

DOW CORNING CORP -- DOW CORNING (R) 3-7132 RTV ADHESIVE SEALANT -- 8030-00-180-6339
===== Product Identification =====

Product ID:DOW CORNING (R) 3-7132 RTV ADHESIVE SEALANT

MSDS Date:11/11/1992

FSC:8030

NIIN:00-180-6339

MSDS Number: BRGRT

=== Responsible Party ===

Company Name:DOW CORNING CORP

Address:SOUTH SAGINAW ROAD

City:MIDLAND

State:MI

ZIP:48686

Country:US

Info Phone Num:517-496-6000

Emerg

ency Phone Num:517-496-5900

Preparer's Name:JACK L SHENEGER

CAGE:5D028

=== Contractor Identification ===

Company Name:DOW CORNING CORP

Address:3901 S SAGINAW RD

Box:997

City:MIDLAND

State:MI

ZIP:48686-0997

Country:US

Phone:517-496-6000/517-496-6315

CAGE:5D028

Company Name:DOW CORNING CORP

Address:2200 W SALZBURG RD

Box:City:AUBURN

State:MI

ZIP:48611

Country:US

Phone:517-496-4388

CAGE:71984

Company Name:INLAND PACKAGING INC

Address:209 PETERSON DR

Box:644

City:ELIZABETHTOWN

State:KY

ZIP:42701-

9804
Country:US
Phone:502-737-6757
CAGE:66172

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Composition/Information on Ingredients
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Ingred Name:METHYLTRIACTOXYSILANE (LIMITS ARE FOR ACETIC ACID, FORMED DURING CURING ON EXPOSURE TO WATER OR HUMID AIR)

CAS:4253-34-3
RTECS #:VV4500000
Fraction by Wt: 2%
Other REC Limits:NONE SPECIFIED
OSHA PEL:10 PPM
ACGIH TLV:10 PPM/STEL 15 PPM

Ingred Name:ETHYLTRIACTOXYSILANE (LIMITS ARE FOR ACETIC ACID, FORMED DURING CURING ON EXPOSURE TO WATER OR HUMID AIR)

CAS:176
89-77-9
Fraction by Wt: 2%
Other REC Limits:NONE SPECIFIED
OSHA PEL:10 PPM
ACGIH TLV:10 PPM/STEL 15 PPM

Ingred Name:SILICA, AMORPHOUS

CAS:112945-52-5
RTECS #:VV7310000
Fraction by Wt: 10%
Other REC Limits:NONE SPECIFIED
OSHA PEL:6 MG/M3
ACGIH TLV:10 MG/M3 TOTAL DUST

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Hazards Identification
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Health Hazards Acute and Chronic:ACUTE; EYE: IRRITATES SLIGHTLY WITH REDNESS & SWELLING. SKIN: SINGLE SHORT EXPOSURE (300F.DONT EAT.AVOID BREATHING, SKIN/EYE CONTACT.

Other Precautions:REVIEW OSHA FORMALDEHYDE REGS FOR INFO-SAFE HANDLING REQUIREMNTS. PRODUCT FORMS ACETIC ACID (HOAC) W/EXPOSURE TO WATER/HUMID AIR. VENT TO CONTROL HOAC EXPOSURE W/IN 10 PPM (CURRENT TLV) OR USE RESPIRATORY PROTECTN. VENT TO CONTROL EXPOSURE.

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Exposure Controls/Personal Protection
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Respiratory Protection:USE RESPIRATORY PROTECTION UNLESS LOCAL EXHAUST VENTILATION IS ADEQUATE OR AIR SAMPLING DATA SHOW EXPOSURES ARE WITHI

N TLV & PEL GUIDELINES. SUITABLE RESPIRATOR: ORGANIC VAPOR TYPE.

Ventilation:LOCAL EXHAUST: RECOMMENDED. MECHANICAL (GENERAL): RECOMMENDED.

Protective Gloves:RUBBER OR PLASTIC GLOVES ARE RECOMMENDED

Eye Protection:SAFETY GLASSES AS A MINIMUM

Other Protective Equipment:WASHING AT MEALTIME & END OF SHIFT IS ADEQUATE. REMOVE CONTAMINATED CLOTHING & SHOES ASAP & CLEAN BEFORE REUSE.

Work Hygienic Practices:GOOD PRACTICE REQUIRES THAT GROSS AMOUNT OF ANY CHEM BE REMOVED FROM SKIN ASAP, ESPECIALLY BEFORE EATING OR SMOKING.

Supplemental Safety and Health

THESE PRECAUTIONS ARE FOR ROOM TEMPERATURES HANDLING; USE AT ELEVATED TEMPERATURES OR AEROSOL/SPRAY APPLICATION, MAY REQUIRE ADDED PRECAUTIONS.

===== Physical/Chemical Properties =====

HCC:V7

Vapor Pres: