

AC Carvup

AXICHEM Pty Ltd

Chemwatch: 5166-26

Version No: 5.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 23/12/2022

Print Date: 06/07/2023

L.GHS.AUS.EN

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

Product Identifier

Product name	AC Carvup
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S.
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	For the control of annual (Wimmera) ryegrass and certain broadleaved weeds in the winter cereal crops.
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Details of the manufacturer or supplier of the safety data sheet

Registered company name	AXICHEM Pty Ltd
Address	9 Palings Court Nerang QLD 4211 Australia
Telephone	07 5596 1736
Fax	Not Available
Website	www.axichem.com.au
Email	msds@axichem.com.au

Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone numbers	+61 1800 951 288
Other emergency telephone numbers	+61 3 9573 3188

Once connected and if the message is not in your preferred language then please dial 01

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	S5
Classification [1]	Serious Eye Damage/Eye Irritation Category 1, Hazardous to the Aquatic Environment Long-Term 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	Danger

Hazard statement(s)

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

Precautionary statement(s) Prevention

P280	Wear protective gloves, protective clothing, eye protection and face protection.
P273	Avoid release to the environment.

Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P391	Collect spillage.

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
64902-72-3	75	<u>chlorsulfuron</u>
Not Available		(750 g/kg)
Not Available	25	inerts

Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Wash out immediately with fresh 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. ▶ 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.
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	<ul style="list-style-type: none"> ▶ If fumes, aerosols or combustion products are inhaled remove from contaminated area. ▶ Other measures are usually unnecessary.
Ingestion	<ul style="list-style-type: none"> ▶ 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. ▶ 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.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

- Water spray or fog.
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.

Special hazards arising from the substrate or mixture

Fire Incompatibility	<ul style="list-style-type: none"> ▸ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ Wear breathing apparatus plus protective gloves. ▸ Prevent, by any means available, spillage from entering drains or water courses. ▸ Use water delivered as a fine spray to control fire and cool adjacent 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. ▸ Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▸ Solid which exhibits difficult combustion or is difficult to ignite. ▸ Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. ▸ Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited; once initiated larger particles up to 1400 microns diameter will contribute to the propagation of an explosion. ▸ A dust explosion may release large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people. ▸ Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type. ▸ Dry dust can also be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport. ▸ Build-up of electrostatic charge may be prevented by bonding and grounding. ▸ Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting. ▸ All movable parts coming in contact with this material should have a speed of less than 1-metre/sec. <p>Decomposition may produce toxic fumes of:</p> <ul style="list-style-type: none"> carbon dioxide (CO₂) hydrogen chloride phosgene nitrogen oxides (NO_x) sulfur oxides (SO_x) other pyrolysis products typical of burning organic material.
HAZCHEM	2Z

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<p>Environmental hazard - contain spillage.</p> <ul style="list-style-type: none"> ▸ Remove all ignition sources. ▸ Clean up all spills immediately. ▸ Avoid contact with skin and eyes. ▸ Control personal contact with the substance, by using protective equipment.
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AC Carvup

	<ul style="list-style-type: none"> Use dry clean up procedures and avoid generating dust. Place in a suitable, labelled container for waste disposal.
Major Spills	<p>Environmental hazard - contain spillage. Moderate hazard.</p> <ul style="list-style-type: none"> CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses. Recover product wherever possible. IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal. ALWAYS: Wash area down with large amounts of water and prevent runoff into drains. If contamination of drains or waterways occurs, advise Emergency Services.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<p>Remove all ignition sources.</p> <ul style="list-style-type: none"> Limit all unnecessary personal contact. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. When handling DO NOT eat, drink or smoke. Always wash hands with soap and water after handling. Avoid physical damage to containers. Use good occupational work practice. Observe manufacturer's storage and handling recommendations contained within this SDS.
Other information	<ul style="list-style-type: none"> Store in original containers. Keep containers securely sealed. No smoking, naked lights or ignition sources. 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, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	<ul style="list-style-type: none"> Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Emergency Limits


Ingredient	TEEL-1	TEEL-2	TEEL-3
chlorsulfuron	3.9 mg/m ³	43 mg/m ³	260 mg/m ³

Ingredient	Original IDLH	Revised IDLH
chlorsulfuron	Not Available	Not Available

MATERIAL DATA

Exposure controls

Appropriate engineering controls	General exhaust is adequate under normal operating conditions.
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Individual protection measures, such as personal protective equipment	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with side shields. ▶ Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent] ▶ 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. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ P.V.C apron. ▶ Barrier cream. ▶ Skin cleansing cream. ▶ Eye wash unit.

Respiratory protection

Type -P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	- -	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO₂), G = Agricultural chemicals, K = Ammonia(NH₃), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	White to light tan powder; mixes with water.		
Physical state	Divided Solid	Relative density (Water = 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)	Not Applicable	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	174-178	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available

Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	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	<p>Accidental ingestion of the material may be damaging to the health of the individual.</p> <p>Sulfonamides and their derivatives may precipitate in kidney tubules causing extensive damage. Haemolytic anaemia may also result from use or exposure. Overdose may cause acidosis or hypoglycaemia with confusion and coma resulting. Hypersensitivity reactions may occur in predisposed individuals including those who have been sensitised by topical application. Deaths associated with therapies based on sulfonamide appear to be a result of hypersensitivity reaction, agranulocytosis, aplastic anaemia, other blood dyscrasias and renal and hepatic failure. Doses of 2 to 5 gms have produced toxicity and fatalities. Pathological findings include crystalluria, and necrotic or inflammatory lesions of the heart, liver, kidneys, bone marrow or other organs. Sulfonamides may damage the stem cell which acts as the precursor to components of the blood. Loss of the stem cell may result in pancytopenia (a reduction in the number of red and white blood cells and platelets) with a latency period corresponding to the lifetime of the individual blood cells. Granulocytopenia (a reduction in granular leukocytes) develops within days and thrombocytopenia (a disorder involving platelets), within 1-2 weeks, whilst loss of erythrocytes (red blood cells) need months to become clinically manifest. Aplastic anaemia develops due to complete destruction of the stem cells. Sulfonamides cross the placental barrier, are excreted in the breast milk and may produce adverse effects in the foetus/ embryo and newborn including agranulocytosis, haemolytic anaemia, jaundice and kernicterus.</p>
Skin Contact	<p>The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.</p> <p>Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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.</p>
Eye	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
Chronic	<p>Long term exposure to high dust concentrations may cause changes in lung function (i.e. pneumoconiosis) caused by particles less than 0.5 micron penetrating and remaining in the lung. A prime symptom is breathlessness. Lung shadows show on X-ray.</p> <p>Repeated ingestion of sulfonamides used for therapeutic purposes has caused nausea, vomiting, abdominal pain, diarrhoea, anorexia, stomatitis, impaired folic acid absorption, exacerbation of porphyria, acidosis, liver injury with jaundice and hypoprothrombinemia, and pancreatitis. Hepatitis has been reported and may be fatal. Renal effects are often prominent and may include crystalluria, haematuria, proteinuria, pain and frequent urination, necrosis of the tubules, nephritic syndrome, and toxic necrosis with oliguria or anuria with azotemia. Neurologic effects include headache, drowsiness, insomnia, vertigo, tinnitus, hearing loss, mental depression, hallucinations, ataxia, muscular paralysis, peripheral neuropathy, transient lesions of the posterior spinal column, transverse myelitis, convulsions and unconsciousness. Haematological effects include eosinophilia, thrombocytopenia, leukopenia, neutropenia, agranulocytosis, pancytopenia, megoblastic anaemia, Heinz body anaemia and aplastic anaemia; petechiae and purpura may result. Acute haemolytic anaemia may also result (possibly as a result of hypersensitivity reactions) with people of African descent apparently more susceptible than Europeans - glucose-6-phosphate deficiency also appears to be a factor. Methaemoglobinaemia, sulphaemoglobinaemia and cyanosis may also occur. Ocular</p>

effects may include acute transient myopia, keratitis and conjunctivitis with inflammation and chemosis accompanied by swelling of the lids and in more severe cases, photophobia. Cross-sensitivity amongst the sulfonamides is common and allergic reaction may occur following systemic use or topical application. Sensitisation may produce generalised skin eruptions, urticaria and pruritus. Stevens-Johnson syndrome; a severe form of erythema multiforme associated with wide-spread lesions of the skin, mucous membranes and which may be fatal in about 25% of cases, has occurred in patients treated with sulfonamides. This syndrome may produce conjunctival and corneal scarring, serum sickness, periorbital oedema, angioedema, arthritis, arthralgia, allergic myocarditis, decreased pulmonary function and eosinophilic pneumonia. Other effects of long-term therapy include fever, chills, alopecia, vasculitis, lupus erythematosus, oligospermia, infertility, hypothyroidism and on occasion, goiter and diuresis.

More severe responses to treatment include irreversible neuromuscular and central nervous system changes and fibrosing alveolitis. During sulfonamide treatment, direct exposure to sunlight should be avoided as photosensitisation dermatitis may develop. This form of phototoxic dermatitis may be contrasted to photoallergic dermatitis produced by specific sensitising agents through immunological intervention. Phototoxic reactions have been described following contact, ingestion or injection of causal agents. The chemical may reach the skin by the circulatory system following ingestion or following parenteral administration. The actual skin changes vary with the agent and circumstances of the exposure. Swelling and redness (erythema) frequently occur, and blistering may also result; increased skin temperature and pruritus may follow. This is analogous to irritant contact dermatitis and occurs immediately following contact.

Hyperpigmentation may also follow the reaction. Photodermatitis of this type requires activation of a chemical substance on the skin surface by UV radiation (290 to 490 nm wavelength) for its clinical expression. In all cases, inflammation develops on the body surfaces normally exposed to sunlight (dorsal hands, arms, neck, face), provided that the responsible photosensitiser also contacts the anatomic areas. Covered skin, the eyelids, submental chin and upper ears covered by hair, are characteristically spared. Phototoxic reactions, analogous to irritant contact dermatitis, are typically accompanied by immediate burning, stinging or "smarting" of the skin shortly following sun exposure, and clinical inflammation appears more like an acute sunburn than an eczematous dermatitis. Photoallergic dermatitis may result from contact with the material; this is characterised by an increased reactivity of the skin to ultra-violet (UV) and/or visible radiation produced by a chemical agent on an immunological basis and occurs after a latent period of days or months. This type of response can be elicited only in individuals who have been previously allergically sensitised to the chemical agent and appropriate radiation.

Photoallergic dermatitis is relatively rare (certainly more so than phototoxic dermatitis produced by non-immunological principals) and presents, clinically, as an eczematous dermatitis in sun-exposed areas (distinguishing it from phototoxic dermatitis which is analogous to contact irritant dermatitis and produces swelling, redness and even blistering); photoallergic dermatitis may eventually spread to areas covered by clothes. Lichenification (thickening with increased skin markings) and chronic pigmentary changes may also develop. Photoallergic reactions may sometimes be followed by a persistent state of light reactivity (persistent light reactor) where clinical dermatitis recurs following exposure to sunlight alone, in the absence of the original initiating chemical. Studies in rats have shown that long-term administration of sulfonamides may produce thyroid malignancies; rats, however, appear to be more susceptible to the goiterogenic effects of sulfonamides than do other animal species. Sulfonamides may cause kernicterus in the neonate and their use is not recommended during pregnancy. Studies in rats and mice given high oral doses have shown that certain sulfonamides cause a significant incidence of cleft palate and other bony abnormalities in the foetus.

Epidemiological studies have associated long-term exposures to triazine herbicides with increase risk of ovarian cancer in female farm workers in Italy and of breast cancer in the general population of Kentucky in the United States. In experiments with female F344 rats, atrazine induced tumours of the mammary gland and reproductive organs. Atrazine also caused lengthening of the oestrus cycle, a dose-dependent increase in the plasma levels of 17beta-oestradiol and early onset of mammary and pituitary tumours in female Prague-Dawley rats.

Investigations into the mechanism of these apparent oestrogenic effects have not been able to demonstrate any consistent interactions with triazine herbicides with the oestrogen receptor or effects on receptor-mediated responses. Atrazine, simazine and propazine have been shown to induce aromatase activity in a human adrenocortical carcinoma cell line. This response was observed at concentrations in the submicromolar range. Aromatase is a circulating enzyme which converts androstenedione (generated in the adrenals) to oestrone in peripheral tissues such as adipose tissues. Oestrone subsequently undergoes conversion to oestradiol which binds to oestrogen receptors in many tissues with induction of tumours. In addition, many human breast cancers contain aromatase. (Breast cancer therapies, based on aromatase inhibitors, are now available.)

The effects of triazine herbicides and some of their metabolites on aromatase activity may provide a partial explanation for the observed increase in plasma oestradiol in rats, together with the observed oestrogen-mediated toxicities *in vivo*. [1]

[1] Sanderson et al: *Environmental Health Perspectives*, 109, pp 1027-1031, 2001

Suggestive evidence between atrazine (or triazines) exposure and an increased risk of prostate cancer, breast cancer, and ovarian cancer have been reported. Although these data provide a suspicion of carcinogenicity, the limited number of investigations and study limitations preclude drawing conclusions regarding these cancer types.

AC Carvup	TOXICITY	IRRITATION
	Not Available	Not Available
chlorsulfuron	TOXICITY	IRRITATION
	Not Available	Not Available
Legend:	1. 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	

CHLORSULFURON

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to

irritants may produce conjunctivitis.

Acute Toxicity	✗	Carcinogenicity	✗
Skin Irritation/Corrosion	✗	Reproductivity	✗
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

AC Carvup	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

chlorsulfuron	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 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.

Toxic to soil organisms.

DO NOT discharge into sewer or waterways.

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

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
chlorsulfuron	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
chlorsulfuron	LOW (LogKOW = 2.5719)

Mobility in soil

Ingredient	Mobility
chlorsulfuron	LOW (KOC = 1352)

SECTION 13 Disposal considerations



Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ 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. ▶ 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. ▶ Containers may still present a chemical hazard/ danger when empty. ▶ Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> ▶ 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. ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.
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Continued...

SECTION 14 Transport information

Labels Required

	
Marine Pollutant	
HAZCHEM	2Z

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

Air transport (ICAO-IATA / DGR)

UN number	3077	
UN proper shipping name	Environmentally hazardous substance, solid, n.o.s. (contains chlorsulfuron)	
Transport hazard class(es)	ICAO/IATA Class	9
	ICAO / IATA Subrisk	Not Applicable
	ERG Code	9L
Packing group	III	
Environmental hazard	Environmentally hazardous	
Special precautions for user	Special provisions	A97 A158 A179 A197 A215
	Cargo Only Packing Instructions	956
	Cargo Only Maximum Qty / Pack	400 kg
	Passenger and Cargo Packing Instructions	956
	Passenger and Cargo Maximum Qty / Pack	400 kg
	Passenger and Cargo Limited Quantity Packing Instructions	Y956
	Passenger and Cargo Limited Maximum Qty / Pack	30 kg G

Sea transport (IMDG-Code / GGVSee)

UN number	3077	
UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains chlorsulfuron)	
Transport hazard class(es)	IMDG Class	9
	IMDG Subrisk	Not Applicable
Packing group	III	
Environmental hazard	Marine Pollutant	
Special precautions for user	EMS Number	F-A, S-F
	Special provisions	274 335 966 967 969
	Limited Quantities	5 kg

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
chlorsulfuron	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
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Product name	Ship Type
chlorsulfuron	Not Available

SECTION 15 Regulatory information

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

chlorsulfuron is found on the following regulatory lists

Australia Chemicals with non-industrial uses removed from the Australian Inventory of Chemical Substances (old Inventory)

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

National Inventory Status

National Inventory	Status
Australia - AIIIC / Australia Non-Industrial Use	Yes
Canada - DSL	No (chlorsulfuron)
Canada - NDSL	No (chlorsulfuron)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (chlorsulfuron)
Korea - KECI	No (chlorsulfuron)
New Zealand - NZIoC	Yes
Philippines - PICCS	No (chlorsulfuron)
USA - TSCA	No (chlorsulfuron)
Taiwan - TCSI	Yes
Mexico - INSQ	No (chlorsulfuron)
Vietnam - NCI	Yes
Russia - FBEPH	No (chlorsulfuron)
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	23/12/2022
Initial Date	23/02/2015

SDS Version Summary

Version	Date of Update	Sections Updated
4.1	03/09/2020	Classification change due to full database hazard calculation/update.
5.1	23/12/2022	Classification review due to GHS Revision change.

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.

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
AII: 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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