### Section 1 - Identification

<table>
<thead>
<tr>
<th>Material:</th>
<th>Aplite</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manufacturer:</td>
<td>Boxley Materials Company</td>
</tr>
<tr>
<td></td>
<td>Piney River Quarry</td>
</tr>
<tr>
<td>Address:</td>
<td>PO Box 13527, Roanoke, VA 24035</td>
</tr>
<tr>
<td>For Information Call:</td>
<td>540-777-7600</td>
</tr>
</tbody>
</table>

In Case of Emergency Call: 540-815-8982

**Recommended use:** Road Base, Asphalt, Concrete, Concrete Block, Driveways, Erosion Control, Manufactured Sand

**Other Names:** Aggregate, Manufactured Sand, Mineral Filler, Screening, Crushed Stone, Crushed Rock, Crusher Run, Feldspar

### Section 2 – Hazard Identification

**WARNING**

Dust may irritate the eyes, skin and respiratory tract. Avoid breathing excessive dust. Breathing silica-containing dust for prolonged periods in the workplace can cause lung damage and a lung disease called silicosis. Several scientific organizations have classified crystalline silica as causing lung cancer in humans. Silicosis or lung cancer can result in permanent injury or death.

**Primary Routes of Exposure:** Eyes, skin, inhalation

**Eye Contact:**
Dust particles can scratch the eye causing irritation, tearing, stinging or burning feeling or swelling of the eyes. These symptoms can lead to blurred vision.

**Skin Contact:**
Direct contact with dust particles can scratch and irritate the skin with redness, an itching or burning feeling, swelling of the skin, and/or rash.

**Skin Absorption:**
Not expected to be a significant exposure route.
Inhalation:

Dusts may irritate the nose, throat and respiratory tract by mechanical abrasion. Coughing, sneezing and shortness of breath may occur.

Ingestion:

Expected to be practically non-toxic. Ingestion of large amounts may cause gastrointestinal irritation including nausea, vomiting diarrhea and blockage.

Effects Following Prolonged or Repeated Exposure:

Exposure to high levels of respirable crystalline silica is associated with silicosis, lung cancer, and autoimmune disorders. For additional information, see Section 11.

Carcinogenicity:

Crystalline silica has been listed as a carcinogen by the International Agency for Research on Cancer (IARC), the National Toxicology Program (NTP), and the Occupational Safety and Health Administration (OSHA). For additional information, see Section 11.

Signs and Symptoms of Exposure:

Symptoms of silicosis may include (but are not limited to) shortness of breath, difficulty breathing with or without exertion; coughing; diminished work capacity; diminished chest expansion; reduction of lung volume; right heart enlargement and/or failure.

Medical Conditions Aggravated by Exposure:

Irritated or broken skin increases chance of contact dermatitis. Pre-existing medical conditions that may be aggravated by exposure include disorders of the eye, skin and lung (including asthma and other breathing disorders). Smoking tobacco will impair the ability of the lungs to clear themselves of dust.

Section 3 – Information on Ingredients

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>CAS No.</th>
<th>% by Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aplite (Feldspar)</td>
<td>68476-25-5</td>
<td>85-100</td>
</tr>
<tr>
<td>Quartz (crystalline silica)</td>
<td>14808-60-7</td>
<td>0-5</td>
</tr>
<tr>
<td>Mica</td>
<td>12001-26-2</td>
<td>0-10</td>
</tr>
</tbody>
</table>
Section 4 – First Aid

**Eyes:**
Immediately flush eye(s) with plenty of clean water for at least 15 minutes, while holding the eyelid(s) open. Occasionally lift the eyelid(s) to ensure thorough rinsing. Beyond flushing, do not attempt to remove material from the eye(s). Contact a physician if irritation persists or later develops.

**Skin:**
Wash affected areas thoroughly with mild soap and fresh water. Contact a physician if irritation persists or later develops.

**Inhalation:**
Remove person to fresh air. Dust in throat and nasal passages should clear spontaneously. Contact a physician if irritation persists or if breathing is difficult. If lung irritation persists or later develops, contact a physician.

**Ingestion:**
If person is conscious, do not induce vomiting. Give large quantity of water and get medical attention. Never attempt to make an unconscious person drink.

**Notes to Physician:**
Not all individuals with silicosis will exhibit symptoms of the disease. However, silicosis can be progressive, and symptoms can appear at any time, even years after exposures have ceased. Persons with silicosis have an increased risk of pulmonary tuberculosis infection.

For emergencies, contact 1-540-815-8982 (24 hours/day, 7 days/week)

Section 5 – Firefighting Measures

**Flash Point:** N/A

**Flammable Limits**
- **LEL:** N/A
- **UEL:** N/A

**Autoignition Temperature:** N/A

**Extinguishing Media:**
The presence of this material in a fire does not hinder the use of any standard extinguishing medium. Use appropriate extinguishing medium for surrounding fire.

**Special Firefighting Procedures:**
None

**Unusual Fire and Explosion Hazards:**
Contact with powerful oxidizing agents may cause fire and/or explosions (see Section 10 of MSDS).
Section 6 – Accidental Release Measures

**Precautions if Material is Spilled or Released:**
Persons involved in cleanup processes should first observe precautions (as appropriate) identified in Section 8 of this MSDS. Wet product should be removed from roads or other surfaces where it may interfere with traffic. Prevent from entering into sewers or drainage systems where it can harden and clog flow. If hardened material is spilled and dust is generated, cleanup personnel may be exposed to respirable crystalline silica. Do not dry sweep or use compressed air for clean-up. Wetting of spilled material and/or use of respiratory protective equipment may be necessary. For emergencies, contact 1-540-815-8982 (24 hours/day, 7 days/week).

**Waste Disposal Methods:**
Contact the quarry to determine feasibility of recycling material. Dispose of waste materials in accordance with applicable federal, state and local laws and regulations.

**Environmental Precautions:**
Stop leak and contain spilled material with sand, aggregate fines, or other inert adsorbent. Collect adsorbed product and clean up materials in appropriate container for proper disposal. Notify proper authorities.

Section 7 – Handling and Storage

**Handling** – Respirable crystalline silica-containing dust may be generated during processing, handling, and storage. Use personal protection and controls identified in Section 8 of this MSDS as appropriate. Avoid using dry sweeping or compressed air for cleaning.

**Storage:**
Do not store near food and beverages or smoking materials.

Section 8 – Exposure Controls and Personal Protective Equipment

<table>
<thead>
<tr>
<th>Component</th>
<th>OSHA/MSHA PEL</th>
<th>ACGIH TVL</th>
<th>NIOSH REL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feldspar</td>
<td>NE</td>
<td>NE</td>
<td>NE</td>
</tr>
<tr>
<td>Respirable dust containing silica</td>
<td>10 mg/m³ ÷ (% silica + 2)</td>
<td>Use Respirable Silica TLV</td>
<td>Use Respirable Silica REL</td>
</tr>
<tr>
<td>Total dust containing silica</td>
<td>OSHA: 30 mg/m³ ÷ (% silica + 2) MSHA: 30 mg/m³ ÷ (% silica + 3)</td>
<td>NE</td>
<td>NE</td>
</tr>
<tr>
<td>Respirable Crystalline Silica (quartz)</td>
<td>NE - Use respirable dust containing silica PEL</td>
<td>0.025 mg/m³</td>
<td>0.05 mg/m³</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>---------------------------------------------</td>
<td>-------------</td>
<td>------------</td>
</tr>
<tr>
<td>Respirable Tridymite and Cristobalite (other forms of crystalline silica)</td>
<td>½ of OSHA and MSHA respirable dust containing silica PEL</td>
<td>0.025 mg/m³</td>
<td>0.05 mg/m³</td>
</tr>
</tbody>
</table>

**Eye Protection:**
Safety glasses with side shields should be worn as minimum protection. Dust goggles should be worn when excessively (visible) dusty conditions are present or are anticipated.

**Skin Protection (Protective Gloves/Clothing):**
Use gloves to provide hand protection from abrasion. In dusty conditions, use long sleeve shirts. Wash work clothes after each use.

