

CODES: 49016 - 17  
49034  
49002, 49, 48  
49103  
49003, 40, 41

# Material Safety Data Sheet

May be used to comply with OSHA's Hazard Communication Standard, 29 CFR 1910.1200. Standard must be consulted for specific requirements.

IDENTITY (As Used on Label and List) CHALK PASTELS

## Section I

Distributor's Name	Sargent Art, Inc.
Address (Number, Street, City, State, and ZIP Code)	
100 E Diamond Avenue	
Hazleton PA 18201	

## Section II - Hazard Ingredients/Identity Information

Hazardous Components (Specific Chemical Identity; Common Name(s))

ALL AP PRODUCTS ARE CERTIFIED BY A NATIONALLY RECOGNIZED AUTHORITY
ON TOXICOLOGY ASSOCIATED WITH A LEADING UNIVERSITY TO CONTAIN
NO KNOWN TOXIC MATERIALS IN SUFFICIENT QUANTITIES TO BE

INJURIOUS TO THE HUMAN BODY EVEN IF INGESTED.

CONFORMS TO ASTM-D 4236.

Section III - Physical/Chemical Characteristics

Boiling Point	NOT APPLICABLE
Vapor Pressure (mm Hg.)	N/A
Vapor Density (AIR = 1)	N/A

Solubility in Water

Appearance and Odor

Section IV - Fire and Explosion Hazard Data

Flash Point (Method Used)	N/A
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Extinguishing Media  
Special Fire Fighting Procedures

Unusual Fire and Explosion Hazards

Section V - Reactivity Data

Stability

Incompatibility (Materials to Avoid) *Strong oxidizers and acids*

Hazardous Decomposition or Byproducts

Hazardous *May Occur*

Polymerization Will Not Occur

**Section VI - Health Hazard Data**

Route(s) of Entry: Inhalation? Possible

**Health Hazards (Acute and Chronic)**

This product is certified to contain no materials in sufficient quantities to be toxic or injurious to humans or to cause acute or chronic health problems.

Carcinogenicity: NTP? None

**Signs and Symptoms of Exposure**

Medical Conditions Generally Aggravated by Exposure

**Emergency and First Aid Procedures****Section VII - Precautions for Safe Handling and Use****Steps to Be Taken in Case Material is Released or Spilled****Waste Disposal Method****Precautions to Be taken in Handling and Storing****Other Precautions****Section VIII - Control Measures****Respiratory Protection (Specify Type)**

Ventilation Local Exhaust

Mechanical (General)

Protective Gloves

Other Protective Clothing or Equipment  
Work/Hygienic Practices

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### U.S. Department of Labor

Occupational Safety and Health Administration  
(Non-Mandatory Form)  
Form Approved  
OMB No. 1218-0072

Note: Blank spaces are not permitted. If any item is not applicable, or no information is available, the space must be marked to indicate that.

Emergency Telephone Number	570-454-3596
Telephone Number for Information	570-454-3596
Date Prepared	7-26-2002
Signature of Preparer (optional)	


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Specific Gravity (H <sub>2</sub> O = 1)	N/A	Melting Point	N/A
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Evaporation Rate (Butyl Acetate = 1) N/A

Insoluble

Various Colors - Essentially Odorless

Flammable Limits	LEL	UEL	NONE
NONE	NONE		

CARBON DIOXIDE, WATER, FOAM  
 SELF-CONTAINED BREATHING  
 APPARATUS  
 NONE

Unstable Conditions to Avoid

Stable X None Known

Strong oxidizers and acids

Conditions to Avoid None Known

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Skin? N/A      Ingestion? Possible

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IARC Monographs? N/A      OSHA Regulated? No

None Known

None Known

If ingested, do not induce vomiting,  
call physician.

Sweep into container and dispose of  
according to local regulations.

In accordance with local regulations.

Keep in cool, dry area.

None Known

Not Required.

Not Required      Special      None

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Not Required	Other	None
Not Required	Eye Protection	Not Required

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Not Required  
Clean, safe work practices

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