Alpha Food Service Fat and Grease Remover

ACCO Brands Australia
Version No: 1.1
Safety Data Sheet according to WHS and ADG requirements

S.GHS.AUS.EN

Issue Date: 09/07/2025

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Alpha Fat and Grease Remover	
Synonyms	Not Available	
Other means of identification	5L- 631110700RE (3055196)	

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

Relevant identified uses	Cleaning fat and grease off surfaces

Details of the supplier of the safety data sheet

Registered company name	Reward Hospitality	
Address	Arthur Dixon Court, Yatala, QLD	
Telephone	1800 473 927	
Fax	Not Available	
Website	Rewardhospitality.com.au	
Email	Yatala@rewardh.com.au	

Emergency telephone number

Association / Organisation	Poisons Information Line	
Emergency telephone numbers	13 11 26	
Other emergency telephone numbers	13 11 26	

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

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

Poisons Schedule	5	
Classification ^[1]	Serious Eye Damage Category 1, Skin Corrosion/Irritation Category 1B, Acute Aquatic Hazard Category 3, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI	

Label elements

GHS label elements





SIGNAL WORD

DANGER

Hazard statement(s)

H318	Causes serious eye damage	
H314	auses severe skin burns and eye damage	
H402	Harmful to aquatic life	
H335	May cause respiratory irritation	

Precautionary statement(s) Prevention

P101	P101 If medical advice is needed, have product container or label at hand.	
P102	Keep out of reach of children.	

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P103	Read label before use.	
P260	Do not breathe dust/fume/gas/mist/vapours/spray.	
P271	Use only outdoors or in a well-ventilated area.	
P280	P280 Wear protective gloves/protective clothing/eye protection/face protection.	
P273	Avoid release to the environment.	

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.	
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.	
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.	
P363	Wash contaminated clothing before reuse.	
P304+P340	P304+P340 IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.	

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 in accordance with local regulations.
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
64-02-8	<10	EDTA tetrasodium salt
1310-73-2	<10	sodium hydroxide
27176-87-0	<10	dodecylbenzenesulfonic acid
111-76-2	<10	ethylene glycol monobutyl ether
1344-09-8	<10	sodium metasilicate
584-08-7	<10	potassium carbonate
7320-34-5	<10	potassium pyrophosphate
1300-72-7	<10	sodium xylenesulfonate

SECTION 4 FIRST AID MEASURES

Description of first aid measures

	1
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 or hair contact occurs: Immediately flush body and clothes with large amounts of water, using safety shower if available. Quickly remove all contaminated clothing, including footwear. Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. Transport to hospital, or doctor.
Inhalation	 If furnes 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	 For advice, contact a Poisons Information Centre or a doctor at once. Urgent hospital treatment is likely to be needed. 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. Transport to hospital or doctor without delay.

Treat symptomatically.

For acute or short term repeated exposures to ethylene glycol:

- ▶ Early treatment of ingestion is important. Ensure emesis is satisfactory
- Test and correct for metabolic acidosis and hypocalcaemia.
- Apply sustained diuresis when possible with hypertonic mannitol.
- ► Evaluate renal status and begin haemodialysis if indicated. [I.L.O]
- Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites
- Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600

For acute or short-term repeated exposures to highly alkaline materials

- Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- ▶ The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- Pamage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue.

Alkalis continue to cause damage after exposure.

INGESTION:

▶ Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- Neutralising agents should never be given since exothermic heat reaction may compound injury.
- * Catharsis and emesis are absolutely contra-indicated.
- * Activated charcoal does not absorb alkali.
- * Gastric lavage should not be used.

Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- ▶ Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:

▶ Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

The product contains a substantial proportion of water, therefore there are no restrictions on the type of extinguishing media which may be used. Choice of extinguishing media should take into account surrounding areas.

Though the material is non-combustible, evaporation of water from the mixture, caused by the heat of nearby fire, may produce floating layers of combustible substances.

In such an event consider

- ▶ foam
- dry chemical powder.
- rearbon dioxide.

Special hazards 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. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire. Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	 The material is not readily combustible under normal conditions. However, it will break down under fire conditions and the organic component may burn. Not considered to be a significant fire risk. Heat may cause expansion or decomposition with violent rupture of containers. Decomposes on heating and may produce toxic fumes of carbon monoxide (CO). May emit acrid smoke. Decomposes on heating and produces toxic fumes of; carbon dioxide (CO2) sulfur oxides (SOx) other pyrolysis products typical of burning organic materialMay emit poisonous fumes. May emit corrosive fumes.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills	

Environmental hazard - contain spillage.

- ► Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- ▶ Control personal contact with the substance, by using protective equipment.
- ► Contain and absorb spill with sand, earth, inert material or vermiculite.
- ▶ Wipe up.

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Place in a suitable, labelled container for waste disposal.

Environmental hazard - contain spillage.

Moderate hazard.

Clear area of personnel and move upwind.

Alert Fire Brigade and tell them location and nature of hazard.

Wear breathing apparatus plus protective gloves.

Prevent, by any means available, spillage from entering drains or water course.

Stop leak if safe to do so.

Contain spill with sand, earth or vermiculite.

Collect recoverable product into labelled containers for recycling.

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

SECTION 7 HANDLING AND STORAGE

Precautions for 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.
 DO NOT enter confined spaces until atmosphere has been checked.
 DO NOT allow material to contact humans, exposed food or food utensils.
 Avoid contact with incompatible materials.
 When handling, DO NOT eat, drink or smoke.

Other information

Conditions for safe storage, including any incompatibilities

•	, , , , , , , , , , , , , , , , , , ,
Suitable container	 Polyethylene or polypropylene container. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	Ethylene glycol monobutyl ether (2-butoxyethanol) and its acetate: May form unstable peroxides in storage is incompatible with oxidisers, permanganates, peroxides, ammonium persulfate, bromine dioxide, nitrates, strong acids, sulfuric acid, nitric acid, perchloric acid
	 Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. Avoid contact with copper, aluminium and their alloys.

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	sodium hydroxide	Sodium hydroxide	Not Available	Not Available	2 mg/m3	Not Available
Australia Exposure Standards	ethylene glycol monobutyl ether	2-Butoxyethanol	96.9 mg/m3 / 20 ppm	242 mg/m3 / 50 ppm	Not Available	Sk

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
EDTA tetrasodium salt	Ethylenediaminetetraacetic acid, tetrasodium salt, dihydrate	6 mg/m3	66 mg/m3	400 mg/m3
EDTA tetrasodium salt	Ethylenediaminetetraacetic acid, tetrasodiumn salt; (Tetrasodium EDTA)	30 mg/m3	330 mg/m3	2000 mg/m3
sodium hydroxide	Sodium hydroxide	Not Available	Not Available	Not Available
dodecylbenzenesulfonic acid	Dodecylbenzene sulfonic acid; (Laurylbenzenesulfonic acid)	2 mg/m3	21 mg/m3	130 mg/m3
ethylene glycol monobutyl ether	Butoxyethanol, 2-; (Glycol ether EB)	20 ppm	20 ppm	700 ppm
sodium metasilicate	Silicic acid, sodium salt; (Sodium silicate)	5.9 mg/m3	65 mg/m3	390 mg/m3
potassium carbonate	Potassium carbonate	0.1 mg/m3	1.1 mg/m3	370 mg/m3
potassium pyrophosphate	Potassium pyrophosphate; (Tetrapotassium diphosphorate)	22 mg/m3	250 mg/m3	1900 mg/m3

Ingredient	Original IDLH	Revised IDLH
EDTA tetrasodium salt	Not Available	Not Available
sodium hydroxide	250 mg/m3	10 mg/m3
dodecylbenzenesulfonic acid	Not Available	Not Available
ethylene glycol monobutyl ether	700 ppm	700 [Unch] ppm
sodium metasilicate	Not Available	Not Available
potassium carbonate	Not Available	Not Available
potassium pyrophosphate	Not Available	Not Available
sodium xylenesulfonate	Not Available	Not Available

Exposure controls

Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can 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. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

Local exhaust ventilation usually required.

Personal protection











Eye and face protection

- Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.
- Chemical goggles.whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.
- Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.
- ▶ Alternatively a gas mask may replace splash goggles and face shields.
- 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. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available.

