


PRODUCT SAFETY CARD

PROPER SHIPPING NAME: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (CYPRODINIL), Class 9, Packing group III, UN: 3077, Marine Pollutant		DG CLASS: 9	SUB RISK: N/A	PCKG GRP: III	MAX TQ: 250KG	TRADE NAME: MIRANO WG	
UN No: 3077	FLASH POINT: NOT FLAMMABLE	HAZCHEM: 2X	HSNO CLASSIFICATIONS: 6.1E, 6.9B, 9.1A		CAS NUMBER: 121552-61-2	SUBSTANCE COMPOSITION: 500g/kg CYPRODINIL	APPROVED HANDLER: YES
TRACKING: -	STATE: POWDER	MARINE POLLUTANT: YES 		FLAMMABLE: NO		SUPPLIER: ADRIA CROP PROTECTION P.O. BOX 535 KUMEU, AUCKLAND. PH: 09-412-9817 FAX: 09-412-9807	

EMERGENCY MANAGEMENT

FIRST AID:	Swallowed: If swallowed do NOT induce vomiting. For advice, contact the National Poisons Centre 0800 POISON (0800 764 766) or a doctor immediately.
	Eyes: If product gets in eyes, wash eyes to remove material. No further measures should normally be required.
	Skin: After contact with skin or hair, wash immediately with soap and water.
	Inhaled: Remove to fresh air.
FIRE:	Make use of water fog or fine spray, foam, dry chemical, or carbon dioxide to extinguish fires.
SPILLAGE:	Wear appropriate protective clothing and prevent material from entering waterways. Absorb spills with inert material and place in waste containers. Wash area with water and absorb with further inert material. Dispose of waste safely (such as to a suitable landfill).
DISPOSAL:	Ensure the packaging is empty. Rinse the packaging and add the residue to the spray tank. If allowed under local Territorial Authority District Plans, burn if circumstances, especially wind direction permit, otherwise crush and bury in an approved local authority facility. DO NOT reuse this container for any other purpose.

IN CASES OF MEDICAL EMERGENCY CONTACT:
NATIONAL POISONS CENTRE – PH: 0800 764 766

DISCLAIMER:

The product information provided in this Product Safety Card has been provided by Adria Crop Protection and is based upon sources believed to be accurate. Adria Crop Protection does not accept any liability arising from the use of this information.

CONSIGNOR: Name: Address: Contact:	CONSIGNEE: Name: Address: Contact:	GROSS WEIGHT:	VOLUME (CUBIC METRES):
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