MATERIAL SAFETY DATA SHEET OSHA'S HAZARD COMMUNICATION STANDARD – U.S. DEPARTMENT OF LABOR

29 CFR 1910.1200	OSHA'S HAZARD				AKIMENI UFI	OMB NO.: 1218-0072
				IDENTIFICATION	-	
MANUFACTURER'S NAME: Gen ADDRESS: 5568 Schaefer Ave	labs (Formerly General C CITY: Chino	hemical Corp.)	TILE MAGIO Tate: Ca	C NON ACID PTC EMERGENCY PHONE ZIP: 91710		PHONE : 909-591-8451 DATE PREPARED : 1/22/99
	SECTION	1 2 – HAZARDO	US INGREDIE	NTS/IDENTITY IN	FORMATION	
HAZARDOUS COMPONENTS None	CAS# None	OSHA PEL None	ACGIH TLN None			
VOC Content: <10 g/L	NOTE:					
				CAL CHARACTER		
BOILING POINT (°F): >212 MELTING POINT (°F): Not Tested SOLUBILITY IN WATER: 100%		VITY: 1.046 NATE: Not Tested AND ODOR: MARO	V	APOR PRESSURE: Not APOR DENSITY: Not Te OR		
	5	ECTION 4 – FIR	RE AND EXPLO	OSION HAZARD D	ATA	
FLASH POINT (°F): None FL NFPA HAZARD RATING: H (0-Lease, 4-Extreme) 1 UNUSUAL FIRE AND EXPLOSIC	AMMABLE LIMITS: Not [®] F R S 0 0 0 N HAZARDS: None	EXTI	Not Tested NGUISHING MED CIAL FIRE FIGHTI	UEL: Not Tested IA: None NG PROCEDURE: Non	рН: 9.5-11.0 е	DOT #: None
		SECTIC CONDITIONS TO	ON 5 - REAC			
STABILITY: Stable INCOMPATIBLE MATERIALS TO HAZARDOUS DECOMPOSITION HAZARDOUS POLYMERIZATION	OR BYPRODUCTS: CO	IZERS				
		SECTION	6 – HEALTH	HAZARD DATA		
ROUTE OF ENTRY INHALATION?: Possible HEALTH HAZARDS: Same as sig NOTE: All chemicals incorporated OSHA CARCINOGENICITY?: No	into this product are foun	osures.	itory list.	ION?: Possible		
SIGNS AND SYMPTOMS OF OV EYES: Burning sensation MEDICAL CONDITIONS GENER.	SKIN: Not expected to	be a problem f EXPOSURE : Same		N: Nausea INHALAT		e a problem
EMERGENCY AND FIRST AID P EYES: Flush with water for 15 min SKIN: Wass off with soap & water INGESTION: Induce vomitting, cal INHALATION: See above	utes. If irritation persists,	call physician				
				SAFE HANDLING		
STEPS TO BE TAKEN IN CASE WASTE DISPOSAL METHOD: Di PRECAUTIONS TO BE TAKEN II OTHER PRECAUTION: Keep out	spose of in accordance w N HANDLING AND STO	ith state and local re RING: Store in a cool	gulations. , dry place, out of	direct sunlight. Do not f		
				L MEASURES		
RESPORITORY PROTECTION:	Open all doors and windo protection per 29 CRF 19		bove TLV or PEL,	a NIOSH approved resp	irator equipped for the	exposure or suitable respiratory
VENTILATION LOCAL EXHAUST: If Available	MECHANICAL: If Ava		CIAL: None	OTHER: None		
PROTECTIVE GLOVE: None OTHER PROTECTIVE CLOTHIN	G OR EQUIPMENT: Non					
WORK HYGENIC PRACTICES:	Use common sense and specific business. Direct					

OTHER SPECIAL REQUIREMENTS: