

MATERIAL SAFETY DATA SHEET				ADDRESS: Freylube Division 41 E. Tupper Street Buffalo, NY 14203-1394	
PRODUCT IDENTIFICATION	Product Name Freylube Supra		Code No. SL-046		Emergency Phone Number (s) Business: (716) 854-3832 Other: (716) 854-2159 – Fax
	Chemical Name Lubricating Grease				Date: October 3, 2008
	Synonyms #1 Synthetic Lithium Grease				Chemical Family Polyglycol
INGREDIENTS	MATERIALS OR COMPONENTS		% W	CAS NUMBER	CARCINOGEN OSHA OR IARC
SHIP. INFO.	Non-Restricted				
PHYSICAL PROPERTIES	Boiling Point / Range °C 392 °F		Melting Point N/A °C °F		Freezing Point N/A °C °F
	Molecular Weight (Calculated) N/A		Specific Gravity (H2O=1) .98 @ / 16 °C		Vapor Pressure (mm Hg) <0.01 @ 20 °C °F
	Vapor Density (Air=1) <1		Solubility in H2O Nil		% Volatiles By Volume 0
	Evaporation Rate N/A <input type="checkbox"/> Ether=1 <input type="checkbox"/> Water=1 <input type="checkbox"/> Butylacetate=1		Appearance and Odor Gray Semi-Solid		
FIRE AND EXPLOSION DATA	Flash Point °C 460 °F		Test Method D-92		Flammable Limits Lower N/A % Upper %
	Autoignition Temperature/Fire Point °C 500 °F		EXTINGUISHING MEDIA <input type="checkbox"/> Water-Spray <input checked="" type="checkbox"/> Water-Fog <input type="checkbox"/> Water-Stream <input checked="" type="checkbox"/> CO2 <input checked="" type="checkbox"/> Dry Chemical <input checked="" type="checkbox"/> Alcohol Foam <input checked="" type="checkbox"/> Foam <input checked="" type="checkbox"/> Earth or Sand		
	SPECIAL FIRE FIGHTING PROCEDURES <input type="checkbox"/> Do Not Enter Building <input type="checkbox"/> Allow Fire To Burn <input checked="" type="checkbox"/> Water May Cause Frothing <input type="checkbox"/> Do Not Use Water				
	UNUSUAL FIRE AND EXPLOSION HAZARDS <input type="checkbox"/> Dust Explosion Hazard <input type="checkbox"/> Sensitive To Shock <input type="checkbox"/> Contamination <input type="checkbox"/> Temperature <input type="checkbox"/> Other (Specify): None				
REACTIVITY DATA	STABILITY <input checked="" type="checkbox"/> Stable <input type="checkbox"/> Unstable		CONDITIONS CONTRIBUTING TO INSTABILITY <input type="checkbox"/> Thermal Decomposition <input type="checkbox"/> Photo Degradation <input type="checkbox"/> Polymerization <input type="checkbox"/> Contamination		
	INCOMPATIBILITY – AVOID CONTACT WITH <input checked="" type="checkbox"/> Strong Acids <input checked="" type="checkbox"/> Strong Alkalis <input checked="" type="checkbox"/> Strong Oxidizers <input type="checkbox"/> Other (Specify):				
	HAZARDOUS DECOMPOSITION PRODUCTS – THERMAL AND OTHER (LIST) Oxides of Carbon and Sulfur if burned.				
	CONDITIONS TO AVOID <input type="checkbox"/> Heat <input checked="" type="checkbox"/> Open Flames <input type="checkbox"/> Sparks <input type="checkbox"/> Ignition Sources <input type="checkbox"/> Other (Specify):				
SPILL OR LEAK	STEPS TO BE TAKEN IF MATERIAL IS RELEASED OR SPILLED <input type="checkbox"/> Flush With Water <input checked="" type="checkbox"/> Absorb With Sand Or Inert Material <input type="checkbox"/> Neutralize <input checked="" type="checkbox"/> Sweep Or Scoop Up And Remove <input type="checkbox"/> Keep Upwind. Evacuate Enclosed Spaces <input type="checkbox"/> Prevent Spread Of Spill <input type="checkbox"/> Dispose of Immediately <input type="checkbox"/> Other (Specify):				
	WASTE DISPOSAL METHOD – CONSULT FEDERAL, STATE, OR LOCAL AUTHORITIES FOR PROPER DISPOSAL PROCEDURES Incinerate				

Product Name: Freylube Supra

Code No. SL-046

Before using product, read and follow directions and precautions on product label and bulletins.

