SCALPA

| IDENTITY (As Used on Label and List) | |
|---|----------------------------------|
| Paint No. RD-6 | |
| Section I | |
| Manufacturer's Name | Emergency Telephone Number |
| Scalp Aesthetics | 1-855-424-7828 |
| Address (Number, Street, City, State, and ZIP Code) | Telephone Number for Information |
| 85 Allen St Suite 110, Rochester, NY 14608 | 1-855-424-7828 |
| | Date Prepared 4-4-18 |

Section II - Hazard Ingredients/Identity Information

Γ

| Hazardous Components (Specific Chemical Identity; Common Name(s)) | OSHA PEL | ACGIH TLV | | Other Limits Recomme nded | % (optional) |
|--|-------------|--------------|----|------------------------------------|-----------------|
| Pigment Red 269 (CAS#67990-05-0) 10% | 1 | NA | NA | 4 | NA |
| Isopropyl Alcohol (CAS# 67-63-0) 10% | 40 | Oppm | NA | N | IA |
| (pH = 8.46 neat) | ١ | A | NA | . N | A |

Section III – Physical/Chemical Characteristics

| oiling Point (deg.C.) 92 Spec | | Specific Gravity (H ₂ 0 = 1) | pecific Gravity (H ₂ 0 = 1) | |
|---|-----------|---|--|-----------|
| Vapor Pressure (mm Hg.) | 50 | 0 Melting Point (deg.C.) | | Ca. 0 |
| Vapor Density (AIR = 1) | Ca. 2 | Evaporation Rate (Butyl Acetate = 1) | | < 1 |
| Solubility in Water Dispersible in all proportio | ns. | | | • |
| Appearance and Odor red pigment dispersion wit | h faint (| odor. | | |
| Section IV – Fire and Explosio | n Hazaı | rd Data | | |
| Flash Point (Method Used) None, TOC | | Flammable Limits NA | NA | JEL NA |
| Extinguishing Media NA | | | | |
| Special Fire Fighting Procedu NA | ires | | | |
| Unusual Fire and Explosion H | lazards | | | |

(Reproduce locally) 1985

OSHA 174, Sept.

Section V – Reactivity Data

| Stability | Unstable | | Conditions to Avoid NA | | |
|---|-------------------|---------------|---------------------------|--|--|
| Stability | Stable | x | Oxidizing agents NA | | |
| Incompatibility <i>(Materials to Avoid)</i> NA | | | | | |
| Hazardous De NA | ecomposition | or Byproducts | | | |
| Hazardous Polymerizati on | May Occur | | Conditions to Avoid | | |
| | Will Not Occur | x | NA | | |

Section VI – Health Hazard Data

| Route(s) of Entry | Inhalation? Ye | es Sk | n? Yes | Ingestion? Yes | |
|--|----------------|-------|--------|----------------|--|
| Health Hazards (Acute and Chronic) | | | | | |
| Acute: None known for the pigment or dispersion agent. Chronic: None known for dispersion agent. Pigment is skin irritant for some individuals. | | | | | |

| Carcinogenicity: | NTP? No | IARC Monographs? No | OSHA Regulated? NA |
|----------------------|----------------------------|--------------------------------|-----------------------|
| Signs and Sympton | ns of Exposure | · | |
| None | | | |
| Medical Conditions | Generally Aggravate | d by Exposure | |
| None known. | | | |
| | | | |
| Emergency and Fire | st Aid Procedures | | |
| For skin exposur | e, no irritation is likely | • | |
| - | e, flush with large qua | | |
| For inhalation, no | o irritation is likely. | | |
| For ingestion, dri | nk two glasses of wat | er, induce vomiting and seek r | nedical help. |
| | | | |
| Section VII– Precaut | ions for Safe Handling | g and Use | |
| Steps to Be Taken i | n Case Material is Rel | eased or Spilled | |

Absorb liquid with paper towels or other absorbent material.

Waste Disposal Method

Dispose of material in accordance with local, state and federal regulations

Steps to Be Taken in Handling and Storing

Special gloves and clothing not generally required but safety glasses should be used. For prolonged exposure, use neoprene or rubber gloves. Store in cool well-ventilated area.

Other Precautions

If large quantities are involved, use safety shower and eyewash fountain.

Section VIII– Control Measures

| Respiratory Protectio | on (Specify Type) | |
|-------------------------------|---|-----------------|
| None required with | n normal handling. | |
| Ventilation None required. | Local Exhaust None required. | Special None |
| | Mechanical <i>(General)</i> None required. | Other None |

| Protective Gloves | Eye Protection | | | |
|---|----------------|--|--|--|
| None required | Yes | | | |
| Other Protective Clothing or Equipment (Specify Type) | | | | |
| Generally not required. | | | | |
| Work/Hygienic Practices | | | | |
| Normal care and cleanliness. | | | | |

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