Silicone Premium 300ML Cartridges Kitchen & Bathroom Sanitary Grade

Iccons

Chemwatch Hazard Alert Code: **2**

Chemwatch: **7992-63**
Version No: **2.1**
Safety Data Sheet according to Work Health and Safety Regulations (Hazardous Chemicals) 2023 and ADG requirements

Initial Date: **09/12/2025**
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Print Date: **10/12/2025**
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SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	Silicone Premium 300ML Cartridges Kitchen & Bathroom Sanitary Grade
Chemical Name	Not Applicable
Synonyms	FSA-STP300-KB (Translucent) and FSA-SWP300-KB (White)
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Bonding and sealing. Use according to manufacturer's directions.

Details of the manufacturer or importer of the safety data sheet

Registered company name	**Iccons**
Address	383 Frankston Dandenong Road Dandenong South VIC 3175 Australia
Telephone	+61 3 9706 4344
Fax	Not Available
Website	www.iccons.com.au
Email	info@iccons.com.au

Emergency telephone number

Association / Organisation	**CHEMWATCH EMERGENCY RESPONSE (24/7)**
Emergency telephone number(s)	+61 1800 951 288 (ID#: 7992-63)
Other emergency telephone number(s)	+61 3 9573 3188

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	Not Applicable
Classification [1]	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Sensitisation (Respiratory) Category 1, Specific Target Organ Toxicity - Repeated Exposure Category 2
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)	
Signal word	**Danger**

Hazard statement(s)

H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H373	May cause damage to organs through prolonged or repeated exposure.

Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P284	[In case of inadequate ventilation] wear respiratory protection.

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P264	Wash all exposed external body areas thoroughly after handling.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P314	Get medical advice/attention 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+P364	Take off contaminated clothing and wash it before reuse.

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

No further product hazard information.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
112945-52-5	5-15	silica amorphous, fumed
34036-80-1	0-5	2-butanone-O,O',O''-(phenylsilylidene)trioxime
2224-33-1	0-5	vinyltris(methylethylketoxime)silane
4075-81-4	0-1	calcium propionate
1760-24-3	0-1	N-[3-(trimethoxysilyl)propyl]ethylenediamine
Legend:	***1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available***	

SECTION 4 First aid measures

Description of 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.
Ingestion	▸ Immediately give a glass of water. ▸ First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

Special hazards arising from the substrate or mixture

Fire Incompatibility	▸ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

Advice for firefighters

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Fire Fighting	▸ 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 courses. ▸ Use water delivered as a fine spray to control fire and cool adjacent 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	▸ Combustible. ▸ Slight fire hazard when exposed to heat or flame. ▸ Heating may cause expansion or decomposition leading to violent rupture of containers. ▸ On combustion, may emit toxic fumes of carbon monoxide (CO). ▸ May emit acrid smoke. ▸ Mists containing combustible materials may be explosive. Combustion products include: carbon monoxide (CO) carbon dioxide (CO2) nitrogen oxides (NOx) silicon dioxide (SiO2) metal oxides other pyrolysis products typical of burning organic material. **Contains low boiling substance:** Closed containers may rupture due to pressure buildup under fire conditions. 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	▸ Clean up all spills immediately. ▸ Avoid contact with skin and eyes. ▸ Wear impervious gloves and safety goggles. ▸ Trowel up/scrape up. ▸ Place spilled material in clean, dry, sealed container. ▸ Flush spill area with water.
Major Spills	▸ 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. ▸ Neutralise/decontaminate residue (see Section 13 for specific agent). ▸ Collect solid residues and seal in labelled drums for disposal. ▸ Wash area and prevent runoff into drains.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	**Contains low boiling substance:** Storage in sealed containers may result in pressure buildup causing violent rupture of containers not rated appropriately. ▸ Check for bulging containers. ▸ Vent periodically ▸ Always release caps or seals slowly to ensure slow dissipation of vapours ▸ Avoid skin 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 come in direct contact with human skin or eyes. ▸ **DO NOT** allow material to come in contact with exposed food or food contact surfaces. ▸ Suitable PPE must be worn at all times. ▸ Avoid contact with incompatible materials. ▸ When handling, **DO NOT** eat, drink or smoke.
Other information	▸ Store in original containers. ▸ Keep containers securely sealed. ▸ No smoking, naked lights or ignition sources. ▸ Store in a cool, dry, well-ventilated area. ▸ Store away from incompatible materials and foodstuff containers. ▸ Protect containers against physical damage and check regularly for leaks. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	▸ Metal can or drum ▸ Packaging as recommended by manufacturer. ▸ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	▸ Avoid strong acids, bases.

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	▸ Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

MATERIAL DATA

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. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection.
Individual protection measures, such as personal protective equipment	
Eye and face protection	▸ Safety glasses with side shields. ▸ Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent] ▸ 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. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].
Skin protection	See Hand protection below
Hands/feet protection	▸ Wear chemical protective gloves, e.g. PVC. ▸ Wear safety footwear or safety gumboots, e.g. Rubber **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	▸ Protective overalls, closely fitted at neck and wrist. ▸ Eye-wash unit. **IN CONFINED SPACES:** ▸ Non-sparking protective boots ▸ Static-free clothing. ▸ Ensure availability of lifeline. Staff should be trained in all aspects of rescue work. Rescue gear: Two sets of SCBA breathing apparatus Rescue Harness, lines etc.

Respiratory protection

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

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AX-AUS / Class1	-
up to 50	1000	-	AX-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	AX-2
up to 100	10000	-	AX-3
100+			Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand
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)

- Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator

Continued...

up to 10	1000	AX-AUS / Class 1	-
up to 50	1000	-	AX-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	AX-2
up to 100	10000	-	AX-3
100+		-	Airline**

** - Continuous-flow or positive pressure demand.
A(All classes) = Organic vapours, B AUS or B1 = Acid gases, 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 deg C)

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Paste with slight odour; does not mix with water.

Physical state	Non Slump Paste	**Relative density (Water = 1)**	0.9-1.1
Odour	Slight	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Available
pH (as supplied)	Not Applicable	**Decomposition temperature (°C)**	Not Available
Melting point / freezing point (°C)	Not Available	**Viscosity (cSt)**	Not Available
Initial boiling point and boiling range (°C)	>35	**Molecular weight (g/mol)**	Not Applicable
Flash point (°C)	>93 (CC)	**Taste**	Not Available
Evaporation rate	Not Available	**Explosive properties**	Not Available
Flammability	Not Applicable	**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	Immiscible	**pH as a solution (1%)**	Not Applicable
Vapour density (Air = 1)	Not Available	**VOC g/L**	Not Available
Heat of Combustion (kJ/g)	Not Available	**Ignition Distance (cm)**	Not Available
Flame Height (cm)	Not Available	**Flame Duration (s)**	Not Available
Enclosed Space Ignition Time Equivalent (s/m3)	Not Available	**Enclosed Space Ignition Deflagration Density (g/m3)**	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

a) Acute Toxicity	Based on available data, the classification criteria are not met.
b) Skin Irritation/Corrosion	There is sufficient evidence to classify this material as skin corrosive or irritating.
c) Serious Eye Damage/Irritation	There is sufficient evidence to classify this material as eye damaging or irritating
d) Respiratory or Skin sensitisation	There is sufficient evidence to classify this material as sensitising to skin or the respiratory system
e) Mutagenicity	Based on available data, the classification criteria are not met.
f) Carcinogenicity	Based on available data, the classification criteria are not met.
g) Reproductivity	Based on available data, the classification criteria are not met.
h) STOT - Single Exposure	Based on available data, the classification criteria are not met.
i) STOT - Repeated Exposure	There is sufficient evidence to classify this material as toxic to specific organs through repeated exposure
j) Aspiration Hazard	Based on available data, the classification criteria are not met.

