

MATERIAL SAFETY DATA SHEET

Make Exclusive For:
ADDRESS:

PRODUCT IDENTIFICATION

Product Name Biodegradable Hammer Grease w/SMT²	Code No. LS-912A
Chemical Name Lubricating Grease	
Synonyms Biodegradable Grease	

Emergency Phone Number (s)
Business:

Date:
March 14, 2005

Chemical Family
Hydrocarbon

INGREDIENTS

MATERIALS OR COMPONENTS	% W	CAS NUMBER	HAZARDOUS ORIGIN OF LABEL

SHIPPING INFORMATION

Non Restricted.

PHYSICAL PROPERTIES

Boiling Point / Range °C > 700 °F	Melting Point N/A °C °F	Freezing Point N/A °C °F	Molecular Weight (Calculated) N/A
Specific Gravity (H ₂ O=1) 0.92 @ / 16 °C	Vapor Pressure (mm Hg) N/A @ °C °F	Vapor Density (Air=1) N/A	
Solubility in H ₂ O NIL	% Volatiles by Volume 0	Evaporation Rate N/A <input type="checkbox"/> Ether-1 <input type="checkbox"/> Water-1 <input type="checkbox"/> Butylacetate-1	
Appearance and Odor Semi-Solid - Vegetable Oil Odor		Other	

FIRE AND EXPLOSION DATA

Flash Point
°C **610 °F** Test Method **D-92** Flammable Limits
Lower **N/A %** Upper **%** Auto-ignition Temperature/Exp Point
°C **640 °F**

EXTINGUISHING MEDIA
 Water-Spray Water-Fog Water-Stream CO₂ Dry Chemical Alcohol Foams Foams 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)
Oxides of carbon and sulfur if burned.

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 Upright. 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
Incinerate

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

TOXICITY	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):					
	Products of this type have been used for years with no known ill effects. This product contains no carcinogens or mutagens as defined by OSHA or IARC. All components are listed on the TSCA Inventory, and Canadian DSL Chemical Inventory. This Product contains no controlled substance under WHMIS.					
HEALTH HAZARD INFORMATION	SARA Title III, Section 313, Reportable Quantities:			WHMIS Ingredient Disclosure, Reportable Quantities:		
	Compound Name	CAS#	% Wt.	Compound Name	CAS#	% Wt.
	PERMISSIBLE EXPOSURE LIMIT (SPECIFY IF TLV/TWA OR CEILING @) ACGIH 20 OSHA 2005 None Established OTHER:					
EFFECTS OF EXPOSURE	IRRITATION <input checked="" type="checkbox"/> SKIN <input type="checkbox"/> SEVERE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> MILD (TRANSIENT) <input checked="" type="checkbox"/> EYE <input type="checkbox"/> SEVERE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> MILD (TRANSIENT)					
	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 <input type="checkbox"/> NARCOTIC EFFECT <input type="checkbox"/> CYANOSIS <input type="checkbox"/> ASPHYCIANT					
	LUNG EFFECTS (SPECIFY) N/A					
	OTHER (SPECIFY) <input type="checkbox"/> REPEATED CONTACT-SKIN DEFATTER <input type="checkbox"/> OTHER (SPECIFY) N/A					
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 AND LAUNDRY <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 MIN. <input checked="" type="checkbox"/> GET MEDICAL ATTENTION <input type="checkbox"/> OTHER (SPECIFY):					
SPECIAL PROTECTION INFORMATION	INHALATION <input type="checkbox"/> REMOVE TO FRESH AIR <input type="checkbox"/> IF NOT BREATHING, GIVE ARTIFICIAL RESPIRATION <input type="checkbox"/> GIVE OXYGEN <input type="checkbox"/> GET MEDICAL ATTENTION <input type="checkbox"/> OTHER (SPECIFY) N/A					
	VENTILATION REQUIREMENTS - Always maintain exposure below permissible exposure limit <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 CONTAMINANT AND OXYGEN DEFICIENCY <input type="checkbox"/> OTHER (SPECIFY):					
	EYE SHIELD <input type="checkbox"/> FACE <input type="checkbox"/> HAND (GLOVE TYPE) <input type="checkbox"/> BUTYL RUBBER <input type="checkbox"/> POLYVINYL ALCOHOL <input type="checkbox"/> OTHER (SPECIFY): <input checked="" type="checkbox"/> SAFETY GLASSES <input type="checkbox"/> GOGGLES <input checked="" type="checkbox"/> POLYVINYL CHLORIDE <input checked="" type="checkbox"/> NEOPRENE <input type="checkbox"/> NATURAL RUBBER <input checked="" type="checkbox"/> POLYETHYLENE					
SPECIAL PRECAUTIONS	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) N/A					
	OTHER PROTECTIVE EQUIPMENT <input type="checkbox"/> RUBBER BOOTS <input type="checkbox"/> APRON <input type="checkbox"/> OTHER (SPECIFY) None					
	PRECAUTIONARY NOTES <input checked="" type="checkbox"/> WASH THOROUGHLY AFTER HANDLING <input checked="" type="checkbox"/> DO NOT GET IN EYES OR ON CLOTHING <input type="checkbox"/> DO NOT BREATHE DUST, VAPOR, MIST, GAS <input type="checkbox"/> KEEP CONTAINER CLOSED <input checked="" type="checkbox"/> KEEP AWAY FROM SPARKS AND OPEN FLAMES <input type="checkbox"/> STORE IN TIGHTLY CLOSED CONTAINER <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 RESIDUE <input type="checkbox"/> USE EXPLOSION PROOF EQUIPMENT <input type="checkbox"/> OTHER (SPECIFY):					
OTHER HANDLING AND STORAGE CONDITIONS: No Special Conditions						
PREPARED BY Fred Meier, Tech. Director		DATE 03/14/05	ADDRESS 227 Leominster Rd Sterling MA		PHONE 978-422-3209	
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