

Fiberlock 8317 Instant Mold Stain Remover ICP Building Solutions Group

Version No: **5.7**Safety Data Sheet (Conforms to Regulation (EU) No 2020/878)

Issue Date: **03/29/2021**Print Date: **03/29/2021**S.REACH.GBR.EN

SECTION 1 Identification of the substance / mixture and of the company / undertaking

1.1. Product Identifier

Product name	Fiberlock 8317 Instant Mold Stain Remover		
Synonyms	lot Available		
Proper shipping name	HYPOCHLORITE SOLUTION		
Other means of identification	Not Available		

1.2. Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Cleaning and removing mold and mildew stains	
Uses advised against	Not Applicable	

1.3. Details of the supplier of the safety data sheet

Registered company name	ICP Building Solutions Group / Fiberlock	
Address	150 Dascomb Road Andover MA 01810 United States	
Telephone	800 225 1141 978 623 9987	
Fax	Not Available	
Website	te www.icpgroup.com	
Email sds@icpgroup.com		

1.4. Emergency telephone number

Association / Organisation	Chemtel		
Emergency telephone numbers	800 255 3924		
Other emergency telephone numbers	813 324 0585		

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classification according to	H314 - Skin Corrosion/Irritation Category 1B, H411 - Chronic Aquatic Hazard Category 2, H400 - Acute Aquatic Hazard Category 1, H290 -			
regulation (EC) No 1272/2008	Corrosive to Metals Category 1, H318 - Serious Eye Damage/Eye Irritation Category 1, H335 - Specific target organ toxicity - single exposure			
[CLP] and amendments [1]	Category 3 (respiratory tract irritation)			
Legend:	1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI			

2.2. Label elements

Hazard pictogram(s)







Signal word Dange

Hazard statement(s)

H314 Causes severe skin burns and eye damage.		
H411 Toxic to aquatic life with long lasting effects.		
H400 Very toxic to aquatic life.		
H290 May be corrosive to metals.		
H335	May cause respiratory irritation.	

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EUH031	Contact with acids liberates toxic gas.
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Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.	
P271	Use only outdoors or in a well-ventilated area.	
P280 Wear protective gloves/protective clothing/eye protection/face protection/hearing protection/		

Precautionary statement(s) Response

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. Rinse skin with water [or shower].		
P305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.		

Precautionary statement(s) Storage

P405	Store locked up.	
P403+P233 Store in a well-ventilated place. Keep container tightly closed.		

Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

2.3. Other hazards

REACh - Art.57-59: The mixture does not contain Substances of Very High Concern (SVHC) at the SDS print date.

SECTION 3 Composition / information on ingredients

3.1.Substances

See 'Composition on ingredients' in Section 3.2

3.2.Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classification according to regulation (EC) No 1272/2008 [CLP] and amendments
1.7681-52-9 2.231-668-3 3.017-011-00-1 4.Not Available	5-10	sodium hypochlorite.	Skin Corrosion/Irritation Category 1B, Serious Eye Damage/Eye Irritation Category 1, Chronic Aquatic Hazard Category 1, Acute Aquatic Hazard Category 1; H314, H318, H410, H400, EUH031 [2]
1.1310-73-2 2.215-185-5 3.011-002-00-6 4.Not Available	0-1	sodium hydroxide	Skin Corrosion/Irritation Category 1A; H314 ^[2]
1.1300-72-7 2.215-090-9 3.Not Available 4.Not Available	0-1	sodium xylenesulfonate	Eye Irritation Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Skin Corrosion/Irritation Category 2; H319, H335, H315 ^[1]
1.1643-20-5 2.216-700-6 3.Not Available 4.Not Available	0-1	lauryldimethylamine oxide	Corrosive to Metals Category 1, Acute Aquatic Hazard Category 1, Serious Eye Damage/Eye Irritation Category 1, Skin Corrosion/Irritation Category 1B; H290, H400, H318, H314 [1]
Legend:	d: 1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 3. Classification drawn from C&L * EU IOELVs available		

SECTION 4 First aid measures

4.1. Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin or hair contact occurs: Immediately flush body and clothes with large amounts of water, using safety shower if available. Quickly remove all contaminated clothing, including footwear. Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. Transport to hospital, or doctor.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.

