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CSR SAFETY DATA SHEET Hebel Adhesive

SECTION 1: IDENTIFICATION OF THE MATERIAL AND SUPPLIER

Product Name:	Hebel Adhesive
Other Names:	Not Applicable
Product Codes/Trade Names:	Not Applicable
Recommended Use:	Applied as thin bed adhesive mortar for Hebel AAC blocks
Applicable In:	Australia
Supplier:	CSR Building Products Limited ABN 55 008 631 356
Address:	Triniti 3, 39 Delhi Road, North Ryde, NSW 2113, Australia
Telephone:	1300 712 896
Email Address:	info@hebel.com.au
Web Site:	www.hebel.com.au
Facsimile:	02 4340 3300
Emergency Phone Number:	000 Fire Brigade and Police (available in Australia only)
Poisons Information Centre:	13 11 26 (available in Australia only)

This Safety Data Sheet (SDS) is issued by the Supplier in accordance with National standards and guidelines from Safe Work Australia (SWA – formerly ASCC/NOHSC). The information in it must not be altered, deleted or added to. The Supplier will not accept any responsibility for any changes made to its SDS by any other person or organization. The Supplier will issue a new SDS when there is a change in product specifications and/or Standards, Codes, Guidelines, or Regulations.

SECTION 2: HAZARDS IDENTIFICATION

STATEMENT OF HAZARDOUS NATURE: Classified as **Hazardous** according to the Approved Criteria For Classifying Hazardous Substances [NOHSC:1008] 3rd Edition.

Hebel Adhesive is classified as **Non-Dangerous Goods** according to the Australian Code for the Transport of Dangerous Goods by Road and Rail.

GHS Classification	GHS Signal Word	GHS Pictogram/s
Skin Irritation Category 2 Skin Sensitisation Category 1 Eye Irritation Category 2A Specific Target Organ Toxicity (Single Exposure) Category 3 Specific Target Organ Toxicity (Repeated Exposure) Category 2	WARNING	

CSR SDS Reference: LWS-SDS-146

Date Issued: 17/08/2016



GHS Hazard statements	GHS Precautionary statements
H315 – Causes skin irritation H317 – May cause an allergic skin reaction H319 – Causes serious eye irritation H335 – May cause respiratory irritation H373 – May cause damage to organs through prolonged or repeated exposure by inhalation AUH066 – Repeated exposure may cause skin dryness and cracking	P260 – Do not breathe dust. P264 – Wash 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 and eye/face protection. P302 + P352 – If on skin, wash with plenty of soap and water. P304 + P340 – If inhaled, 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. P312 – Call a Poison Centre or doctor 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. P362 – Take off contaminated clothing and wash before reuse. P403 + P233 – Store in a well-ventilated place and keep container tightly closed.

A low proportion of the fine dust in the supplied dry product will be respirable crystalline silica. Once wetted, in the wet or final set form, risk of any airborne respirable dust will be low, but dry residues, or dust from cutting, grinding, abrading or finishing the set product may contain respirable crystalline silica.

SECTION 3: COMPOSITION / INFORMATION ON INGREDIENTS

Chemical Name:	Synonyms:	Proportion:	CAS Number:
Graded sand containing crystalline silica	Quartz	>60%	14808-60-7
Portland Cement	GP Cement	10-30%	65997-15-1
Calcium carbonate	Limestone	1-10%	471-34-1
Non hazardous ingredients	N/A	Balance	

Note: Cement in concrete contains traces (2-20 ppm) of Chromium VI (hexavalent).

SECTION 4: FIRST AID MEASURES

Swallowed:	Rinse mouth and lips with water. Do not induce vomiting. Give water to drink to dilute stomach contents. If symptoms persist, seek medical attention.
Eyes:	Flush thoroughly with flowing water, while holding eyelids open, for 15 minutes to remove all traces. If symptoms such as irritation or redness persist, seek medical attention. If wet cement is splashed in the eye, always treat as above, and seek urgent medical attention.
Skin:	Remove heavily contaminated clothing. Wash off skin thoroughly with water. Use a mild soap if available. Shower if necessary. Seek medical attention for persistent redness, irritation or burning of the skin.
Inhaled:	Remove to fresh air, away from dusty area. If symptoms persist, seek medical attention.
First Aid Facilities:	Eye wash station. Washing facilities with running water.
Advice to Doctor:	Treat symptomatically. Wet cement burns to skin or eye may result in corrosive caustic burns. Ingestion of significant amounts of cement dry or wet is unlikely. Do not induce emesis or

	perform gastric lavage. Neutralization with acidic agents is not advised because of increased risks of exothermic burns. Water-mineral oil soaks may aid in removing hardened cement from the skin. Ophthalmological opinion should be sought for ocular burns.
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SECTION 5: FIRE FIGHTING MEASURES

