



Laboratory:
 WearCheck Canada Inc.
 C8-1175 Appleby Line
 Burlington, ON L7L 5H9
 CANADA

Ship To:

National Steel Car Limited
 600 Kenilworth Ave. North
 Hamilton, ON L8N 3J4
 CA

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 L 8 N 3 J 4

Carton Contents:



1 x Sample Bottles
 1 x Sample Mailers
 1 x Sample Information Forms (SIFs)
 SIF# WC0829279 to WC0829279



▼ scan to track samples from this carton and/or to manage these sample kits



CARTON ID
211349

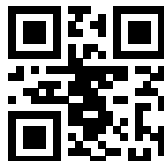
▼ keep for your records * THESE LABELS PEEL OFF * ▼ place on return shipping box



← scan to track carton/samples

Customer:

Shipped:



ID# 211349

ID# 211349



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0829279

WC sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. WC shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

CUSTOMER CODE: NAT602HAM

WORK ORDER NO.: _____

▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

- Sample From:
- | | | |
|---|--|---|
| <input type="checkbox"/> Circulating Oil | <input type="checkbox"/> Reduction Gear | <input type="checkbox"/> Plain Bearing |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder | <input type="checkbox"/> Roller Bearing |
| <input type="checkbox"/> Pump | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Thrust Bearing |
| <input type="checkbox"/> Blower | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine | <input type="checkbox"/> Screw Compressor | <input type="checkbox"/> New Unused Oil |
| | | <input type="checkbox"/> Other _____ |

FILTER: Element / Depth / Offline / None μm RATING: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-200

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP FOR TRACKING THIS SAMPLE** ▼ **STICK ON BOTTLE**



◀ scan to track sample ID or S/N:

_____ Sample Date: _____

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