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1. IDENTIFICATION OF THE SUBSTANCE / PREPARATION AND OF THE COMPANY / UNDERTAKING

COARSE GRIT 1.1 Product identifier

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

Garden and Horticulture

1.3 Details of the supplier of the safety data sheet

Vitax Limited Owen Street Coalville

LE67 3DE Tel: 01530 510060 Email: info@vitax.co.uk

Tel: 01530 510060 (Office Hours) 1.4 Emergency Contact:

2. HAZARD IDENTIFICATION

2.1 Classification of the substance or mixture

Classification CLP Classification (Regulation (EC) 1272/2008):

Quartz sands and grits do not meet the criteria for classification as dangerous as defined in Directive 67/548/EEC (classification, packaging and labelling of

dangerous substances).

2.2 Label elements Not Classified

2.3 Other hazards The grain size distribution means that it is not hazardous. However, any respirable

crystalline silica dust generated by processing and handling may cause health effects. Prolonged and/or massive inhalation of respirable crystalline silica dust may cause lung fibrosis, commonly referred to as silicosis. Principal symptoms of silicosis are cough and breathlessness. Occupational exposure to respirable

crystalline silica should be monitored and controlled.

3. COMPOSITION / INFORMATION ON INGREDIENTS

3.1 Substance

Chemical: SiO₂ (ca. 99 %) Mineralogical: alpha quartz E.I.N.E.C.S.-N°: 238-878-4 C.A.S.-N°: 14808-60-7 EU-classification: no classification silicon dioxide **IUPAC Name:** REACh Reg. No: Exempted

4. FIRST AID MEASURES

4.1 Description of first aid measures

General advice No actions are to be avoided, nor are there any special instructions for rescuers.

Eye contact Wash with copious quantities of water.

Ingestion Not hazardous. No special first aid measures necessary.

Inhalation No special first aid measures. Remove to fresh air and consult a physician.

Skin contact Not hazardous. No special first aid measures necessary.

4.2 Most important symptoms and effects No specific information.

4.3 Indication of any immediate medical attention and special treatment needed

No specific information. Treatment symptomatic.

5. FIRE-FIGHTING MEASURES

5.1 Extinguishing media

Suitable extinguishing media: Does not burn. Use extinguishing media suitable for surrounding materials.

Unsuitable extinguishing media: Not applicable.

Special exposure hazards: No hazardous releases in case of fire.

Special protective equipment for fire fighters: Not applicable. 5.2 Special hazards arising from the substance or mixture

None known.

5.3 Advice for fire-fighters No specific protection required.

6. ACCIDENTAL RELEASE MEASURES

6.1 Personal precautions Avoid airborne dust generation. In case of exposure to airborne dust

concentrations exceeding regulatory limits, wear a personal respirator in

compliance with national legislation.



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6.2 Environmental precautions No special requirements.

6.3 Methods for cleaning up Avoid dry sweeping and use water spraying or vacuum cleaning systems to

prevent airborne dust generation.

7. HANDLING AND STORAGE

7.1 Precautions for safe handling Avoid airborne dust generation. Handle bags carefully so as to prevent accidental

> bursting. Provide appropriate exhaust ventilation at places where airborne dust is generated. In case of insufficient ventilation, wear suitable respiratory protective

equipment.

7.2 Conditions for safe storage Keep containers closed and store/handle bagged products so as to prevent

accidental bursting.

7.3 Specific end use Play Sand.

8. EXPOSURE CONTROLS / PERSONAL PROTECTION

8.1 Control parameters

Exposure limit values Respect workplace regulatory provisions for all types of airborne dust (total dust,

> respirable dust and respirable crystalline silica dust). The UK Control of Substances Hazardous to Health Regulations 2002 (as amended) require adherence to good practice principles in the control of exposure to hazardous

Additionally, a WEL (Workplace Exposure Limit) for respirable crystalline silica dust of 0.1mg/m³ applies in the United Kingdom, measured as an 8 hour TWA

(Time Weighted Average).

8.2 Exposure controls

Provide appropriate local exhaust ventilation in places where dust is generated. Occupational exposure controls

> Control of occupational exposure may also be achieved by enclosing plant and equipment, by isolating personnel from dusty areas and by ensuring good

standards of ventilation in the workplace.

In case of exposure to airborne dust concentrations exceeding regulatory limits, Respiratory protection

wear a personal respirator that complies with the requirements of national

legislation.

Wear safety glasses with side-shields in circumstances where there is a risk of Eye protection

penetrative eye injuries.

Environmental exposure controls No special requirements.

9. PHYSICAL AND CHEMICAL PROPERTIES

Solid, granular, yellow/brown. Appearance

Odour Odourless. Density: 2.65 g/cm³ SiO₂ %: ca. 99 % Grain shape: sub-angular Particle size range: 2-6mm nominal Solubility in water: negligible Solubility in hydrofluoric acid yes Melting point: 1610°C Molecular weight:

10. STABILITY AND REACTIVITY

10.1 Reactivity Not considered chemically reactive

Stable under normal ambient conditions and under the anticipated conditions of 10.2 Chemical stability

use

60.1

10.3 Possibility of hazardous reactions None known 10.4 Conditions to avoid None known 10.5 Incompatible materials None known 10.6 Hazardous decomposition products None known

11. TOXICOLOGICAL INFORMATION

Skin irritation: Data shows no skin irritation effects. Eye irritation: Data shows no eye irritation effects.