Suitable extinguishing media:	Use carbon dioxide, foam, dry chemical or water spray as required for fire in surrounding materials.
Specific hazards:	None
Special protective equipment and precautions for firefighters:	As required for fire in surrounding materials.
HAZCHEM Code:	None

SECTION 6: ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures:	Recommendations on Exposure Controls / Personal Protection (see Section 8 below) should be followed during spill and clean-up.
Environmental precautions:	Keep product out of storm water and sewer drains.
Methods and materials for containment and cleaning up:	Bag waste materials. Dust is best cleaned up by wet sweeping and/or vacuuming to avoid making dust airborne. Wetting down before sweeping up dust may be a useful control measure, but will result in setting.

SECTION 7: HANDLING AND STORAGE

Precautions for safe handling:	When supplied in bags these need to be handled in accordance with Manual Handling Regulations and Code of Practice.
Conditions for safe storage:	This product should be stored in its factory packaging in a dry area. Protect from moisture to prevent hardening.
Incompatibilities:	None

SECTION 8: EXPOSURE CONTROLS / PERSONAL PROTECTION

Exposure Standards:	<p>Workplace Exposure Standards for Airborne Contaminants, Safe Work Australia</p> <p>Crystalline silica (quartz): TWA – 0.1 mg/m³ respirable dust (≤ 7 microns particle equivalent aerodynamic diameter)</p> <p>Calcium carbonate: TWA – 10 mg/m³ as inspirable dust</p> <p>Portland cement: TWA – 10 mg/m³ as inspirable dust</p> <p>Total dust (of any type or particle size): TWA – 10 mg/m³</p>
Notes on Exposure Standards:	<p>All occupational exposures to atmospheric contaminants should be kept to as low a level as is workable (practicable) and in all cases to below the Workplace Exposure Standard (WES).</p> <p>TWA (Time Weighted Average): the time-weighted average airborne concentration over an eight-hour working day, for a five-day working week over an entire working life. According to current knowledge this concentration should neither impair the health of, nor cause undue discomfort to, nearly all workers.</p>

Biological Limit Values:	No biological limit allocated.
ENGINEERING CONTROLS	
<input type="checkbox"/> Ventilation:	Work methods and engineering should aim to prevent skin contact with the wet product. Keep exposures to dust as low as practicable, with the aim of maintaining respirable crystalline silica dust levels to below the WES. Work in the open air and external openings (such as doors and windows in buildings) generally provides adequate ventilation. Local mechanical ventilation or extraction may be used, if necessary, to control airborne dust levels. Hand tools generate less dust when cutting, drilling or sanding. If power tools are used they should be fitted with efficient and well maintained dust extraction devices. If generated dust cannot be avoided, follow personal protection recommendations.
<input type="checkbox"/> Special Consideration for Repair &/or Maintenance of Contaminated Equipment:	Where possible vacuum or wash down all gear, equipment or mobile plant prior to maintenance and repair work. If compressed air cleaning cannot be avoided, wear eye and respiratory protection and clothing as listed below. Recommendations on Exposure Control and Personal Protection should be followed.
PERSONAL PROTECTION	
<input type="checkbox"/> Personal Hygiene	Wash hands before eating, drinking, using the toilet, or smoking. Wash work clothes regularly.
<input type="checkbox"/> Skin Protection:	Wear loose comfortable clothing. Direct skin contact should be avoided by wearing long-sleeved shirts and long trousers, a cap or hat, and gloves (standard duty leather or equivalent AS 2161). Impervious gloves or gauntlets and footwear are required to protect skin. Never kneel in wet cement, or allow extended contact of skin with wet cement. Remove clothing which has become contaminated with wet or dry cement to avoid prolonged contact with the skin. If cement gets into boots, remove socks and boots immediately and wash skin thoroughly.
<input type="checkbox"/> Eye Protection:	When working with wet product, splash-resistant safety glasses with side shields or safety goggles (AS 1336) or a face shield should be worn to ensure all contact with eyes is avoided. Ventilated non-fogging goggles (dust resistant AS 1336) should be worn when working in a dusty environment.
<input type="checkbox"/> Respiratory Protection:	None required if engineering and handling controls are adequate. Where engineering and handling controls are not enough to minimise exposure to total dust and to respirable crystalline silica, personal respiratory protection may be required. The type of respiratory protection required depends primarily on the concentration of the respirable crystalline silica dust in the air, and the frequency and length of exposure time. Amount of exertion required during the work, and personal comfort are other considerations in choice of respirator. A suitable P1 or P2 particulate respirator chosen and used in accordance with AS 1715 and 1716 may be sufficient for many situations, but where high levels of dust are encountered, more efficient cartridge-type or powered respirators or supplied-air helmets or suits may be necessary. Use only respirators that bear the Australian Standards mark and are fitted and maintained correctly, and kept in clean storage when not in use.

