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Product ID:23F1081G202 MSDS Date:01/01/1985

FSC:5910

NIIN:00-083-8415

MSDS Number: BCYDQ === Responsible Party ===

Company Name: GENERAL ELECTRIC CO. CAPACITOR PROD. DEPT.

Address:JOHN ST City:HUDSON FALLS

State:NY ZIP:12839 Country:US CAGE:01002

=== Contractor Identification ===

Company

Name: GENERAL ELECTRIC CO CAPACITOR PRODUCTS DEPARTMENT

Address: JOHN ST

Box:City:HUDSON FALLS

State:NY ZIP:12839 Country:US

Phone:518-746-5750

CAGE:01002

======= Composition/Information on Ingredients ========

Ingred Name: POLYCHLORINATED BIPHENYLS (PCBS) (SARA III)

CAS:1336-36-3

RTECS #:TQ1350000 EPA Rpt Qty:1 LB DOT Rpt Qty:1 LB

Effects of Overexposure:ABSORBED THRU SKIN,LUNGS,INTESTINE.CAUSES CANCER,LIVE

| ====================================== |
|--|
| First Aid:EYES:FLUSH W/WATER IMMEDIATELY.SKIN:WASH W/SOAP IMMEDITELY. INHAL:REMOVE TO FRESH AIR,GIVE ART. RESPIR.AS NEEDED.INGEST:GET MEDICAL ATTN.GIVE LARGE QTY OF SALT WATER,INDUCE VOMITING,BUT DO NOT MAKE UN CONSCIOUS PERSON VOMIT. |
| ======== Accidental Release Measures ========== |
| Spill Release Procedures:USE ABSORBENT & DIKES TO PREVENT RU |
| NOFF.ISOLATE & NOTIFY PROPER AUTHORITIES. |
| ============ Handling and Storage ============== |
| Handling and Storage Precautions:STORAGE MUST FOLLOW RCRA REQUIREMENTS. |
| ====== Exposure Controls/Personal Protection ======== |
| Respiratory Protection:SUPPLIED AIR W/FULL FACEPIECE,HELMET OR HOOD Ventilation:LOCAL EXHAUST Protective Gloves:RUBBER-IMPERV Eye Protection:GOGGLES,FACE SHIELD Other Protective Equipment:FULL CLOTHING TO PREVENT SKIN CONTACT Supplemental Safety and Health |
| OVEREXPOS:CAN CAUSE FORMATION OF CYSTS, CAUSES STILLBIRTHS. IRRIATATES EYES, NOSE THROAT. |
| ========= Physical/Chemical Properties ========== |
| HCC:T6 Appearance and Odor:LIGHT STRAW-COLORED LIQUID,AROMATIC ODOR. |
| ========== Stability and Reactivity Data =========== |
| STRONG OXIDIZERS |
| ======== Disposal Considerations ============ |
| Waste Disposal Methods:CONTROLLED DISPOSAL REQUIRED-GENERALLY HIGH TEMPRATURE INCINERATION.ONLY A |

R,KIDNEY,STOMACH,EYE,HEARING DISORDER(SUP DATA)

PPROVED DISPOSAL OPERATOR PERMITTED.

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