View NSN Online: https://aerobasegroup.com/nsn/8010-01-060-7176

Product ID:BODY FILLER COMPOUND A & B MSDS Date:12/14/1992 FSC:8010 NIIN:01-060-7176 Kit Part:Y MSDS Number: BVXBX === Responsible Party === Company Name: DELTA PLASTICS CO (FORMALLY DELTA DPC, INC) Address:10513 ROAD 236 City: TERRA BELLA (FORMALLY IN TULARE) State:CA ΖI P:93270 Country:US Info Phone Num:209-535-1332 / 209-535-3723 (FAX) Emergency Phone Num:209-535-1332 / 209-535-3723 (FAX) Preparer's Name: ERIC SKIFF CAGE:DO191 === Contractor Identification === Company Name: DELTA DPC, INC Address:983 E. LEVIN AVE. Box:City:TULARE State:CA ZIP:93274 Country:US Phone:209-686-1644 CAGE:0ND20 Company Name: DELTA PLASTICS CO. Address:280 MAIN ST. PO BOX 489 Box:489 City:PIXLEY State:CA ZIP:93256 Phone:209-757-2010 CAGE:DO191

======== Composition/Information on

Ingredients =========

Ingred Name:POLYESTER RESIN Fraction by Wt: 35-39% Other REC Limits:NONE RECOMMENDED

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SUPERVISION OF MEDICAL PERSONNEL. NEVER GIVE ANYTHING BY MOUTH TO UNCONSCIOUS PERSON.

MEDICAL ATTENT ION. INGESTION-INDUCE VOMITING ONLY UNDE

Flash Point Method:TOC Flash Point:210F,99C Extinguishing Media:CARBON DIOXIDE, FOAM, DRY CHEMICAL. Fire Fighting Procedures:WEAR SELF-CONTAINED BREATHING APPARATUS. Unusual Fire/Explosion Hazard:KEEP AWAY FROM HEAT AND SOURCES OF IGNITION.

Spill Release Proc

edures:ELIMINATE ALL SOURCES OF IGNITION. PREVENT FLOW INTO SEWERS OR WATERWAYS. CLEAN UP WITH AN INERT ABSORBANT USING NON-SPARKING TOOLS. Neutralizing Agent:NOT APPLICABLE.

Handling and Storage Precautions: KEEP PRODUCT COOL, DRY AND AWAY FROM SOURCES OF IGNITION AND INCOMPATIBLE MATERIALS. USE WITH ADEQUATE VENTILATION. Other Precautions: NONE SPECIFIED BY MANUFACTURER.

======== Exposure Controls/Person

al Protection ==========

Respiratory Protection:USE PROVIDED RESPIRATOR. DLA-HMIS-IF ENGINEERING CONTROLS FAIL OR NON-ROUTINE USE OR EMERGENCY OCCURS;USE NIOSH/MSHA APPROVED RESPIRATOR OR SUPPLIED AIR RESPIRATOR OR SCBA,AS REQUIRED.USE IAW 29 CFR 1 910.134 & MFR'S RECOMMENDATIONS. Ventilation:LOCAL EXHAUST PREFERABLE. Protective Gloves:USE PROVIDED GLOVES. Eye Protection:CHEMICAL SPLASH GOGGLES Other Protective Equipment:EYE WASH STATION. Work Hygienic Practices:FOLLOW PRUDENT H YGENIC PROCEDURES. Supplemental Safety and Health KEY1=N1. PART A OF 4 PART KIT. FOR PART B,C & D SEE PNI B,C & D THIS NSN/CAGE. MSDS ENTERED BY DLA-HMIS UNDER PROJECT FOR GSA.

HCC:V5 Vapor Density:>1 Spec Gravity:1.02 Viscosity:PASTE Evaporation Rate & amp; Reference: