

Safety Data Sheet

*** DRAFT ***

According To Federal Register / Vol. 77, No. 58 / Monday, March 26, 2012 / Rules And Regulations Revision Date: 08/03/2018 Date of Issue: 04/07/2009 Supersedes Date: 02/15/2017

Version: 3.1

SECTION 1: IDENTIFICATION

1.1. Product Identifier

Product Form: Mixture

Product Name: Portland Cement (ASTM Type I/II, ASTM Type III, ASTM Type V, ASTM C595 Type IL, Masonry, Block, Plastic,

Class G

Synonyms: Portland Cement; also known as Cement or Hydraulic Cement

1.2. Intended Use of the Product

Use of the Substance/Mixture: No use is specified.

1.3. Name, Address, and Telephone of the Responsible Party

Company

Calportland Company 2025 E. Financial Way

Glendora, CA 91741 - United States

T 626-852-6200

www.calportland.com

1.4. Emergency Telephone Number

Emergency Number : 626-852-6200

SECTION 2: HAZARDS IDENTIFICATION

2.1. Classification of the Substance or Mixture

 Skin Corr. 1C
 H314

 Eye Dam. 1
 H318

 Skin Sens. 1
 H317

 Carc. 1A
 H350

 STOT SE 3
 H335

Full text of hazard classes and H-statements: see section 16

2.2. Label Elements

GHS-US Labeling

Hazard Pictograms (GHS-US)







Signal Word (GHS-US) : Danger

Hazard Statements (GHS-US) : H314 - Causes severe skin burns and eye damage.

H317 - May cause an allergic skin reaction. H318 - Causes serious eve damage.

H335 - May cause respiratory irritation.

H350 - May cause cancer.

Precautionary Statements (GHS-US): P201 - Obtain special instructions before use.

P202 - Do not handle until all safety precautions have been read and understood.

P260 - Do not breathe vapors, mist, or spray.

P264 - Wash hands, forearms, and other exposed areas thoroughly after handling.

P271 - Use only outdoors or in a well-ventilated area.

P280 - Wear protective gloves, protective clothing, and eye protection. P301+P330+P331 - If swallowed: rinse mouth. Do NOT induce vomiting. P303+P361+P353 - If on skin (or hair): Take off immediately all contaminated

clothing. Brush off, then rinse skin with water/shower.

P304+P340 - If inhaled: Remove person to fresh air and keep at rest in a position

comfortable for breathing.

P305+P351+P338 - If in eyes: Rinse cautiously with water for several minutes.

Remove contact lenses, if present and easy to do. Continue rinsing. P308+P313 - If exposed or concerned: Get medical advice/attention.

P310 - Immediately call a poison center or doctor.

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P321 - Specific treatment (see section 4 on this SDS).

P333+P313 - If skin irritation or rash occurs: Get medical advice/attention.

P363 - Wash contaminated clothing before reuse.

P403+P233 - Store in a well-ventilated place. Keep container tightly closed.

P405 - Store locked up.

P501 - Dispose of contents/container in accordance with local, regional, national, and international regulations.

2.3. Other Hazards

Inhalation can cause serious, potentially irreversible lung/respiratory tract tissue damage due to chemical (caustic) burns, including third degree burns. Individuals with lung disease (e.g. bronchitis, emphysema, COPD, pulmonary disease) or sensitivity to hexavalent chromium can be aggravated by exposure.

2.4. Unknown Acute Toxicity (GHS-US)

No data available

SECTION 3: COMPOSITION/INFORMATION ON INGREDIENTS

3.1. Substance

Not applicable

3.2. Mixture

Name	Product Identifier	%	GHS-US classification
Cement, portland, chemicals	(CAS-No.) 65997-15-1	78 - 95	Skin Irrit. 2, H315 Eye Dam. 1, H318
			Skin Sens. 1, H317 STOT SE 3, H335
Limestone	(CAS-No.) 1317-65-3	<= 25	Not classified
Gypsum (Ca(SO4).2H2O)	(CAS-No.) 13397-24-5	5 - 7	Not classified
Quartz	(CAS-No.) 14808-60-7	<= 0.3	Carc. 1A, H350 STOT SE 3, H335 STOT RE 1, H372
Silica, crystalline (general form)	(CAS-No.) Not Applicable		Not classified

Full text of H-phrases: see section 16

SECTION 4: FIRST AID MEASURES

4.1. Description of First-aid Measures First-aid Measures General: Never give anything by mouth to an unconscious person. If you feel unwell, seek medical advice (show the label where possible).

First-aid Measures After Inhalation: When symptoms occur: go into open air and ventilate suspected area. Obtain medical attention if breathing difficulty persists. Inhalation of gross amounts of Portland cement requires immediate medical attention.

First-aid Measures After Skin Contact: Remove contaminated clothing. Brush off, then immediately flush skin with plenty of water for at least 60 minutes. Wash contaminated clothing before reuse. Get immediate medical advice/attention.

First-aid Measures After Eye Contact: Rinse cautiously with water for at least 60 minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Get immediate medical advice/attention.

First-aid Measures After Ingestion: Rinse mouth. Do not induce vomiting. Immediately call a poison center or doctor/physician.

4.2. Most Important Symptoms and Effects Both Acute and Delayed

Symptoms/Injuries: Causes severe skin burns and eye damage. May cause respiratory irritation. Skin sensitization. May cause cancer.

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Symptoms/Injuries After Inhalation: The three types of silicosis include: 1) Simple chronic silicosis – which results from long-term exposure (more than 20 years) to low amounts of respirable crystalline silica. Nodules of chronic inflammation and scarring provoked by the respirable crystalline silica form in the lungs and chest lymph nodes. This disease may feature breathlessness and may resemble chronic obstructive pulmonary disease (COPD); 2) Accelerated silicosis – occurs after exposure to larger amounts of respirable crystalline silica over a shorter period of time (5-15 years); 3) Acute silicosis – results from short-term exposure to very large amounts of respirable crystalline silica. The lungs become very inflamed and may fill with fluid, causing severe shortness of breath and low blood oxygen levels. Inflammation, scarring, and symptoms progress faster in accelerated silicosis than in simple silicosis. Progressive massive fibrosis may occur in simple or accelerated silicosis, but is more common in the accelerated form. Progressive massive fibrosis results from severe scarring and leads to the destruction of normal lung structures. Some studies show that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis may be associated with the increased incidence of several autoimmune disorders such as scleroderma (thickening of the skin), systemic lupus erythematosus, rheumatoid arthritis and diseases affecting the kidneys. Silicosis increases the risk of tuberculosis. Some studies show an increased incidence of chronic kidney disease and end-stage renal disease in workers exposed to respirable crystalline silica

Symptoms/Injuries After Skin Contact: Cement may cause dry skin, discomfort, irritation, severe burns, and dermatitis. Exposure of sufficient duration to wet cement, or to dry cement on moist areas of the body, can cause serious, potentially irreversible damage to skin, eye, respiratory and digestive tracts due to chemical (caustic) burns, including third degree burns. A skin exposure may be hazardous even if there is no pain or discomfort. Cement is capable of causing dermatitis by irritation and allergy. Skin affected by dermatitis may include symptoms such as, redness, itching, rash, scaling, and cracking. Irritant dermatitis is caused by the physical properties of cement including alkalinity and abrasion. Allergic contact dermatitis is caused by sensitization to hexavalent chromium (chromate) present in cement. The reaction can range from a mild rash to severe skin ulcers. Persons already sensitized may react to the first contact with cement. Others may develop allergic dermatitis after years of repeated contact with cement.

Symptoms/Injuries After Eye Contact: Airborne dust may cause immediate or delayed irritation or inflammation. Eye contact with large amounts of clinker dust, dry cement powder or with wet cement can cause moderate eye irritation, chemical burns and blindness. Eye exposures require immediate first aid and medical attention to prevent significant damage to the eye. **Symptoms/Injuries After Ingestion:** May cause burns or irritation of the linings of the mouth, throat, and gastrointestinal tract. **Chronic Symptoms:** May cause cancer.

