

NATIONAL CHEMICAL LABORATORIES -- CITRUS-KLEEN #1095

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MSDS Safety Information
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FSC: 7930

NIIN: 01-381-5886

MSDS Date: 09/01/1991

MSDS Num: BZLQB

Product ID: CITRUS-KLEEN #1095

MFN: 01

Responsible Party

Cage: 93607

Name: NATIONAL CHEMICAL LABORATORIES OF PENNSYLVANIA INC

Address: 401 N 10TH ST

City

: PHILADELPHIA PA 19123-3803

Info Phone Number: 215-922-1200

Emergency Phone Number: 215-922-1200

Proprietary Ind: Y

Review Ind: Y

Published: Y

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Contractor Summary
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Cage: 93607

Name: NATIONAL CHEMICAL LABORATORIES OF PENNSYLVANIA INC

Address: 401 N 10TH ST

City: PHILADELPHIA PA 19123-3803

Phone: 215-922-1200

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Item Description Inform
ation
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Item Manager: GSA

Item Name: CLEANING COMPOUND,SOLVENT-DETERGENT

Unit of Issue: BX

Quantitative Expression: 0000000004EA

UI Container Qty: 1

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Ingredients
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Name: *** PROPRIETARY ***

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Health Hazards Data
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Route Of Entry Inds - Inhalation: NO

Skin: YES

Ingestion: YES

Carcinogenicity Inds - NTP: NO

IARC: NO

OSHA: NO

Effects of Exposure: CAUSES SKIN/EYE IRRIT. DO NOT INGEST. HARMFUL IF SWALLOWED. MAY CAUSE SEVERE MUCOSAL DAMAGE & GASTRIC DISTRESS. MAY CAUSE SYSTEMIC INTOXICATION.

Medical Cond Aggravated By Exposure: MAY AGGRAVATE EXISTING DERMATITIS & IRRITATE SENSITIVE SKIN.

First Aid: EYES: FLUSH W/WATER 15 MIN. GET MED AID. SKIN: THOROUGHLY WASH W/WATER & A

PPLY CREAM. IF IRRIT PERSISTS, GET MED AID. INGESTION: DON'T INDUCE VOMITING. GIVE MILK, EGG WHITE, GELATIN, WATER. GET IMMEDIATE MED AID.

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Handling and Disposal

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Spill Release Procedures: RECONTAINERIZE BY MOPPING, WET VACUUM OR USE SUITABLE ABSORBENT. RINSE REMAINING MATERIAL TO DRAINS. BE CAUTIOUS OF SLIPPERY FLOORS.

Waste Disposal Methods: FOLLOW LOCAL, STATE, FEDERAL REGS.

Handling And Storage Precautions: STORE BETWEEN 40-120F.

Other Precautions: KEEP AWAY FROM CHILDREN. FOR SALE, USE, STORAGE BY SERVICE PERSONNEL ONLY.

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Fire and Explosion Hazard Information

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Flash Point Method: TOC

Flash Point Text: NONE TO BOILING

Lower Limits: NOT EST.

Upper Limits: NOT EST.

Unusual Fire/Explosion Hazard: NONE

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Control Measures

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Respiratory Protection: GENERALLY NOT REQUIRED.

Ventilation: LOCAL.

Protective Gloves: LATEX, RUBBER

Eye Protection: GOGGLES, SAFETY GLASSES W/SHIELDS.

Other Protective Equipment: RUBBER BOOTS SHOULD BE WORN IF WORKING IN STANDING SOLUTIONS.

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Physical/Chemical Properties

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B.P. Text: 212F,100C

Vapor Pres: =WATER

Vapor Density: =WATER
Spec Gravity: 1.062
PH: 13.5
Evaporation Rate & Reference: =WATER
Solubility in Water: COMPLETE
Appearance and Odor: ORANGE LIQUID, ORANGE ODOR
Percent Volatiles by Volume: 87.0

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Reactivity Data
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Stability Indicator: YES
Materials To Avoid: ACIDS, OXIDIZERS.
Hazardous Decomposition Products: CARBON OXIDES, AMINES.
Hazardous Polymerization Indicator: NO
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Toxicological Information
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Ecological Information
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MSDS Transport Information
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Regulatory Information
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Other Information
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Transportation Information
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Responsible Party Cage: 93607
Trans ID NO: 132002
Product ID: CITRUS-KLEEN #1095
MSDS Prepared Date: 09/01/1991
Review Date: 04/24/1996
MFN: 1
Multiple KIT Number: 0
Review IND: Y
Unit O

f Issue: BX
Container QTY: 1

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Detail DOT Information

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DOT PSN Code: ZZZ
DOT Proper Shipping Name: NOT REGULATED BY THIS MODE OF TRANSPORTATION

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Detail IMO Information

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IMO PSN Code: ZZZ
IMO Proper Shipping Name: NOT REGULATED FOR THIS MODE OF TRANSPORTATION

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Detail IATA Information

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IATA PSN Code: ZZZ
IATA Proper Shipping Name: NOT REGULATED BY THIS MODE OF TRANSPORTATION

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Detail AFI Information

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AFI PSN Code: ZZZ
AFI Proper Shipping Name: NOT REGULATED BY THIS MODE OF TRANSPORTATION

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HAZCOM Labe

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Product ID: CITRUS-KLEEN #1095
Cage: 93607
Company Name: NATIONAL CHEMICAL LABORATORIES OF PENNSYLVANIA INC
Street: 401 N 10TH ST
City: PHILADELPHIA PA
Zipcode: 19123-3803
Health Emergency Phone: 215-922-1200
Label Required IND: Y
Date Of Label Review: 12/16/1998
Status Code: C
Label Date: 12/16/1998
Origination Code: G
Hazard And Precautions: CAUSES SKIN/EYE IRRIT. DO NOT INGEST. HARMFUL IF
SWALLOWED. MAY CAUSE SEVERE MUCOSAL DAMAGE &

amp; GASTRIC DISTRESS. MAY CAUSE
SYSTEMIC INTOXICATION.

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