|  |  |  |  |
| --- | --- | --- | --- |
| **Substance Name:** | **Kilfrost GEO** | **Manufacturer:** | **Kilfrost** |
| Is hazard data sheet available: Yes [x]  No [ ]  | **Assessment Reference No**. | **E0258** |
| **Note: Not classified as (physical, health or environmental) hazardous.** |
| Explosive |  |[ ]  Corrosive |  |[ ]
| Health Hazard |  |[ ]  Oxidizing |  |[ ]
| Serious Health Hazard |  |[ ]  Toxicity 1-3 |  |[ ]
| Flammable |  |[ ]  Acute Toxicity 4 |  |[ ]
| Carcinogenic |  |[ ]  Harmful to Aquatic Environment |  |[ ]
| Gas Under Pressure |  |[ ]  Hazardous to the Ozone Layer |  |[ ]
| Dust/Fume |  |[ ]  Irritant |  |[ ]

|  |  |
| --- | --- |
| **Description of current or proposed use:** | **Current controls:** |
| Filling GEJ Engine system with Antifreeze/Coolant.Usually diluted to a 30% (approx) mix with water.Generally, the product itself is not handled directly, except in instances where it may be required to be decanted from the drum into a smaller container. | Used in well-ventilated area PPE used.Provide eyewash station. Wash hands after handling. Wash contaminated clothing before reuse.Stored in tightly-closed, original container in a dry, cool and well-ventilated place |
| **Estimated duration of operator exposure.** | <30 minutes |
| **Estimated quantity used.** | 1000 Litres  |
| **Potential exposure routes.** | **Current PPE specified.** |
| Skin contact |[x]  Skin Absorption |[ ]  Eye/Face |[x]  Goggles |
| Inhalation |[x]  Eye |[x]  Respiratory |[x]  If ventilation is inadequate, suitable respiratory protection must be worn. |
| Ingestion |[x]   |[ ]  Body |[x]  Wear suitable protective clothing as protection against splashing or contamination |
| Sharps and Puncture |[ ]   |[ ]  Hand |[x]  Chemical-resistant, impervious gloves complying with an approved standard should be worn if skin contact is possible. |
| Contaminated Clothing |[ ]   |[ ]  Other |[ ]   |
| Is the method of use in accordance with supplier’s guidance?  | Yes |[x]  No |[ ]
| Are control measures in accordance with supplier’s guidance?  | Yes |[x]  No |[ ]
| Is the material stored in accordance with supplier’s guidance?  | Yes |[x]  No |[ ]
| Can spillages or accidental release be dealt with satisfactorily?  | Yes |[x]  No |[ ]
| Is adequate and suitable fire-fighting equipment available?  | Yes |[x]  No |[ ]
| Are adequate and suitable first-aid facilities available?  | Yes |[x]  No |[ ]
| Are all risks adequately controlled?  | Yes |[x]  No |[ ]
| Less hazardous alternatives to be sought?  | Yes  |[ ]  No  |[x]  Additional or upgraded PPE required?Yes [ ]  No [x]  |
| Other controls or action required?  | Yes  |[ ]  No  |[x]   |
| **Assessed by:**  | Mike Turner | **Date:**  | 01.01.2023. |