



Laboratory:
WearCheck USA
501 Madison Ave.
Cary, NC 27513
USA

Ship To:

BEKAERT

1395 S MARIETTA PKWY BLDG 700 SUITE 708

MARIETTA, GA 30067

US

3 0 0 6 7

Carton Contents:



5 x Sample Bottles

5 x Sample Mailers

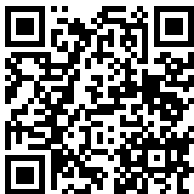
5 x Sample Information Forms (SIFs)

SIF# WC0886235 to WC0886239



W C - M O B - 2

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



CARTON ID
230877

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



◀ scan to track carton/samples

Customer:

Shipped:



ID# 230877

ID# 230877



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0886235

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.

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From: Final Drive Transmission

Diesel Engine Differential New (Unused) Oil

Natural Gas Engine Gearbox Pump Drive

Engine (fuel _____) Swing Drive Axle

Hydraulic System Tandem Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments: _____

Add Tests: PrtCount _____ 1000-059

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

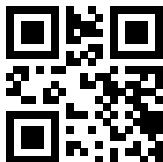
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: _____

WC0886235



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ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

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<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

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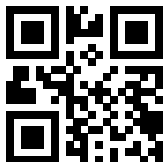
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