Material Safety Data Sheet
K17100, K17101, K17109

KINCROME

Revision Date: 26.02.2026
Issue: 2

SECTION 1 - PRODUCT AND COMPANY IDENTIFICATION:

PRODUCT IDENTIFIER

PRODUCT NAME	Multi-Purpose Grease
SYNONYMS	None
PROPER SHIPPING NAME	Multi-Purpose Grease
OTHER MEANS OF IDENTIFICATION	K17100, K17101 & K17109

DETAILS OF MANUFACTURE

MANUFACTURE NAME	Lubrimaxx Marketing Pty Ltd
ADDRESS	30 Spencer Street, Sunshine West, Victoria 3020, Australia.
TEL & FAX. NO	1300 72 1300
OTHER MEANS OF IDENTIFICATION	None

DETAILS OF SUPPLIER

COMPANY NAME	Kincrome Australia Pty. Ltd (ABN: 41 007 185 006)
COMPANY ADDRESS	Australia 3 Lakeview Drive Caribbean Business Park Scoresby Victoria 3179 AUSTRALIA New Zealand Level 29, 188 Quay Street, Auckland Central 1010 NZ

EMERGENCY CONTACT NO.

CONTACT NO.	Australia: 1300 657 528 New Zealand: 0011 64 2 7342 5754 Poisons information Centre: Australia: 131 126 New Zealand: 0800 764 766

SECTION 2 - HAZARDS IDENTIFICATION:

CLASSIFICATION OF THE SUBSTANCE OR MIXTURE

Not regulated as Dangerous Goods under ADG Code.

DETAILS OF SUPPLIER

GHS CLASSIFICATION HAZARD CLASS AND CATEGORY	Skin irritation - Category 2 Serious eye irritation - Category 2A
GHS ELEMENT, INCLUDING PRE-CAUTIONARY STATEMENTS SYM-BOL	 GHS07 – Exclamation mark
SIGNAL WORD	Warning
NZ HSNO	Skin Irrit. 2 Eye Irrit. 2

SECTION 2 - HAZARDS IDENTIFICATION (CONT.)_

HAZARD STATEMENT(S)

H315	Causes skin irritation.
H319	Causes serious eye irritation.

PRECAUTIONARY STATEMENT(S) PREVENTION

P210	Keep away from heat, hot surface, sparks, open flames and other ignition sources. No smoking.
P264	Wash hands [and ...] thoroughly after handling.
P264+P265	Wash hands [and ...] thoroughly after handling. Do not touch eyes.
P280	Wear protective gloves/protective clothing/eye protection/face protection/hearing protection/...

PRECAUTIONARY STATEMENT(S) RESPONSE

P302+P352	IF ON SKIN: wash with plenty of water/...
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses if present and easy to do - continue rinsing.
P321	Specific treatment (see information on this label and safety datasheet)).
P332+P317	If skin irritation occurs: Get medical help.
P337+P317	If eye irritation persists: Get medical help.
P362+P364	Take off contaminated clothing and wash it before reuse.

PRECAUTIONARY STATEMENT(S) STORAGE

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

PRECAUTIONARY STATEMENT(S) DISPOSAL

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 - COMPOSITION / INFORMATION ON INGREDIENTS

MIXTURES

CAS NO.	%[WEIGHT]	NAME
64742-54-7	30-40	Distillates (petroleum), hydrotreated heavy paraffinic
64742-62-7	40-50	Residual oils (petroleum), solvent-dewaxed
1310-65-2	1-5	Lithium hydroxide (Li(OH))
N/A (Mixture)	Balance	Non-hazardous additives

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 the source of contamination, vapor, dust, spray or fumes or move the victim to fresh air. • 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	• Contact physician immediately if swallowed. • If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. • Observe the patient carefully. • Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. • Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. • Seek medical advice. • Avoid giving milk or oils. • Avoid giving alcohol. • If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

INDICATION OF ANY IMMEDIATE MEDICAL ATTENTION AND SPECIAL TREATMENT NEEDED

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.
Treat symptomatically.
To treat poisoning by the higher aliphatic alcohols (up to C7):

- Gastric lavage with copious amounts of water.
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxygen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5)

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 shock.
Monitor and treat, where necessary, for pulmonary oedema.
Anticipate and treat, where necessary, for 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.
Give activated charcoal.

