PROKLENE FLOC PLUS

Auto Klene Solutions

Chemwatch: **73-5411**Version No: **6.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: 26/09/2024 Print Date: 01/10/2024

S.GHS.AUS.EN

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

Product Identifier	
Product name	PROKLENE FLOC PLUS
Chemical Name	Not Applicable
Synonyms	Not Available
Chemical formula	Not Applicable
Other means of identification	Not Available
Relevant identified uses of the s	substance or mixture and uses advised against
Relevant identified uses	Water Treatment Coagulant.
Details of the supplier of the saf	ety data sheet
Registered company name	Auto Klene Solutions
Address	51/885 Mountain Hwy Bayswater VIC 3153
Telephone	+61 3 8761 1900
Fax	+61 3 8761 1955
Website	http://www.autoklene.com/msds/
Email	Not Available
Emergency telephone number	
Association / Organisation	Auto Klene Solutions
Emergency telephone numbers	131 126 (Poisons Information Centre)
Other emergency telephone numbers	0800 764 766 (New Zealand Poisons Information Centre)
SECTION 2 Hazards identifie	cation

Classification of the substance or mixture

HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

ChemWatch Haza	ard Ratings	
	MinMax	c i
Flammability	0	_
Toxicity	1	0 = Minimum
Body Contact	2	1 = Low
Reactivity	0	2 = Moderate
Chronic	0	3 = High 4 = Extreme

Poisons Schedule	Not Applicable
Classification ^[1]	Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A, Chronic Aquatic Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)





Signal word

Warning

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azard statement(s)		
H315	Causes skin irritation.	
Н319	Causes serious eye irritation.	
		Page 1 continued
H410	Very toxic to aquatic life with long lasting effects.	
recautionary statement(s) Prev	rention	
P273	Avoid release to the environment.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	
recautionary statement(s) Resp	ponse	
P321	Specific treatment (see advice on this label).	
P362	Take off contaminated clothing and wash before reuse.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rin	sing.
P337+P313	If eye irritation persists: Get medical advice/attention.	
P391	Collect spillage.	
P302+P352	IF ON SKIN: Wash with plenty of water.	
	If skin irritation occurs: Get medical advice/attention.	

Substances

See section below for composition of Mixtures

P501

SECTION 3 Composition / information on ingredients

Precautionary statement(s) Disposal

Mixtures

CAS No	%[weight]	Name
1327-41-9	10-30	aluminium hydroxide chloride
7732-18-5	balance	water

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

SECTION 4 First aid measures

Description of first aid measure	us .
	If this product comes in contact with the eyes:
	▶ Wash out immediately with fresh running water.
Eye Contact	▶ 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.
	▶ Seek medical attention without delay; if pain persists or recurs seek medical attention.
	▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
	If skin contact occurs:
Skin Contact	▶ Immediately remove all contaminated clothing, including footwear.
Skill Contact	▶ Flush skin and hair with running water (and soap if available).
	▶ Seek medical attention in event of irritation.
Inhalation	▶ If fumes, aerosols or combustion products are inhaled remove from contaminated area. ▶ Other measures are usually unnecessary.

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▶ 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. Figive water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice.

Indication of any immediate medical attention and special treatment needed

- Manifestation of aluminium toxicity include hypercalcaemia, anaemia, Vitamin D refractory osteodystrophy and a progressive encephalopathy (mixed dysarthria-apraxia of speech, asterixis, tremulousness, myoclonus, dementia, focal seizures). Bone pain, pathological fractures and proximal myopathy can occur.
- ▶ Symptoms usually develop insidiously over months to years (in chronic renal failure patients) unless dietary aluminium loads are excessive.
- Serum aluminium levels above 60 ug/ml indicate increased absorption. Potential toxicity occurs above 100 ug/ml and clinical symptoms are present when levels exceed 200
- ▶ Deferoxamine has been used to treat dialysis encephalopathy and osteomalacia. CaNa2EDTA is less effective in chelating aluminium. [Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 Firefighting measures

Extinguishing media

- There is no restriction on the type of extinguisher which may be used.
 Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	 ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves in the event of a fire. ▶ Prevent, by any means available, spillage from entering drains or water courses. ▶ Use fire fighting procedures suitable for surrounding area. ▶ DO NOT approach containers suspected to be hot. ▶ Cool fire exposed containers with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	▶ Non combustible. ▶ Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: hydrogen chloride May emit poisonous fumes. May emit corrosive fumes.
HAZCHEM	Not Applicable

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

▶ Clean up all spills immediately.

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills

▶ Avoid breathing vapours and contact with skin and eyes.
▶ Control personal contact with the substance, by using protective equipment. ▶
Contain and absorb spill with sand, earth, inert material or vermiculite.
▶ Wipe up.

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Moderate hazard.

In Clear area of personnel and move upwind.

In Alert Fire Brigade and tell them location and nature of hazard.

In Wear breathing apparatus plus protective gloves.

In Prevent, by any means available, spillage from entering drains or water course.

In Stop leak if safe to do so.

► Contain spill with sand, earth or vermiculite.

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

SECTION 7 Handling and storage

Precautions for safe handling	
Safe handling	 ▶ DO NOT allow clothing wet with material to stay in contact with skin ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Avoid contact with moisture. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use.
Other information	 ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.
Conditions for safe storage, incl	uding any incompatibilities
Suitable container	 ▶ Polyethylene or polypropylene container. ▶ Packing as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	▶Avoid strong acids, bases.
SECTION 8 Exposure contro	ls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	aluminium hydroxide chloride	Aluminium, soluble salts (as Al)	2 mg/m3	Not Available	Not Available	Not Available
Emergency Limits						
Ingredient	Material name	TEEL-1	TEEL-2		TEEL-3	
Ingredient	Material name	TEEL-1	TEEL-2		TEEL-3	
PAC30	Not Available	Not Available	Not Availab	le	Not Available	

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Ingredient	Original IDLH	Revised IDLH	
aluminium hydroxide chloride	Not Available Not Available		
water	Not Available Not Available		
Exposure controls			
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. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use. Employers may need to use multiple types of controls to prevent employee overexposure.		
Personal protection			
Eye and face protection	 ▶ Safety glasses with side shields. ▶ Chemical goggles. ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. 		
Skin protection	See Hand protection below		
Hands/feet protection	▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.		
Body protection	See Other protection below		
Other protection	 ▶ Overalls. ▶ P.V.C apron. ▶ Barrier cream. ▶ Skin cleansing cream. 		

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the: **"Forsberg Clothing Performance Index".**The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

▶ Eye wash unit.

Material	СРІ
BUTYL	A
NEOPRENE	A
VITON	A
NATURAL RUBBER	С
PVA	С

^{*} CPI - Chemwatch Performance Index

C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation.

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A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which mightotherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

SECTION 9 Physical and chemical properties

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Appearance	Tan coloured liquid; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	0.9
Odour	Not Available	Partition coefficient n- octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	2.5-3.5	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
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)	Not Available	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

See section 7
 ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
See section 7
See section 7
See section 7
See section 5

SECTION 11 Toxicological information

Information on toxicological effects		
Inhaled	The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.	
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual.	

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ALUMINIUM HYDROXIDE CHLORIDE	12042-91-0 Substance [CAS RN 1327-41-9] has been investigated as a reproductive effector in rats. Aluminium compounds are widely used in antiperspirants without harmful effects to the skin Some people, however, are unusually sensitive to topically applied aluminium compounds. Skin irritation was reported in subjects following the application of aluminium chloride hexahydrate in ethanol used for the treatment of axillary or palmar hyperhidrosis (excessive sweating) or the use of a crystal deodorant containing alum Aluminium in antiperspirants is thought to work by (a) precipitating inside the eccrine sweat ducts as insoluble aluminium hydroxide, and (b) altering sweating by either a direct constrictor effect on the eccrine duct lumen or via an anticholinergic action.		
Legend:	Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances Oral (rat) LD50: 9187 mg/kg [Hoechst] Skin (human) 150 mg/3d-I Mild for RTEC No.: BD 0549500 for RTEC No.: BD 0550000 CAS RN:		
	Oral(Rat) LD50; >90 mg/kg ^[2]	Not Available	
water	TOXICITY	IRRITATION	
	Oral(Rat) LD50; >300-<2000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) ^[1]	
aluminium hydroxide chloride	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]	
	TOXICITY	IRRITATION	
	Not Available	Not Available	
PAC30	TOXICITY	IRRITATION	
Chronic	Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Exposure to large doses of aluminium has been connected with the degenerative brain disease Alzheimer's Disease. There are reports of lung damage due to excessive inhalation of alumina dust. Ingestion of large amounts of aluminium hydroxide for prolonged periods may cause phosphate depletion, especially if phosphate intake is low. This may cause loss of appetite, muscle weakness, muscular disease and even softening of the bones. These effects have not been reported in people occupationally exposed to aluminium hydroxide.		
Eye	This material can cause eye irritation and damage in so	<u> </u>	
Skin Contact	The material may accentuate any pre-existing dermatitis condition 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. The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.		

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For cosmetic uses of aluminium, the majority would be applied in formulations where the aluminium would be insoluble, which means that very little of the applied aluminium might be bioaccessible for skin absorption. The notable exception being antiperspirants where the aluminium is soluble at low pH in the formulation, before being rendered insoluble as it is neutralised by the sweat on the skin's surface and within the sweat ducts.

There are limited human data on the dermal absorption of aluminium. Aluminium compounds are common additives in underarm antiperspirants. The active ingredient is usually an aluminium chlorohydrate salt, which is thought to form an obstructive plug of aluminium hydroxide within the sweat duct A preliminary study of the dermal absorption of aluminium from antiperspirants using aluminum-26 has been performed. After repeated exposure for 6 days to aluminium chlorohydrate 21 % (about 13 mg of aluminium) to each axilla under occlusive dressing in two volunteers (one man and a woman), on skin previously tape stripped twice,

blood and urine samples were collected. Aluminium was detected in the blood 6 hours after the first application and remained detectable for 15 days. The results of this study estimate that the proportion of aluminium is absorbed averaged 0.012% The shortcomings of this study are that it was not done in accordance with good practice (GCP) and it was performed using only 2 volunteers.

A case of hyperaluminaemia 3.88 +/- 0.07 umol/L) in a 43-year-old woman who applied about 1g of an aluminium chlorhydrate-containing antiperspirant cream on each shaved underarm every morning for 4 years was reported A decrease in aluminium concentration in plasma and urine was observed, reaching the reference range in the third (for urine) and eighth (for plasma) month after antiperspirant use was discontinued. Beside this case report, for which only brief details are available, thereis no evidence for a link between hyperaluminaemia and antiperspirant uses.

Based on the observation of a high incidence of breast cancer in the upper outer quadrant adjacent to the usual area of application of deodorants and/or antiperspirants, some scientific teams have advanced the hypothesis of a possible link between antiperspirants and breast cancer.

Aluminium was measured in human breast tissue in a study which separated a tissue component from the fat.

As cationic polymers possess unique physical structures and surface properties, various kinds of cationic polymers have been developed over the past few decades for a wide spectrum of nanomedical applications in the central nervous system (CNS). Although cationic polymers could be successfully used for gene transfer, drug delivery, and diagnostic imaging, after entering into the CNS, they may cause neurotoxicity and induce CNS damage, which seriously limits their applications. The neurotoxic effects of cationic polymers on CNS are mostly studied in mice, and have not been examined in detail.

While evaluating the neurotoxicity of cationic polymers, the surface charge, surface area, coating, size, shape, and the basic materials that cationic polymers are made up of are expected to show important roles, and should be carefully considered. Apoptosis, necrosis, autophagy, oxidative stress, inflammation, and inflammasome; which are expected to be the most important problems in the evaluation of cationic polymersinduced neurotoxicity. For aluminium compounds:

Aluminium present in food and drinking water is poorly absorbed through the gastrointestinal tract. The bioavailability of aluminium is dependent on the form in which it is ingested and the presence of dietary constituents with which the metal cation can complex Ligands in food can have a marked effect on absorption of aluminium, as they can either enhance uptake by forming absorbable (usually water soluble) complexes (e.g., with carboxylic acids such as citric and lactic), or reduce it by forming insoluble compounds (e.g., with phosphate or dissolved silicate). Considering the available human and animal data it is likely that the oral absorption of aluminium can vary 10-fold based on chemical form alone. Although bioavailability appears to generally parallel water solubility, insufficient data are available to directly extrapolate from solubility in water to bioavailability.

For oral intake from food, the European Food Safety Authority (EFSA) has derived a tolerable weekly intake (TWI) of 1 milligram (mg) of aluminium per kilogram of bodyweight. In its health assessment, the EFSA states a medium bioavailability of 0.1 % for all aluminium compounds which are ingested with food. This corresponds to a systemically available tolerable daily dose of 0.143 microgrammes (µg) per kilogramme (kg) of body weight. This means that for an adult weighing 60 kg, a systemically available dose of 8.6 µg per day is considered safe.

Based on a neuro-developmental toxicity study of aluminium citrate administered via drinking water to rats, the Joint FAO/WHO Expert Committee on Food Additives (JECFA) established a Provisional Tolerable Weekly Intake (PTWI) of 2 mg/kg bw (expressed as aluminium) for all aluminium compounds in food, including food additives. The Committee on Toxicity of chemicals in food, consumer products and the environment (COT) considers that the derivation of this PTWI was sound and that it should be used in assessing potential risks from dietary exposure to aluminium.

The Federal Institute for Risk Assessment (BfR) of Germany has assessed the estimated aluminium absorption from antiperspirants.

The material may cause 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.

WATER	No significant acute toxicological data identified in literature search.		
Acute Toxicity	×	Carcinogenicity	
Skin Irritation/Corr osion		Reproductivity	
Serious Eye Damage/Irritation		STOT - Single Exposure	
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×
Mutagenicity	×	Aspiration Hazard	×

Legend: X – Data either not available or does not fill the criteria for classification

– Data available to make classification

SECTION 12 Ecological information

Toxicity

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PAC30	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
aluminium	LC50	96	Fish	>0.42mg/L	2
hydroxide chloride	EC50	48	Crustacea	0.33mg/L	2
	EC50	96	Algae or other aquatic plants	0.0054mg/L	2
	NOEC	168	Crustacea	>0.012mg/L	2
water	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
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				

Ingredient	Persistence: Water/Soil	Persistence: Air
water	LOW	LOW

Bioaccumulat ive potential

Ingredient	Bioaccumulation
water	LOW (LogKOW = -1.38)

Mobility in soil

Ingredient	Mobility
g. calciit	mosimy

water	LOW (KOC = 14.3)

SECTION 13 Disposal considerations

Waste treatment methods

▶ Recycle wherever possible.

Product / Packaging disposal

- ▶ 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.
- ▶ Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or incineration in a licensed apparatus (after admixture with suitable combustible material).
- ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 Transport information

Labels Required

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Marine Pollutant



HAZCHEM

CHEM Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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

Not Applicable

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

Product name	Group		
aluminium hydroxide chloride	Not Available		
water	Not Available		
Transport in bulk in accordance	Transport in bulk in accordance with the ICG Code		
Product name	Ship Type		
aluminium hydroxide chloride	Not Available		
water	Not Available		

SECTION 15 Regulatory information

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

aluminium hydroxide chloride is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

water is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes

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National Inventory	Status		
Canada - NDSL	No (aluminium hydroxide chloride; water)		
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	Yes		
Vietnam - NCI	Yes		
Russia - ARIPS	Yes		
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	26/09/2024
Initial Date	09/01/2017

SDS Version Summary

Version	Issue Date	Sections Updated
2.1.1.1	09/01/2017	Acute Health (eye), Acute Health (skin), Acute Health (swallowed), Advice to Doctor, Chronic Health, Classification, Disposal, Environmental, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), Fire Fighter (fire fighting), First Aid (inhaled), First Aid (skin), First Aid (swallowed), Personal Protection (other), Personal Protection (eye), Personal Protection (hands/feet), Spills (major), Spills (minor), Storage (storage incompatibility), Storage (storage requirement), Storage (suitable container), Transport, Transport Information
6.1.1.1	26/09/2024	One-off system update. NOTE: This may or may not change the GHS classification

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. Scale of use, frequency of use and current or available engineering controls must be considered.

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