

TITAN CHLOROTHALONIL 900 WG FUNGICIDE

Titan Ag

Chemwatch: 9045-42

Version No: 2.1

Safety Data Sheet according to Work Health and Safety Regulations (Hazardous Chemicals) 2023 and ADG requirements

Chemwatch Hazard Alert Code: 4

Initial Date: 08/07/2026

Revision Date: 08/07/2026

Print Date: 10/07/2026

L.GHS.AUS.EN.E

SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	TITAN CHLOROTHALONIL 900 WG FUNGICIDE
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	ORGANOCHLORINE PESTICIDE, SOLID, TOXIC (contains chlorothalonil)
Chemical formula	Not Applicable
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Agricultural fungicide. Use according to manufacturer's directions.
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Details of the manufacturer or importer of the safety data sheet

Registered company name	Titan Ag
Address	Princes Street Marina, Suite 15/16 Princes Street Newport NSW 2106 Australia
Telephone	+61 2 9999 6655
Fax	+61 2 9999 0483
Website	https://www.titanag.com.au/
Email	titanorders@titanag.com.au

Emergency telephone number

Association / Organisation	Titan Ag
Emergency telephone number(s)	1800 033 111 (24 hours)
Other emergency telephone number(s)	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	S6
Classification ^[1]	Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 1, Acute Toxicity (Inhalation) Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Carcinogenicity Category 2, Hazardous to the Aquatic Environment Long-Term Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	   
Signal word	Danger

Hazard statement(s)

H317	May cause an allergic skin reaction.
H318	Causes serious eye damage.
H330	Fatal if inhaled.
H335	May cause respiratory irritation.
H351	Suspected of causing cancer.
H410	Very toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P273	Avoid release to the environment.
P284	[In case of inadequate ventilation] wear respiratory protection.
P202	Do not handle until all safety precautions have been read and understood.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P391	Collect spillage.

Precautionary statement(s) Storage

P403+P233	Store in a well-ventilated place. Keep container tightly closed.
P405	Store locked up.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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No further product hazard information.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
1897-45-6	90	chlorothalonil
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available	

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: ▶ Immediately hold eyelids apart and flush the eye continuously with running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▶ Transport to hospital or doctor without delay. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs: ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	▶ If fumes or combustion products are inhaled remove from contaminated area. ▶ Lay patient down. Keep warm and rested. ▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▶ Transport to hospital, or doctor, without delay.
Ingestion	▶ Give a slurry of activated charcoal in water to drink. NEVER GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK. ▶ At least 3 tablespoons in a glass of water should be given. ▶ Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of

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emptying the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor.

NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear protective gloves when inducing vomiting.

- ▶ REFER FOR MEDICAL ATTENTION WITHOUT DELAY.
- ▶ In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.
- ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist.
- ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. (ICSC20305/20307)

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

BASIC TREATMENT

- ▶ Establish a patent airway with suction where necessary.
- ▶ Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- ▶ Administer oxygen by non-rebreather mask at 10 to 15 L/min.
- ▶ Monitor and treat, where necessary, for pulmonary oedema.
- ▶ Monitor and treat, where necessary, for shock.
- ▶ Anticipate seizures.
- ▶ **DO NOT** use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

ADVANCED TREATMENT

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.
- ▶ Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema.
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- ▶ Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

SECTION 5 Firefighting measures

Extinguishing media

- ▶ Water spray or fog.
- ▶ Foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.

Special hazards arising from the substrate or mixture

Fire Incompatibility

- ▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

Advice for firefighters

Fire Fighting

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- ▶ Wear full body protective clothing with breathing apparatus.
- ▶ Prevent, by any means available, spillage from entering drains or water course.
- ▶ Use fire fighting procedures suitable for surrounding area.
- ▶ **Do not approach containers suspected to be hot.**
- ▶ Cool fire exposed containers with water spray from a protected location.
- ▶ If safe to do so, remove containers from path of fire.
- ▶ Equipment should be thoroughly decontaminated after use.

Fire/Explosion Hazard

- ▶ Solid which exhibits difficult combustion or is difficult to ignite.
 - ▶ Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion.
 - ▶ Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited; once initiated larger particles up to 1400 microns diameter will contribute to the propagation of an explosion.
 - ▶ A dust explosion may release large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.
 - ▶ Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type.
 - ▶ Dry dust can also be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
 - ▶ Build-up of electrostatic charge may be prevented by bonding and grounding.
 - ▶ Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.
 - ▶ All movable parts coming in contact with this material should have a speed of less than 1-metre/sec.
- Combustion products include:
- ▶ carbon monoxide (CO)
 - ▶ carbon dioxide (CO₂)
- hydrogen chloride
phosgene
nitrogen oxides (NO_x)
- ▶ other pyrolysis products typical of burning organic material.

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	May emit poisonous fumes.
HAZCHEM	2X

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	▶ Clean up waste regularly and abnormal spills immediately. ▶ Avoid breathing dust and contact with skin and eyes. ▶ Wear protective clothing, gloves, safety glasses and dust respirator. ▶ Use dry clean up procedures and avoid generating dust. ▶ Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (H-Class HEPA type) (consider explosion-proof machines designed to be grounded during storage and use). H-Class HEPA filtered industrial vacuum cleaners should NOT be used on wet materials or surfaces. ▶ Dampen with water to prevent dusting before sweeping. ▶ Place in suitable containers for disposal.
Major Spills	▶ DO NOT touch the spill material ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. ▶ Neutralise/decontaminate residue (see Section 13 for specific agent). ▶ Collect solid residues and seal in labelled drums for disposal. ▶ Wash area and prevent runoff into drains. ▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using. ▶ If contamination of drains or waterways occurs, advise emergency services.

Personal Protective Equipment advice is contained in Section 8 of the SDS.

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	▶ Avoid skin contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ DO NOT allow material to come in direct contact with human skin or eyes. ▶ DO NOT allow material to come in contact with exposed food or food contact surfaces. ▶ Suitable PPE must be worn at all times. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use. ▶ Avoid physical damage to containers. ▶ Always wash hands with soap and water after handling. ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained. ▶ Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions) ▶ Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame. ▶ Establish good housekeeping practices. ▶ Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds. ▶ Use continuous suction at points of dust generation to capture and minimise the accumulation of dusts. Particular attention should be given to overhead and hidden horizontal surfaces to minimise the probability of a "secondary" explosion. According to NFPA Standard 654, dust layers 1/32 in. (0.8 mm) thick can be sufficient to warrant immediate cleaning of the area. ▶ Do not use air hoses for cleaning. ▶ Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area. Vacuums with explosion-proof motors should be used. ▶ Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition. ▶ Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national guidance. ▶ Do not empty directly into flammable solvents or in the presence of flammable vapors. ▶ The operator, the packaging container and all equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastics cannot be grounded, and antistatic bags do not completely protect against development of static charges. Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source. ▶ Do NOT cut, drill, grind or weld such containers. ▶ In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.
Other information	▶ Store in original containers. ▶ Keep containers securely sealed. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

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Conditions for safe storage, including any incompatibilities

Suitable container	▶ Glass container is suitable for laboratory quantities ▶ Lined metal can, lined metal pail/ can. ▶ Plastic pail. ▶ Polyliner drum. ▶ Packing as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks. For low viscosity materials ▶ Drums and jerricans must be of the non-removable head type. ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.): ▶ Removable head packaging; ▶ Cans with friction closures and ▶ low pressure tubes and cartridges may be used. - Where combination packages are used, and the inner packages are of glass, there must be sufficient inert cushioning material in contact with inner and outer packages *. - In addition, where inner packagings are glass and contain liquids of packing group I and II there must be sufficient inert absorbent to absorb any spillage *. - * unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic. All inner and sole packagings for substances that have been assigned to Packaging Groups I or II on the basis of inhalation toxicity criteria, must be hermetically sealed.
	Storage incompatibility ▶ Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

MATERIAL DATA

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum.

NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- ▶ cause inflammation
- ▶ cause increased susceptibility to other irritants and infectious agents
- ▶ lead to permanent injury or dysfunction
- ▶ permit greater absorption of hazardous substances and
- ▶ acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Exposure controls

Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. An approved self contained breathing apparatus (SCBA) may be required in some situations.

Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
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	<table> <tr> <td>1: Room air currents minimal or favourable to capture</td><td>1: Disturbing room air currents</td></tr> <tr> <td>2: Contaminants of low toxicity or of nuisance value only.</td><td>2: Contaminants of high toxicity</td></tr> <tr> <td>3: Intermittent, low production.</td><td>3: High production, heavy use</td></tr> <tr> <td>4: Large hood or large air mass in motion</td><td>4: Small hood-local control only</td></tr> </table> Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used. Concentrate material is measured and mixed, preferably outdoors, in proportions as recommended by manufacturer.	1: Room air currents minimal or favourable to capture	1: Disturbing room air currents	2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity	3: Intermittent, low production.	3: High production, heavy use	4: Large hood or large air mass in motion	4: Small hood-local control only
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents								
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3: Intermittent, low production.	3: High production, heavy use								
4: Large hood or large air mass in motion	4: Small hood-local control only								
Individual protection measures, such as personal protective equipment	     								
Eye and face protection	▶ Safety glasses with side shields. ▶ Chemical goggles.[AS/NZS 1337.1, EN166 or national equivalent] ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].								
Skin protection	See Hand protection below								
Hands/feet protection	▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber NOTE: ▶ The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. ▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: · frequency and duration of contact, · chemical resistance of glove material, · glove thickness and · dexterity Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent). · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use. · Contaminated gloves should be replaced. As defined in ASTM F-739-96 in any application, gloves are rated as: · Excellent when breakthrough time > 480 min · Good when breakthrough time > 20 min · Fair when breakthrough time < 20 min · Poor when glove material degrades For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended. It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times. Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: · Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.								
Body protection	See Other protection below								
Other protection	▶ Overalls. ▶ Eyewash unit. ▶ Barrier cream. ▶ Skin cleansing cream.								

Respiratory protection

Full face respirator with supplied air.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-

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		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO₂), G = Agricultural chemicals, K = Ammonia(NH₃), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

Where significant concentrations of the material are likely to enter the breathing zone, a Class P3 respirator may be required.

Class P3 particulate filters are used for protection against highly toxic or highly irritant particulates.

Filtration rate: Filters at least 99.95% of airborne particles

Suitable for:

- Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.
- Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke.
- Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS
- Highly toxic particles e.g. Organophosphate Insecticides, Radionuclides, Asbestos

Note: P3 Rating can only be achieved when used with a Full Face Respirator or Powered Air-Purifying Respirator (PAPR). If used with any other respirator, it will only provide filtration protection up to a P2 rating.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Light brown solid.		
Physical state	Solid	Relative density (Water = 1)	~1.8
Odour	Slight, Pungent	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	6-8	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	~252	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	>350	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Negligible	Gas group	Not Available
Solubility in water	Partly miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available
Heat of Combustion (kJ/g)	Not Available	Ignition Distance (cm)	Not Available
Flame Height (cm)	Not Available	Flame Duration (s)	Not Available
Enclosed Space Ignition Time Equivalent (s/m ³)	Not Available	Enclosed Space Ignition Deflagration Density (g/m ³)	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	- Unstable in the presence of incompatible materials. - Product is considered stable. - Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

a) Acute Toxicity	There is sufficient evidence to classify this material as acutely toxic.
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Continued...

TITAN CHLOROTHALONIL 900 WG FUNGICIDE

b) Skin Irritation/Corrosion	Based on available data, the classification criteria are not met.
c) Serious Eye Damage/Irritation	There is sufficient evidence to classify this material as eye damaging or irritating
d) Respiratory or Skin sensitisation	There is sufficient evidence to classify this material as sensitising to skin or the respiratory system
e) Mutagenicity	Based on available data, the classification criteria are not met.
f) Carcinogenicity	There is sufficient evidence to classify this material as carcinogenic
g) Reproductivity	Based on available data, the classification criteria are not met.
h) STOT - Single Exposure	There is sufficient evidence to classify this material as toxic to specific organs through single exposure
i) STOT - Repeated Exposure	Based on available data, the classification criteria are not met.
j) Aspiration Hazard	Based on available data, the classification criteria are not met.
Inhaled	Inhalation of dusts, generated by the material, during the course of normal handling, may produce severely toxic effects; these may be fatal. Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. Rat inhalation studies showed high toxicity with a fine 5-8 micron chlorothalonil dust. While there are no human toxicity records, all care is needed to avoid dust inhalation. The inhaled substance produces wheezing, nasal discharge and respiratory difficulties in animals. Histological examination revealed pulmonary congestion and oedema, bronchitis, tracheitis, bronchopneumonia and rhinitis. Systemic effects included liver necrosis
Ingestion	Accidental ingestion of the material may be severely damaging to the health of the individual; animal experiments indicate that ingestion of less than 5 gram may be fatal. Aromatic nitriles, unlike aliphatic nitriles, do not appear to readily liberate cyanide in vivo. Symptoms of acute toxicity seen in mice and rats given oral doses of chlorothalonil include dyspnea, diarrhoea, lachrymation, reduced motility, reduced reflexes and haematuria. In dogs treatment also produced vomiting.
Skin Contact	The material is not thought to be a skin irritant (as classified by EC Directives using animal models). Abrasive damage however, may result from prolonged exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected. Dermal application to rabbits lead to eye irritation, diarrhoea, local erythema and oedema. Patch testing indicated that 10-28% of 88 Japanese farmers were sensitive to chlorothalonil and other pesticides; 35 had acute dermatitis. In some cases photosensitisation was involved.
Eye	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation. Chlorothalonil caused severe damage to rabbit eyes with corneal clouding still present two weeks after instillation
Chronic	On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment. Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a substantial number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals. Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive. Substances than can cause occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers Wherever it is reasonably practicable, exposure to substances that can cause occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance. Toxic: danger of serious damage to health by prolonged exposure through inhalation, in contact with skin and if swallowed. Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage may become apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicity tests. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Susceptible persons may develop allergic skin reactions. Contact dermatitis has been reported for personnel working in chlorothalonil manufacturing and in farmers and horticultural workers. Workers in the manufacture of wood products have also developed contact dermatitis on the hands and face when wood preservatives containing chlorothalonil were used. Long term administration to animals produces kidney and stomach lesions. High concentrations of chlorothalonil in the diet of dogs caused thyroid changes (NOEL 500 mg/kg diet). The results of subchronic and chronic studies with mice, rats and dogs indicate that the kidney and stomach are the target organs of chlorothalonil toxicity. Non-neoplastic changes in the stomach (hyperplasia, hyperkeratosis) were the result of chronic irritation of the mucosa, those in the kidney took the form of hyperplasia in the proximal tubules with intracytoplasmic inclusions in the tubule cells. Neoplastic alterations developed in the organs of rats, and to a lesser extent, in mice given high doses of chlorothalonil. Long-term administration to mice and rats resulted in the development of renal tubule adenomas and carcinomas, and forestomach papillomas and carcinomas. Only a small percentage of the tumours were malignant; the overall incidences were low and mostly not dose dependent. In one study with the metabolite, 4-hydroxy-2,5,6-trichloroisophthalic dinitrile, no tumour increases were evident in mice fed 1500 ppm for 24 months. In studies with rats and rabbits, chlorothalonil doses which were toxic for the dams did not have embryotoxic or teratogenic effects. Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

Continued...

TITAN CHLOROTHALONIL 900 WG FUNGICIDE	TOXICITY	IRRITATION
	Not Available	Not Available
chlorothalonil	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >2000 mg/kg ^[2]	Eye: adverse effect observed (irreversible damage) ^[1]
	Inhalation (Rat) LC50: 0.078 mg/L4h ^[2]	Skin (Rodent - guinea pig): 0.5ppm
	Oral (Mouse) LD50: 3700 mg/kg ^[2]	Skin: adverse effect observed (irritating) ^[1]
		Skin: no adverse effect observed (not irritating) ^[1]
Legend: 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances		