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Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a significant number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. The principal toxic effects of methyl ethyl ketoxime MEKO in animal studies, regardless of the route of administration, include haemolytic anaemia, increased respiration; and reversible reduction in spontaneous activity, motor coordination and muscle tone. At high vapour concentration the product has a reversible narcotic action Extremely high concentrations may lead to coma and respiratory failure. Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure. The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation.
Ingestion	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. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Application of 0.5 gm methyl ethyl ketoxime (MEKO) to the backs of rabbits for 24 hours under an occlusive dressing produced mild irritation (Draize score 1.5 out of 8). MEKO was a strong sensitiser in the maximisation test (8 out of 10 guinea pigs were sensitised.
Eye	0.1 ml of methyl ethyl ketoxime (MEKO) was corrosive to the rabbit eye. This material causes serious eye irritation.
Chronic	Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. Practical evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a substantial number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals. Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive. Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance. Harmful: danger of serious damage to health by prolonged exposure through inhalation, in contact with skin and if swallowed. Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage may become apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicity tests. The synthetic, amorphous silicas are believed to represent a very greatly reduced silicosis hazard compared to crystalline silicas and are considered to be nuisance dusts. When heated to high temperature and a long time, amorphous silica can produce crystalline silica on cooling. Inhalation of dusts containing crystalline silicas may lead to silicosis, a disabling pulmonary fibrosis that may take years to develop. Discrepancies between various studies showing that fibrosis associated with chronic exposure to amorphous silica and those that do not may be explained by assuming that diatomaceous earth (a non-synthetic silica commonly used in industry) is either weakly fibrogenic or nonfibrogenic and that fibrosis is due to contamination by crystalline silica content Methyl ethyl ketoxime (MEKO) administered to rats by gavage at 25, 75 and 225 mg/kg/day, 7 days/week for 13 weeks, produced dose-related decreases in red blood cell counts and haemoglobin and haematocrit values accompanied by a mild to marked reticulocytosis (increased number of young red blood cells). Other effects included a dose-related pattern of spleen, liver and kidney weights. The spleen and liver showed evidence of compensatory red blood cell production suggesting that, in the rat, MEKO induces haemolytic anaemia with complementary erythropoiesis. A no-observed-effect-level was not established but effects at 25 mg/kg were described as minimal. When MEKO was administered to rats at dose levels of 0.5, and 1.0 ml/kg/day, daily for 4 weeks, transient central nervous system depression immediately followed. At 4 weeks dose-related decreases were seen in red blood cell count and haemoglobin. Dose-related increases were evident in spleen weight (from 1.7 to 3.2 fold). It was concluded that 0.1 ml/kg produced only minimal effects. When rats were exposed by inhalation to MEKO vapour for 6 hours/day, 5 days/week for 4 weeks, mild increases in blood mean corpuscular volume, mean corpuscular haemoglobin, reticulocyte count and red blood cell count were seen at 533 and 714 ppm. Spleen weights were increased and haemosiderosis (deposits of iron) in the spleen were seen at 714 ppm. Repeated exposure to synthetic amorphous silicas may produce skin dryness and cracking. Available data confirm the absence of significant toxicity by oral and dermal routes of exposure. Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted in a number of species, at airborne concentrations ranging from 0.5 mg/m3 to 150 mg/m3. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m3. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m3. Differences in values may be due to particle size, and therefore the number of particles administered per unit dose. Generally, as particle size diminishes so does the NOAEL/ LOAEL. Exposure produced transient increases in lung inflammation, markers of cell injury and lung collagen content. There was no evidence of interstitial pulmonary fibrosis. On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.

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	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. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses, the cough produces stringy phlegm, vital capacity decreases further, and shortness of breath becomes more severe. Other signs or symptoms include changed breath sounds, reduced oxygen uptake during exercise, emphysema and rarely, pneumothorax (air in the lung cavity). Removing workers from the possibility of further exposure to dust generally stops the progress of lung abnormalities. When there is high potential for worker exposure, examinations at regular period with emphasis on lung function should be performed.

Silicone Premium 300ML Cartridges Kitchen & Bathroom Sanitary Grade	**TOXICITY**	**IRRITATION**
	Not Available	Not Available
silica amorphous, fumed	**TOXICITY**	**IRRITATION**
	Inhalation (Rat) LC50: 0.45 mg/L4h[2]	Not Available
	Oral (Rat) LD50: >5000 mg/kg[2]	
2-butanone-O,O',O''-(phenylsilylidene)trioxime	**TOXICITY**	**IRRITATION**
	dermal (rat) LD50: >2000 mg/kg[1]	Not Available
	Oral (Rat) LD50: >2000 mg/kg[1]	
vinyltris(methylethylketoxime)silane	**TOXICITY**	**IRRITATION**
	dermal (rat) LD50: >2009 mg/kg[1]	Eye: adverse effect observed (irritating)[1]
	Oral (Rat) LD50: >2000 mg/kg[1]	Skin: no adverse effect observed (not irritating)[1]
calcium propionate	**TOXICITY**	**IRRITATION**
	Dermal (rabbit) LD50: 320 mg/kg[1]	Eye: adverse effect observed (irreversible damage)[1]
	Inhalation (Rat) LC50: >4.9 mg/l4h[2]	Skin: no adverse effect observed (not irritating)[1]
	Oral (Rat) LD50: >=2000 mg/kg[1]	
N-[3-(trimethoxysilyl)propyl]ethylenediamine	**TOXICITY**	**IRRITATION**
	Dermal (rabbit) LD50: >2000 mg/kg[1]	Eye (Rodent - rabbit): 15mg - Severe
	Inhalation (Rat) LC50: >1.49<2.44 mg/l4h[1]	Eye: adverse effect observed (irreversible damage)[1]
	Oral (Rat) LD50: 1897 mg/kg[1]	Skin (Rodent - rabbit): 500mg - Mild
		Skin: no adverse effect observed (not irritating)[1]