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.
If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.
Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications. Drug therapy should be considered for pulmonary oedema.
Treat seizures with diazepam. Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome. Acidosis may respond to hyperventilation and bicarbonate therapy. Haemodialysis might be considered in patients with severe intoxication.
Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994 For C8 alcohols and above. Symptomatic and supportive therapy is advised in managing patients.

SECTION 5 - FIRE FIGHTING MEASURES

PERSONAL PRECAUTIONS, PROTECTIVE EQUIPMENT AND EMERGENCY PROCEDURES

SUITABLE EXTINGUISHING MEDIA	Use water spray, dry chemical, alcohol resistance foam, or carbon dioxide.
SPECIFIC HAZARDS	Combustible material.
HAZARDS FROM COMBUSTION PRODUCTS	Depending on combustion conditions, a complex mixture of airborne solids, liquids, and gases including carbon monoxide, carbon dioxide, sulphur oxides, phosphorus oxides and metal oxides will be evolved when this material undergoes combustion.
SPECIAL PROTECTIVE EQUIPMENT	Fire-fighters should wear full protective clothing and self-contained breathing apparatus (SCBA) in case of fire.

SECTION 6 - ACCIDENTAL RELEASE MEASURES

PERSONAL PRECAUTIONS, PROTECTIVE EQUIPMENT AND EMERGENCY PROCEDURES

NON-EMERGENCY PERSONNEL	Wear appropriate protective equipment as in section 8 below to prevent skin and eye contamination. Remove of ignition sources and provision of sufficient ventilation.
EMERGENCY PROCEDURES	Personnel involved in clean up required to wear appropriate personal protective equipment and clothing to minimize exposure.
ENVIRONMENTAL PRECAUTION	Isolate the spillage and prevent the material to enter drains, sewers, waterways and soil Dispose of waste according to federal, Environmental Protection Authority and state regulations. If the spillage enters the waterways contact the Environmental Protection Authority, or your local Waste Management Authority.
METHOD AND MATERIALS FOR CONTAINMENT AND CLEANING UP	Minor spills do not normally need any special clean-up measures. In the event of a major spill, clear area of all unprotected personnel. Spilt material may result in a slip hazard and should be absorbed into dry, inert material (e.g. sand, earth or vermiculite), which then can be put into appropriately labelled drums for disposal by an approved agent according to local conditions.. Avoid accidents, clean up immediately. Wear protective equipment to prevent skin and eye contamination and inhalation of dust.

SECTION 7 - HANDLING AND STORAGE

PRECAUTIONS FOR SAFE HANDLING	Avoid contact with the product by using appropriate protective equipment such as gloves, glasses or goggles and full-length clothing. Prevent small spills and leakage to avoid slip hazards. Properly dispose of any contaminated rags or cleaning materials in order to prevent fire hazards. Eating, drinking, and smoking should be prohibited in the area where this material is handled, stored and processed. Workers should follow good personal hygiene practices, such as washing hands before eating, drinking and smoking. Remove contaminated clothing and protective equipment before entering eating areas. Keep containers tightly closed when not in use. Prevent product from entering waterways, drains or sewers.
CONDITIONS FOR SAFE STORAGE	Store in a cool, dry well-ventilated place and out of direct sunlight. Store away from food stuff. Store away from sources of heat and/or ignition. Keep the containers closed when not in use.

