Product ID:FA12/078 MSDS Date:01/01/1985

FSC:5915

NIIN:00-922-0714

MSDS Number: BFWKP === Responsible Party ===

Company Name:FILTRON CO.INC. Address:148 SWEET HOLLOW RD

City:OLD BETHPAGE

State:NY

ZIP:11804-1315 Country:US

Emergency Phone Num:914-699-2000

CAGE:JO774

=== Contractor Identification ===

Company Name:FIL

TRON CO INC

Address:148 SWEET HOLLOW RD

Box:City:OLD BETHPAGE

State:NY

ZIP:11804-1315 Country:US

Phone:914-699-2000

CAGE:81831

Company Name:FILTRON CO.INC. Address:148 SWEET HOLLOW RD

Box:City:OLD BETHPAGE

State:NY

ZIP:11804-1315 Country:US

Phone:914-699-2000

CAGE:JO774

====== 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

====== Hazards Ide

ntification ============
Effects of Overexposure:ABSORBED THRU SKIN,LUNGS,INTESTINE.CAUSES CANCER,LIVER,KIDNEY,STOMACH,EYE,HEARING DISORDER(SUP DATA)
======================================
First Aid:EYES:FLUSH W/WATER IMMED.SKIN:WASH W/SOAP IMMED.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 UNCONSCIOUS PE RSON VOMIT.
========= Accident
al Release Measures ============
Spill Release Procedures:USE ABSORBENT & DIKES TO PREVENT RUNOFF.ISOLATE & NOTIFY PROPER AUTHORITIES.
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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.IRRITATES EYES,NOSE,THROAT.
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HCC:Z3 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 TEMPERATURE INCINERATION.ONLY APPROVED DISPOSAL OPERATOR PERMITTED.

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Id seek competent professional advice to verify and assume responsibility for the suitability of this information to their particular situation.