

MEGUIAR'S M63 - FLAGSHIP MARINE WAX

Chemwatch Material Safety Data Sheet
Issue Date: Fri 22-Jul-2005

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

MEGUIAR'S M63 - FLAGSHIP MARINE WAX

SYNONYMS

Manufacturer's Code: M63

PRODUCT USE

Wax emulsion.

SUPPLIER

Company: Meguiar's Australia P/L

Address:

35 Slough Business Park

Holker St, Silverwater

NSW, 2128

AUS

Telephone: +61 2 9737 9422

Telephone: 1800 804 182

Fax: +61 2 9737 9414

Section 2 - HAZARDS IDENTIFICATION

STATEMENT OF HAZARDOUS NATURE

**HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS. According to the
Criteria of NOHSC, and the ADG Code.**

POISONS SCHEDULE

None

RISK

HARMFUL-May cause lung damage if swallowed.

SAFETY

Do not breathe gas/fumes/vapour/spray.

Avoid contact with eyes.

Wear suitable protective clothing.

Use only in well ventilated areas.

Keep container in a well ventilated place.

To clean the floor and all objects contaminated by this material, use water.

Keep container tightly closed.

Keep away from food, drink and animal feeding stuffs.

Take off immediately all contaminated clothing.

In case of contact with eyes, rinse with plenty of water and contact Doctor or
Poisons Information Centre.

If swallowed, IMMEDIATELY contact Doctor or Poisons Information Centre. (show
this container or label).

If you feel unwell contact Doctor or Poisons Information Centre. (Show the label
if possible).

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Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
naphtha petroleum, isoparaffin, hydrotreated	64742-48-9.	10-25
kaolin	1332-58-7	5-15

Section 4 - FIRST AID MEASURES

SWALLOWED

- 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.

EYE

If this product comes in contact with the eyes:

- Wash out immediately with fresh 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.
- If pain persists or recurs seek medical attention.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

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.

INHALED

- 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.

NOTES TO PHYSICIAN

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

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Section 4 - FIRST AID MEASURES

For acute or short term repeated exposures to petroleum distillates or related hydrocarbons:

- Primary threat to life, from pure petroleum distillate ingestion and/or inhalation, is respiratory failure.
- Patients should be quickly evaluated for signs of respiratory distress (e.g. cyanosis, tachypnoea, intercostal retraction, obtundation) and given oxygen. Patients with inadequate tidal volumes or poor arterial blood gases (pO₂ 50 mm Hg) should be intubated.
- Arrhythmias complicate some hydrocarbon ingestion and/or inhalation and electrocardiographic evidence of myocardial injury has been reported; intravenous lines and cardiac monitors should be established in obviously symptomatic patients. The lungs excrete inhaled solvents, so that hyperventilation improves clearance.
- A chest x-ray should be taken immediately after stabilisation of breathing and circulation to document aspiration and detect the presence of pneumothorax.
- Epinephrine (adrenalin) is not recommended for treatment of bronchospasm because of potential myocardial sensitisation to catecholamines. Inhaled cardioselective bronchodilators (e.g. Alupent, Salbutamol) are the preferred agents, with aminophylline a second choice.
- Lavage is indicated in patients who require decontamination; ensure use of cuffed endotracheal tube in adult patients. [Ellenhorn and Barceloux: Medical Toxicology].

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Use water delivered as a fine spray to control fire and cool adjacent area.
- Avoid spraying water onto liquid pools.
- 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.

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.

Other decomposition products include, carbon dioxide (CO₂), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

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Section 5 - FIRE FIGHTING MEASURES

May emit corrosive fumes.

FIRE INCOMPATIBILITY

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

Avoid strong acids.

HAZCHEM

None

Personal Protective Equipment

PERSONAL PROTECTION EQUIPMENT

Breathing apparatus.

Chemical splash suit.

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable labelled container for waste disposal.

