



MATERIAL SAFETY DATA SHEET

ADDRESS:
1158 Erie Avenue, Box 285
N. Tonawanda, New York 14120

PRODUCT NAME

Sulflo #1

Code No.

10,221

Emergency Phone Number(s)

Business: (716) 695-3585
Other:

Sulfurized Machining Compound

10/08

SYNONYMS

Chemical Family

Hydrocarbon

MATERIALS OR COMPONENTS

%W

CAS NUMBER

CARCINOGEN
OSHA OR IARC

Sulfur

3-7

7704-34-9

No

Mineral Oil

89-95

64742-52-5

No

Lithium 12 Hydroxystearate

1-2

7620-77-1

No

Wax - Micro Crystalline

1-2

63231-60-7

No

INGREDIENTS

SHIPPING INFORMATION

Not Restricted

PHYSICAL PROPERTIES

Boiling Point Range
°C 700 °F

Melting Point
NA °C °F

Freezing Point
°C 0 °F

Molecular weight (Calculated)
NA

Specific Gravity (H₂O=1)
0.900 / 16 °C

Vapor Pressure (mm Hg)
NA °C °F

Vapor Density (Air=1)
NA

Solubility in H₂O
NIL

% Volatiles by Volume
0

Evaporation Rate
NA Either = 1 Water = 1 Butylacetate = 1

Appearance and Odor

Yellow - Semi- Fluid - Bland

ell

FIRE AND EXPLOSION DATA

Flash Point
°C 350 °F

Test Method
D-92

Flammable Limits
Lower NA % Upper %

Autoignition Temperature/Fire Point
°C 400 °F

EXTINGUISHING MEDIA
 Water-spray Water-fog Water-stream CO₂ Dry chemical Alcohol foam Foam Earth or sand

SPECIAL FIRE FIGHTING PROCEDURES
 Do not enter Building Allow fire to burn Water may cause frothing Do not use water

UNUSUAL FIRE AND EXPLOSION HAZARDS
 Dust explosion Hazard Sensitive to shock Contamination Temperature Other (Specify): None

REACTIVITY DATA

STABILITY
 Stable Unstable

CONDITIONS CONTRIBUTING TO INSTABILITY
 Thermal decomposition Photo degradation Polymerization Contamination

INCOMPATIBILITY - Avoid contact with
 Strong Acids Strong Alkalis Strong Oxidizers Other (Specify):

HAZARDOUS DECOMPOSITION PRODUCTS - THERMAL AND OTHER (list)
CO & CO₂ IF INCOMPLETE COMBUSTION.

CONDITIONS TO AVOID
 Heat Open Flames Sparks Ignition sources Other (specify):

SPILL OR LEAK

STEPS TO BE TAKEN IF MATERIAL IS RELEASED OR SPILLED

Flush with Water

Absorb with sand or inert material

Neutralize

Sweep or scoop up and remove

Keep tipwind Evacuate enclosed spaces.

Prevent Spread or spill

Dispose of Immediately

Other (specify)

WASTE DISPOSAL METHOD - Consult federal, state, or local authorities for proper disposal procedures.

ALL DISPOSALS MUST COMPLY WITH

Before using product, read and follow directions and precautions on product label and bulletins.

| | | | |
|--|-------------------------------------|--|--|
| TOXICITY INFORMATION | CONDITIONS TO AVOID | | |
| | Excessive Skin Contact | | |
| | PRIMARY ROUTES OF ENTRY | | |
| | <input type="checkbox"/> INHALATION | <input checked="" type="checkbox"/> SKIN CONTACT | <input type="checkbox"/> OTHER (Specify) |
| This product has been used for years with no known ill effects. It contains no known carcinogens or mutagens as defined by OSHA or IARC. | | | |
| This product contains the following toxic chemicals subject to the reporting requirements of Section 313 of the Emergency Planning and Community Right-To-Know Act of 1986 (40 CFR 372): | | | |
| CAS# | Chemical Name | Percent by Weight | |

| | | | | | |
|---------------------------|-------------------------|--|--|--|---|
| HEALTH HAZARD INFORMATION | NFPA Rating | Health.....0 | NFPA HAZARD RATING CODES | | |
| | | Flammability.....1 | Least.....0 | High.....3 | |
| | | Reactivity.....0 | Slight.....1 | Extreme.....4 | |
| | | Protective Equipment.....B | Moderate.....2 | | |
| | Effects of Exposure | PERMISSIBLE EXPOSURE LIMIT (Specify if TLV/TWA or Ceiling [c]) | ACGIH 20 | OSHA 2008 | Other: 5mg/m ³ for Mineral Oil |
| | | IRRITATION | <input checked="" type="checkbox"/> Skin | <input type="checkbox"/> Severe | <input type="checkbox"/> Moderate |
| | | | <input checked="" type="checkbox"/> Eye | <input type="checkbox"/> Severe | <input type="checkbox"/> Moderate |
| | | CORROSIVITY | <input type="checkbox"/> Skin | <input type="checkbox"/> 4 hrs. (DOT) | <input type="checkbox"/> 24 hrs (CPSC) |
| | | | <input type="checkbox"/> Eye | <input type="checkbox"/> May cause blindness | <input checked="" type="checkbox"/> Not Corrosive |
| | | SENSITIZATION | <input type="checkbox"/> Skin | <input type="checkbox"/> Respiratory | <input checked="" type="checkbox"/> None |
| | | INHALATION EFFECTS | | | |
| | | <input type="checkbox"/> Narcotic effect <input type="checkbox"/> Cyanosis <input type="checkbox"/> Asphyxiant | | | |
| | LUNG EFFECTS (Specify): | Unknown | | | |
| | OTHER (Specify): | <input type="checkbox"/> Repeated contact-skin defatter <input type="checkbox"/> Other (Specify) | | | |
| | EMERGENCY FIRST AID | INGESTION | | | |
| | | <input type="checkbox"/> Induce vomiting <input checked="" type="checkbox"/> DO NOT Induce vomiting <input type="checkbox"/> Give plenty of water <input checked="" type="checkbox"/> Get medical attention <input type="checkbox"/> Other (Specify): | | | |
| | | DERMAL | | | |
| | | <input checked="" type="checkbox"/> Flush with soap and water <input type="checkbox"/> Get medical attention <input checked="" type="checkbox"/> Contaminated clothing- remove & launder <input type="checkbox"/> Contaminated shoes - destroy <input type="checkbox"/> Other (Specify) | | | |
| | | EYE CONTACT | | | |
| | | <input checked="" type="checkbox"/> Flush with plenty of water for at least 15 minutes <input checked="" type="checkbox"/> Get medical attention <input type="checkbox"/> Other (Specify): | | | |
| | | INHALATION | | | |
| | | <input checked="" type="checkbox"/> Remove to fresh air <input checked="" type="checkbox"/> If not breathing give artificial respiration <input checked="" type="checkbox"/> Give oxygen <input checked="" type="checkbox"/> Get medical attention <input type="checkbox"/> Other (Specify): | | | |

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|--|--|--|--|--|
| SPECIAL PROTECTION INFORMATION | VENTILATION REQUIREMENTS - Always maintain exposure below permissible exposure limits | | | |
| | <input type="checkbox"/> Consult an industrial hygienist or environmental health specialist | <input type="checkbox"/> Local exhaust | <input checked="" type="checkbox"/> Use with adequate ventilation | <input type="checkbox"/> Check for air contamination and oxygen deficiency |
| | <input type="checkbox"/> Other (Specify): | | | |
| | EYE | HAND (GLOVE TYPE) | | |
| | <input type="checkbox"/> Safety glasses <input checked="" type="checkbox"/> Face Shield <input type="checkbox"/> Goggles | <input type="checkbox"/> Polyvinyl chloride | <input checked="" type="checkbox"/> Neoprene | <input type="checkbox"/> Butyl Rubber <input type="checkbox"/> Polyvinyl alcohol <input type="checkbox"/> Other (Specify): |
| RESPIRATOR TYPE - Use only NIOSH / MESA approved equipment | | | | |
| <input type="checkbox"/> Self-contained | <input type="checkbox"/> Supplied air | <input type="checkbox"/> Can or cartridge gas or vapor | <input type="checkbox"/> Filter-dust, fume, mist <input type="checkbox"/> Other (Specify): | |
| OTHER PROTECTIVE EQUIPMENT | | | | |
| <input type="checkbox"/> Rubber boots | <input checked="" type="checkbox"/> Apron | <input type="checkbox"/> Other (specify): | | |

| | | | | |
|---------------------------------------|--|--|---|--|
| SPECIAL PRECAUTIONS | PRECAUTIONARY NOTES | | | |
| | <input checked="" type="checkbox"/> Wash Thoroughly after handling | <input checked="" type="checkbox"/> Do not get in eyes, or on clothing | <input checked="" type="checkbox"/> Do not breathe dust, vapor, mist, gas | <input checked="" type="checkbox"/> Keep container closed |
| | <input type="checkbox"/> Do not store near Combustibles | <input type="checkbox"/> Keep from contact with clothing and other combustible materials | <input type="checkbox"/> Empty container may contain hazardous residues | <input checked="" type="checkbox"/> Keep away from sparks, and open flames |
| Other handling and storage conditions | | | | |
| No Special conditions | | | | |

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|-------------|-------|---|----------------|
| Prepared by | Date | Address | Phone |
| Dennis Krol | 10/08 | 1158 Erie Avenue, Box 728, N. Tonawanda, NY 14120 | (716) 695-3585 |