**Respiratory Protection:**
All respirators must be NIOSH-approved for the exposure levels present. (See NIOSH Respirator Selection Guide). The need for respiratory protection should be evaluated by a qualified safety and health professional. For air-contaminant concentrations which exceed or are likely to exceed applicable exposure limits, use a NIOSH-approved, contaminant-specific, air purifying respirator. If such conditions are sufficiently high that the air-purifying respirator is inadequate, or if oxygen adequate to sustain life is not present, use a positive-pressure, self-contained breathing apparatus. Activities that generate dust require the use of an appropriate dust respirator where dust levels exceed or are likely to exceed allowable exposure limits. For respirable silica levels that exceed or are likely to exceed an 8-hour Time Weighted Average (TWA) of 0.5 mg/m³, a high-efficiency particulate filter respirator must be worn at a minimum; however, if respirable silica levels exceed or are likely to exceed an 8-hour TWA of 5.0 mg/m³ a positive-pressure, full-face respirator or equivalent is required. Respirator use must comply with applicable MSHA (42 CFR 84) or OSHA (29 CFR 1910.134) standards, which include provisions for a user training program, respirator inspection, repair and cleaning, respirator fit testing, medical surveillance and other requirements.

**Engineering Controls:**
Activities that generate dust require the use of general ventilation, local exhaust and/or wet suppression methods to maintain exposures below allowable exposure limits.

**Other:**
Respirable dust and quartz levels should be monitored regularly to determine worker exposure levels. Exposure levels in excess of allowable exposure limits should be reduced by all feasible engineering controls, including (but not limited to) wet suppression, ventilation, process enclosure, and enclosed employee workstations.
Section 9 – Physical and Chemical Properties

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiling Point</td>
<td>N/A</td>
</tr>
<tr>
<td>pH</td>
<td>N/A</td>
</tr>
<tr>
<td>Specific Gravity (H2O = 1)</td>
<td>2.60-2.90</td>
</tr>
<tr>
<td>Evaporation Rate (Butyl Acetate = 1)</td>
<td>0</td>
</tr>
<tr>
<td>Melting Point</td>
<td>N/A</td>
</tr>
<tr>
<td>Vapor Pressure (mm Hg.)</td>
<td>N/A</td>
</tr>
<tr>
<td>Solubility in Water</td>
<td>0</td>
</tr>
<tr>
<td>Vapor Density (Air = 1)</td>
<td>N/A</td>
</tr>
<tr>
<td>% Volatile</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Appearance and Odor: No odor. Angular gray, white and tan particles ranging in size from powder to boulders.

Section 10 – Stability and Reactivity

Stability:
Stable under normal temperatures and pressures.

Conditions to Avoid:
Contact with incompatible materials should be avoided (see below). See Sections 5 and 7 for additional information.

Incompatibility (Materials to Avoid):
Silicate minerals may react violently with powerful oxidizing agents such as fluorine, boron trifluoride, chlorine trifluoride, manganese trifluoride, and oxygen difluoride yielding possible fire and/or explosions. Silica dissolves readily in hydrofluoric acid producing a corrosive gas – silicon tetrafluoride.

Hazardous Decomposition or Byproducts:
Silica-containing respirable dust particles may be generated. When heated, quartz is slowly transformed into tridymite (above 860°C/1580°F) and cristobalite (above 1470°C/2678°F). Both tridymite and cristobalite are other forms of crystalline silica and are considered more fibrogenic to the lungs than quartz.

Hazardous Polymerization:
Not known to occur.
Section 11 – Toxicological Information