TOXICITY	CONDITIONS TO AVOID Excessive Skin Contact	
	PRIMARY ROUTES OF ENTRY <input type="checkbox"/> INHALATION <input checked="" type="checkbox"/> SKIN CONTACT <input type="checkbox"/> OTHER (SPECIFY):	
	This product contains no carcinogens or mutagens as defined by OSHA or IARC. All components are listed on the TSCA Inventory, and Canadian DSL Chemical Inventory. This Product contains no controlled substance under WHMIS.	
HEALTH HAZARD INFORMATION	EFFECTS OF EXPOSURE	PERMISSIBLE EXPOSURE LIMIT (SPECIFY IF TLV/TWA OR CEILING ©) ACGIH None Established OSHA None Established OTHER:
		IRRITATION <input checked="" type="checkbox"/> SKIN <input type="checkbox"/> SEVERE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> MILD (TRANSIENT) <input checked="" type="checkbox"/> EYE <input type="checkbox"/> SEVERE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> MILD (TRANSIENT)
		CORROSIVITY <input type="checkbox"/> SKIN <input type="checkbox"/> 4 HRS. (DOT) <input type="checkbox"/> 24 HRS. (CPSC) <input type="checkbox"/> EYE <input type="checkbox"/> MAY CAUSE BLINDNESS <input checked="" type="checkbox"/> NOT CORROSIVE
		SENSITIZATION <input type="checkbox"/> SKIN <input type="checkbox"/> RESPIRATORY <input checked="" type="checkbox"/> NONE
		INHALATION EFFECTS <input type="checkbox"/> NARCOTIC EFFECT N/A <input type="checkbox"/> CYANOSIS <input type="checkbox"/> ASPHYXIANT
		LUNG EFFECTS (SPECIFY) N/A
		OTHER (SPECIFY) <input type="checkbox"/> REPEATED CONTACT-SKIN DEFATTER <input type="checkbox"/> OTHER (SPECIFY): None
	EMERGENCY FIRST AID	INGESTION <input type="checkbox"/> INDUCE VOMITING <input checked="" type="checkbox"/> DO NOT INDUCE VOMITING <input type="checkbox"/> GIVE PLENTY OF WATER <input checked="" type="checkbox"/> GET MEDICAL ATTENTION <input type="checkbox"/> OTHER (SPECIFY):
		DERMAL <input checked="" type="checkbox"/> FLUSH WITH SOAP AND WATER <input type="checkbox"/> GET MEDICAL ATTENTION <input checked="" type="checkbox"/> CONTAMINATED CLOTHING – REMOVE AND LAUNDRER <input type="checkbox"/> CONTAMINATED SHOES – DESTROY <input type="checkbox"/> OTHER (SPECIFY):
		EYE CONTACT <input checked="" type="checkbox"/> FLUSH WITH PLENTY OF WATER FOR AT LEAST 15 MIN. <input checked="" type="checkbox"/> GET MEDICAL ATTENTION <input type="checkbox"/> OTHER (SPECIFY):
INHALATION <input type="checkbox"/> REMOVE TO FRESH AIR <input type="checkbox"/> IF NOT BREATHING, GIVE ARTIFICIAL RESPIRATION <input type="checkbox"/> GIVE OXYGEN <input type="checkbox"/> GET MEDICAL ATTENTION <input type="checkbox"/> OTHER (SPECIFY): N/A		
OTHER (SPECIFY):		
SPECIAL PROTECTION INFORMATION	VENTILATION REQUIREMENTS – <i>Always maintain exposure below permissible exposure limits</i> <input type="checkbox"/> CONSULT AN INDUSTRIAL HYGIENIST OR ENVIRONMENTAL HEALTH SPECIALIST <input type="checkbox"/> LOCAL EXHAUST <input checked="" type="checkbox"/> USE WITH ADEQUATE VENTILATION <input type="checkbox"/> CHECK FOR AIR CONTAMINANT AND OXYGEN DEFICIENCY <input type="checkbox"/> OTHER (SPECIFY):	
	EYE <input checked="" type="checkbox"/> SAFETY GLASSES <input type="checkbox"/> FACE SHIELD <input type="checkbox"/> GOGGLES HAND (GLOVE TYPE) <input checked="" type="checkbox"/> BUTYL RUBBER <input type="checkbox"/> POLYVINYL ALCOHOL <input type="checkbox"/> OTHER (SPECIFY): <input checked="" type="checkbox"/> POLYVINYL CHLORIDE <input type="checkbox"/> NEOPRENE <input checked="" type="checkbox"/> NATURAL RUBBER <input checked="" type="checkbox"/> POLY-ETHYLENE	
	RESPIRATOR TYPE – <i>Use only NIOSH / MESA approved equipment</i> <input type="checkbox"/> SELF-CONTAINED <input type="checkbox"/> SUPPLIED AIR <input type="checkbox"/> CAN OR CARTRIDGE GAS OR VAPOR <input type="checkbox"/> FILTER-DUST, FUME, MIST <input type="checkbox"/> OTHER (SPECIFY): N/A	
	OTHER PROTECTIVE EQUIPMENT <input type="checkbox"/> RUBBER BOOTS <input type="checkbox"/> APRON <input type="checkbox"/> OTHER (SPECIFY): None	
SPECIAL PRECAUTIONS	PRECAUTIONARY NOTES <input checked="" type="checkbox"/> WASH THOROUGHLY AFTER HANDLING <input checked="" type="checkbox"/> DO NOT GET IN EYES OR ON CLOTHING <input type="checkbox"/> DO NOT BREATH DUST, VAPOR, MIST, GAS <input type="checkbox"/> KEEP CONTAINER CLOSED <input checked="" type="checkbox"/> KEEP AWAY FROM SPARKS, AND OPEN FLAMES <input type="checkbox"/> STORE IN TIGHTLY CLOSED CONTAINER <input type="checkbox"/> DO NOT STORE NEAR COMBUSTIBLES <input type="checkbox"/> KEEP FROM CONTACT WITH CLOTHING AND OTHER COMBUSTIBLE MATERIALS <input type="checkbox"/> EMPTY CONTAINER MAY CONTAIN HAZARDOUS RESIDUE <input type="checkbox"/> USE EXPLOSION PROOF EQUIPMENT <input type="checkbox"/> OTHER (SPECIFY):	
	OTHER HANDLING AND STORAGE CONDITIONS None	
PREPARED BY Brian Kusak, Tech. Director DATE 10/03/08 ADDRESS 41 E. Tupper Street Buffalo, NY 14203-1394 PHONE (716) 854-3832		
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