TITAN CHLOROTHALONIL 900 WG FUNGICIDE	Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of reactions of the allergen with specific antibodies of the IgE class and belong in their reaction rates to the manifestation of the immediate type. In addition to the allergen-specific potential for causing respiratory sensitisation, the amount of the allergen, the exposure period and the genetically determined disposition of the exposed person are likely to be decisive. Factors which increase the sensitivity of the mucosa may play a role in predisposing a person to allergy. They may be genetically determined or acquired, for example, during infections or exposure to irritant substances. Immunologically the low molecular weight substances become complete allergens in the organism either by binding to peptides or proteins (haptens) or after metabolism (prohaptens). Particular attention is drawn to so-called atopic diathesis which is characterised by an increased susceptibility to allergic rhinitis, allergic bronchial asthma and atopic eczema (neurodermatitis) which is associated with increased IgE synthesis. Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.
CHLOROTHALONIL	ADI: 0.01 mg/kg/day NOEL: 1.5 mg/kg/day
TITAN CHLOROTHALONIL 900 WG FUNGICIDE & CHLOROTHALONIL	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production. WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans. for chlorothalonil: Chlorothalonil has low acute oral and dermal toxicity in rats and rabbits, respectively (acute oral and dermal LD50 values are > 10 000 mg/kg body weight). Hammer-milled technical chlorothalonil (MMAD 5-8 um) exhibited high toxicity in rats in an inhalation study, with a 4-h LC50 of 0.1 mg/litre. Chlorothalonil is a skin and eye irritant in the rabbit. Skin sensitization studies in the guinea-pig were inconclusive. The main effects of repeated oral dosing in rats are on the stomach and kidney. Groups of 25 rats of each sex per group were fed chlorothalonil at 0, 1.5, 3, 10 or 40 mg/kg body weight per day in the diet for 13 weeks, and this was followed by a 13-week recovery period. Increased incidences of hyperplasia and hyperkeratosis of the forestomach occurred at 10 and 40 mg/kg; these reversed when treatment ceased. At 40 mg/kg, there was an increased incidence of hyperplasia of kidney proximal tubular epithelium in males at 13 weeks and after the recovery period. The NOEL was 3 mg/kg body weight per day based upon lack of forestomach lesions. The onset of the forestomach and kidney changes was shown to be rapid, with the lesions developing within 4-7 days in male rats at a dietary level of 175 mg/kg body weight per day. In a 13-week study on mice (0, 7.5, 15, 50, 275 or 750 mg/kg in the diet), increased incidences of hyperplasia and hyperkeratosis of the squamous epithelial cells of the forestomach occurred in males and females at 50 mg/kg diet and above. The NOEL, based upon these changes, was 15 mg/kg chlorothalonil in the diet, equivalent to 3 mg/kg body weight per day. In a study on rats (0, 1.8, 3.8, 15 or 175 mg/kg body weight per day), the effects were characterized histologically as an increase in the incidence and severity of hyperplasia, hyperkeratosis, and ulcers and erosions of the squamous mucosa of the forestomach, and as epithelial hyperplasia of the kidney proximal convoluted tubules at 3.8 mg/kg and above. The NOEL for non-neoplastic effects was therefore 1.8 mg/kg. The incidence of renal tumours (adenomas and carcinomas) and forestomach tumours (papillomas and carcinomas) was markedly increased at 175 mg/kg. There was evidence for an increased incidence of kidney tumours in males at 15 mg/kg and of stomach tumours at 3.8 and 15 mg/kg in males and females. The NOEL for neoplastic effects was therefore 1.8 mg/kg body weight per day based upon changes in forestomach tumour incidence. Supporting evidence for the carcinogenic potential of chlorothalonil in the kidney and forestomach of rats was provided by the results from other 2-year studies at higher dose levels. Chlorothalonil was not mutagenic in several <i>in vitro</i> and <i>in vivo</i> tests, although it was positive in a small number of assays. The monothio, dithio, trithio, dicysteine, tricysteine and monogluthathione derivatives of chlorothalonil, which are potential nephrotoxics, were shown to be negative in the Ames assay. Chlorothalonil was not teratogenic in rats or rabbits at doses up to 400 and 50 mg/kg body weight per day, respectively. Reproductive parameters such as mating, fertility and gestation length were not affected by chlorothalonil at levels up to 1500 mg/kg in the diet in a two-generation study in rats. The acute oral toxicity of the 4-hydroxy metabolite is greater than that of chlorothalonil itself (acute oral LD50 of 332 mg/kg body weight versus > 10 000 mg/kg body weight). Several studies have been undertaken to characterize the toxicological profile of this metabolite and to establish NOELs About 30% of an oral dose of chlorothalonil is absorbed within 48 h in rats at doses up to 50 mg/kg body weight. At higher doses, absorption is lower, indicating a saturation process. When 14C-chlorothalonil is given orally the radioactivity is distributed into blood and tissues within 2 h. The greatest concentration is found in the kidney, followed by liver and blood. The kidneys contain 0.3% of a 5 mg/kg body weight dose after 24 h. Most of an oral dose of chlorothalonil in rats is found in faeces (> 82% within 48-72 h, regardless of dose). Biliary excretion is rapid, peaking within 2 h after a 5 mg/kg body weight oral dose, and is saturated at 50 mg/kg body weight and above. Urinary excretion accounts for 5-10% of the dose in rats. Faecal excretion is the main route in dogs and monkeys but urinary excretion (< 4%) is less than in rats. Metabolic studies in rats indicate that chlorothalonil is conjugated with glutathione in the liver as well as in the gastrointestinal tract. Some of the glutathione conjugates may be absorbed from the intestine and transported to the kidneys, where they are converted by cytosolic β-lyase to thiol analogues that are excreted in the urine. When germ-free rats are dosed with chlorothalonil, the thiol metabolites appear in urine in much smaller amounts than with normal rats, indicating the involvement of intestinal microflora in the metabolism of chlorothalonil. Dogs or monkeys dosed orally with chlorothalonil excrete little or no thiol derivatives in urine. When 14C-chlorothalonil was applied to rat skin, approximately 28% of the dose was absorbed within 120 h. About 18% of the dose was found in faeces and 6% in urine within 120 h.

Acute Toxicity	✓	Carcinogenicity	✓
Skin Irritation/Corrosion	✗	Reproductivity	✗
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✓
Respiratory or Skin sensitisation	✓	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification
✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

TITAN CHLOROTHALONIL 900 WG FUNGICIDE	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
chlorothalonil	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	0.57mg/l	1
	BCF	1008h	Fish	<0.1-2.7	7
	EC50	48h	Crustacea	0.059mg/l	1
	EC50	96h	Algae or other aquatic plants	0.002-0.01mg/L	4
	NOEC(ECx)	48h	Crustacea	0.032mg/l	1
	LC50	96h	Fish	0.008mg/L	4
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. US EPA, Ecotox database - Aquatic Toxicity Data 4. ECETOC Aquatic Hazard Assessment Data 5. NITE (Japan) - Bioconcentration Data 6. METI (Japan) - Bioconcentration Data 7. Vendor Data				

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

for chlorothalonil:

Chlorothalonil is a colourless, odourless, crystalline solid with a melting point of 250 C and a vapour pressure of 7.63 × 10-5 Pa (5.72 × 10-7 mm Hg) at 25 C. It has low water solubility (0.6-1.2 mg/litre at 25 C) and an octanol/water partition coefficient (log Kow) of 2.882. It is hydrolysed in water slowly at pH 9 but is stable at pH 7 or below (at 25 C).

Environmental fate:

Chlorothalonil adsorbs strongly to organic matter in soil and suspended material in water. It is not, therefore, leached from soil to groundwater. It is removed rapidly from surface water to suspended material and to a lesser extent to bottom sediment

Chlorothalonil is removed from aqueous media by strong adsorption on suspended matter. Modelled data suggest little or no partition to bottom sediment. Abiotic degradation of chlorothalonil in water through photolysis does not occur. Some hydrolysis does take place at higher pH.

Half-life (hr) soil : 2208

Biodegradation may occur in natural waters with enzyme processes being involved. Microbial degradation is the major cause of dissipation in soil ; this involves several parallel processes, one of which leads to formation of the 4-hydroxy metabolite. Chlorothalonil is rapidly degraded in soil, and degradation may occur in water with the production of the 4-hydroxy metabolite, 4-hydroxy-2,5,6-trichloroisophthalonitrile. Half-lives for dissipation of the 4-hydroxy metabolite in soils range between 6 and 43 days. Chlorothalonil does not translocate from the site of application to other parts of a plant. It is metabolized only to a limited extent on plants and the 4-hydroxy metabolite is usually < 5% of the residue. Chlorothalonil is metabolised in fish via glutathione conjugation to give more polar excretory products. The enzyme glutathione- S-transferase is involved with this conversion. High concentrations of radiolabel found in the gall bladder and bile, after exposure of rainbow trout to 14C-chlorothalonil, are consistent with the excretion of the compound as glutathione conjugates. The concentrations of radiolabel accumulating in the gall bladder and other organs fell rapidly when the fish were placed in clean water. Chlorothalonil does not bioaccumulate in aquatic organisms.

Ecotoxicity:

Highly toxic to fish, aquatic invertebrates. LC50: < 0.5 mg/L.

MATC (Maximum Allowable Toxicant Concentration) two generation Daphnia magna reproduction study was 0.035 mg/L.

Classified - relatively non toxic to bees.

At recommended application rate - non toxic to earth worms.