Skin protection

See Hand protection below

► Elbow length PVC gloves

When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

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.

Body protection

See Other protection below

Other protection

- Overalls.
- P.V.C. apron.
- ▶ Barrier cream.
- Skin cleansing cream.
- Eye wash unit.

Thermal hazards

Not Available

Recommended material(s) GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

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Material	СРІ
BUTYL	Α
NEOPRENE	В
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
NATURAL+NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
NITRILE+PVC	С
PE	С
PE/EVAL/PE	С
PVA	С
PVC	С
SARANEX-23	С
SARANEX-23 2-PLY	С
TEFLON	С
VITON	С
VITON/CHLOROBUTYL	С

^{*} CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion **NOTE**: As a series of factors will influence the actual performance of the glove, a final

selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as

Respiratory protection

Type ABK-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 5 x ES	ABK-AUS / Class 1 P2	-	ABK-PAPR-AUS / Class 1 P2
up to 25 x ES	Air-line*	ABK-2 P2	ABK-PAPR-2 P2
up to 50 x ES	-	ABK-3 P2	-
50+ x ES	-	Air-line**	-

^ - Full-face

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)

"feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear liquid		
Physical state	Liquid	Relative density (Water = 1)	1.08-1.12
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	12-14	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Available
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	11-13
Vapour density (Air = 1)	Not Available	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

Information on toxicological effects

Inhaled	The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane. Not normally a hazard due to non-volatile nature of product The material has NOT been classified by EC Directives or other classification systems as "harmful by inhalation". This is because of the lack of corroborating animal or human evidence.
Ingestion	Ingestion of alkaline corrosives may produce burns around the mouth, ulcerations and swellings of the mucous membranes, profuse saliva production, with an inability to speak or swallow. Both the oesophagus and stomach may experience burning pain; vomiting and diarrhoea may follow. The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. Ingestion of anionic surfactants may produce diarrhoea, bloated stomach, and occasional vomiting. Severe acute exposure to ethylene glycol monobutyl ether, by ingestion, may cause kidney damage, haemoglobinuria, (blood in urine) and is potentially fatal.
Skin Contact	The material can produce severe chemical burns following direct contact with the skin. Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. Anionic surfactants can cause skin redness and pain, as well as a rash. Cracking, scaling and blistering can occur. Ethylene glycol monobutyl ether penetrates the skin easily and will cause more harm on skin contact than through inhalation. 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. Direct eye contact with corrosive bases can cause pain and burns. There may be swelling, epithelium destruction, clouding of the comea and inflammation of the iris. Mild cases often resolve; severe cases can be prolonged with complications such as persistent swelling, scarring, permanent cloudiness, bulging of the eye, cataracts, eyelids glued to the eyeball and blindness. Direct eye contact with some anionic surfactants in high concentration can cause severe damage to the comea. Low concentrations can cause discomfort, excess blood flow, and comeal clouding and swelling. Recovery may take several days. Ethylene glycol monobutyl ether may cause pain, redness and damage to the eyes.

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Chronic

Studies show that inhaling this substance for over a long period (e.g. in an occupational setting) may increase the risk of cancer.

Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems.

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.

There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment.

Exposure to sulfonates can cause an imbalance in cellular salts and therefore cellular function. Airborne sulfonates may be responsible for respiratory allergies and, in some instances, minor dermal allergies.

Repeated skin contact with some sulfonated surfactants has produced sensitisation dermatitis in predisposed individuals.

Fot and Oreses Democratic	TOXICITY	IRRITATION	
Fat and Grease Remover	Not Available	Not Available	
	TOXICITY	IRRITATION	
EDTA tetrasodium salt	Oral (rat) LD50: 630 mg/kg*g ^[2]	*[BASF]	
		Eyes (rabbit): 1.9 mg	
		Eyes (rabbit):100 mg/24h-moderate	
		Skin (rabbit):500 mg/24h-mo	oderate
	TOXICITY	IRRITATION	
	Oral (rabbit) LD50: 325 mg/kg ^[1]	Eye (rabbit): 0.05 mg/24h SEVERE	
sodium hydroxide		Eye (rabbit):1 mg/24h SEVERE	
		Eye (rabbit):1 mg/30s rinsed-S	EVERE
		Skin (rabbit): 500 mg/24h SEVI	ERE
dodecylbenzenesulfonic	TOXICITY		IRRITATION
acid	Oral (rat) LD50: 650 mg/kg ^[2]		Not Available
	TOXICITY	IRRITATION	
	dermal (rat) LD50: >2000 mg/kg ^[1]	* [Union Carbide]	
ethylene glycol monobutyl ether	Inhalation (rat) LC50: 450 ppm/4H ^[2]	Eye (rabbit): 100 mg SEVERE	
	Oral (rat) LD50: 250 mg/kg ^[2]	Eye (rabbit): 100 mg/24	h-moderate
		Skin (rabbit): 500 mg, o	pen; mild
	TOXICITY	IRRITATION	
sodium metasilicate	dermal (rat) LD50: >5000 mg/kg ^[1]	Skin (human): 250 mg/24h SEVERE	
	Oral (rat) LD50: 500 mg/kg ^[1]	Skin (rabbit): 250 mg/24h SEVERE	
	TOXICITY		IRRITATION
potassium carbonate	Dermal (rabbit) LD50: >2000 mg/kg ^[1]		Nil reported
	Oral (rat) LD50: 1870 mg/kgd ^[2]		
	TOXICITY		IRRITATION
potassium pyrophosphate	dermal (rat) LD50: >2000 mg/kg ^[1]		[Albright]
рошоский ругориооришо	Oral (rat) LD50: >300-<2000 mg/kg> ^[1]		
	TOXICITY		IRRITATION
sodium xylenesulfonate	Dermal (rabbit) LD50: >2000 mg/kg ^[1]		Not Available
,	Oral (rat) LD50: >3000 mg/kg ^[1]		
	()		
Legend:	Nalue obtained from Europe ECHA Registered Substances - Acute tox. A	city 2.* Value obtained from mar	nufacturer's SDS. Unless otherwise specified data
	extracted from RTECS - Register of Toxic Effect of chemical Substances		

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Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms

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within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dysphea, couch and mucus production.

No significant acute toxicological data identified in literature search.

for alkvl sulfates: alkane sulfonates and alpha-olefin sulfonates

Most chemicals of this category are not defined substances, but mixtures of homologues with different alkyl chain lengths. Alpha-olefin sulfonates are mixtures of alkene sulfonate and hydroxyl alkane sulfonates with the sulfonate group in the terminal position and the double bond, or hydroxyl group, located at a position in the vicinity of the sulfonate group.

Common physical and/or biological pathways result in structurally similar breakdown products, and are, together with the surfactant properties, responsible for similar environmental behavior and essentially identical hazard profiles with regard to human health.

Acute toxicity: These substances are well absorbed after ingestion; penetration through the skin is however poor. After absorption, these chemicals are distributed mainly to the liver.

Acute oral LD50 values of alkyl sulfates in rats and/or mice were (in mg/kg):

C10-; 290-580

C10-16-, and C12-; 1000-2000

C12-14, C12-15, C12-16, C12-18 and C16-18-; >2000

C14-18, C16-18-; >5000

The clinical signs observed were non-specific (piloerection, lethargy, decreased motor activity and respiratory rate, diarrhoea). At necropsy the major findings were irritation of the gastrointestinal tract and anemia of inner organs.

Based on limited data, the acute oral LD50 values of alkane sulfonates and alpha-olefin sulfonates of comparable chain lengths are assumed to be in the same range.

Toxicological data is available and well documented for representative toluene, xylene and cumene sulfonates (including sodium, potassium, ammounium and calcium salts). These data show that hydrotropes have low toxicity for all routes, do not cause genetic damage, show no evidence of causing cancer in long-term skin studies, and have not caused birth defects, developmental defects or reduced fertility.

Linear alkyl benzene sulfonates are derived from strong corrosive acids. Animal testing has shown they can cause skin reactions, eye irritation, sluggishness, passage of frequent watery stools, weakness and may lead to death. They may also react with surfaces of the mouth and intestines, depending on the concentration exposed to. There is no evidence of harm to the unborn baby or tendency to cause cancer.

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.

SODIUM HYDROXIDE

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, couch and mucus production.

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

DODECYLBENZENESULFONIC ACID

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

 $The \ material \ may \ produce \ respiratory \ tract \ irritation, \ and \ result \ in \ damage \ to \ the \ lung \ including \ reduced \ lung \ function.$

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

Linear alkyl benzene sulfonates are derived from strong corrosive acids. Animal testing has shown they can cause skin reactions, eye irritation, sluggishness, passage of frequent watery stools, weakness and may lead to death. They may also react with surfaces of the mouth and intestines, depending on the concentration exposed to. There is no evidence of harm to the unborn baby or tendency to cause cancer.

ADI: 2.5 mg/kg/day NOEL: 250 mg/kg/day

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

For ethylene glycol monoalkyl ethers and their acetates (EGMAEs):

Typical members of this category are ethylene glycol propylene ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE) and their acetates.

EGMAEs are substrates for alcohol dehydrogenase isozyme ADH-3, which catalyzes the conversion of their terminal alcohols to aldehydes (which are transient metabolites). Further, rapid conversion of the aldehydes by aldehyde dehydrogenase produces alkoxyacetic acids, which are the predominant urinary metabolites of mono substituted glycol ethers.

ETHYLENE GLYCOL MONOBUTYL ETHER

Acute Toxicity: Oral LD50 values in rats for all category members range from 739 (EGHE) to 3089 mg/kg bw (EGPE), with values increasing with decreasing molecular weight. Four to six hour acute inhalation toxicity studies were conducted for these chemicals in rats at the highest vapour concentrations practically achievable. Values range from LC0 > 85 ppm (508 mg/m3) for EGHE, LC50 > 400ppm (2620 mg/m3) for EGBEA to LC50 > 2132 ppm (9061 mg/m3) for EGPE. No lethality was observed for any of these materials under these conditions. Dermal LD50 values in rabbits range from 435 mg/kg bw (EGBE) to 1500 mg/kg bw (EGBEA).

Exposure of pregnant rats to ethylene glycol monobutyl ether (2-butoxyethanol) at 100 ppm or rabbits at 200 ppm during organogenesis resulted in maternal toxicity and embryotoxicity including a decreased number of viable implantations per litter. Slight foetoxicity in the form of poorly ossified or unossified skeletal elements was also apparent in rats. Teratogenic effects were not observed in other species.

At least one researcher has stated that the reproductive effects were less than that of other monoalkyl ethers of ethylene glycol.

Chronic exposure may cause anaemia, macrocytosis, abnormally large red cells and abnormal red cell fragility.

Exposure of male and female rats and mice for 14 weeks to 2 years produced a regenerative haemolytic anaemia and subsequent effects on the

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Fat and Grease Remover

haemopoietic system in rats and mice. In addition, 2-butoxyethanol exposures caused increases in the incidence of neoplasms and nonneoplastic lesions (1). The occurrence of the anaemia was concentration-dependent and more pronounced in rats and females.

For ethylene alvcol:

Ethylene glycol is quickly and extensively absorbed through the gastrointestinal tract. Limited information suggests that it is also absorbed through the respiratory tract; dermal absorption is apparently slow. Following absorption, ethylene glycol is distributed throughout the body according to total body water. In most mammalian species, including humans, ethylene glycol is initially metabolised by alcohol.

dehydrogenase to form glycolaldehyde, which is rapidly converted to glycolic acid and glycoxal by aldehyde oxidase and aldehyde dehydrogenase. These metabolites are oxidised to glycoxylate; glycoxylate may be further metabolised to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate CO2, which is one of the major elimination products of ethylene glycol. In addition to exhaled CO2, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid.

NOTE: Changes in kidney, liver, spleen and lungs are observed in animals exposed to high concentrations of this substance by all routes. ** ASCC (NZ) SDS

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

SODIUM METASILICATE

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

POTASSIUM PYROPHOSPHATE

No data available. Data for sodium analogue only. tetrasodium pyrophosphate

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

No significant acute toxicological data identified in literature search.

for alkyl sulfates; alkane sulfonates and alpha-olefin sulfonates

SODIUM XYLENESULFONATE

Most chemicals of this category are not defined substances, but mixtures of homologues with different alkyl chain lengths. Alpha-olefin sulfonates are mixtures of alkene sulfonate and hydroxyl alkane sulfonates with the sulfonate group in the terminal position and the double bond, or hydroxyl group, located at a position in the vicinity of the sulfonate group.

Common physical and/or biological pathways result in structurally similar breakdown products, and are, together with the surfactant properties, responsible for similar environmental behavior and essentially identical hazard profiles with regard to human health.

Acute toxicity: These substances are well absorbed after ingestion; penetration through the skin is however poor. After absorption, these chemicals are distributed mainly to the liver.

Acute oral LD50 values of alkyl sulfates in rats and/or mice were (in mg/kg):

C10-; 290-580

C10-16-, and C12-; 1000-2000

C12-14, C12-15, C12-16, C12-18 and C16-18-; >2000

C14-18, C16-18-; >5000

The clinical signs observed were non-specific (piloerection, lethargy, decreased motor activity and respiratory rate, diarrhoea). At necropsy the major findings were irritation of the gastrointestinal tract and anemia of inner organs.

Based on limited data, the acute oral LD50 values of alkane sulfonates and alpha-olefin sulfonates of comparable chain lengths are assumed to be in the same range.

Toxicological data is available and well documented for representative toluene, xylene and cumene sulfonates (including sodium, potassium, ammounium and calcium salts). These data show that hydrotropes have low toxicity for all routes, do not cause genetic damage, show no evidence of causing cancer in long-term skin studies, and have not caused birth defects, developmental defects or reduced fertility.

POTASSIUM CARBONATE &

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

Acute Toxicity	0	Carcinogenicity	0
Skin Irritation/Corrosion	✓	Reproductivity	0
Serious Eye Damage/Irritation	*	STOT - Single Exposure	0
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	0
Mutagenicity	0	Aspiration Hazard	0

Legend:

X - Data available but does not fill the criteria for classification

Data required to make classification available

Data Not Available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

_	Endpoint	Test Duration (hr)	Species	Value	Source
EDTA tetrasodium salt	NOEC	71	Algae or other aquatic plants	0.0003802mg/L	4
DTA tetrasodium salt	EC10	72	Algae or other aquatic plants	=0.48mg/L	1
DTA tetrasodium salt	EC50	72	Algae or other aquatic plants	=1.01mg/L	1
DTA tetrasodium salt	LC50	96	Fish	41mg/L	2
DTA tetrasodium salt	EC50	48	Crustacea	140mg/L	2
odium hydroxide	EC50	384	Crustacea	27901.643mg/L	3
odium hydroxide	EC50	96	Algae or other aquatic plants	1034.10043mg/L	3
odium hydroxide	LC50	96	Fish	4.16158mg/L	3
odium hydroxide	NOEC	96	Fish	56mg/L	4
odium hydroxide	EC50	48	Crustacea	40.4mg/L	2
lodecylbenzenesulfonic cid	EC50	48	Crustacea	=5.12mg/L	1
lodecylbenzenesulfonic cid	EC50	384	Crustacea	1.309mg/L	3
lodecylbenzenesulfonic cid	EC50	96	Algae or other aquatic plants	5.549mg/L	3
lodecylbenzenesulfonic	LC50	96	Fish	5.118mg/L	3
thylene glycol monobutyl ther	EC50	384	Crustacea	51.539mg/L	3
thylene glycol monobutyl ther	LC50	96	Fish	222.042mg/L	3
thylene glycol monobutyl ther	EC50	48	Crustacea	164mg/L	2
thylene glycol monobutyl ther	NOEC	168	Crustacea	56mg/L	2
thylene glycol monobutyl ther	EC50	96	Algae or other aquatic plants	720mg/L	2
odium metasilicate	LC50	96	Fish	260- 310mg/L	2
odium metasilicate	NOEC	96	Fish	348mg/L	2
odium metasilicate	EC50	48	Crustacea	1700mg/L	2
odium metasilicate	EC50	96	Crustacea	160mg/L	2
odium metasilicate	EC50	72	Algae or other aquatic plants	207mg/L	2
otassium carbonate	LC50	96	Fish	68mg/L	2
otassium carbonate	NOEC	96	Fish	33mg/L	2
otassium carbonate	EC50	48	Crustacea	200mg/L	2
otassium carbonate	EC50	48	Crustacea	430mg/L	2
otassium pyrophosphate	LC50	96	Fish	>100mg/L	2
ootassium pyrophosphate	EC50	48	Crustacea	>100mg/L	2
ootassium pyrophosphate	EC50	48	Algae or other aquatic plants	>=100- <=200mg/L	2
ootassium pyrophosphate	EC50	72	Algae or other aquatic plants	>100mg/L	2
ootassium pyrophosphate	NOEC	72	Algae or other aquatic plants	>100mg/L	2
odium xylenesulfonate	LC50	96	Fish	>1000mg/L	2
odium xylenesulfonate	EC50	48	Crustacea	>40.3mg/L	2
odium xylenesulfonate	EC50	48	Crustacea	>=40.3mg/L	2
	EC50	96	Algae or other aquatic plants	>=230mg/L	2
odium xylenesulfonate			-3 adamo piano		

Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

On the basis of available evidence concerning either toxicity, persistence, potential to accumulate and or observed environmental fate and behaviour, the material may present a danger, immediate or long-term and /or delayed, to the structure and/ or functioning of natural ecosystems.

Harmful to aquatic organisms.

For alkyl sulfates; alkane sulfonates and alpha-olefin sulfonates:

Environmental Fate: The similar physical and chemical properties of these chemicals result in similar ecotoxic action and environmental fate throughout the group. The lineal hydrophobic hydrocarbon chain structure and the polar sulfate or sulfonate groups confer surfactant properties and enable the commercial use of these substances as anionic surface active agents. Within each subcategory the most important parameter influencing ecotoxicity is the varying length of the alkyl chain. As ionic substances, the chemicals in this group all have extremely low vapor pressures, and therefore decompose before reaching their theoretical boiling points. As surfactants tend to concentrate at the water/air interface rather than equilibrate across these boundaries, calculated measures of partitioning of these compounds in the environment should be viewed with caution as the models do not take into account the properties of surfactants. It is therefore deduced that the target compartment for these substances is the hydrosphere, and partitioning into the atmosphere can be excluded. In water, the compounds are stable to hydrolysis under environmental conditions. No significant bioaccumulation is expected.

For Ethelene Glycol Monoalkyl Ethers and their Acetates:

log BCF: 0.463 to 0.732;

LC50: 94 to > 5000 mg/L. (aquatic species).

Members of this category include ethylene glycol propyl ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE).

Environmental Fate: Aquatic Fate - The ethers possess no functional groups that are readily subject to hydrolysis in the presence of waters. The acetates possess an ester group that hydrolyses in neutral ambient water under abiotic conditions. Will partition predominately to water and, to a lesser extent, to air and soil. Soil - Highly mobile in soil.

Ecotoxicity: Ethelene glycol monoalkyl ethers and their acetates are readily biodegradable.

For Hydrotropes:

Atmospheric Fate: No experimental data are available for the breakdown of hydrotropes in sunlight, (photodegradation), however; the predicted atmospheric oxidation half-lives are on the order of 40 to 105 hours, indicating significant atmospheric degradation potential. As hydrotropes do not evaporate, the importance of atmospheric light breakdown as an environmental fate mechanism is low. However, atmospheric emissions of these substances are considered to be very low.

Terrestrial Fate: No terrestrial toxicity data are available for members of the hydrotropes category; however, these substances have little potential to reach the terrestrial compartment, are non-persistent, and are not expected to accumulate or persist.

Aquatic Fate: These substances are predicted to partition almost exclusively to the water compartment. Hydrotropes are readily soluble in water and have a low potential to evaporate from water. Hydrotropes are readily biodegradable, in oxygenated water and are not expected to biodegrade, to a significant extent, under low oxygen conditions, however, the presence of hydrotropes in low oxygen waters is expected to be negligible. With the exception of salts in this category, hydrotropes are expected to have low breakdown potential in water - the salts will break down in water and are readily biodegradable.

For Linear Alkylbenzene Sulfonic Acids and their Salts (LABS): Log Kow: ~2.

Environmental Fate: The environmental fate of LABS and alkylbenzene sulfonate, (LAS), are expected to be similar. LABS are liquids and LAS is a solid at room temperature. Most of these chemicals will partition to the soil and water • very little move to the air or sediment. Atmospheric Fate: Breakdown of LABS/LAS by light is expected to be an important fate process. The substances are expected to be broken down by hydroxyl radicals, with a half-life of 7-8.6 hours. (LABS), and 95% breakdown of LAS, in 20 minutes, at 25 C.

Terrestrial Fate: Substantial breakdown of LABS, LAS, and the C10-16 derivatives of LABS by oxygen using microbes is expected to occur. LAS will not breakdown under low oxygen conditions.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium hydroxide	LOW	LOW
dodecylbenzenesulfonic acid	HIGH	HIGH
ethylene glycol monobutyl ether	LOW (Half-life = 56 days)	LOW (Half-life = 1.37 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
sodium hydroxide	LOW (LogKOW = -3.8796)
dodecylbenzenesulfonic acid	LOW (BCF = 140)
ethylene glycol monobutyl ether	LOW (BCF = 2.51)

Mobility in soil

Ingredient	Mobility
sodium hydroxide	LOW (KOC = 14.3)
dodecylbenzenesulfonic acid	LOW (KOC = 16830)
ethylene glycol monobutyl ether	HIGH (KOC = 1)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

- ▶ 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.
- Product / Packaging

 Recycle wherever possible.
 - Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility
 can be identified.
 - Treat and neutralise at an approved treatment plant.
 - ► Treatment should involve: Neutralisation with suitable dilute acid followed by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material).
 - Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 TRANSPORT INFORMATION

disposal

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

EDTA TETRASODIUM SALT(64-02-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Substances Information System - Consolidated Lists

Australia Inventory of Chemical Substances (AICS)

SODIUM HYDROXIDE(1310-73-2) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards Australia Inventory of Chemical Substances (AICS)

Australia Hazardous Substances Information System - Consolidated Lists

DODECYLBENZENESULFONIC ACID(27176-87-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Substances Information System - Consolidated Lists

Australia Inventory of Chemical Substances (AICS)

ETHYLENE GLYCOL MONOBUTYL ETHER(111-76-2) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards Australia Inventory of Chemical Substances (AICS)

Australia Hazardous Substances Information System - Consolidated Lists International Agency for Research on Cancer (IARC) - Agents Classified by the IARC

Monographs

Australia Inventory of Chemical Substances (AICS)

SODIUM METASILICATE(1344-09-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

POTASSIUM CARBONATE(584-08-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Substances Information System - Consolidated Lists

Australia Inventory of Chemical Substances (AICS)

POTASSIUM PYROPHOSPHATE(7320-34-5) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

Australia Hazardous Substances Information System - Consolidated Lists

SODIUM XYLENESULFONATE(1300-72-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Υ
Canada - NDSL	N (potassium carbonate; sodium metasilicate; sodium xylenesulfonate; dodecylbenzenesulfonic acid; potassium pyrophosphate; ethylene glycol monobutyl ether EDTA tetrasodium salt; sodium hydroxide)
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Y
Korea - KECI	Υ
New Zealand - NZIoC	Y
Philippines - PICCS	Υ
USA - TSCA	Y
Legend:	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Other information

Ingredients with multiple cas numbers

Name	CAS No
EDTA tetrasodium salt	10378-23-1, 13235-36-4, 194491-31-1, 64-02-8
sodium hydroxide	12200-64-5, 1310-73-2
potassium carbonate	584-08-7, 6381-79-9
sodium xylenesulfonate	1300-72-7, 30587-85-0

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.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net

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

 ${\sf PC-TWA: Permissible \ Concentration-Time \ Weighted \ Average}$

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 $_{\circ}$

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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