SECTION 8 - HANDLING AND STORAGE

ENGINEERING CONTROLS	Use only in well ventilated areas.
EYE PROTECTION	Avoid contact with the eyes. Wear safety glasses or face shield to avoid eye contact or splashing.
HAND PROTECTION	Avoid contact with skin. Impervious gloves recommended. Wear suitable protective clothing.
BODY PROTECTION	Not normally required. Where splashing is possible suitable work wear should be worn to protect personal clothing.
RESPIRATORY PROTECTION	Do not breathe dust, fumes or vapor. Use approved respirator when exposed to concentration above the exposure limit.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE	Amber Semi Solid Heavy Paste
ODOUR	Mild
ODOUR THRESHOLD	Not available
SPECIFIC GRAVITY	0.89 typical
VISCOSITY	Not available
BOILING POINT	Not available
MELTING POINT	Not available
DROPPING POINT	Not available
FLASH POINT	Greater than 240 °C
PH VALUE	Not available
EVAPORATION RATE	Not available
PENETRATION AT 250C	Typically 280
FLAMMABILITY	Non Flammable Semi Solid
AUTO IGNITION TEMPERATURE	Not available
FLAMMABLE LIMITS	Not available
VAPOUR PRESSURE	Not available
VAPOUR DENSITY	Not available
DECOMPOSITION TEMPERATURE	Not available
SOLUBILITY IN WATER	Insoluble
PARTITION COEFFICIENT	Not available
BIODEGRADABILITY	Petroleum base oils are inherently biodegradable.

SECTION 10: STABILITY AND REACTIVITY

REACTIVITY	No dangerous reaction known under conditions of normal use.
CHEMICAL STABILITY	Stable under normal conditions of storage and handling.
POSSIBILITY OF HAZARDOUS REACTIONS	under recommended storage conditions. No hazards to be specially mentioned.
CONDITIONS TO AVOID	Keep away from heat, strong oxidizers, open flames or other sources of ignition.
INCOMPATIBLE MATERIALS	Oxidising agents.
HAZARDOUS DECOMPOSITION PRODUCTS	Hazardous decomposition products are not expected to form during normal storage requirements. See Section 5 for hazardous combustion products.

SECTION 11 TOXICOLOGICAL INFORMATION

INFORMATION ON THE LIKELY ROUTES OF EXPOSURES	
SKIN EXPOSURE	May cause skin irritation.
EYE EXPOSURE	May cause eye irritation.
DELAYED AND IMMEDIATE EFFECTS AND ALSO CHRONIC EFFECTS FROM SHORT AND LONG TERM EXPOSURE	
ACUTE TOXICITY	Not classified as acutely toxic.
SKIN CORROSION/IRRITATION	May cause skin irritation.
SERIOUS EYE DAMAGE/ EYE IRRITATION	May cause eye irritation.
RESPIRATORY/SKIN SENSITIZATION	Not classified as a respiratory sensitiser or a skin sensitiser.
CARCINOGENICITY	Product not expected to be carcinogenic.
GERM CELL MUTAGENICITY	Product not expected to be mutagenic activity.
REPRODUCTIVE TOXICITY	Product not expected to be reproductive toxicity.
SPECIFIC TARGET ORGAN TOXICITY SINGLE EXPOSURE	No data available.
SPECIFIC TARGET ORGAN TOXICITY REPEATED EXPOSURE	Product not expected to be specific target organ toxicity.

Note: Information given is based on data on the toxicology of base oil. Toxicological information on product is not available.

SECTION 12: ECOLOGICAL INFORMATION

DISPOSAL METHOD	
TOXICITY	Not classified based on available information.
PERSISTENCE AND DEGRADABILITY	Petroleum base oils are inherently biodegradable.
BIOACCUMULATION POTENTIAL	No data available but this product is not expected to bioaccumulate.
MOBILITY IN SOIL	No data available but the component of this product has low solubility, floats and is expected to migrate from water to land.