With minor exceptions, chlorothalonil is not phytotoxic. The LC50 of a suspension concentrate formulation (500 g chlorothalonil/litre) in artificial soil for earthworms was > 1000 mg/kg soil (14 days). Earwigs suffered increased mortality when in contact with chlorothalonil residues on peanut foliage or ingesting it as a food source in laboratory tests; there was no other indication of insecticidal action. Chlorothalonil is of low toxicity to birds with a reported acute oral LD50 of 4640 mg/kg diet in the mallard duck. No significant reproductive effects were reported. A field study of aquatic organisms exposed following chlorothalonil application suggests that the toxicity is less than that predicted from laboratory studies; this is again consistent with the physicochemical properties of the compound. Deaths were seen in some species exposed experimentally in the field. There have been no reported incidents of kills in the environment. However, despite the short residence time of chlorothalonil in environmental media, kills would be expected to occur. Linking kills to the compound would be difficult given that residues would not persist long enough for chlorothalonil to be identified.

Chlorothalonil is algicidal for a number of algal species. The fungicide does not inhibit bacterial growth except at very high concentrations in laboratory culture. Field and laboratory evidence shows no effects on nitrogen fixation or nitrification at recommended application rates and minimal effects at higher application rates in temperate soils. There was insufficient information to assess effects on the nitrogen cycle in tropical soils.

Chlorothalonil is classified as "relatively non-toxic" to honey-bees. Earwigs exposed to residues topically and via food showed some mortality (20-55%), but there is no other evidence of insecticidal action. Chlorothalonil has low toxicity to birds in acute or dietary tests. The low acute toxicity of chlorothalonil to laboratory mammals tempered with its short persistence in the environment suggests minimal hazard to wild mammal species.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
chlorothalonil	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
chlorothalonil	LOW (BCF = 125)

Mobility in soil

TITAN CHLOROTHALONIL 900 WG FUNGICIDE

Ingredient	Mobility
chlorothalonil	LOW (Log KOC = 2392)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	- Containers may still present a chemical hazard/ danger when empty. - Return to supplier for reuse/ recycling if possible. Otherwise: - If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. - Where possible retain label warnings and SDS and observe all notices pertaining to the product. DO NOT allow wash water from cleaning or process equipment to enter drains. - It may be necessary to collect all wash water for treatment before disposal. - In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. - Where in doubt contact the responsible authority.
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SECTION 14 Transport information

Labels Required

	
Marine Pollutant	
HAZCHEM	2X

Land transport (ADG)

14.1. UN number or ID number	2761				
14.2. UN proper shipping name	ORGANOCHLORINE PESTICIDE, SOLID, TOXIC (contains chlorothalonil)				
14.3. Transport hazard class(es)	<table> <tr> <td>Class</td><td>6.1</td></tr> <tr> <td>Subsidiary Hazard</td><td>Not Applicable</td></tr> </table>	Class	6.1	Subsidiary Hazard	Not Applicable
Class	6.1				
Subsidiary Hazard	Not Applicable				
14.4. Packing group	I				
14.5. Environmental hazard	Environmentally hazardous				
14.6. Special precautions for user	<table> <tr> <td>Special provisions</td><td>61 274</td></tr> <tr> <td>Limited quantity</td><td>0</td></tr> </table>	Special provisions	61 274	Limited quantity	0
Special provisions	61 274				
Limited quantity	0				

Air transport (ICAO-IATA / DGR)

14.1. UN number	2761														
14.2. UN proper shipping name	Organochlorine pesticide, solid, toxic * (contains chlorothalonil)														
14.3. Transport hazard class(es)	<table> <tr> <td>ICAO/IATA Class</td><td>6.1</td></tr> <tr> <td>ICAO / IATA Subsidiary Hazard</td><td>Not Applicable</td></tr> <tr> <td>ERG Code</td><td>6L</td></tr> </table>	ICAO/IATA Class	6.1	ICAO / IATA Subsidiary Hazard	Not Applicable	ERG Code	6L								
ICAO/IATA Class	6.1														
ICAO / IATA Subsidiary Hazard	Not Applicable														
ERG Code	6L														
14.4. Packing group	I														
14.5. Environmental hazard	Environmentally hazardous														
14.6. Special precautions for user	<table> <tr> <td>Special provisions</td><td>A3 A5</td></tr> <tr> <td>Cargo Only Packing Instructions</td><td>673</td></tr> <tr> <td>Cargo Only Maximum Qty / Pack</td><td>50 kg</td></tr> <tr> <td>Passenger and Cargo Packing Instructions</td><td>666</td></tr> <tr> <td>Passenger and Cargo Maximum Qty / Pack</td><td>5 kg</td></tr> <tr> <td>Passenger and Cargo Limited Quantity Packing Instructions</td><td>Forbidden</td></tr> <tr> <td>Passenger and Cargo Limited Maximum Qty / Pack</td><td>Forbidden</td></tr> </table>	Special provisions	A3 A5	Cargo Only Packing Instructions	673	Cargo Only Maximum Qty / Pack	50 kg	Passenger and Cargo Packing Instructions	666	Passenger and Cargo Maximum Qty / Pack	5 kg	Passenger and Cargo Limited Quantity Packing Instructions	Forbidden	Passenger and Cargo Limited Maximum Qty / Pack	Forbidden
Special provisions	A3 A5														
Cargo Only Packing Instructions	673														
Cargo Only Maximum Qty / Pack	50 kg														
Passenger and Cargo Packing Instructions	666														
Passenger and Cargo Maximum Qty / Pack	5 kg														
Passenger and Cargo Limited Quantity Packing Instructions	Forbidden														
Passenger and Cargo Limited Maximum Qty / Pack	Forbidden														