4.3. Indication of Any Immediate Medical Attention and Special Treatment Needed

If exposed or concerned, get medical advice and attention. If medical advice is needed, have product container or label at hand.

SECTION 5: FIRE-FIGHTING MEASURES

5.1. Extinguishing Media

Suitable Extinguishing Media: Use extinguishing media appropriate for surrounding fire.

Unsuitable Extinguishing Media: Do not use a heavy water stream. Use of heavy stream of water may spread fire.

5.2. Special Hazards Arising From the Substance or Mixture

Fire Hazard: Product is not flammable. **Explosion Hazard:** Product is not explosive.

Reactivity: Wet cement is alkaline and is incompatible with acids, ammonium salts and aluminum metal. Cement dissolves in hydrofluoric acid, producing corrosive silicon tetrafluoride gas. Cement reacts with water to form silicates and calcium hydroxide. Silicates react with powerful oxidizers such as fluorine, boron trifluoride, chlorine trifluoride, manganese trifluoride, and oxygen difluoride.

5.3. Advice for Firefighters

Precautionary Measures Fire: Exercise caution when fighting any chemical fire.

Firefighting Instructions: Use water spray or fog for cooling exposed containers. Do not get water inside containers. Do not apply water stream directly at source of leak.

Protection During Firefighting: Do not enter fire area without proper protective equipment, including respiratory protection. **Hazardous Combustion Products:** None.

SECTION 6: ACCIDENTAL RELEASE MEASURES

6.1. Personal Precautions, Protective Equipment and Emergency Procedures

General Measures: Do not get in eyes, on skin, or on clothing. Do not breathe dust. Do not handle until all safety precautions have been read and understood.

6.1.1. For Non-Emergency Personnel

Protective Equipment: Use appropriate personal protective equipment (PPE).

Emergency Procedures: Evacuate unnecessary personnel.

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6.1.2. For Emergency Personnel

Protective Equipment: Equip cleanup crew with proper protection.

Emergency Procedures: Upon arrival at the scene, a first responder is expected to recognize the presence of dangerous goods, protect oneself and the public, secure the area, and call for the assistance of trained personnel as soon as conditions permit.

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6.2. Environmental Precautions

Prevent entry to sewers and public waters.

6.3. Methods and Materials for Containment and Cleaning Up

For Containment: As an immediate precautionary measure, isolate spill or leak area in all directions. Contain solid spills with appropriate barriers and prevent migration and entry into sewers or streams.

Methods for Cleaning Up: Neutralize slowly product with a weak acid. Clean up spills immediately and dispose of waste safely. Allow liquid material to solidify before cleaning up. Recover the product by vacuuming, shoveling or sweeping. Transfer spilled material to a suitable container for disposal. Contact competent authorities after a spill. Avoid actions that cause dust to become airborne during clean-up such as dry sweeping or using compressed air. Use HEPA vacuum or thoroughly wet with water to clean-up dust. Use PPE described in Section 8.

6.4. Reference to Other Sections

See Section 8 for exposure controls and personal protection and Section 13 for disposal considerations.

SECTION 7: HANDLING AND STORAGE

7.1. Precautions for Safe Handling

Additional Hazards When Processed: Keep bulk and bagged cement dry until used. Stack bagged material in a secure manner to prevent falling. Bagged cement is heavy and poses risks such as sprains and strains to the back, arms, shoulders and legs during lifting and mixing. Handle with care and use appropriate control measures. Engulfment hazard. To prevent burial or suffocation, do not enter a confined space, such as a silo, bin, bulk truck, or other storage container or vessel that stores or contains cement. Cement can buildup or adhere to the walls of a confined space. The cement can release, collapse or fall unexpectedly. Properly ground all pneumatic conveyance systems. The potential exists for static build-up and static discharge when moving cement powders through a plastic, non-conductive, or non-grounded pneumatic conveyance system. The static discharge may result in damage to equipment and injury to workers. Cutting, crushing or grinding hardened cement, concrete or other crystalline silicabearing materials will release respirable crystalline silica. Use all appropriate measures of dust control or suppression, and Personal Protective Equipment (PPE) described in Section 8 below.