Legend:	***1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances***

SILICA AMORPHOUS, FUMED	For silica amorphous: Derived No Adverse Effects Level (NOAEL) in the range of 1000 mg/kg/d. In humans, synthetic amorphous silica (SAS) is essentially non-toxic by mouth, skin or eyes, and by inhalation. Epidemiology studies show little evidence of adverse health effects due to SAS. Repeated exposure (without personal protection) may cause mechanical irritation of the eye and drying/cracking of the skin. When experimental animals inhale synthetic amorphous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, the vast majority of SAS is excreted in the faeces and there is little accumulation in the body. Following absorption across the gut, SAS is eliminated via urine without modification in animals and humans. SAS is not expected to be broken down (metabolised) in mammals. After ingestion, there is limited accumulation of SAS in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated, but appears to be insignificant in animals and humans. SASs injected subcutaneously are subjected to rapid dissolution and removal. There is no indication of metabolism of SAS in animals or humans based on chemical structure and available data. In contrast to crystalline silica, SAS is soluble in physiological media and the soluble chemical species that are formed are eliminated via the urinary tract without modification. Both the mammalian and environmental toxicology of SASs are significantly influenced by the physical and chemical properties, particularly those of solubility and particle size. For silane, dichlorodimethyl-, reaction products with silica Acute oral toxicity is very low for treated silica. Acute inhalation toxicity was only tested for inhalable particles and is not relevant for the material used industrially. Changes in respiratory organs (inflammatory processes) after repeated exposure were reversible in animals that survived the exposure and were observed above the valid TLV values, only. If TLV values are maintained no health hazards are expected. Repeated dose toxicity is sufficiently investigated. Treated silica is not mutagenic. The NOAEL for repro/developmental toxicity is 500 mg/kg bw. **Acute toxicity:** In a limit test giving 10% in the diet (5000 mg/kg bw) to rats the acute oral LD50 was determined to be higher than 5000 mg/kg bw. In another study administering single doses of 2500 and 5000 mg/kg bw to rats the LD50 was also concluded to be higher than 5000 mg/kg bw. In an acute oral toxicity study giving still higher single doses in olive oil the LD50 appeared to be above 7900 mg/kg bw. No signs of toxicity were observed in any of these studies. All inhalation testing has been conducted with a substance that differs significantly from the commercial product based on particle size.
2-BUTANONE-O,O',O''-(PHENYLSILYLIDENE)TRIOXIME	* Sibond SDS
VINYLTRIS(METHYLETHYLKETOXIME)SILANE	No significant acute toxicological data identified in literature search.
N-[3-(TRIMETHOXYSILYL)PROPYL]ETHYLENEDIAMINE	Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of reactions of the allergen with specific antibodies of the IgE class and belong in their reaction rates to the manifestation of the immediate type. In addition to the allergen-specific potential for causing respiratory sensitisation, the amount of the allergen, the exposure period and the genetically determined disposition of the exposed person are likely to be decisive. Factors which increase the sensitivity of the mucosa may play a role in predisposing a person to

Continued...

