Application for Chemical Approval Answer all questions and email completed form to thomas.s.2@pg.com

| Product Name: (Exact, Full | LC1300 – SpecSeal LCI Intumescent Firestop Sealant |
|---|--|
| description) | Let300 Specseal Let intumescent thestop scalant |
| Manufacturer: | SpecSeal |
| Module: (Area of use) | Wall penetrations |
| Applicant Name: | Matt Cokely |
| Applicant Phone Number: | 570-840-0133 |
| 3 rd Party info if applicable: | 370-040-0133 |
| Company, Contact Name & Ph# | |
| Is there a similar product already in | Yes |
| CHEMS? | 163 |
| If Yes, Why is an additional product | Unable to obtain |
| being submitted for approval? | Shabe to obtain |
| If replacing/removing an existing | |
| approved Product? List: Chems#, | |
| Product Name, and Date it will | |
| have been removed from the site. | |
| Will the chemical be used IN as an | No |
| ingredient or process aid, including | |
| the water, or ON as to touch be | |
| applied to any products being | |
| manufactured here? | |
| If Yes, has PS And RA given | N/A |
| approval? | |
| Has VOC and/or HAP data been | Yes |
| provided? | |
| Permanent or Temporary Approval | Permanent Approval Request |
| request? | |
| If Temporary - must include Date | |
| any unused product will have been | |
| removed from the site. | |
| Chemical Product Physical Form: | Sealant |
| List Temporary and/or Permanent | Nedata Mobile Storage |
| Storage Location(s): | |
| If product spilled in a storage area | Putty isn't spillable |
| where would it go? What, if any | |
| containment is provided? | |
| If product spilled in a usage area | Putty isn't spillable |
| where would it go? What, if any | |
| containment is provided? | |
| For what purpose (how/why) will | Firestopping in Walls |
| product be used? | |
| | |
| How will product be | Caulk gun |
| dispensed/applied? | |

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| What is the potential exposure risk | Carcinogenic Category 2, Eye Irritation Category 2A, Specific |
|---------------------------------------|--|
| to personnel? (Skin, Eye, | Target Organ Toxicity (Inhalation-Respiratory Irritation) Single |
| Inhalation, Ingestion) | Exposure Category 3 |
| Normal Usage Rate: Qty per (Day, | 3/month |
| Month, Year) | |
| Quantity, Unit of Measure and | 1 case of 12 tubes |
| container type to be ordered: | |
| Maximum amount to be on-site at | 12 tubes |
| one time: | |
| What Manuf/Vendor/Supplier are | Anixter, Inc. |
| you purchasing this chemical | |
| through? | |
| Diaper Specific: Has the new | N/A |
| Chemical product been reviewed | |
| by QA versus the Substance of | |
| Interest (SOI) list? | |
| Diaper Specific: If this is a | N/A |
| Substance of Interest being | |
| brought on site anyway, is there a | |
| plan to ensure that it does not get | |
| introduced into the diaper product | |
| stream? | |
| Is there any ingredient(s) that is on | N/A |
| the Department of Homeland | |
| Security's Chemicals of Interest? If | |
| Yes, list ingredients. | |