

MATERIAL SAFETY DATA SHEET

SECTION I

EMERGENCY TELEPHONE NUMBER(S)

1-248-548-0040

IDENTITY : **E-Z Groom colognes (Vanilla Mist, Tropical Jubilee, Silky Almond, Orange Crush, Pearl, Onyx, Puppermint, Filthy Beast, Gingerbread, and all others)**

INGREDIENTS/CHEMICAL NAME: **Deionized water, fragrance blend, polysorbate 80**
OTHER:

SECTION II - HAZARDOUS INGREDIENTS/IDENTITY INFORMATION

HAZARDOUS INGREDIENTS AS DEFINED BY OSHA, 29 CFR 1910. 1200

<u>CHEMICAL NAME</u>	<u>COMMON NAME</u>	<u>CAS NO.</u>	<u>ACGIH TLV</u>	<u>OSHA PEL</u>	<u>OTHER LIMITS</u>
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This product is considered non-hazardous per the OSHA communication standard

SECTION III - PHYSICAL/CHEMICAL CHARACTERISTICS

BOILING POINT (° F) 212	SPECIFIC GRAVITY (H ₂ O = 1) 1.0-1.1
VAPOR PRESSURE (mm hG) N/A	PERCENT VOLATILE BY VOLUME (%) N/A
VAPOR DENSITY (AIR = 1) N/A	EVAPORATION RATE (nBuOAc = 1) N/A
SOLUBILITY IN WATER 100%	APPEARANCE AND ODOR Transparent and fragrant

SECTION IV - FLAMMABILITY AND REACTIVITY

FLASH POINT (METHOD USED)	
> 212 F (closed cup)	EXPLOSIVE LIMIT
N/A	LEL
N/A	UEL

EXTINGUISHING MEDIA: **Will not sustain combustion**

SPECIAL FIRE FIGHTING PROCEDURES: **N/A**

UNUSUAL FIRE HAZARDS: **None**

STABILITY **STABLE**

CONDITIONS TO AVOID: **None**

HAZARDOUS DECOMPOSITION PRODUCTS: **None**

HAZARDOUS POLYMERIZATION WILL NOT OCCUR

SECTION V - HEALTH AND SAFETY DATA

ROUTES OF ENTRY: **Oral, Eye**

HEALTH HAZARDS (ACUTE AND CHRONIC): **None**

SIGNS AND SYMPTOMS OF EXPOSURE: **None**

MEDICAL CONDITIONS GENERALLY AGGRAVATED BY EXPOSURE: **None**

EMERGENCY AND FIRST AID PROCEDURES: **Flush with water if prolonged eye exposure occurs.**

OTHER:

SECTION VI - PRECAUTIONS FOR SAFE HANDLING AND USE

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING: **No special precautions**

OTHER PRECAUTIONS:

STEPS TO BE TAKEN IN CASE IS RELEASED OR SPILLED: **Mop up, flush down drain with excess water**

WASTE DISPOSAL METHOD: **Non hazardous waste**

SECTION VII - SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION (Specify Type): **None required with normal use**

VENTILATION

LOCAL EXHAUST: **None required with normal use**

MECHANICAL (General): **Acceptable** SPECIAL : **None**

OTHER :

EYE PROTECTION : **None required with normal use**

PROTECTIVE GLOVES : **None required with normal use**

OTHER PROTECTIVE EQUIPMENT : **None required with normal use**

*N.A. - NOT APPLICABLE

*N.K. - NOT KNOWN