

Material Safety Data Sheet

K211054

KINCROME

Revision Date: 02.12.2025
Issue: 0

SECTION 1 - PRODUCT AND COMPANY IDENTIFICATION:

PRODUCT IDENTIFIER

PRODUCT NAME	Spray Detailer
SYNONYMS	None
PROPER SHIPPING NAME	Spray Detailer
OTHER MEANS OF IDENTIFICATION	K211054

DETAILS OF MANUFACTURE

MANUFACTURE NAME	Lubrimaxx Marketing Pty Ltd
ADDRESS	30 Spencer Street, Sunshine West, Victoria 3020, Australia.
TEL & FAX. NO	1300 72 1300
OTHER MEANS OF IDENTIFICATION	None

DETAILS OF SUPPLIER

COMPANY NAME	Kincrome Australia Pty. Ltd (ABN: 41 007 185 006)
COMPANY ADDRESS	Australia 3 Lakeview Drive Caribbean Business Park Scoresby Victoria 3179 AUSTRALIA New Zealand Level 29, 188 Quay Street, Auckland Central 1010 NZ

EMERGENCY CONTACT NO.

CONTACT NO.	Australia: 1300 657 528 New Zealand: 0011 64 2 7342 5754 Poisons information Centre: Australia: 131 126 New Zealand: 0800 764 766
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SECTION 2 - HAZARDS IDENTIFICATION:

CLASSIFICATION OF THE SUBSTANCE OR MIXTURE

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

DETAILS OF SUPPLIER

GHS CLASSIFICATION HAZ- ARD CLASS AND CATEGORY	Carcinogenicity – category 1A
GHS ELEMENT, INCLUDING PRECAUTIONARY STATE- MENTS SYMBOL	  GHS07 – Exclamation mark GHS08 - Health Hazard
SIGNAL WORD	Danger
NZ HSNO	Not applicable

SECTION 2 - HAZARDS IDENTIFICATION (CONT.)

HAZARD STATEMENT(S)

H315	Causes skin irritation.
H319	Causes serious eye irritation.
H335	May cause respiratory irritation.
H350I	May cause cancer by inhalation.

PRECAUTIONARY STATEMENT(S) PREVENTION

P203	Obtain, read and follow all safety instructions before use.
P210	Keep away from heat, hot surface, sparks, open flames and other ignition sources. No smoking.
P261	Avoid breathing dust/fume/gas/mist/vapors/spray.
P264	Wash hands [and ...] thoroughly after handling.
P264+P265	Wash hands [and ...] thoroughly after handling. Do not touch eyes.
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

P302+P352	IF ON SKIN: wash with plenty of water/...
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses if present and easy to do - continue rinsing.
P318	if exposed or concerned, get medical advice.
P319	Get medical help if you feel unwell.
P321	Specific treatment (see information on this label and safety datasheet).
P332+P317	If skin irritation occurs: Get medical help.
P337+P317	If eye irritation persists: Get medical help.
P362+P364	Take off contaminated clothing and wash it before reuse.

PRECAUTIONARY STATEMENT(S) STORAGE

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

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
N/A (Mixture)	5-10	Wax Dispersion
63148-62-9	5-10	Polydimethylsiloxane
7631-86-9	5-10	Silicone Dioxide
63148-62-9	<2	Fragrance
N/A (Mixture)	<2	Emulsifier
N/A (Mixture)	<1	Colour
7732-18-5	Balance	Water

SECTION 4 - FIRST AID MEASURES

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 contact occurs: • 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	If fumes or combustion products are inhaled: • Lay patient down. Keep warm and rested. • Prosthesis such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. • 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.
INGESTION	• Contact physician immediately if swallowed. • 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. • Seek medical advice. • Avoid giving milk or oils. • Avoid giving alcohol. • If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

INDICATION OF ANY IMMEDIATE MEDICAL ATTENTION AND SPECIAL TREATMENT NEEDED

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

Treat symptomatically.

To treat poisoning by the higher aliphatic alcohols (up to C7):

- Gastric lavage with copious amounts of water.
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxygen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5]

BASIC TREATMENT

Establish a patent airway with suction where necessary.

Watch for signs of respiratory insufficiency and assist ventilation as necessary.

Administer oxygen by non-rebreather mask at 10 to 15 l/min.

Monitor and treat, where necessary, for shock.

Monitor and treat, where necessary, for pulmonary oedema.

Anticipate and treat, where necessary, for seizures.

DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

Give activated charcoal.

ADVANCED TREATMENT

Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.

Positive-pressure ventilation using a bag-valve mask might be of use.

Monitor and treat, where necessary, for arrhythmias.

Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.

If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.

Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.

Drug therapy should be considered for pulmonary oedema. Treat seizures with diazepam.

Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph. Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.

Acidosis may respond to hyperventilation and bicarbonate therapy.

Haemodialysis might be considered in patients with severe intoxication.

Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994 For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

SECTION 5 - FIRE FIGHTING MEASURES

PERSONAL PRECAUTIONS, PROTECTIVE EQUIPMENT AND EMERGENCY PROCEDURES

SUITABLE EXTINGUISHING MEDIA	Use dry chemical, or carbon dioxide, or sand. Do not use water jet.
HAZARDS FROM COMBUSTION PRODUCTS	Depending on combustion conditions, a complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, sulphur oxides, phosphorus oxides and metal oxides will be evolved when this material undergoes combustion.
SPECIAL PROTECTIVE EQUIPMENT	Fire-fighters should wear full protective clothing and self contained breathing apparatus (SCBA) in case of fire.

SECTION 6 - ACCIDENTAL RELEASE MEASURES

PERSONAL PRECAUTIONS, PROTECTIVE EQUIPMENT AND EMERGENCY PROCEDURES

NON-EMERGENCY PERSONNEL	Wear appropriate protective equipment as in section 8 below to prevent skin and eye contamination. Remove of ignition sources and provision of sufficient ventilation.
EMERGENCY PROCEDURES	Personnel involved in clean up required to wear appropriate personal protective equipment and clothing to minimize exposure.
ENVIRONMENTAL PRECAUTION	Isolate the spillage and prevent the material to enter drains, sewers, waterways and soil. Dispose of waste according to federal, Environmental Protection Authority and state regulations. If the spillage enters the waterways contact the Environmental Protection Authority, or your local Waste Management Authority.
METHOD AND MATERIALS FOR CONTAINMENT AND CLEANING UP	Minor spills do not normally need any special clean-up measures. In the event of a major spill, prevent spillage from entering drains or water courses. Spilt material may result in a slip hazard and should be absorbed into dry, inert material (e.g. sand, earth or vermiculite), which then can be put into appropriately labelled drums for disposal by an approved agent according to local conditions.

SECTION 7 - HANDLING AND STORAGE

PRECAUTIONS FOR SAFE HANDLING	Avoid contact with the product by using appropriate protective equipment such as gloves, glasses or goggles and full-length clothing. Prevent small spills and leakage to avoid slip hazards. Properly dispose of any contaminated rags or cleaning materials in order to prevent fire hazards. Eating, drinking, and smoking should be prohibited in the area where this material is handled, stored and processed. Workers should follow good personal hygiene practices, such as washing hands before eating, drinking and smoking. Remove contaminated clothing and protective equipment before entering eating areas. Keep containers tightly closed when not in use. Prevent product from entering waterways, drains or sewers.
CONDITIONS FOR SAFE STORAGE	Store in a cool, dry well-ventilated area away from heat, sources of ignition, oxidising agents.

SECTION 8 - HANDLING AND STORAGE

ENGINEERING CONTROLS	Use only in well ventilated areas.
EYE PROTECTION	Avoid contact with the eyes. Wear safety glasses or face shield to avoid eye contact or splashing.
HAND PROTECTION	Avoid contact with skin. Chemical resistant gloves such as nitrile recommended. Wear suitable protective clothing.
BODY PROTECTION	Not normally required. Where splashing is possible suitable work wear should be worn to protect personal clothing.
RESPIRATORY PROTECTION	Do not breathe dust, fumes or vapor. Use approved respirator when exposed to concentration above the exposure limit.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

INFORMATION ON BASIC PHYSICAL AND CHEMICAL PROPERTIES APPEARANCE

APPEARANCE	Translucent Clear liquid
ODOUR	Not available
ODOUR THRESHOLD	Not available
SPECIFIC GRAVITY	1.00 +/- 0.02
VISCOSITY	<100 cps
BOILING POINT	Not available
MELTING POINT	Not available
DROPPING POINT	Not available
FLASH POINT	Not available
PH VALUE	9.0 – 12.0
EVAPORATION RATE	~1.00 (Water = 1)
PENETRATION AT 250C	Not available
FLAMMABILITY	Not available
AUTO IGNITION TEMPERATURE	Not available
FLAMMABLE LIMITS	Not available
VAPOUR PRESSURE	Not available
VAPOUR DENSITY	Not available
DECOMPOSITION TEMPERATURE	Not available
SOLUBILITY IN WATER	Yes
PARTITION COEFFICIENT	Not available
BIODEGRADABILITY	Not classified as biodegradable

SECTION 10: STABILITY AND REACTIVITY

REACTIVITY	No dangerous reaction known under conditions of normal use
CHEMICAL STABILITY	Stable under normal conditions of storage and handling.
POSSIBILITY OF HAZARDOUS REACTIONS	None under normal processing
CONDITIONS TO AVOID	Keep away from heat, flames & sparks.
INCOMPATIBLE MATERIALS	Avoid contact with acidic or oxidizing agent.
HAZARDOUS DECOMPOSITION PRODUCTS	Carbon Monoxide, formaldehyde.

SECTION 11 TOXICOLOGICAL INFORMATION

INFORMATION ON THE LIKELY ROUTES OF EXPOSURES	
SKIN EXPOSURE	May cause skin irritation.
EYE EXPOSURE	May cause eye irritation.
DELAYED AND IMMEDIATE EFFECTS AND ALSO CHRONIC EFFECTS FROM SHORT AND LONG TERM EXPOSURE	
ACUTE TOXICITY	No data available.
SKIN CORROSION/IRRITATION	May causes skin irritation.
SERIOUS EYE DAMAGE/ EYE IRRITATION	Not classified as serious eye irritation.
RESPIRATORY/SKIN SENSITIZATION	May cause an allergic skin reaction.
CARCINOGENICITY	May cause cancer.
GERM CELL MUTAGENICITY	No data available.
REPRODUCTIVE TOXICITY	No evidence of developmental or reproductive toxicity.
SPECIFIC TARGET ORGAN TOXICITY SINGLE EXPOSURE	Acute studies do not indicate any specific organ toxicity following single exposure.
SPECIFIC TARGET ORGAN TOXICITY REPEATED EXPOSURE	May causes damage to organs through prolonged or repeated exposure.
Note: Information given is based on data on the toxicology of base oil. Toxicological information on product is not available.	

SECTION 12: ECOLOGICAL INFORMATION

DISPOSAL METHOD	
TOXICITY	No data available.
PERSISTENCE AND DEGRADABILITY	No data available however this product is not readily biodegradable.
BIOACCUMULATION POTENTIAL	No data available.
MOBILITY IN SOIL	No data available.

SECTION 13: DISPOSAL CONSIDERATIONS

DISPOSAL METHOD	
PRODUCT	The product should not be released to the environment, so any unused material should be recycled wherever possible or be disposed of as hazardous waste at an appropriate collection depot. If this is not possible, the product is suitable for burning in an enclosed burner where it can be used as a fuel source. The product is also suitable for incineration at very high temperatures to prevent formation of undesirable combustion products. Spilled product that cannot be recovered should be absorbed and then shovelled into a suitable drum. Follow Government regulations for disposal of such waste. Do not mix new or used lubricating oils taken for recycling or disposal by suitably licensed contractors in accordance with Government regulations.
CONTAINERS	Empty containers may contain residual oil. They should be completely drained and then stored until reconditioned or disposed of. Empty drums should be taken for recycling or disposal through suitably licensed contractors in accordance with Government regulations. Where the containers are of metal construction they should not be pressurised, cut by a grinder, welded, brazed, soldered, drilled or exposed to heat, flames or other sources of ignition. Closed metal containers when exposed to such conditions/ treatment may explode causing serious injury or death.

UNCLEANED PACKAGING RECOMMENDATION

Disposal must be made according to official regulations.

SECTION 14: TRANSPORT INFORMATION

NOT CLASSIFIED AS DANGEROUS GOODS BY ROAD, RAIL AND SEA.

DISPOSAL METHOD	
IATA	Not Regulated
IMDG	Not Regulated
U.N NUMBER	Not Available
U.N PROPER SHIPPING NAME	Not Available
CLASS	Not Available
SUBSIDIARY RISK	Not Available
PACKING GROUP	Not Available
MARINE POLLUTANT	No
HAZCHEM CODE	Not Available

SECTION 15: REGULATORY INFORMATION

POISONS SCHEDULE: Not scheduled

ADG CODE: Nil

SECTION 16: OTHER INFORMATION

CHEMICAL EMERGENCIES: 1 800 033 111

N/D = Not determined, N/A = Not applicable

LITERATURE REFERENCES:

Preparation of Safety Data Sheets for Hazardous Chemicals Code of Practice (December 2011 Safe Work Australia)

GHS Hazardous Chemical Information List (September 2014 Safe Work Australia)

Guidance on the Classification of Hazardous Chemicals under the WHS Regulations. April 2012. Safe Work Australia.

Global Harmonized System of Classification and Labelling of Chemicals (GHS). Fifth revised edition.

Australian Exposure Standards

Australian Code For The Transport Of Dangerous Goods By Road And Rail 7th Edition.

Standard for the Uniform Scheduling of Medicines and Poisons 2015.

HSIS Hazardous Substance Information System National Worksafe Data Base.

LABELLING OF WORKPLACE HAZARDOUS CHEMICALS, Code of Practice, DEC 2011

IMPLEMENTATION OF THE GLOBALLY HARMONISED SYSTEM OF CLASSIFICATION AND LABELLING OF CHEMICALS (GHS)

APRIL 2012

ABBREVIATIONS AND ACRONYMS

ADG CODE: Australian Code for the Transport of Dangerous Goods by Road and Rail.

AICS: Australian Inventory of Chemical Substances.

CAS Number: Chemical Abstracts Service Registry Number.

GHS: Globally Harmonized System of Classification and Labelling of Chemicals

HAZCHEM: An emergency action code of numbers and letters which gives information to emergency services.

HSIS: Hazardous Substances Information System

IATA: International Air Transport Association

IMDG: International Maritime Dangerous Goods

NTP: National Toxicology Program (USA).

SDS: Safety Data Sheet

SWA: SafeWork Australia

TWA: Time Weighted Average.

UN NUMBER: United Nations Number.

DISCLAIMER: It is believed that the information given in this bulletin is accurate at the issue date. It is offered in good faith, but without guarantee and without acceptance of responsibility for its accuracy.

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Kincrome a policy of ongoing research and development aimed at product improvement and therefore may change the formulation, specification and characteristics of its products without notice.

It is the user's responsibility to verify the current formulation, specification or characteristics of a product, and to ascertain that it is suitable for an intended use or application.

REASON(S) FOR ISSUE: Revised

Material Safety Data Sheets are updated frequently. Please ensure that you have a current copy.

PLEASE NOTE that although every care has been taken in compiling the above information, it is solely reliant upon data available to us at the date hereof.

We believe the data to be correct, however for the reason just stated we are not in a position to warrant its accuracy. With that in mind and given that the full range of possibilities and conditions under which the information may be applied simply cannot be anticipated, **YOU ARE CAUTIONED** to make your own determinations as to the veracity and the suitability of the information to the particular circumstances that apply, or may apply, to you from time to time.

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