

# MATERIAL SAFETY DATA SHEET — 9 Sections

## SECTION 1 — PRODUCT INFORMATION

Product Identifier <b>Dry-Type Transformer</b>		WHMIS Classification (optional)	
Product Use <b>Electrical</b>			
Manufacturer's Name <b>Hammond Power Solutions Inc.</b>		Supplier's Name	
Street Address <b>595 Southgate Drive</b>		Street Address	
City <b>Guelph</b>	Province <b>Ontario</b>	City	Province
Postal Code <b>N1G 3W6</b>	Emergency Telephone <b>(519) 822-2441</b>	Postal Code	Emergency Telephone

## SECTION 2 — HAZARDOUS INGREDIENTS

Hazardous Ingredients (specific)	%	CAS Number	LD <sub>50</sub> of Ingredient (specify species and route)	LC <sub>50</sub> of Ingredient (specify species)
Cured Polyester Resin	0.5	73144-93-1		
Cured Epoxy Resin	0.5	25068-38-6		

## SECTION 3 — PHYSICAL DATA

Physical State <b>Solid</b>	Odour and Appearance		Odour Threshold (ppm) <b>N/A</b>	
Specific Gravity	Vapour Density (air = 1)	Vapour Pressure (mmHg)	Evaporation Rate <b>N/A</b>	
Boiling Point (°C)	Freezing Point (°C) <b>N/A</b>	pH <b>N/A</b>	Coefficient of Water/Oil Distribution <b>N/A</b>	

## SECTION 4 — FIRE AND EXPLOSION DATA

Flammability <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, under which conditions?		
Means of Extinction			
Flashpoint (°C) and Method <b>N/A</b>	Upper Flammable Limit (% by volume)	Lower Flammable Limit (% by volume) <b>N/A</b>	
Autoignition Temperature (°C) <b>500°C</b>	Explosion Data — Sensitivity to Impact	Explosion Data — Sensitivity to Static Discharge	
Hazardous Combustion Products <b>Insulating Resins Will Liberate Oxides of Carbon and Hydrocarbons, The Composition and Toxicity of These Oxides Have Not Been Determined.</b>			

## SECTION 5 — REACTIVITY DATA

Chemical Stability <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If no, under which conditions?		
Incompatibility with Other Substances <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, which ones?		
Product is Stable. Hazardous Polymerization Will Not Occur Under Normal Operating Conditions.			
Reactivity, and under what conditions? <b>Open Flame</b>			
Hazardous Decomposition Products <b>In The Presence of Open Flame, May Release Toxic and Irritating Gases</b>			

Product Identifier Dry-Type Transformer

**SECTION 6 — TOXICOLOGICAL PROPERTIES**

Route of Entry	<input type="checkbox"/> Skin Contact	<input type="checkbox"/> Skin Absorption	<input type="checkbox"/> Eye Contact	<input checked="" type="checkbox"/> Inhalation	<input type="checkbox"/> Ingestion
Effects of Acute Exposure to Product When Commissioned Protective Coatings May Be Volatilized and Produce Fumes. Do Not Breathe These Vapors and Ventilate the Area. May Cause Dizziness, Headache and Nausea.					
Effects of Chronic Exposure to Product This Product Produces No Harmful By-Products During Operation and is Not Considered a Threat to Human Health.					
Contains No Polychlorinated Biphenyls (PCB's)					
Exposure Limits (value, source, date)	Irritancy (if yes, explain) <input type="checkbox"/> Yes <input type="checkbox"/> No N/A				
Sensitization (if yes, explain)	Carcinogenicity (if yes, explain) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Reproductive Toxicity (if yes, explain) <input type="checkbox"/> Yes <input type="checkbox"/> No	Teratogenicity (if yes, explain)				
Mutagenicity (if yes, explain)	Synergistic Products (if yes, explain) <input type="checkbox"/> Yes <input type="checkbox"/> No				

**SECTION 7 — PREVENTIVE MEASURES**

Personal Protective Equipment	<input type="checkbox"/> Gloves	<input type="checkbox"/> Respirator	<input type="checkbox"/> Eye	<input type="checkbox"/> Footwear	<input type="checkbox"/> Clothing	<input type="checkbox"/> Other
If checked, specify type						
Engineering Controls (specify, such as ventilation, enclosed process)						
Leak and Spill Procedure						
Waste Disposal Dispose of in Accordance With Applicable Federal and Local Regulations						
Handling Procedures and Equipment						
Storage Requirements Store in a Dry Environment						
Special Shipping Information						PIN

**SECTION 8 — FIRST AID MEASURES**

Inhalation	If Affected By Inhalation of Vapors, Remove to Fresh Air
Ingestion	N/A
Skin Contact	N/A
Eye Contact	N/A

**SECTION 9 — PREPARATION INFORMATION**

Prepared by (Group, Department, etc.) Jeff Perry	Telephone Number (519) 822-2441	Preparation Date 2/20/2014
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