Precautions for Safe Handling: Do not breathe dust. Do not get in eyes, on skin, or on clothing. Wash hands and other exposed areas with mild soap and water before eating, drinking or smoking and when leaving work. Avoid contact with eyes, skin and clothing. Handle empty containers with care because they may still present a hazard. Obtain special instructions before use. Do not handle until all safety precautions have been read and understood. Cutting, crushing or grinding hardened cement, concrete or other crystalline silica-bearing materials will release respirable crystalline silica. Use all appropriate measures of dust control or suppression, and Personal Protective Equipment (PPE) described in Section 8 below.

Hygiene Measures: Handle in accordance with good industrial hygiene and safety procedures.

7.2. Conditions for Safe Storage, Including Any Incompatibilities

Storage Conditions: Store in a dry place. Protect from moisture.

Incompatible Materials: Acids. Ammonium salts. Aluminum. Water. Oxidizers.

7.3. Specific End Use(s)

No use is specified.

SECTION 8: EXPOSURE CONTROLS/PERSONAL PROTECTION

8.1. Control Parameters

For substances listed in section 3 that are not listed here, there are no established exposure limits from the manufacturer, supplier, importer, or the appropriate advisory agency including: ACGIH (TLV), AIHA (WEEL), NIOSH (REL), or OSHA (PEL).

Cement, portland, chemicals (65997-15-1)		
USA ACGIH	ACGIH TWA (mg/m³)	1 mg/m³ (particulate matter containing no asbestos and <1%
		crystalline silica, respirable particulate matter)
USA ACGIH	ACGIH chemical category	Not Classifiable as a Human Carcinogen
USA NIOSH	NIOSH REL (TWA) (mg/m³)	10 mg/m³ (total dust)
		5 mg/m³ (respirable dust)
USA IDLH	US IDLH (mg/m³)	5000 mg/m ³
USA OSHA	OSHA PEL (TWA) (mg/m³)	15 mg/m³ (total dust)
		5 mg/m ³ (respirable fraction)

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Limestone (1317-65-3)			
USA NIOSH	NIOSH REL (TWA) (mg/m³)	10 mg/m³ (total dust)	
		5 mg/m³ (respirable dust)	
USA OSHA	OSHA PEL (TWA) (mg/m³)	15 mg/m³ (total dust)	
		5 mg/m³ (respirable fraction)	
Gypsum (Ca(SO4).2H2O) (13397-24-5)		
USA ACGIH	ACGIH TWA (mg/m³)	10 mg/m³ (inhalable particulate matter)	
USA NIOSH	NIOSH REL (TWA) (mg/m³)	10 mg/m³ (total dust)	
		5 mg/m³ (respirable dust)	
USA OSHA	OSHA PEL (TWA) (mg/m³)	15 mg/m³ (total dust)	
		5 mg/m³ (respirable fraction)	
Quartz (1480	8-60-7)		
USA ACGIH	ACGIH TWA (mg/m³)	0.025 mg/m³ (respirable particulate matter)	
USA ACGIH	ACGIH chemical category	A2 - Suspected Human Carcinogen	
USA NIOSH	NIOSH REL (TWA) (mg/m³)	0.05 mg/m³ (respirable dust)	
USA IDLH	US IDLH (mg/m³)	50 mg/m³ (respirable dust)	
USA OSHA	OSHA PEL (TWA) (mg/m³)	50 μg/m³	
Silica, crystal	Silica, crystalline (general form) (Not Applicable)		
USA OSHA	OSHA PEL (TWA) (mg/m³)	50 μg/m³ (excludes construction work, agricultural operations, and	
		exposures that result from the processing of sorptive clays)	

8.2. Exposure Controls

Appropriate Engineering Controls

: Emergency eye wash fountains and safety showers should be available in the immediate vicinity of any potential exposure. Use local exhaust or general dilution ventilation or other suppression methods to maintain dust levels below exposure limits. Power equipment should be equipped with proper dust collection devices.

Personal Protective Equipment

: Gloves. Protective clothing. Protective goggles. Insufficient ventilation: wear respiratory protection.









Hand Protection

: Wear gloves impervious to water to prevent skin contact. Do not rely on barrier creams, in place of impervious gloves.

Eye and Face Protection

: Wear ANSI approved glasses or safety goggles when handling wet concrete to prevent contact with eyes. Wearing contact lenses, when using concrete, is not recommended. In case of excessive dust production, safety goggles are recommended.

Skin and Body Protection

: Wear gloves, boot covers and protective clothing impervious to water to prevent skin contact. Do not rely on barrier creams, in place of impervious gloves.

Respiratory Protection

: If exposure limits are exceeded or irritation is experienced, approved respiratory protection should be worn. In case of inadequate ventilation, oxygen deficient atmosphere, or where exposure levels are not known wear approved respiratory protection.

Other Information : When using, do not eat, drink or smoke.

SECTION 9: PHYSICAL AND CHEMICAL PROPERTIES

9.1. Information on Basic Physical and Chemical Properties

Physical State : Solid
Appearance : Gray powder

Odor : None

Odor Threshold: No data availablepH: 12 - 13 (in water)Evaporation Rate: No data availableMelting Point: No data available

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Freezing Point : No data available **Boiling Point** : No data available **Flash Point** : No data available **Auto-ignition Temperature** : No data available **Decomposition Temperature** : No data available : No data available Flammability (solid, gas) **Vapor Pressure** : No data available Relative Vapor Density at 20°C : No data available **Relative Density** : No data available

Specific Gravity : 3.15

Solubility : Slightly soluble in water.

Partition Coefficient: N-Octanol/Water : No data available Viscosity : No data available

9.2. Other Information No additional information available

SECTION 10: STABILITY AND REACTIVITY

- **10.1. Reactivity:** Wet cement is alkaline and is incompatible with acids, ammonium salts and aluminum metal. Cement dissolves in hydrofluoric acid, producing corrosive silicon tetrafluoride gas. Cement reacts with water to form silicates and calcium hydroxide. Silicates react with powerful oxidizers such as fluorine, boron trifluoride, chlorine trifluoride, manganese trifluoride, and oxygen difluoride.
- **10.2. Chemical Stability:** Stable under recommended handling and storage conditions (see section 7).
- **10.3. Possibility of Hazardous Reactions:** Hazardous polymerization will not occur.
- **10.4. Conditions to Avoid:** Protect from moisture. Incompatible materials.
- 10.5. Incompatible Materials: Acids. Ammonium salts. Aluminum. Water. Oxidizers.
- 10.6. Hazardous Decomposition Products: None.

SECTION 11: TOXICOLOGICAL INFORMATION

11.1. Information on Toxicological Effects

Acute Toxicity: Not classified

Quartz (14808-60-7)	
LD50 Oral Rat	> 5000 mg/kg
LD50 Dermal Rat	> 5000 mg/kg

Skin Corrosion/Irritation: Causes severe skin burns and eye damage.

pH: 12 - 13 (in water)

Serious Eye Damage/Irritation: Causes serious eye damage.

pH: 12 - 13 (in water)

Respiratory or Skin Sensitization: May cause an allergic skin reaction.

Germ Cell Mutagenicity: Not classified **Carcinogenicity:** May cause cancer.