**Acute Effects:**
No specific data on product.

**Effects Following Prolonged or Repeated Exposure:**
Prolonged overexposure to respirable dusts in excess of allowable exposure limits can cause inflammation of the lungs leading to possible fibrotic changes, a medical condition known as pneumoconiosis. Prolonged and repeated inhalation of respirable crystalline silica-containing dust in excess of allowable exposure limits may cause a chronic form of silicosis, an incurable lung disease that may result in permanent lung damage or death. Chronic silicosis generally occurs after 10 years or more of overexposure; a more accelerated type of silicosis may occur between 5 and 10 years of higher levels of exposure. In early stages of silicosis, not all individuals will exhibit symptoms (signs) of the disease. However, silicosis can be progressive, and symptoms can appear at any time, even years after exposure has ceased. Symptoms of silicosis may include, but are not limited to, the following: shortness of breath; difficulty breathing with or without exertion; coughing; diminished work capacity; diminished chest expansion; reduction of lung volume; right heart enlargement and/or failure. Persons with silicosis have an increased risk of pulmonary tuberculosis infection. Repeated overexposures to very high levels of respirable crystalline silica (quartz, cristobalite, tridymite) for periods as short as six months may cause acute silicosis. Acute silicosis is a rapidly progressive, incurable lung disease that is typically fatal. Symptoms include (but are not limited to): shortness of breath, cough, fever, weight loss, and chest pain. Respirable dust containing newly broken silica particles has been shown to be more hazardous to animals in laboratory tests than respirable dust containing older silica particles of similar size. Respirable silica particles which had aged for sixty days or more showed less lung injury in animals than equal exposures of respirable dust containing newly broken particles of silica. There are reports in the literature suggesting that excessive crystalline silica exposure may be associated with autoimmune disorders and other adverse health effects involving the kidney. In particular, the incidence of scleroderma (thickening of the skin caused by swelling and thickening of fibrous tissue) appears to be higher in silicotic individuals. To date, the evidence does not conclusively determine a causal relationship between silica exposure and these adverse health effects.

**Carcinogenicity:**
Epidemiology studies on the association between crystalline silica exposure and lung cancer have had both positive and negative results. There is some speculation that the source and type of crystalline silica may play a role. Studies of persons with silicosis indicate an increased risk of developing lung cancer, a risk that increases with the level and duration of exposure. It is not clear whether lung cancer develops in non-silicotic patients. Several studies of silicotics do not account for lung cancer confounders, especially smoking, which have been shown to increase the risk of developing lung disorders, including emphysema and lung cancer.
In October 1996, an IARC Working Group designated respirable crystalline silica as carcinogenic (Group 1). The NTP's Report on Carcinogens, 9th edition, lists respirable crystalline silica as a "known human carcinogen." In year 2000, the American Conference of Governmental Industrial Hygienists (ACGIH) listed respirable crystalline silica (quartz) as a suspected human carcinogen (A-2). These classifications are based on sufficient evidence of carcinogenicity in certain experimental animals and on selected epidemiological studies of workers exposed to crystalline silica.

Section 12 – Ecological Information

Aquatic Ecotoxicological Data:
No specific data on this product. Not expected to be toxic to aquatic organisms.

Environmental Fate Data:
No specific data on this product.

Other:
No specific data on this product.

Section 13 – Disposal Considerations

Place contaminated materials in appropriate containers and dispose of in a manner consistent with applicable federal, state, and local regulations. Prevent from entering drainage, sewer systems, and unintended bodies of water. It is the responsibility of the user to determine, at the time of disposal, whether product meets criteria for hazardous waste. Product uses, transformations, mixture and processes, may render the resulting material hazardous.

Section 14 – Transport Information

DOT Proper Shipping Name: Not regulated.

DOT Hazard Classification: Not applicable.

UN/NA Number: Not regulated.

DOT Packing Group: Not applicable.

Labeling Requirements:
Section 15 – Regulatory Information

Toxic Substances Control Act (TSCA):
The components in this product are listed on the TSCA Inventory or are exempt.

Comprehensive Environmental Response, Compensation and Liability Act (CERCLA):
Releases of this material to air, land, or water are not reportable to the National Response Center under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) or to state and local emergency planning committees under the Superfund Amendments and Reauthorization Act.

Superfund Amendments and Reauthorization Act of 1986 (SARA), Title III:
Section 302 extremely hazardous substances:
None

Section 311/312 hazard categories:
Delayed Health

Section 313 reportable ingredients at or above de minimus concentrations:
None

California Proposition 65:
This product contains a chemical (crystalline silica) known to the State of California to cause cancer.

State Regulatory Lists:
Each state may promulgate standards more stringent than the federal government. This section cannot encompass an inclusive list or all state regulations. Therefore, the user should review the components listed in Section 2 and consult state or local authorities for specific regulations that apply.

Section 16 – Other Information

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