SECTION 9: PHYSICAL AND CHEMICAL PROPERTIES

Appearance:	Fine to medium grey coarse powder
Odour:	None
Odour threshold:	Not applicable

pH:	11-12
Melting point/Freezing point:	>1200°C
Initial boiling point and range:	Not applicable
Vapour pressure:	Not applicable
Vapour density:	Not applicable
Specific gravity (Relative density):	1.3 to 1.7
Solubility:	Slight, reacts on mixing with water forming alkaline solution (pH >11)
Evaporation rate:	Not applicable
Partition coefficient (n-octanol/water):	Not determined
Viscosity:	Not determined
Flammability:	Not flammable
Flash point:	Not applicable
Upper/lower flammability or explosive limits:	Not applicable
Auto-ignition temperature:	Not applicable
Decomposition temperature:	Not determined
% Volatiles:	0%
Volatile Organic Compounds (VOC) Content: (as specified by the Green Building Council of Australia)	None

SECTION 10: STABILITY AND REACTIVITY

Chemical Stability:	Stable
Hazardous Reactions:	None
Conditions to avoid:	Dust generation. Keep free of moisture during storage.
Incompatible Materials:	None
Hazardous Decomposition Products:	None

SECTION 11: TOXICOLOGICAL INFORMATION

Health effects information is based on reported effects in use from overseas and Australian reports.

Health Effects: Acute (short term)

Swallowed:	Unlikely under normal industrial use. Mildly abrasive and corrosive to mouth and throat if swallowed. May cause nausea, stomach cramps and constipation.
Eyes:	Irritating and corrosive to the eyes and may cause alkaline burns. Dust is irritating to the eyes. Exposure to dust may aggravate existing eye irritations.
Skin:	Dust is irritating and drying to the skin. Direct contact with wet product may cause serious skin burns. Within 12 to 48 hours (after one to six-hour exposures) possible first, second or third degree burns may occur. There may be no obvious pain at the time of the exposure. Chronic skin disorders may be aggravated by exposure to dust or contact with wet product due to presence of Portland Cement.

Inhaled:	Dust is irritating to the nose, throat and respiratory tract causing coughing and sneezing. Pre-existing upper respiratory and lung diseases including asthma and bronchitis may be aggravated.
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Health Effects: Chronic (long term)

Eyes:	Dust may cause irritation and inflammation of the eyes and aggravate pre-existing eye conditions.
Skin:	Repeated heavy contact with the dust may cause drying of the skin and can result in skin rash (dermatitis) typically affecting the hands. Over time this may become chronic and can also become infected. Persons who are allergic to chromium may develop an allergic dermatitis which aggravates the irritant effects and this combination can lead to chronic cement dermatitis and serious disability particularly affecting the hands.
Inhaled:	Repeated exposure to the dust may result in increased nasal and respiratory secretions and coughing. Inflammation of lining tissue of the respiratory system may follow repeated exposure to high levels of dust with increased risk of bronchitis and pneumonia.

Additional Notes

Long Term Effects:	Long term occupational over-exposure or prolonged breathing-in (or inhalation) of crystalline silica dust at levels above the WES carries the risk of causing serious and irreversible lung disease, including bronchitis, and silicosis (scarring of the lung), including acute and/or accelerated silicosis. It may also increase the risk of other irreversible and serious disorders including scleroderma (a disease affecting the skin, joints, blood vessels and internal organs) and other auto-immune disorders. SWA has not classified crystalline silica as a carcinogen.
Special Toxic Effects:	Inhalation of dust, including crystalline silica dust, is considered by medical authorities to increase the risk of lung disease due to tobacco smoking.

SECTION 12: ECOLOGICAL INFORMATION

Eco-toxicity:	Product forms an alkaline slurry when mixed with water.
Persistence and Degradability:	Product is persistent and would have a low degradability.
Bioaccumulative potential:	There is no evidence to suggest bioaccumulation will occur.
Mobility in soil:	A low mobility would be expected in a landfill situation.

SECTION 13: DISPOSAL CONSIDERATIONS

Hebel Adhesive can be treated as a common waste for disposal or dumped into a landfill site in accordance with local authority guidelines. Keep material out of storm water and sewer drains.

Measures should be taken to prevent dust generation during disposal and exposure and personal precautions should be observed (see Section 8 above).

SECTION 14: TRANSPORT INFORMATION

UN number:	None allocated
UN Proper Shipping Name:	None allocated
Class and Subsidiary Risk :	None allocated
Packaging Group:	None allocated
Special Precautions for User:	None
HAZCHEM code:	None allocated

SECTION 15: REGULATORY INFORMATION

Poisons Schedule:	Not scheduled
Exposures by inhalation to high levels of dust may be regulated under the Hazardous Substances Regulations (State) as they are applicable to Respirable Crystalline Silica, requiring exposure assessment, controls and health surveillance.	

SECTION 16: OTHER INFORMATION

For further information on this product, please contact:	
CSR Building Products Limited (ABN 55 008 631 356), Trinit 3, 39 Delhi Road, North Ryde, NSW 2113, Australia.	
Phone:	+61 2 9372 5888 or 1800 807 668 (available in Australia only)
Fax:	+61 2 9372 5877

ADDITIONAL INFORMATION**Australian Standards References:**

AS 1336	Recommended Practices for Occupational Eye Protection
AS 1715	Selection, Use and Maintenance of Respiratory Protective Devices
AS 1716	Respiratory Protective Devices
AS 2161	Industrial Safety Gloves and Mittens (excluding electrical and medical gloves)

Other References:

NOHSC:1008 (2004)	Approved Criteria for Classifying Hazardous Substances
Model Code of Practice	Preparation of Safety Data Sheets for Hazardous Chemicals, December 2011, Safe Work Australia.
Model Code of Practice	Labelling of Workplace Hazardous Chemicals, December 2011, Safe Work Australia.
Model Code of Practice	Managing Risks Of Hazardous Chemicals In The Workplace, July 2012, Safe Work Australia.
WHS	Guidance on the Classification of Hazardous Chemicals under the WHS Regulations, April 2012, Safe Work Australia.
ADG Code	Australian Code for the Transport of Dangerous Goods by Road and Rail, 7 th edition, National Transport Commission.
WES	Workplace Exposure Standards For Airborne Contaminants, April 2013, Safe Work Australia.
WES	Guidance On The Interpretation Of Workplace Exposure Standards For Airborne Contaminants, April 2013, Safe Work Australia.
GHS	Globally Harmonized System of Classification and Labelling of Chemicals (GHS), 3 rd revised edition, United Nations, New York and Geneva, 2009.
GHS	Understanding the Globally Harmonized System of Classification and Labelling of Chemicals (GHS), United Nations, New York and Geneva, 2010.
HSIS	Hazardous Substances Information System (HSIS), internet advisory service, Safe Work Australia.
HCIL	GHS Hazardous Chemical Information List (HCIL), internet advisory service, Safe Work Australia.

AUTHORISATION

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Authorised by:	Safety Improvement Manager – CSR Hebel
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END OF SDS