Quartz (14808-60-7)	
IARC group	1
National Toxicology Program (NTP) Status	Known Human Carcinogens.
OSHA Hazard Communication Carcinogen List	In OSHA Hazard Communication Carcinogen list.
Silica, crystalline (general form) (Not Applicable)	
IARC group	1
National Toxicology Program (NTP) Status	Known Human Carcinogens.
OSHA Hazard Communication Carcinogen List	In OSHA Hazard Communication Carcinogen list.
OSHA Specifically Regulated Carcinogen List	In OSHA Specifically Regulated Carcinogen list.

Reproductive Toxicity: Not classified

Specific Target Organ Toxicity (Single Exposure): May cause respiratory irritation.

Specific Target Organ Toxicity (Repeated Exposure): Not classified

Aspiration Hazard: Not classified

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Symptoms/Injuries After Inhalation: The three types of silicosis include: 1) Simple chronic silicosis – which results from long-term exposure (more than 20 years) to low amounts of respirable crystalline silica. Nodules of chronic inflammation and scarring provoked by the respirable crystalline silica form in the lungs and chest lymph nodes. This disease may feature breathlessness and may resemble chronic obstructive pulmonary disease (COPD); 2) Accelerated silicosis – occurs after exposure to larger amounts of respirable crystalline silica over a shorter period of time (5-15 years); 3) Acute silicosis – results from short-term exposure to very large amounts of respirable crystalline silica. The lungs become very inflamed and may fill with fluid, causing severe shortness of breath and low blood oxygen levels. Inflammation, scarring, and symptoms progress faster in accelerated silicosis than in simple silicosis. Progressive massive fibrosis may occur in simple or accelerated silicosis, but is more common in the accelerated form. Progressive massive fibrosis results from severe scarring and leads to the destruction of normal lung structures. Some studies show that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis may be associated with the increased incidence of several autoimmune disorders such as scleroderma (thickening of the skin), systemic lupus erythematosus, rheumatoid arthritis and diseases affecting the kidneys. Silicosis increases the risk of tuberculosis. Some studies show an increased incidence of chronic kidney disease and end-stage renal disease in workers exposed to respirable crystalline silica.

Symptoms/Injuries After Skin Contact: Cement may cause dry skin, discomfort, irritation, severe burns, and dermatitis. Exposure of sufficient duration to wet cement, or to dry cement on moist areas of the body, can cause serious, potentially irreversible damage to skin, eye, respiratory and digestive tracts due to chemical (caustic) burns, including third degree burns. A skin exposure may be hazardous even if there is no pain or discomfort. Cement is capable of causing dermatitis by irritation and allergy. Skin affected by dermatitis may include symptoms such as, redness, itching, rash, scaling, and cracking. Irritant dermatitis is caused by the physical properties of cement including alkalinity and abrasion. Allergic contact dermatitis is caused by sensitization to hexavalent chromium (chromate) present in cement. The reaction can range from a mild rash to severe skin ulcers. Persons already sensitized may react to the first contact with cement. Others may develop allergic dermatitis after years of repeated contact with cement.

Symptoms/Injuries After Eye Contact: Airborne dust may cause immediate or delayed irritation or inflammation. Eye contact with large amounts of clinker dust, dry cement powder or with wet cement can cause moderate eye irritation, chemical burns and blindness. Eye exposures require immediate first aid and medical attention to prevent significant damage to the eye.

Symptoms/Injuries After Ingestion: May cause burns or irritation of the linings of the mouth, throat, and gastrointestinal tract. **Chronic Symptoms:** May cause cancer.

SECTION 12: ECOLOGICAL INFORMATION

12.1. Toxicity

Ecology - General : Not classified.

12.2. Persistence and Degradability

Portland Cement (ASTM Type I/II, ASTM Type	III, ASTM Type V, ASTM C595 Type IL, Masonry, Block, Plastic, Class G)
Persistence and Degradability	Not established.

12.3. Bioaccumulative Potential

Portland Cement (ASTM Type I/II, ASTM Type III, ASTM Type V, ASTM C595 Type IL, Masonry, Block, Plastic, Class G)		
Bioaccumulative Potential	Not established.	

