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CORNELL DUBILIER ELEC DIV OF FED PAC ELEC CO -- TJL6040J -- 5910-00-819-2155

Product ID:TJL6040J MSDS Date:01/01/1985 FSC:5910 NIIN:00-819-2155 **MSDS Number: BFQTG** === Responsible Party === Company Name: CORNELL DUBILIER ELEC DIV OF FED PAC ELEC CO Address: ONE INTERCHANGE PLZ City:WAYNE State:NJ ZIP:07470 Country:US CAGE:09023 === Contractor Identification === Com pany Name: CORNELL DUBILIER ELEC DIV FED PAC ELEC Address: ONE INTERCHANGE PLZ Box:B-967 City:WAYNE State:NJ ZIP:07470 Country:US Phone:201-694-8600 CAGE:09023 Company Name: CORNELL-DUBILIER ELECTRONICS Address: ONE INTERCHANGE PLZ Box:City:WAYNE State:NJ ZIP:07470 Country:US Phone:201-694-8600 CAGE:14655 Ingred Name: POLYCHLORINATED BIPHENYLS (PCBS) (SARA III) CAS:1336-36-3 RTECS #:TQ1350000 EPA Rpt Qty:1 LB DOT Rpt Qty:1 LB

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## Effects of Overexposure: ABSORBED THRU SKIN, LUNGS, INTESTINE. CAUSES CANCER, LIVER, KIDNEY, STOMACH, EYE, HEARING DISORDER (SUP DATA)

First Aid:EYES:FLUSH W/WATER IMMEDIATELY.SKIN:WASH W/SOAP IMMEDIATELY.INHAL:REMOVE TO FRESH AIR,GIVE ART.RESPIR.AS NEEDED.INGEST:GET MEDICAL ATTN.GIVE LARGE QTY OF SALT WATER,INDUCE VOMITING,BUT DO NOT MAKE UNC ONCSIOUS PERSON VOMIT.

Spill Release Procedures: USE ABSORBENT & DIKES TO PREVENT RUNOFF. ISOLATE & NOTIFY PROPER AUTHORITIES.

Handling and Storage Precautions:STORAGE MUST FOLLOW RCRA REQUIREMENTS. Other Precautions:LARGE CAPACITORS OF 3 LB OR MORE PCB REQUIRE LABELS IN STORAGE USE & TRANSPORTATION

	Exposure Controls/Personal Protection	======
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Respiratory Protection:SUPPLIED AIR W/FULL FACEPIECE,HELMET OR HOOD Ventilation:LOCAL EXHAUST Protective Gloves:RUBBER-IMPERV Eye Protection:GOGGLES,FACE SHIELD Other Protective Equipment:FULL CLOTHING TO PREVENT SKIN CONTACT Supplemental Safety and Health OVEREXPOS:CAN CAUSE FORMATION OF CYSTS,CAUSES STILLBIRTHS.IRRITATES EYES,NOSE THROAT.

Appearance and Odor:LIGHT STRAW-COLORED LIQUID, AROMATIC ODOR

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## STRONG OXIDIZERS

## Waste Disposal Methods:CONTROLLED DISPOSAL REQUIRED-GENERALLY HIGH TEMPERATURE INCINERATION.ONLY APPROVED DISPOSAL OPERATOR PERMITTED.

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