

EMERGENCY INFORMATION AND STORAGE GUIDE / DANGEROUS GOODS DECLARATION

POWERFLUSH Acid Sanitiser

Substance: Red liquid containing 10-30% Phosphoric Acid (CAS No. 7664-39-2), 10-30% Sulfuric Acid (CAS No. 7664-93-9) and <10% non-qac sanitiser
Proper Shipping Name: CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (contains phosphoric acid and sulfuric acid)

UN No.: 3264	DG Class: 8	Subsidiary Risk Class: N/A	Packing Group: II	Flash Point: (°C) N/A	HAZCHEM: 2X	Marine Pollutant: Yes	Maximum Transport Quantity: 250L
Hazard Classifications: 6.9A, 8.2B 8.3A 9.1B		EPA Approval Code: HSR002526 (Group Standard)		Tracking Required: No		Approved Handler: N/A	IER Guide: N/Av

EMERGENCY PROCEDURES

24 HOUR ADVICE IN AN EMERGENCY ONLY: 0800 764 766

IF THIS HAPPENS	DO THIS
Tanker/Vehicle Accident	Switch off engine and electrical equipment. Keep people away and warn other traffic. Check for spills and leaks. Call the emergency services: Dial 111
Spill or Leak	Major spills: Call the Fire Department and alert them to the nature of the spill. DO NOT TOUCH spilt material. Wear overalls, chemical-resistant gloves and safety goggles. Prevent further spillage. Use soda ash or slaked lime to neutralize. Contain spill and absorb with sand or other suitable material. Place spillage in a sealable container. Wash down affected area with large amounts of water. Dispose of spill container according to the regulations of the local authority.
Fire	Call the Fire Department: Dial 111. Wear protective clothing and breathing apparatus. May release toxic fumes under fire conditions. Extinguish fires with water fog, foam, dry chemical or carbon dioxide. Cool sealed drums with water spray to prevent rupturing. Contain and collect run-off (see Spill or Leak section above). Keep non-involved persons away.

FIRST AID

If Swallowed:	Harmful if swallowed. Do NOT induce vomiting. Rinse mouth. Immediately call a POISON CENTRE (0800 764 766) or doctor/physician. If medical advice is needed, have product container or label at hand.
If in Eyes:	Wash eyes cautiously for 15 minutes. Remove contact lenses if they are present and it is easy to do so. Continue rinsing. Immediately call a Poison Centre or doctor/physician
If on Skin:	Immediately flush body and clothing with large amounts of water, using safety shower if available. Quickly remove all contaminated clothing and footwear. Immediately call a Poison Centre or doctor/physician.
If Inhaled:	Remove to fresh air and keep at rest in a position comfortable for breathing. If ill effects persist, contact doctor or poison centre for advice.

STORAGE AND SEGREGATION SUMMARY

Storage: Keep out of reach of children. Store in original container with lid tightly closed in a cool, dry, well-ventilated area out of direct sunlight. Store away from incompatible materials, food, fertilizers and seeds. Avoid physical damage to container and check regularly for leaks.

Aggregate Storage Volume Thresholds: When storing products of the same hazard the aggregate quantity must be considered. For more information consult the current NZS8409 Management of Chemicals and the HSNO Regulations.

Location Certificate:	Hazardous Atmosphere Zone:	Number of Fire Extinguishers:	Hazard Class & Emergency Action Signage:	Emergency Information:	Emergency Plan:	Secondary Containment:
N/A	N/A	N/A	1000L	5L	1000L	1000L

DO NOT Store or Load with:
Explosives

Segregate From:
Oxidising agents, Organic Peroxides, Food and Food Containers, Alkalis

Segregation: Check the latest Land Transport Rule Dangerous Goods, Rule45001 for additional information. Sea transport may require additional segregation. Refer NZS5433 Sea Segregation for details.

No. and Kind of Packages:	Gross Weight: kg	Volume: m ³
Consignor:	Consignee:	
Dangerous Goods Declaration: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labelled, and are in all respects in proper condition for transport according to all applicable international and national rules, regulations and legislation.	Name: Title: Signature:	Date:

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