- **12.4. Mobility in Soil** No additional information available
- 12.5. Other Adverse Effects

Other Information : Avoid release to the environment.

SECTION 13: DISPOSAL CONSIDERATIONS

13.1. Waste Treatment Methods

Waste Disposal Recommendations: Dispose of contents/container in accordance with local, regional, national, and international regulations.

Additional Information: Container may remain hazardous when empty. Continue to observe all precautions.

Ecology - Waste Materials: Avoid release to the environment.

SECTION 14: TRANSPORT INFORMATION

The shipping description(s) stated herein were prepared in accordance with certain assumptions at the time the SDS was authored, and can vary based on a number of variables that may or may not have been known at the time the SDS was issued.

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- **14.1. In Accordance with DOT** Not regulated for transport
- 14.2. In Accordance with IMDG Not regulated for transport14.3. In Accordance with IATA Not regulated for transport

SECTION 15: REGULATORY INFORMATION

15.1. US Federal Regulations

Portland Cement (ASTM Type I/II, ASTM Type III, ASTM Type V, ASTM C595 Type IL, Masonry, Block, Plastic, Class G)	
SARA Section 311/312 Hazard Classes Immediate (acute) health hazard	
·	Delayed (chronic) health hazard
Cement, portland, chemicals (65997-15-1)	
Listed on the United States TSCA (Toxic Substances Control Act) inventory	
Limestone (1317-65-3)	
Listed on the United States TSCA (Toxic Substances Control Act) inventory	
Quartz (14808-60-7)	
Listed on the United States TSCA (Toxic Substances Control Act) inventory	

15.2. US State Regulations



WARNING: This product can expose you to chemicals, including Silica, crystalline (airborne particles of respirable size), which is known to the State of California to cause cancer; and chromium (hexavalent compounds), which is known to the State of California to cause birth defects or other reproductive harm. For more information, go to www.P65Warnings.ca.gov.

Cement, portland, chemicals (65997-15-1)

- U.S. Massachusetts Right To Know List
- U.S. New Jersey Right to Know Hazardous Substance List
- U.S. Pennsylvania RTK (Right to Know) List

Limestone (1317-65-3)

- U.S. Massachusetts Right To Know List
- U.S. New Jersey Right to Know Hazardous Substance List
- U.S. Pennsylvania RTK (Right to Know) List

Gypsum (Ca(SO4).2H2O) (13397-24-5)

- U.S. New Jersey Right to Know Hazardous Substance List
- U.S. Pennsylvania RTK (Right to Know) List

Quartz (14808-60-7)

- U.S. Massachusetts Right To Know List
- U.S. New Jersey Right to Know Hazardous Substance List
- U.S. Pennsylvania RTK (Right to Know) List

SECTION 16: OTHER INFORMATION, INCLUDING DATE OF PREPARATION OR LAST REVISION

Date of Preparation or Latest Revision : 08/03/2018

Other Information : This document has been prepared in accordance with the SDS

requirements of the OSHA Hazard Communication Standard 29 CFR

1910.1200

GHS Full Text Phrases:

Carc. 1A	Carcinogenicity Category 1A
Eye Dam. 1	Serious eye damage/eye irritation Category 1
Skin Corr. 1C	Skin corrosion/irritation Category 1C
Skin Irrit. 2	Skin corrosion/irritation Category 2
Skin Sens. 1	Skin sensitization, Category 1
STOT RE 1	Specific target organ toxicity (repeated exposure) Category 1
STOT SE 3	Specific target organ toxicity (single exposure) Category 3
H314	Causes severe skin burns and eye damage
H315	Causes skin irritation
H317	May cause an allergic skin reaction

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H318	Causes serious eye damage
H335	May cause respiratory irritation
H350	May cause cancer
H372	Causes damage to organs through prolonged or repeated exposure

This information is based on our current knowledge and is intended to describe the product for the purposes of health, safety and environmental requirements only. It should not therefore be construed as guaranteeing any specific property of the product.

SDS US (GHS HazCom)

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