SECTION 13: DISPOSAL CONSIDERATIONS

DISPOSAL METHOD	
PRODUCT	The product should not be released to the environment, so any unused material should be recycled wherever possible or be disposed of as hazardous waste at an appropriate collection depot. If this is not possible, the product is suitable for burning in an enclosed burner where it can be used as a fuel source. The product is also suitable for incineration at very high temperatures to prevent formation of undesirable combustion products. Spilled product that cannot be recovered should be absorbed and then shovelled into a suitable drum. Follow Government regulations for disposal of such waste. Do not mix new or used lubricating oils taken for recycling or disposal by suitably licensed contractors in accordance with Government regulations.
CONTAINERS	Empty containers may contain residual oil. They should be completely drained and then stored until reconditioned or disposed of. Empty drums should be taken for recycling or disposal through suitably licensed contractors in accordance with Government regulations. Where the containers are of metal construction they should not be pressurised, cut by a grinder, welded, brazed, soldered, drilled or exposed to heat, flames or other sources of ignition. Closed metal containers when exposed to such conditions/treatment may explode causing serious injury or death.

UNCLEANED PACKAGING RECOMMENDATION
Disposal must be made according to official regulations.

SECTION 14: TRANSPORT INFORMATION

NOT CLASSIFIED AS DANGEROUS GOODS BY ROAD, RAIL AND SEA.

DISPOSAL METHOD	
IATA	Not Regulated
IMDG	Not Regulated
U.N NUMBER	Not Available
U.N PROPER SHIPPING NAME	Not Available
CLASS	Not Available
SUBSIDIARY RISK	Not Available
PACKING GROUP	Not Available
MARINE POLLUTANT	No
HAZCHEM CODE	Not Available

SECTION 15: REGULATORY INFORMATION

POISONS SCHEDULE: Not scheduled
ADG CODE: Nil

SECTION 16: OTHER INFORMATION

CHEMICAL EMERGENCIES: 1 800 033 111
N/D = Not determined, N/A = Not applicable
LITERATURE REFERENCES:
Preparation of Safety Data Sheets for Hazardous Chemicals Code of Practice (December 2011 Safe Work Australia)
GHS Hazardous Chemical Information List (September 2014 Safe Work Australia)
Guidance on the Classification of Hazardous Chemicals under the WHS Regulations. April 2012. Safe Work Australia.
Global Harmonized System of Classification and Labelling of Chemicals (GHS). Fifth revised edition.
Australian Exposure Standards
Australian Code For The Transport Of Dangerous Goods By Road And Rail 7th Edition.

Standard for the Uniform Scheduling of Medicines and Poisons 2015.
HSIS Hazardous Substance Information System National Worksafe Data Base.
LABELLING OF WORKPLACE HAZARDOUS CHEMICALS, Code of Practice, DEC 2011
IMPLEMENTATION OF THE GLOBALLY HARMONISED SYSTEM OF CLASSIFICATION AND LABELLING OF CHEMICALS (GHS) APRIL 2012

ABBREVIATIONS AND ACRONYMS

ADG CODE: Australian Code for the Transport of Dangerous Goods by Road and Rail.
AICS: Australian Inventory of Chemical Substances.
CAS Number: Chemical Abstracts Service Registry Number.
GHS: Globally Harmonized System of Classification and Labelling of Chemicals
HAZCHEM: An emergency action code of numbers and letters which gives information to emergency services.
HSIS: Hazardous Substances Information System
IATA: International Air Transport Association
IMDG: International Maritime Dangerous Goods
NTP: National Toxicology Program (USA).
SDS: Safety Data Sheet
SWA: SafeWork Australia
TWA: Time Weighted Average.
UN NUMBER: United Nations Number.

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It is the user's responsibility to verify the current formulation, specification or characteristics of a product, and to ascertain that it is suitable for an intended use or application.

REASON(S) FOR ISSUE: Revised
Material Safety Data Sheets are updated frequently. Please ensure that you have a current copy.

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We believe the data to be correct, however for the reason just stated we are not in a position to warrant its accuracy. With that in mind and given that the full range of possibilities and conditions under which the information may be applied simply cannot be anticipated, **YOU ARE CAUTIONED** to make your own determinations as to the veracity and the suitability of the information to the particular circumstances that apply, or may apply, to you from time to time.
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