Sea transport (IMDG-Code / GGVSee)

14.1. UN number	2761
14.2. UN proper shipping name	ORGANOCHLORINE PESTICIDE, SOLID, TOXIC (contains chlorothalonil)

14.3. Transport hazard class(es)	IMDG Class	6.1
	IMDG Subsidiary Hazard	Not Applicable
14.4. Packing group	I	
14.5 Environmental hazard	Marine Pollutant	
14.6. Special precautions for user	EMS Number	F-A, S-A
	Special provisions	61 274
	Limited Quantities	0

14.7. Maritime transport in bulk according to IMO instruments

14.7.1. Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

14.7.2. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
chlorothalonil	Not Applicable

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
chlorothalonil	Not Applicable

SECTION 15 Regulatory information

Safety, health and environmental regulations / legislation specific for the substance or mixture

chlorothalonil is found on the following regulatory lists

- Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
- Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
- Australian Inventory of Industrial Chemicals (AIIC)
- Chemical Footprint Project - Chemicals of High Concern List
- International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
- International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2B: Possibly carcinogenic to humans
- International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

Additional Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (chlorothalonil)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	All chemical substances in this product have been designated as TSCA Inventory 'Active'
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	No (chlorothalonil)
UAE - Control List (Banned/Restricted Substances)	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	08/07/2026
Initial Date	08/07/2026

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

TITAN CHLOROTHALONIL 900 WG FUNGICIDE

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

- PC - TWA: Permissible Concentration-Time Weighted Average
- PC - STEL: Permissible Concentration-Short Term Exposure Limit
- IARC: International Agency for Research on Cancer
- ACGIH: American Conference of Governmental Industrial Hygienists
- STEL: Short Term Exposure Limit
- TEEL: Temporary Emergency Exposure Limit,
- IDLH: Immediately Dangerous to Life or Health Concentrations
- ES: Exposure Standard
- OSF: Odour Safety Factor
- NOAEL: No Observed Adverse Effect Level
- LOAEL: Lowest Observed Adverse Effect Level
- TLV: Threshold Limit Value
- LOD: Limit Of Detection
- OTV: Odour Threshold Value
- BCF: BioConcentration Factors
- BEI: Biological Exposure Index
- DNEL: Derived No-Effect Level
- PNEC: Predicted no-effect concentration
- MARPOL: International Convention for the Prevention of Pollution from Ships
- IMSBC: International Maritime Solid Bulk Cargoes Code
- IGC: International Gas Carrier Code
- IBC: International Bulk Chemical Code

- AIIC: Australian Inventory of Industrial Chemicals
- DSL: Domestic Substances List
- NDSL: Non-Domestic Substances List
- IECSC: Inventory of Existing Chemical Substance in China
- EINECS: European INventory of Existing Commercial chemical Substances
- ELINCS: European List of Notified Chemical Substances
- NLP: No-Longer Polymers
- ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
- NZIoC: New Zealand Inventory of Chemicals
- PICCS: Philippine Inventory of Chemicals and Chemical Substances
- TSCA: Toxic Substances Control Act
- TCSI: Taiwan Chemical Substance Inventory
- INSQ: Inventario Nacional de Sustancias Químicas
- NCI: National Chemical Inventory
- FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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