MAJOR SPILLS

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.
- No smoking, naked lights or ignition sources.
- Increase ventilation.
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

EMERGENCY RESPONSE PLANNING GUIDELINES (ERPG)

The maximum airborne concentration below which it is believed that nearly all individuals could be exposed for up to one hour WITHOUT experiencing or developing

life-threatening health effects is:

kaolin 500 mg/m³

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:

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Section 6 - ACCIDENTAL RELEASE MEASURES

kaolin 100 mg/m³

other than mild, transient adverse effects
without perceiving a clearly defined odour is:

kaolin 6 mg/m³

The threshold concentration below which most people
will experience no appreciable risk of health effects:

kaolin 5 mg/m³

American Industrial Hygiene Association (AIHA)

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

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR 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.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.

SUITABLE CONTAINER

- Metal can or drum
- Packaging as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

Avoid reaction with oxidising agents.
Avoid strong acids.

STORAGE REQUIREMENTS

- 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 storing and handling recommendations.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

Source	Material	TWA ppm	TWA mg/m ³	STEL ppm	STEL mg/m ³	Peak ppm	Peak mg/m ³
Australian Exposure Standards	Kaolin		10				

No data available for naphtha petroleum, isoparaffin, hydrotreated as (CAS: 64742-48-9)
Not available. Refer to individual constituents.

INGREDIENT DATA

NAPHTHA PETROLEUM, ISOPARAFFIN, HYDROTREATED:

No exposure limits set by NOHSC or ACGIH.

REL TWA: 400 ppm [EXXON]

for petroleum distillates:

CEL TWA: 500 ppm, 2000 mg/m³ (compare OSHA TWA).

KAOLIN:

Kaolin dust appears to have fibrogenic potential even in the absence of crystalline silica. Kaolinosis can exist as simple and complicated forms with the latter often associated with respiratory symptoms. Crystalline silica enhances the severity of the pneumoconiosis.

PERSONAL PROTECTION

EYE

- Safety glasses with side shields.
- Chemical goggles.
- Contact lenses pose a special hazard; soft lenses may absorb irritants and all lenses concentrate them. DO NOT wear contact lenses.

HANDS/FEET

Wear chemical protective gloves, eg. PVC.
Wear safety footwear or safety gumboots, eg. Rubber.

OTHER

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

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific CHEMWATCH data (if available), or your Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.
An approved self contained breathing apparatus (SCBA) may be required in some situations.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Provide adequate ventilation in warehouse or closed storage area.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White liquid with a sweet odour; soluble in water.

PHYSICAL PROPERTIES

Liquid.
Mixes with water.

Molecular Weight: Not Applicable
Melting Range (°C): Not Available
Solubility in water (g/L): Miscible
pH (1% solution): Not Available
Volatile Component (%vol): 24 max. (VOC)
Relative Vapour Density (air=1): >1
Lower Explosive Limit (%): Not Available
Autoignition Temp (°C): Not Available
State: Liquid

Boiling Range (°C): 199
Specific Gravity (water=1): 1.0
pH (as supplied): 8.5
Vapour Pressure (kPa): Not Available
Evaporation Rate: <1
Flash Point (°C): Not Applicable
Upper Explosive Limit (%): Not Available
Decomposition Temp (°C): Not Available

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual.

Considered an unlikely route of entry in commercial/industrial environments The liquid may produce considerable gastrointestinal discomfort and may be harmful or toxic if swallowed. Ingestion may result in nausea, pain and vomiting. Vomit entering the lungs by aspiration may cause potentially lethal chemical pneumonitis.

Ingestion of petroleum hydrocarbons may produce irritation of the pharynx, oesophagus, stomach and small intestine with oedema and mucosal ulceration resulting; symptoms include a burning sensation in the mouth and throat. Large amounts may produce narcosis with nausea and vomiting, weakness or dizziness, slow and shallow respiration, swelling of the abdomen, unconsciousness and convulsions. Myocardial injury may produce arrhythmias, ventricular fibrillation and electrocardiographic changes. Central nervous system depression may also occur. Light aromatic hydrocarbons produce a warm, sharp, tingling sensation on

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Section 11 - TOXICOLOGICAL INFORMATION

contact with taste buds and may anaesthetise the tongue. Aspiration into the lungs may produce coughing, gagging and a chemical pneumonitis with pulmonary oedema and haemorrhage.

EYE

Limited evidence exists, or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals and/or is expected to produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

Petroleum hydrocarbons may produce pain after direct contact with the eyes. Slight, but transient disturbances of the corneal epithelium may also result. The aromatic fraction may produce irritation and lachrymation.

SKIN

Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.

The material is not thought to be a skin irritant (i.e. is unlikely to produce irritant dermatitis as described in EC Directives using animal models). Temporary discomfort, however, may result from prolonged dermal exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

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.

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.

If exposure to highly concentrated solvent atmosphere is prolonged this may lead to narcosis, unconsciousness, even coma and possible death.

CHRONIC HEALTH EFFECTS

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Repeated or prolonged exposure to mixed hydrocarbons may produce narcosis with dizziness, weakness, irritability, concentration and/or memory loss, tremor in the fingers and tongue, vertigo, olfactory disorders, constriction of visual field, paraesthesias of the extremities, weight loss and anaemia and degenerative changes in the liver and kidney. Chronic exposure by petroleum workers, to the lighter hydrocarbons, has been associated with visual disturbances, damage to the central nervous system, peripheral neuropathies (including numbness and

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Section 11 - TOXICOLOGICAL INFORMATION

paraesthesias), psychological and neurophysiological deficits, bone marrow toxicities (including hypoplasia possibly due to benzene) and hepatic and renal involvement. Chronic dermal exposure to petroleum hydrocarbons may result in defatting which produces localised dermatoses. Surface cracking and erosion may also increase susceptibility to infection by microorganisms. One epidemiological study of petroleum refinery workers has reported elevations in standard mortality ratios for skin cancer along with a dose-response relationship indicating an association between routine workplace exposure to petroleum or one of its constituents and skin cancer, particularly melanoma. Other studies have been unable to confirm this finding.

TOXICITY AND IRRITATION

Not available. Refer to individual constituents.

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances

NAPHTHA PETROLEUM, ISOPARAFFIN, HYDROTREATED:

No significant acute toxicological data identified in literature search.

KAOLIN:

TOXICITY

IRRITATION

No significant acute toxicological data identified in literature search.

Section 12 - ECOLOGICAL INFORMATION

Drinking Water Standards:

hydrocarbon total: 10 ug/l (UK max.).

DO NOT discharge into sewer or waterways.

Refer to data for ingredients, which follows:

NAPHTHA PETROLEUM, ISOPARAFFIN, HYDROTREATED:

DO NOT discharge into sewer or waterways.

Section 13 - DISPOSAL CONSIDERATIONS

Puncture containers to prevent re-use and bury at an authorised landfill.

Section 14 - TRANSPORTATION INFORMATION

Dangerous Goods Class: None

Subrisk: None

UN/NA Number: None

Packing Group: None

Labels Required:

Additional Shipping Information:

International Transport Regulations:

IMO Dangerous Goods class: None

IMO Packing group: None

IATA Dangerous goods class: None

Cargo Instructions:

Cargo Max:

Passenger Instructions:

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Section 14 - TRANSPORTATION INFORMATION

Passenger Max:

Special Provisions: None, None

HAZCHEM

None

Section 15 - REGULATORY INFORMATION

POISONS SCHEDULE

None

REGULATIONS

naphtha petroleum, isoparaffin, hydrotreated (CAS: 64742-48-9) is found on the following regulatory lists:

Australia High Volume Industrial Chemical List (HVICL)

Australian Inventory of Chemical Substances (AICS)

Australian Poisons Schedule

kaolin (CAS: 1332-58-7) is found on the following regulatory lists:

Australia High Volume Industrial Chemical List (HVICL)

Australian Inventory of Chemical Substances (AICS)

Section 16 - OTHER INFORMATION

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