Prolonged and/or massive exposure to respirable crystalline silica-containing dust **Chronic effects**

may cause silicosis, a nodular pulmonary fibrosis caused by deposition in the lungs of fine respirable particles of crystalline silica. In 1997, IARC (the



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International Agency for Research on Cancer) concluded that crystalline silica inhaled from occupational sources can cause lung cancer in humans. However it pointed out that not all industrial circumstances, nor all crystalline silica types, were to be incriminated. (IARC Monographs on the evaluation of the carcinogenic risks of chemicals to humans, Silica, silicates dust and organic fibres, 1997, Vol. 68, IARC, Lyon, France.)

In June 2003, SCOEL (the EU Scientific Committee on Occupational Exposure Limits) concluded that the main effect in humans of the inhalation of respirable crystalline silica dust is silicosis. "There is sufficient information to conclude that the relative risk of lung cancer is increased in persons with silicosis (and, apparently, not in employees without silicosis exposed to silica dust in quarries and in the ceramic industry). Therefore preventing the onset of silicosis will also reduce the cancer risk..." (SCOEL SUM Doc 94-final, June 2003). So there is a body of evidence supporting the fact that increased cancer risk would be limited to people already suffering from silicosis. Worker protection against silicosis should be assured by respecting the existing regulatory occupational exposure limits and implementing additional risk management measures where required (see IMA-Europe table of OELs in the EU at http://www.ima-eu.org/en/publication.htm).

12. ECOTOXICOLOGICAL INFORMATION

12.1 Toxicity No specific adverse effects known

12.2 Persistence and degradabilityInformation not available12.3 Bioaccumulative potentialInformation not available12.4 Mobility in soilInformation not available

12.5 Results of PBT and vPvB Not classified

12.6 Other adverse effects Information not available

13. DISPOSAL CONSIDERATIONS

13.1 Waste treatment methods

Waste from residues / unused products Can be landfilled in compliance with local regulations. The material should be

buried to prevent dust being picked up by the wind. Where possible, recycling is

preferable to disposal.

Packaging No specific requirements. Recycling and disposal of packaging should be carried

out by an authorised waste management company.

14. TRANSPORT INFORMATION

14.1 UN number: Product is unclassified for transport
14.2 UN proper shipping name: Product is unclassified for transport
14.3 Transport hazard Product is unclassified for transport
14.4 Packing group: Product is unclassified for transport
14.5 Environmental hazards: Product is unclassified for transport
14.6 Special precautions for user: Product is unclassified for transport
14.7 Transport in bulk according to Annex II of MARPOL 73/78 and the IBC code

Applicable for Maritime bulk transport only. Check with carrier.

15. REGULATORY INFORMATION

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

National Legislation Sand blasting According to the Control of Substances Hazardous to Health

Regulations 2002, sand and other substances containing free crystalline silica cannot be used as an abrasive for blasting articles in any blasting apparatus.

European Legislation Quartz sand does not meet the criteria for classification as dangerous as defined in

Directive 67/548/EEC.

15.2 Chemical Safety Assessment CSA not undertaken for this substance

16. OTHER INFORMATION

Liability

The information provided is to the best of Vitax Ltd knowledge and belief accurate and reliable as of the date indicated. However, no representation, warranty or guarantee is made to its accuracy, reliability or completeness. It is the user's responsibility to satisfy himself as to the suitability and completeness of such information for his own particular use.



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UK Health and Safety Executive - silica (quartz)

Extract taken from http://www.hse.gov.uk/quarries/silica.htm

Quartz is found in almost all kinds of rock, sands, clays, shale and gravel. Workers exposed to fine dust containing quartz are at risk of developing a chronic and possibly severely disabling lung disease known as "silicosis". It usually takes a number of years of regular daily exposure before there is a risk of developing silicosis. Silicosis is a disease that has only been seen in workers from industries where there is a significant exposure to silica dust, such as in quarries, foundries, the potteries etc. No cases of silicosis have been documented among members of the general public in Great Britain, indicating that environmental exposures to silica dust are not sufficiently high to cause this occupational disease. In addition to silicosis, there is now evidence that heavy and prolonged workplace exposure to dust containing crystalline silica can lead to an increased risk of lung cancer. The evidence suggests that an increased risk of lung cancer is likely to occur only in those workers who have developed silicosis. It should also be noted that excessive long term exposures to almost any dust, are likely to lead to respiratory (breathing) problems.

Detailed reviews of the scientific evidence on the health effects of crystalline silica have been published by HSE in the following Hazard Assessment Documents EH75/4 and EH75/5. These documents are available from HSE Books.