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 Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ► Transport to hospital, or doctor, without delay. Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. Pefore any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. This must definitely be left to a doctor or person authorised by him/her. (ICSC13719) ▶ For advice, contact a Poisons Information Centre or a doctor at once. Urgent hospital treatment is likely to be needed. If swallowed do NOT induce vomiting If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Ingestion Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious • Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Transport to hospital or doctor without delay.

4.2 Most important symptoms and effects, both acute and delayed

See Section 11

4.3. Indication of any immediate medical attention and special treatment needed

For acute or repeated exposures to hypochlorite solutions:

- Release of small amounts of hypochlorous acid and acid gases from the stomach following ingestion, is usually too low to cause damage but may be irritating to mucous membranes. Buffering with antacid may be helpful if discomfort is evident.
- ▶ Evaluate as potential caustic exposure.
- Decontaminate skin and eyes with copious saline irrigation. Check exposed eyes for corneal abrasions with fluorescein staining.
- ▶ Emesis or lavage and catharsis may be indicated for mild caustic exposure.
- Chlorine exposures require evaluation of acid/base and respiratory status.
- Inhalation of vapours or mists may result in pulmonary oedema.

ELLENHORN and BARCELOUX: Medical Toxicology.

For acute or short-term repeated exposures to highly alkaline materials:

- ▶ Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue.

Alkalis continue to cause damage after exposure. INGESTION:

Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- Neutralising agents should never be given since exothermic heat reaction may compound injury.
- * Catharsis and emesis are absolutely contra-indicated.
- * Activated charcoal does not absorb alkali.
- * Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- ▶ Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE

Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

Excellent warning properties force rapid escape of personnel from chlorine vapour thus most inhalations are mild to moderate. If escape is not possible, exposure to high concentrations for a very short time can result in dyspnea, haemophysis and cyanosis with later complications being tracheobroncho-pneumonitis and pulmonary oedema. Oxygen, intermittent positive pressure breathing apparatus and aerosolysed bronchodilators are of therapeutic value where chlorine inhalation has been light to moderate. Severe inhalation should result in hospitalisation and treatment for a respiratory emergency.

Any chlorine inhalation in an individual with compromised pulmonary function (COPD) should be regarded as a severe inhalation and a respiratory emergency. [CCINFO, Dow 1988] Effects from exposure to chlorine gas include pulmonary oedema which may be delayed. Observation in hospital for 48 hours is recommended

Diagnosed asthmatics and those people suffering from certain types of chronic bronchitis should receive medical approval before being employed in occupations involving chlorine exposure.

If burn is present, treat as any thermal burn, after decontamination.

Depending on the degree of exposure, periodic medical examination is indicated. The symptoms of lung oedema often do not manifest until a few hours have passed and they are aggravated by physical effort. Rest and medical observation is therefore essential. Immediate administration of an appropriate spray, by a doctor or a person authorised by him/her should be considered

(ICSC24419/24421

SECTION 5 Firefighting measures

5.1. Extinguishing media

- Water spray or fog.
- Foam
- Dry chemical powder.

5.2. Special hazards arising from the substrate or mixture

Fire Incompatibility

None known.

5.3. Advice for firefighters

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Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course.
Fire/Explosion Hazard	 Non combustible. Not considered a significant fire risk, however containers may burn. May emit corrosive fumes.

SECTION 6 Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

See section 8

6.2. Environmental precautions

See section 12

6.3. Methods and material for containment and cleaning up

Minor Spills	 Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. Check regularly for spills and leaks. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment.
Major Spills	 Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus.

6.4. Reference to other sections

Personal Protective Equipment advice is contained in Section 8 of the SDS.

SECTION 7 Handling and storage

7.1. Precautions for safe handling

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Safe handling	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. 		
Fire and explosion protection	See section 5		
Other information	Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. DO NOT store near acids, or oxidising agents No smoking, naked lights, heat or ignition sources.		

7.2. Conditions for safe storag	e, including any incompatibilities			
Suitable container	Liquid inorganic hypochlorites shall not to be transported in unlined metal drums. Inner packagings shall be fitted with vented closures and plastics drums and carboys shall have vented closures or be performance tested to a minimum of 250 kPa. All non-vented packagings shall be filled so that the ullage is at least 10% at 21-25 deg.C. Lined metal can, lined metal pail/ can. Plastic pail. Polyliner drum. For low viscosity materials Drums and jerricans must be of the non-removable head type. Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt.			
Storage incompatibility	 Contact with acids produces toxic fumes Presence of rust (iron oxide) or other metal oxides catalyses decomposition of inorganic hypochlorites. Contact with water can cause heating and decomposition giving off chlorine and oxygen gases. Solid hypochlorites in contact with water or moisture may generate sufficient heat to ignite combustible materials. Contact with acids produces toxic fumes of chlorine Avoid contact with copper, aluminium and their alloys. 			

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment	
sodium hypochlorite	Inhalation 1.55 mg/m³ (Systemic, Chronic)	0.21 μg/L (Water (Fresh))	

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Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment	
Dermal 0.5 % in mixture (weight basis) (Local, Chronic) Inhalation 1.55 mg/m³ (Local, Chronic) Inhalation 3.1 mg/m³ (Systemic, Acute) Inhalation 3.1 mg/m³ (Local, Acute) Inhalation 1.55 mg/m³ (Systemic, Chronic) * Oral 0.26 mg/kg bw/day (Systemic, Chronic) * Dermal 0.5 % in mixture (weight basis) (Local, Chronic) * Inhalation 1.55 mg/m³ (Local, Chronic) * Inhalation 3.1 mg/m³ (Systemic, Acute) * Inhalation 3.1 mg/m³ (Local, Acute) *		0.042 μg/L (Water - Intermittent release) 0.26 μg/L (Water (Marine)) 4.69 mg/L (STP) 11.1 mg/kg food (Oral)	
sodium hydroxide	Inhalation 1 mg/m³ (Local, Chronic) Inhalation 1 mg/m³ (Local, Chronic) *	Not Available	
sodium xylenesulfonate	Not Available	0.23 mg/L (Water (Fresh)) 0.023 mg/L (Water - Intermittent release) 2.3 mg/L (Water (Marine)) 0.862 mg/kg sediment dw (Sediment (Fresh Water)) 0.086 mg/kg sediment dw (Sediment (Marine)) 0.037 mg/kg soil dw (Soil) 100 mg/L (STP)	
lauryldimethylamine oxide	Dermal 11 mg/kg bw/day (Systemic, Chronic) Inhalation 6.2 mg/m³ (Systemic, Chronic) Dermal 5.5 mg/kg bw/day (Systemic, Chronic) * Inhalation 1.53 mg/m³ (Systemic, Chronic) * Oral 0.44 mg/kg bw/day (Systemic, Chronic) *	0.034 mg/L (Water (Fresh)) 0.003 mg/L (Water - Intermittent release) 0.034 mg/L (Water (Marine)) 5.24 mg/kg sediment dw (Sediment (Fresh Water)) 0.524 mg/kg sediment dw (Sediment (Marine)) 1.02 mg/kg soil dw (Soil) 24 mg/L (STP) 11.1 mg/kg food (Oral)	

^{*} Values for General Population

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
UK Workplace Exposure Limits (WELs)	sodium hydroxide	Sodium hydroxide	Not Available	2 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
sodium hypochlorite	13 mg/m3	140 mg/m3	290 mg/m3
sodium hypochlorite	2 mg/m3	290 mg/m3	1,800 mg/m3
sodium hydroxide	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
sodium hypochlorite	Not Available	Not Available
sodium hydroxide	10 mg/m3	Not Available
sodium xylenesulfonate	Not Available	Not Available
lauryldimethylamine oxide	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating Occupational Exposure Band Limit		
sodium xylenesulfonate	E	≤ 0.01 mg/m³	
Notes:	Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the		

adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

8.2. Exposure controls

8.2.1. Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

8.2.2. Personal protection











Eye and face protection

- ► Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.
- ▶ Chemical goggles.whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.
- Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.