	allergy. They may be genetically determined or acquired, for example, during infections or exposure to irritant substances. Immunologically the low molecular weight substances become complete allergens in the organism either by binding to peptides or proteins (haptens) or after metabolism (prohaptens). Particular attention is drawn to so-called atopic diathesis which is characterised by an increased susceptibility to allergic rhinitis, allergic bronchial asthma and atopic eczema (neurodermatitis) which is associated with increased IgE synthesis. Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure. For N-[3-(trimethoxysilyl)propyl]ethylenediamine (AEAPTMS) and its analogues: **Acute toxicity**: In rabbits, AEAPTMS is moderately irritating to the skin and severely irritating to the eyes. AEAPTMS showed a skin sensitizing potential in a guinea pig maximisation test. **Repeat dose toxicity**: AEAPTMS was tested in rats in a combined repeated dose toxicity test with a reproductive/ developmental screening test, following the OECD test guideline 422 (28-39 days). Clinical findings attributed to the test substance included clear perioral soiling in several high dose animals and either increased nasal sounds, labored respiration, or soft vocalizations in approximately half of the high dose females and one high dose male. These signs were not seen in the control animals and infrequently seen in either of the two lower dose groups. Observations recorded at dosing indicated a dose-related resistance to dosing. Evaluating all 30 animals/dose over the entire dosing period, the incidence of resistance was 3, 5, 27 and 62% for the controls, 25, 125 and 500 mg/kg bw/day dose groups, respectively. Similar incidence patterns were noted for salivation just prior to dosing, wetness around the mouth at dosing, and wetness around the mouth 5-30 minutes following dosing. These clinical findings are anticipated based on the amine-functionality of the material and indicative of irritation, rather than systemic effects. There were no test substance-related effects on body weight, organ weights or organ-to-body weight ratios, food consumption, FOB or motor activity parameters, or haematology or serum chemistry parameters, and no macroscopic or microscopic findings were attributed to the test-substance. Based on the results of this study, the NOAEL for the systemic toxicity of this material in the rat via oral dosing for at least 28 consecutive days was considered to be 500 mg/kg bw/day. **Genetic toxicity:** AEAPTMS has been tested in an Ames test, an ***in vitro*** Chinese hamster ovary cell HGPRT assay and sister chromatid exchange assay, and an ***in vivo*** mouse micronucleus assay. The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.
2-BUTANONE-O,O',O''-(PHENYLSILYLIDENE)TRIOXIME & VINYLTRIS(METHYLETHYLKETOXIME)SILANE & N-[3-(TRIMETHOXYSILYL)PROPYL]ETHYLENEDIAMINE	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.
2-BUTANONE-O,O',O''-(PHENYLSILYLIDENE)TRIOXIME & VINYLTRIS(METHYLETHYLKETOXIME)SILANE	alpha,beta-Unsaturated oximes represent two previously unknown classes of prohaptens.Three putative metabolites were proposed as sensitising agents. These included two diastereometric alpha,beta-epoxy oximes and a nitro analogue. When tested in the LLNA,alpha,beta-epoxy oximes. Allergic Contact Dermatitis—Formation, Structural Requirements,and Reactivity of Skin Sensitizers. Ann-Therese Karlberg et al: Chem. Res. Toxicol. 2008, 21, pp 53–69 https://ftp.cdc.gov/pub/Documents/OEL/06.%20Dotson/References/Karlberg_2008.pdf
VINYLTRIS(METHYLETHYLKETOXIME)SILANE & N-[3-(TRIMETHOXYSILYL)PROPYL]ETHYLENEDIAMINE	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.

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

Legend: ✗ ***– Data either not available or does not fill the criteria for classification***
✓ ***– Data available to make classification***

SECTION 12 Ecological information

Toxicity

Silicone Premium 300ML Cartridges Kitchen & Bathroom Sanitary Grade

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

silica amorphous, fumed

Endpoint	Test Duration (hr)	Species	Value	Source
NOEC(ECx)	24h	Crustacea	>=10000mg/l	1

Continued...

2-butanone-O,O',O"-(phenylsilylidene)trioxime	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	EC50	72h	Algae or other aquatic plants	13.8mg/l	2
	EC50	48h	Crustacea	>101mg/l	2
	NOEC(ECx)	72h	Algae or other aquatic plants	4.34mg/l	2
	LC50	96h	Fish	>89.8mg/l	2
vinyltris(methylethylketoxime)silane	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	NOEC(ECx)	72h	Algae or other aquatic plants	1mg/l	2
	EC50	72h	Algae or other aquatic plants	6.1mg/l	2
	EC50	48h	Crustacea	201mg/l	2
	LC50	96h	Fish	>100mg/l	2
calcium propionate	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	EC50	72h	Algae or other aquatic plants	48.7mg/l	2
	EC50	48h	Crustacea	22.7mg/l	2
	EC50	96h	Algae or other aquatic plants	400.8mg/l	2
	EC50(ECx)	48h	Crustacea	22.7mg/l	2
	LC50	96h	Fish	51.8mg/l	2
N-[3-(trimethoxysilyl)propyl]ethylenediamine	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	EC50	72h	Algae or other aquatic plants	5.5mg/l	2
	EC50	48h	Crustacea	81mg/l	2
	NOEC(ECx)	72h	Fish	1.6mg/l	2
	EC50	96h	Algae or other aquatic plants	11mg/l	2
	LC50	96h	Fish	597mg/l	2

Legend:	***Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. US EPA, Ecotox database - Aquatic Toxicity Data 4. ECETOC Aquatic Hazard Assessment Data 5. NITE (Japan) - Bioconcentration Data 6. METI (Japan) - Bioconcentration Data 7. Vendor Data***

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
N-[3-(trimethoxysilyl)propyl]ethylenediamine	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
N-[3-(trimethoxysilyl)propyl]ethylenediamine	LOW (LogKOW = -0.47)

Mobility in soil

Ingredient	Mobility
N-[3-(trimethoxysilyl)propyl]ethylenediamine	LOW (Log KOC = 6856)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	▸ Recycle wherever possible or consult manufacturer for recycling options. ▸ Consult State Land Waste Authority for disposal. ▸ Bury or incinerate residue at an approved site. ▸ Recycle containers if possible, or dispose of in an authorised landfill.

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

14.7. Maritime transport in bulk according to IMO instruments

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

Continued...

Not Applicable

14.7.2. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
silica amorphous, fumed	Not Applicable
2-butanone-O,O',O''-(phenylsilylidene)trioxime	Not Applicable
vinyltris(methylethylketoxime)silane	Not Applicable
calcium propionate	Not Applicable
N-[3-(trimethoxysilyl)propyl]ethylenediamine	Not Applicable

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
silica amorphous, fumed	Not Applicable
2-butanone-O,O',O''-(phenylsilylidene)trioxime	Not Applicable
vinyltris(methylethylketoxime)silane	Not Applicable
calcium propionate	Not Applicable
N-[3-(trimethoxysilyl)propyl]ethylenediamine	Not Applicable

SECTION 15 Regulatory information

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

silica amorphous, fumed is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)
International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

2-butanone-O,O',O''-(phenylsilylidene)trioxime is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australian Inventory of Industrial Chemicals (AIIC)

vinyltris(methylethylketoxime)silane is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

calcium propionate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australian Inventory of Industrial Chemicals (AIIC)

N-[3-(trimethoxysilyl)propyl]ethylenediamine is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

Additional Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (silica amorphous, fumed; 2-butanone-O,O',O''-(phenylsilylidene)trioxime; vinyltris(methylethylketoxime)silane; calcium propionate; N-[3-(trimethoxysilyl)propyl]ethylenediamine)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (2-butanone-O,O',O''-(phenylsilylidene)trioxime)
USA - TSCA	All chemical substances in this product have been designated as TSCA Inventory 'Active'
Taiwan - TCSI	Yes
Mexico - INSQ	No (2-butanone-O,O',O''-(phenylsilylidene)trioxime; vinyltris(methylethylketoxime)silane; N-[3-(trimethoxysilyl)propyl]ethylenediamine)
Vietnam - NCI	Yes
Russia - FBEPH	No (2-butanone-O,O',O''-(phenylsilylidene)trioxime)
UAE - Control List (Banned/Restricted Substances)	No (silica amorphous, fumed; 2-butanone-O,O',O''-(phenylsilylidene)trioxime; vinyltris(methylethylketoxime)silane; calcium propionate; N-[3-(trimethoxysilyl)propyl]ethylenediamine)
Legend:	***Yes = All CAS declared ingredients are on the inventory*** ***No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.***

Continued...

SECTION 16 Other information

Revision Date	09/12/2025
Initial Date	09/12/2025

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
- 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
- ES: Exposure Standard
- 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
- DNEL: Derived No-Effect Level
- PNEC: Predicted no-effect concentration
- MARPOL: International Convention for the Prevention of Pollution from Ships
- IMSBC: International Maritime Solid Bulk Cargoes Code
- IGC: International Gas Carrier Code
- IBC: International Bulk Chemical Code

- AIIC: Australian Inventory of Industrial Chemicals
- DSL: Domestic Substances List
- NDSL: Non-Domestic Substances List
- IECSC: Inventory of Existing Chemical Substance in China
- EINECS: European INventory of Existing Commercial chemical Substances
- ELINCS: European List of Notified Chemical Substances
- NLP: No-Longer Polymers
- ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
- NZIoC: New Zealand Inventory of Chemicals
- PICCS: Philippine Inventory of Chemicals and Chemical Substances
- TSCA: Toxic Substances Control Act
- TCSI: Taiwan Chemical Substance Inventory
- INSQ: Inventario Nacional de Sustancias Químicas
- NCI: National Chemical Inventory
- FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances