3 Hazard. Exposure via inhalation may result in respiratory irritation.

Chronic Toxicity

Mutagenicity: This material has been classified as not a mutagen.

Carcinogenicity: This material has been classified as not a carcinogen.

Reproductive toxicity (including via lactation): This material has been classified as not a reproductive toxicant.

Specific target organ toxicity (repeat exposure): This material has been classified as a Category 2 Hazard. On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; inrespect of the available information, however, there presently exists inadequate data for making a satisfactory assessment. Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a substantial number of individuals at agreater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety ofnonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number ofindividuals, and/or of producing a positive response in experimental animals. Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airwayhyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose toasthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely tobecome hyper-responsive. Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in peoplewith pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers. Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Healthsurveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and thereshould be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance. Harmful: danger of serious damage to health by prolonged exposure through inhalation. Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused byrepeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage maybecome apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicitytests. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs

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orbiochemical systems. Persons with a history of asthma or other respiratory problems or are known to be sensitised, should not be engaged in any work involving thehandling of isocyanates. The chemistry of reaction of isocyanates, as evidenced by MDI, in biological milieu is such that in the event of a true exposure of small MDIdoses to the mouth, reactions will commence at once with biological macromolecules in the buccal region and will continue along the digestivetract prior to reaching the stomach. Reaction products will be a variety of polyureas and macromolecular conjugates with for example mucus, proteins and cell components. This is corroborated by the results from an MDI inhalation study. Following an inhalation exposure of rats to radiolabelled MDI, 79% of the dosewas excreted in faeces. The faecal excretion in these animals was considered entirely due to ingestion of radioactivity from grooming andingestion of deposited material from the nasopharangeal region via the mucociliary escalator, i.e. not following systemic absorption. The faecalradioactivity was tentatively identified as mixed molecular weight polyureas derived from MDI. Diamine was not present. Thus, for MDI anddiisocyanates in general the oral gayage dosing route is inappropriate for toxicological studies and risk assessment. It is expected that oral gayage dosing will result in a similar outcome to that produced by TDI or MDI. that is (1) reaction with stomach contents and (2) polymerization to solid polyureas. Reaction with stomach contents is very plausibly described in case reports of accidental ingestion of polymeric MDI based glue in domesticanimals. Extensive polymerization and CO2 liberation resulting in an expansion of the gastric content is described in the stomach, withoutapparent acute chemical toxicityPolyurea formation in organic and aqueous phases has been described. In this generally accepted chemistry of hydrolysis of an isocyanatethe initially produced carbamate decarboxylates to an amine which. The amine, as a reactive intermediate, then reacts very readily with thepresent isocyanate to produce a solid and inert polyurea. This urea formation acts as a pH buffer in the stomach, thus promoting transformation of the diisocyanate into polyurea, even under the acidic conditions. At the resorbtive tissues in the small intestine, these high molecular reaction products are likely to be of very low bioavailability, which issubstantiated by the absence of systemic toxicity in acute oral bioassays with rats at the OECD limit dose (LC50>2 g/kg bw). The respiratory tract may be regarded as the main entry for systemically available isocyanates as evidenced following MDI.exposures. A detailed summary on urinary, plasma and in vitro metabolite studies is provided below. Taken together, all available studies provide convincingevidence that MDI-protein adduct and MDI-metabolite formation proceeds:via formation of a labile isocyanate glutathione (GSH)-adduct, then transfer to a more stable adduct with larger proteins, and without formation of free MDA. MDA reported as a metabolite is actually formed by analytical workup procedures (strong acid or basehydrolysis) and is not an identified metabolite in urine or bloodRepeated or prolonged exposure to mixed hydrocarbons may produce narcosis with dizziness, weakness, irritability, concentration and/ormemory loss, tremor in the fingers and tongue, vertigo, olfactory disorders, constriction of visual field, paraesthesias of the extremities, weightloss and anaemia and degenerative changes in the liver and kidney. Chronic exposure by petroleum workers, to the lighter hydrocarbons, hasbeen associated with visual disturbances, damage to the central nervous system, peripheral neuropathies (including numbness andparaesthesias), psychological and neurophysiological deficits, bone marrow toxicities (including hypoplasia possibly due to benzene) and hepaticand renal involvement. Chronic dermal exposure to petroleum hydrocarbons may result in defatting which produces localised dermatoses. Surface cracking and erosion may also increase susceptibility to infection by microorganisms. One epidemiological study of petroleum refineryworkers has reported elevations in standard mortality ratios for skin cancer along with a dose-response relationship indicating an association between routine workplace exposure to petroleum or one of its constituents and skin cancer, particularly melanoma. Other studies have been unable to confirm this finding. Hydrocarbon solvents are liquid hydrocarbon fractions derived from petroleum processing streams, containing only carbon and hydrogen atoms, with carbon numbers ranging from approximately C5-C20 and boiling between approximately 35-370 deg C. Many of the hydrocarbon solventshave complex and variable compositions with constituents of 4 types, alkanes (normal paraffins, isoparaffins, and cycloparaffins) and aromatics(primarily alkylated one- and two-ring species). Despite the compositional complexity, most hydrocarbon solvent constituents have similartoxicological properties, and the overall toxicological hazards can be characterized in generic terms. Hydrocarbon solvents can cause chemical pneumonitis if aspirated into the lung, and those that are volatile can cause acute CNS effects and/or ocular and respiratory irritation at exposurelevels exceeding occupational recommendations. Otherwise, there are few toxicologically important effects. The exceptions, nhexane andnaphthalene, have unique toxicological properties Animal studies: No deaths or treatment related signs of toxicity were observed in rats exposed to light alkylate naphtha (paraffinic hydrocarbons) atconcentrations of 668, 2220 and 6646 ppm for 6 hrs/day, 5 days/wk for 13 weeks. Increased liver weights and kidney toxicity (male rats) was observed in high dose animals. Exposure to pregnant rats at concentrations of 137, 3425 and 6850 ppm did not adversely affect reproduction orcause maternal or foetal toxicity. Lifetime skin painting studies in mice with similar naphthas have shown weak or no carcinogenic activityfollowing prolonged and repeated exposure. Similarnaphthas/distillates, when tested at nonirritating dose levels, did not show any significant carcinogenic activity indicating that this tumorigenicresponse is likely related to chronic irritation and not to dose. The mutagenic potential of naphthas has been reported to be largely negative in avariety of mutagenicity tests. The exact relationship between these results and human health is not known. Some components of this producthave been shown to produce a species specific, sex hormonal dependent kidney lesion in male rats from repeated oral

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or inhalation exposure. Subsequent research has shown that the kidney damage develops via the formation of a alpha-2u-globulin, a mechanism unique to the male rat. Humans do not form alpha-2u-globulin, therefore, the kidney effects resulting from this mechanism are not relevant in human. Prolonged or repeated contact with xylenes may cause defatting dermatitis with drying and cracking. Chronic inhalation of xylenes has beenassociated with central nervous system effects, loss of appetite, nausea, ringing in the ears, irritability, thirst anaemia, mucosal bleeding, enlarged liver and hyperplasia. Exposure may produce kidney and liver damage. In chronic occupational exposure, xylene (usually mix ed withother solvents) has produced irreversible damage to the central nervous system and ototoxicity (damages hearing and increases sensitivity tonoise), probably due to neurotoxic mechanisms. Industrial workers exposed to xylene with a maximum level of ethyl benzene of 0.06 mg/l (14 ppm) reported headaches and irritability and tiredquickly. Functional nervous system disturbances were found in some workers employed for over 7 years whilst other workers had enlarged livers. Xylene has been classed as a developmental toxin in some jurisdictions. Small excess risks of spontaneous abortion and congenital malformation were reported amongst women exposed to xylene in the first trimesterof pregnancy. In all cases. however, the women were also been exposed to other substances. Evaluation of workers chronically exposed toxylene has demonstrated lack of genotoxicity. Exposure to xylene has been associated with increased risks of haemopoietic malignancies but, again, simultaneous exposure to other substances (including benzene) complicates the picture. A long-term gavage study to mixed xylenes(containing 17% ethyl benzene) found no evidence of carcinogenic activity in rats and mice of either sex. Chronic solvent inhalation exposures may result in nervous system impairment and liver and blood changes. [PATTYS]

12. ECOLOGICAL INFORMATION

Avoid contaminating waterways.

Acute aquatic hazard: This material has been classified as not hazardous for acute aquatic exposure. Acute toxicity estimate (based on ingredients): > 100 mg/L

Long-term aquatic hazard: This material has been classified as not hazardous for chronic aquatic exposure. Non-rapidly or rapidly degradable substance for which there are adequate chronic toxicity data available OR in the absence of chronic toxicity data, Acute toxicity estimate (based on ingredients): >100 mg/L, where the substance is not rapidly degradable and/or BCF < 500 and/or log K_{ow} < 4.

Ecotoxicity: No information available.

Persistence and degradability: No information available.

Bioaccumulative potential: No information available.

Mobility: No information available.

13. DISPOSAL CONSIDERATIONS

Containers may still present a chemical hazard/ danger when empty.Return to supplier for reuse/ recycling if possible.Otherwise:If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the sameproduct, then puncture containers, to prevent re-use, and bury at an authorised landfill.Where possible retain label warnings and SDS and observe all notices pertaining to the product.DO NOT allow wash water from cleaning or process equipment to enter drains.It may be necessary to collect all wash water for treatment before disposal.In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.Where in doubt contact the responsible authority.Recycle wherever possible.Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment ordisposal facility can be identified.Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensedapparatus (after admixture with suitable combustible material).Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

14. TRANSPORT INFORMATION

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ROAD AND RAIL TRANSPORT

Classified as Dangerous Goods by the criteria of the "Australian Code for the Transport of Dangerous Goods by Road & Rail" and the "New Zealand NZS5433: Transport of Dangerous Goods on Land".



UN No: 1263

Dangerous Goods Class: 3

Packing Group: III

Hazchem Code: •3Y

Emergency Response Guide No: 14

Limited Quantities 5 L

Proper Shipping Name: PAINT

Segregation Dangerous Goods: Not to be loaded with explosives (Class 1), flammable gases (Class 2.1), if both are in bulk, toxic gases (Class 2.3), spontaneously combustible substances (Class 4.2), oxidising agents (Class 5.1), organic peroxides (Class 5.2), toxic substances (Class 6.1), infectious substances (Class 6.2) or radioactive substances (Class 7). Exemptions may apply.

MARINE TRANSPORT

Classified as Dangerous Goods by the criteria of the International Maritime Dangerous Goods Code (IMDG Code) for transport by sea. This material is classified as a Marine Pollutant (P) according to the International Maritime Dangerous Goods Code.



UN No: 1263

Dangerous Goods Class: 3

Packing Group: III

Limited Quantities: 5 L

Proper Shipping Name: PAINT

AIR TRANSPORT

Classified as Dangerous Goods by the criteria of the International Air Transport Association (IATA) Dangerous Goods Regulations for transport by air.



UN No: 1263

Dangerous Goods Class: 3

Packing Group: III

Limited Quantities: 10 L

Proper Shipping Name: PAINT

15. REGULATORY INFORMATION

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This material is not subject to the following international agreements:

Montreal Protocol (Ozone depleting substances)
The Stockholm Convention (Persistent Organic Pollutants)
The Rotterdam Convention (Prior Informed Consent)
Basel Convention (Hazardous Waste)
International Convention for the Prevention of Pollution from Ships (MARPOL)

This material/constituent(s) is covered by the following requirements:

The Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) established under the Therapeutic Goods Act (Commonwealth): .

16. OTHER INFORMATION

Issued: 2023-11-22

Reason for issue: First Issue

This information was prepared in good faith from the best information available at the time of issue. It is based on the present level of research and to this extent we believe it is accurate. However, no guarantee of accuracy is made or implied and since conditions of use are beyond our control, all information relevant to usage is offered without warranty. The manufacturer will not be held responsible for any unauthorised use of this information or for any modified or altered versions.

If you are an employer it is your duty to tell your employees, and any others that may be affected, of any hazards described in this sheet and of any precautions that should be taken.

Safety Data Sheets are updated frequently. Please ensure you have a current copy.

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