

Dunlop Super Tileset Ardex (Ardex Australia)

Chemwatch: 15-5658 Version No: 5.1.1.1 Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 01/11/2019 Print Date: 17/08/2020 S.GHS.AUS.EN

SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	Dunlop Super Tileset
Synonyms	cement based adhesive
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses Adhesive used to fix all ceramic tiles including mosaics and marble, rendered walls and concrete floors.

Details of the supplier of the safety data sheet

Registered company name	Ardex (Ardex Australia)	
Address	20 Powers Road Seven Hills NSW 2147 Australia	
Telephone	1800 224 070	
Fax	1300 780 102	
Website	Not Available	
Email	Not Available	

Emergency telephone number

Association / Organisation	Ardex (Ardex Australia)
Emergency telephone numbers	1800 224 070 (Mon-Fri, 9am-5pm)
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

ChemWatch	Hazard	Ratings
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	Min	Max	
Flammability	0	1	
Toxicity	1		0 = Minimum
Body Contact	3		1 = Low
Reactivity	0		2 = Moderate
Chronic	2	1	3 = High 4 = Extreme

Poisons Schedule	Not Applicable
Classification ^[1]	Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)



Dunlop Super Tileset

Signal word	Danger
ement(s)	

Hazard statement(s)		
H315	Causes skin irritation.	
H318	Causes serious eye damage.	
H317	May cause an allergic skin reaction.	
H335	May cause respiratory irritation.	

Precautionary statement(s) Prevention

P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	
P261	Avoid breathing dust/fumes.	
P272	Contaminated work clothing should not be allowed out of the workplace.	

Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P310	Immediately call a POISON CENTER or doctor/physician.	
P321	Specific treatment (see advice on this label).	
P362	Take off contaminated clothing and wash before reuse.	

Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

Precautionary statement(s) Disposal

P501

Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
65997-15-1	10-60	portland cement
14808-60-7.	10-60	graded sand
Not Available	0-1	cellulosic thickener

SECTION 4 First aid measures

Eye Contact	 If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	 If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay.
Ingestion	 If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Special nazards arising from th	special nazards arising from the substrate or mixture			
Fire Incompatibility	None known.			
Advice for firefighters				
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. 			
Fire/Explosion Hazard	 Non combustible. Not considered a significant fire risk, however containers may burn. silicon dioxide (SiO2) May emit poisonous fumes. May emit corrosive fumes. 			
HAZCHEM	Not Applicable			

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Remove all ignition sources. Clean up all spills immediately. Avoid contact with skin and eyes. Control personal contact with the substance, by using protective equipment.
Major Spills	Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing.

Personal Protective Equipment advice is contained in Section 8 of the SDS.

SECTION 7 Handling and storage

Precautions for safe handling	
Safe handling	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Prevent concentration in hollows and sumps.
Other information	 Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers.

Conditions for safe storage, including any incompatibilities

Suitable container	 Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	 Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. Avoid contact with copper, aluminium and their alloys. Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	graded sand	Silica - Crystalline: Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	Material name	TEEL-1		TEEL-2	TEEL-3		
graded sand	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m	3	33 mg/m3	200 mg/m3		
Ingredient	Original IDLH			Revised IDLH			
portland cement	5,000 mg/m3			Not Available			
graded sand	25 mg/m3 / 50 mg/m3			Not Available			
Exposure controls	Engineering controls are used to remove a hazard or place a barrier be	tween the wor	ker and the ha	azard. Well-designed er	gineering controls can		
Appropriate engineering controls	be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment.						

Personal protection		R	

Eye and face protection	 Safety glasses with side shields. Chemical goggles. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task.
Skin protection	See Hand protection below
Hands/feet protection	 NOTE: The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Neoprene rubber gloves
Body protection	See Other protection below
Other protection	 Overalls. P.V.C apron. Barrier cream. Skin cleansing cream.

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

▶ Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.

- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Fine off-white powder; insoluble in water. Bulk density: 1.5 kg/dm3 (approximately).			
Physical state	Physical state Divided Solid Relative density (Water = 1) Not Available			
Odour	Not Available	Partition coefficient n-octanol / water	Not Available	

Dunlop Super Tileset

Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	11 (paste form)
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

TOXICITY

Oral (rat) LD50: =500 mg/kg^[2]

graded sand

Information on toxicological effects

nformation on toxicological ef	Tects		
Inhaled	Inhaled The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should b conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.		
	Effects on lungs are significantly enhanced in the presence of respirable particles.		
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual.		
Skin Contact	This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition Handling wet cement can cause dermatitis. Cement when wet is quite alkaline and this alkali action on the skin contributes strongly to cement contact dermatitis since it may cause drying and defatting of the skin which is followed by hardening, cracking, lesions developing, possible infections of lesions and penetration by soluble salts. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions 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.		
Eye	If applied to the eyes, this material causes severe eye damage.		
Chronic	It applied to the eyes, this material causes severe eye damage. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Cement contact dermatitis (CCD) may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is due to soluble chromates (chromate compounds) present in trace amounts in some cements and cement products. Soluble chromates readily penetrate intact skin. Cement dermatitis can be characterised by fissures, eczematous rash, dystrophic nails, and dry skin; acute contact with highly alkaline mixtures may cause localised necrosis. Overexposure to the breathable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity and chest infections. Repeated exposures in the workplace to high levels of fine-divided dusts may produce a condition known as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50000 inch) are present.		
Dunion Super Tiles et	ΤΟΧΙΟΙΤΥ	IRRITATION	
Dunlop Super Tileset	Not Available	Not Available	
	тохісіту	IRRITATION	
portland cement	Not Available	Not Available	

IRRITATION

Not Available

Legend:	 Value obtained from Europe ECHA Registered Sub specified data extracted from RTECS - Register of To 		ained from manufacturer's SDS. Unless otherwise
PORTLAND CEMENT	The following information refers to contact allergens a Contact allergies quickly manifest themselves as cont eczema involves a cell-mediated (T lymphocytes) imm involve antibody-mediated immune reactions. The sig distribution of the substance and the opportunities for Asthma-like symptoms may continue for months or ex- known as reactive airways dysfunction syndrome (RA	act eczema, more rarely as urticaria c nune reaction of the delayed type. Oth nificance of the contact allergen is not contact with it are equally important. ven years after exposure to the materia	or Quincke's oedema. The pathogenesis of contact ner allergic skin reactions, e.g. contact urticaria, t simply determined by its sensitisation potential: the al ends. This may be due to a non-allergic condition
	criteria for diagnosing RADS include the absence of p asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev lymphocytic inflammation, without eosinophilia.	ocumented exposure to the irritant. Oth	pic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible
PORTLAND CEMENT & GRADED SAND	asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev	ocumented exposure to the irritant. Other exposure to the irritant. Other exposure bronchial hyperreactivity on mether the second	pic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible
	asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev lymphocytic inflammation, without eosinophilia.	ocumented exposure to the irritant. Other exposure to the irritant. Other exposure bronchial hyperreactivity on mether the second	pic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible
GRADED SAND	asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev lymphocytic inflammation, without eosinophilia. No significant acute toxicological data identified in lite	ocumented exposure to the irritant. Oth rere bronchial hyperreactivity on meth rature search.	bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible acholine challenge testing, and the lack of minimal
GRADED SAND Acute Toxicity	asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev lymphocytic inflammation, without eosinophilia. No significant acute toxicological data identified in lite	cumented exposure to the irritant. Othere bronchial hyperreactivity on methor ature search.	bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible acholine challenge testing, and the lack of minimal
GRADED SAND Acute Toxicity Skin Irritation/Corrosion	asthma-like symptoms within minutes to hours of a do airflow pattern on lung function tests, moderate to sev lymphocytic inflammation, without eosinophilia. No significant acute toxicological data identified in lite	cumented exposure to the irritant. Othere bronchial hyperreactivity on mether ature search. Carcinogenicity Reproductivity	bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible acholine challenge testing, and the lack of minimal

SECTION 12 Ecological information

Dunlop Super Tileset	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Species	Value	Source
portland cement	Not Available	Not Available	Not Available	Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Species	Value	Source
graded sand	Not Available	Not Available	Not Available	Not Available	Not Available
Legend:	Extracted from	n 1. IUCLID Toxicity Data 2. Europe E	CHA Registered Substances - Ecotoxicological Info	ormation - Aquatic Toxicity 3.	EPIWIN Su

DO NOT discharge into sewer or waterways.

Persistence and degradability			
Ingredient	Persistence: Water/Soil Persistence: Air		
	No Data available for all ingredients	No Data available for all ingredients	
Bioaccumulative potential			
Ingredient	Bioaccumulation		
	No Data available for all ingredients		
Mobility in soil			
Ingredient	Mobility		
	No Data available for all ingredients		

SECTION 13 Disposal considerations

Waste treatment methods		
Product / Packaging disposal	 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 or consult manufacturer for recycling options. Consult State Land Waste Management Authority for disposal. Bury residue in an authorised landfill. Recycle containers if possible, or dispose of in an authorised landfill. 	

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SECTION 14 Transport information

Labels Required		
Marine Pollutant	NO	
HAZCHEM	Not Applicable	

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

SECTION 15 Regulatory information

Safety, health and environmental regulations / legislation specific for the substance or mixture

portland cement is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

graded sand is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australian Inventory of Industrial Chemicals (AIIC) Chemical Footprint Project - Chemicals of High Concern List International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1 : Carcinogenic to humans

National Inventory Status

National Inventory	Status
Australia - AIIC	Yes
Australia Non-Industrial Use	No (portland cement; graded sand)
Canada - DSL	Yes
Canada - NDSL	No (portland cement; graded sand)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (portland cement)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (portland cement)
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 Other information

Revision Date	01/11/2019
Initial Date	20/05/2008

SDS Version Summary

Version	Issue Date	Sections Updated
4.1.1.1	02/11/2015	Acute Health (swallowed), Chronic Health, Classification, Disposal, Engineering Control, Fire Fighter (fire/explosion hazard), First Aid (swallowed), Ingredients, Personal Protection (hands/feet), Spills (minor), Storage (storage incompatibility), Storage (storage requirement)
5.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average

Dunlop Super Tileset

PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit, IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors

BEI: Biological Exposure Index

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