Skin protection

See Hand protection below

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Hands/feet protection	 Elbow length PVC gloves When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.
Body protection	See Other protection below
Other protection	 Overalls. PVC Apron. PVC protective suit may be required if exposure severe.

Respiratory protection

- ▶ Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- ▶ Use approved positive flow mask if significant quantities of dust becomes airborne.
- ► Try to avoid creating dust conditions.

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties

9.1. Information on basic physical and chemical properties

Appearance	Not Available		
Physical state	Liquid	Relative density (Agua= 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	14	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	100	Molecular weight (g/mol)	Not Available
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	1.60	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

9.2. Other information

Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2
10.2. Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
10.3. Possibility of hazardous reactions	See section 7.2
10.4. Conditions to avoid	See section 7.2
10.5. Incompatible materials	See section 7.2
10.6. Hazardous decomposition products	See section 5.3

SECTION 11 Toxicological information

11.1. Information on toxicological effects

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The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane. Inhaled The material has NOT been classified by EC Directives or other classification systems as "harmful by inhalation". This is because of the lack of corroborating animal or human evidence. Ingestion of alkaline corrosives may produce burns around the mouth, ulcerations and swellings of the mucous membranes, profuse saliva production, with an inability to speak or swallow. Both the oesophagus and stomach may experience burning pain; vomiting and diarrhoea may follow. The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence Ingestion Swallowing hypochlorites may cause burning in the mouth and throat, abdominal cramps, nausea, vomiting, diarrhea, pain, inflammation f the mouth and stomach, low blood pressure, shock, confusion and delirium. Severe poisonings may lead to convulsion, coma and death Hypochlorites irritate the mouth, throat and stomach; the hypochlorous acid liberated in the stomach can cause tearing of the stomach wall, with bleeding, and can be fatal. The material can produce severe chemical burns within the oral cavity and gastrointestinal tract following ingestion. The material can produce severe chemical burns following direct contact with the skin. Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep Skin Contact Contact may cause severe itchiness, skin lesions and mild eczema. Exudation and sloughing may occur. Two patients were reported with chronic allergic dermatitis of the hand, related to sensitization to sodium hypochlorite as the active component of laundry bleach Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected. If applied to the eyes, this material causes severe eye damage. Direct eye contact with corrosive bases can cause pain and burns. There may be swelling, epithelium destruction, clouding of the cornea and inflammation of the iris. Mild cases often resolve; severe cases can be prolonged with complications such as persistent swelling, scarring, permanent cloudiness, bulging of the eye, cataracts, eyelids glued to the eyeball and blindness. Hypochlorite in pool water at concentrations of 1 ppm chlorine or less is non irritating to eyes if the pH is higher than 7.2 (slightly alkaline); At Eve lower pH sensation of stinging, smarting of eyes with transient reddening may occur but generally no injury. Eye contact with a 5% hypochlorite solution may produce a temporary burning discomfort and slight irritation of the epithelium of the cornea, but without injury The material can produce severe chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Chronic Reduced breathing capacity may result from chronic low level exposure to chlorine gas. Chronic poisoning may result in cough, severe chest pains, sore throat and blood in the phlegm. Moderate to severe exposures over 3 years produced decreased lung capacity in a number of There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment. TOXICITY IRRITATION Fiberlock 8317 Instant Mold Stain Remove Oral (Human)LC50: 0 mg/kg^[2] Not Available TOXICITY IRRITATION Dermal (rabbit) LD50: >10000 mg/kg^[1] Eye (rabbit): 10 mg - moderate sodium hypochlorite Inhalation(Rat) LC50; >2.625 mg/l4[1] Eye (rabbit): 100 mg - moderate Oral(Rat) LD50; >237 mg/kg[1] Skin (rabbit): 500 mg/24h-moderate TOXICITY IRRITATION Dermal (rabbit) LD50: 1350 mg/kg^[2] Eye (rabbit): 0.05 mg/24h SEVERE Eye (rabbit):1 mg/24h SEVERE Oral(Rabbit) LD50; 325 mg/kg^[1] Eye (rabbit):1 mg/30s rinsed-SEVERE sodium hydroxide Eye: adverse effect observed (irritating)^[1] Skin (rabbit): 500 mg/24h SEVERE Skin: adverse effect observed (corrosive)[1] IRRITATION TOXICITY Oral(Rat) LD50; >10 mg/kg[2] Eye: adverse effect observed (irritating)^[1] sodium xylenesulfonate Skin: no adverse effect observed (not irritating)^[1] TOXICITY IRRITATION dermal (rat) LD50: >2000 mg/kg[1] Eve (rabbit): 50 ug/24h - SEVERE lauryldimethylamine oxide Skin (rabbit): 2 mg/24h - SEVERE Oral(Rat) LD50; >600 mg/kg[1] 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise Legend:

specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

as sodium hypochlorite pentahydrate

SODIUM HYPOCHLORITE

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Mutagenicity	×	Aspiration Hazard	×	
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×	
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✓	
Skin Irritation/Corrosion	✓	Reproductivity	×	
Acute Toxicity	×	Carcinogenicity	×	
SODIUM HYDROXIDE & LAURYLDIMETHYLAMINE OXIDE	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.			
Fiberlock 8317 Instant Mold Stain Remover & SODIUM HYPOCHLORITE	Hypochlorite salts are classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing. Hypochlorite salts are extremely corrosive and can cause severe damage to the eyes and skin. A number of skin cancers have been observed in mice, when applied to their skin.			
Fiberlock 8317 Instant Mold Stain Remover & SODIUM XYLENESULFONATE	For alkyl sulfates; alkane sulfonates and alpha-olefin sulfonates Most chemicals of this category are not defined substances, but mixtures of homologues with different alkyl side chains. Common physical and/or biological pathways result in structurally similar breakdown products, and are, together with the surfactant properties, responsible for similar environmental behavior and essentially identical hazard profiles with regard to human health. Acute toxicity: These substances are well absorbed after ingestion; penetration through the skin is however, poor. After absorption, these chemicals are distributed mainly to the liver. In animals, signs of poisoning by mouth include lethargy, hair standing up, decreased motor activity and breathing rate, and diarrhea.			
Fiberlock 8317 Instant Mold Stain Remover & SODIUM HYPOCHLORITE & SODIUM HYDROXIDE & SODIUM XYLENESULFONATE & LAURYLDIMETHYLAMINE OXIDE	Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant.			
LAURYLDIMETHYLAMINE OXIDE	Amine oxides are readily metabolised and excreted af reversible irritation of the eyes, skin and airways. They		rtality or skin sensitization on exposure but caused	
SODIUM XYLENESULFONATE	No significant acute toxicological data identified in literature search. Toxicological data is available and well documented for representative toluene, xylene and cumene sulfonates (including sodium, potassium, ammounium and calcium salts). These data show that hydrotropes have low toxicity for all routes, do not cause genetic damage, show no evidence of causing cancer in long-term skin studies, and have not caused birth defects, developmental defects or reduced fertility.			
	The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.			

Legend:

X − Data either not available or does not fill the criteria for classification
✓ − Data available to make classification

SECTION 12 Ecological information

12.1 Toxicity

Shanlaah 0247 In stant 24 : 1 1	Endpoint	Test Duration (hr)	Species	Value	Source
Fiberlock 8317 Instant Mold Stain Remover	Not Available Not Available		Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	72	Fish	<0.001mg/L	4
	LC50	96	Fish	<0.001mg/L	4
sodium hypochlorite	EC50	48	Crustacea	<0.001mg/L	4
	EC50	72	Algae or other aquatic plants	0.018mg/l	2
	EC50	96	Algae or other aquatic plants	~0.1~0.4mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48	Crustacea	34.59-47.13mg/l	4
sodium hydroxide	LC50	96	Fish	0.204mg/L	4
	NOEC(ECx)	16	Crustacea	0.393mg/L	4
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48	Crustacea	>400mg/l	1
sodium xylenesulfonate	NOEC(ECx)	96 Algae or other aquatic plants		31mg/l	2
	EC50	96	Algae or other aquatic plants	>=230mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48	Crustacea	2.9mg/l	2
lauryldimethylamine oxide	LC50	96	Fish	2.4mg/l	2
	EC50	72	Algae or other aquatic plants	0.015mg/l	2

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Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For Chlorine:

Atmospheric Fate: Atmospheric chlorine forms hydrochloric or hypochlorous acid in the atmosphere, either through reactions with hydroxyl radicals or, other trace species, such as hydrocarbons. These acids are believed to be removed from the atmosphere primarily through precipitation washout/dry deposition. When chlorine, hypochlorous acid or hydrogen chloride mixes in the atmosphere with water vapor, dilute solutions of strong mineral acids form which fall to earth as "acid rain", snow, fog, or acidified dry particles.

In freshwater, the hypchlorites break down rapidly into non-toxic compounds when exposed to sunlight. While chlorine levels decline rapidly In seawater, hypobromite (which is acutely toxic to aquatic organisms) is formed. Sodium and calcium hypochlorite exhibit low levels of toxicity to birds, but they are highly toxic to freshwater fish and invertebrates. Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium hydroxide	LOW	LOW
lauryldimethylamine oxide	LOW	LOW

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation
sodium hydroxide	LOW (LogKOW = -3.8796)
lauryldimethylamine oxide	HIGH (LogKOW = 4.673)

12.4. Mobility in soil

Ingredient	Mobility
sodium hydroxide	LOW (KOC = 14.3)
lauryldimethylamine oxide	LOW (KOC = 18660)

12.5.Results of PBT and vPvB assessment

	P	В	Т
Relevant available data	Not Applicable	Not Applicable	Not Applicable
PBT Criteria fulfilled?	Not Applicable	Not Applicable	Not Applicable

12.6. Other adverse effects

No data available

SECTION 13 Disposal considerations

13.1. Waste treatment methods

Product / Packaging disposal

- ► Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.

- DO NOT allow wash water from cleaning or process equipment to enter drains
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Treat and neutralise at an approved treatment plant.

Waste treatment options Not Available

Sewage disposal options Not Available

SECTION 14 Transport information

Labels Required



Marine Pollutant



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HAZCHEM	2X				
	2/				
Land transport (ADR-RID) 14.1. UN number	1791				
14.2. UN proper shipping					
name	HYPOCHLORITE SOLUTION				
14.3. Transport hazard	Class 8				
class(es)	Subrisk Not Applic	able			
14.4. Packing group	III				
14.5. Environmental hazard	Environmentally hazardo	ous			
	Hazard identification (Kemler) 80			
	Classification code	C9			
14.6. Special precautions for	Hazard Label	8			
user	Special provisions	521			
	Limited quantity	5 L			
	Tunnel Restriction Cod	de 3 (E)			
Air transport (ICAO IATA / DGE	2)				
Air transport (ICAO-IATA / DGF	1791				
14.1. UN number 14.2. UN proper shipping					
name	Hypochlorite solution				
440 Tanners and the	ICAO/IATA Class	8			
14.3. Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable			
	ERG Code	8L			
14.4. Packing group	III				
14.5. Environmental hazard	Environmentally hazardo	ous			
	Special provisions		A3 A803		
	Cargo Only Packing Instructions		856		
	Cargo Only Maximum Qty / Pack		60 L		
14.6. Special precautions for user	Passenger and Cargo	Packing Instructions		852	
	Passenger and Cargo	Maximum Qty / Pack		5 L	
	Passenger and Cargo Limited Quantity Packing Instructions		king Instructions	Y841	
	Passenger and Cargo Limited Maximum Qty / Pack		1 L		
Sea transport (IMDG-Code / GC	GVSee)				
14.1. UN number	1791				
14.2. UN proper shipping name	HYPOCHLORITE SOLUTION				
	IMDG Class 8				
14.3. Transport hazard class(es)		Applicable			
14.4. Packing group 14.5. Environmental hazard	III Marine Pollutant				
14.5. Environmental nazaru					
14.6. Special precautions for	EMS Number	F-A , S-B			
user	Special provisions 223 274 900 Limited Quantities 5 L				
	Limited Quantities	JL			
Inland waterways transport (Al	DN)				
14.1. UN number	1791				
14.2. UN proper shipping name	HYPOCHLORITE SOLU	TION			
14.3. Transport hazard class(es)	8 Not Applicable				
14.4. Packing group	III				
14.5. Environmental hazard	Environmentally hazardo	ous			
	Classification code	C9			
14.6. Special precautions for	Special provisions	521			
user	Limited quantity	5 L			

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PP, EP Equipment required Fire cones number 0

14.7. Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

14.8. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
sodium hypochlorite	Not Available
sodium hydroxide	Not Available
sodium xylenesulfonate	Not Available
lauryldimethylamine oxide	Not Available

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
sodium hypochlorite	Not Available
sodium hydroxide	Not Available
sodium xylenesulfonate	Not Available
lauryldimethylamine oxide	Not Available

SECTION 15 Regulatory information

15.1. Safety, health and environmental regulations / legislation specific for the substance or mixture

······································				
sodium hypochlorite is found on the following regulatory lists				
Europe EC Inventory	European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and			
European Union - European Inventory of Existing Commercial Chemical Substances	Packaging of Substances and Mixtures - Annex VI			
(EINECS)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs			
sodium hydroxide is found on the following regulatory lists				
Europe EC Inventory	European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and			
European Union - European Inventory of Existing Commercial Chemical Substances	Packaging of Substances and Mixtures - Annex VI			
(EINECS)	UK Workplace Exposure Limits (WELs)			
sodium xylenesulfonate is found on the following regulatory lists				
Europe EC Inventory	European Union - European Inventory of Existing Commercial Chemical Substances			
	(EINECS)			
lauryldimethylamine oxide is found on the following regulatory lists				
Europe EC Inventory	European Union - European Inventory of Existing Commercial Chemical Substances			
Europe Eo inventory	(EINECS)			

This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable - : Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, -2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

ECHA SUMMARY

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (sodium hypochlorite; sodium hydroxide; sodium xylenesulfonate; lauryldimethylamine oxide)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (lauryldimethylamine oxide)
Vietnam - NCI	Yes
Russia - FBEPH	Yes

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National Inventory	Status	
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)	

SECTION 16 Other information

Revision Date	03/29/2021
Initial Date	05/21/2017

CONTACT POINT

PLEASE NOTE THAT TITANIUM DIOXIDE IS NOT PRESENT IN CLEAR OR NEUTRAL BASES

Full text Risk and Hazard codes

H315	Causes skin irritation.	
H318	Causes serious eye damage.	
H319	Causes serious eye irritation.	
H410	Very toxic to aquatic life with long lasting effects.	

SDS Version Summary

Version	Issue Date	Sections Updated
4.7.1.1.1	03/29/2021	Classification, Ingredients

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios.

For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 166 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average

PC-STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

IDLH: Immediately Dangerous to Life or Health Concentrations

ES: Exposure Standard

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value

LOD: Limit Of Detection

OTV: Odour Threshold Value

BCF: BioConcentration Factors

BEI: Biological Exposure Index

AIIC: Australian Inventory of Industrial Chemicals

DSL: Domestic Substances List

NDSL: Non-Domestic Substances List

IECSC: Inventory of Existing Chemical Substance in China

EINECS: European INventory of Existing Commercial chemical Substances

ELINCS: European List of Notified Chemical Substances

NLP: No-Longer Polymers

ENCS: Existing and New Chemical Substances Inventory

KECI: Korea Existing Chemicals Inventory

NZIoC: New Zealand Inventory of Chemicals

PICCS: Philippine Inventory of Chemicals and Chemical Substances

TSCA: Toxic Substances Control Act

TCSI: Taiwan Chemical Substance Inventory

INSQ: Inventario Nacional de Sustancias Químicas

NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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