



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

Ship To:

C.C.G.S. Sir William Alexander

Canadian Coast Guard Fleet Warehouse 13 Akerley Blvd. Door 1A Burnside Industrial Park

Dartmouth, NS B3B 1J6

CANADA



Carton Contents:



12 x Sample Bottles
 12 x Sample Mailers
 12 x Sample Information Forms (SIFs)
 SIF# WC0897949 to WC0897960



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



CARTON ID
234879

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

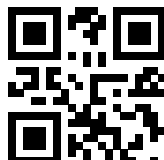


← scan to track carton/samples

Customer:

Shipped:

ID# 234879



ID# 234879



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897949

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: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

▲ 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: _____

WC0897949



WC0897949



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897950

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: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

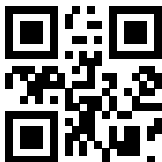
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0897950



WC0897950



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897951

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

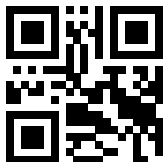
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: _____

WC0897951



WC0897951



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897952

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

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

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▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: _____

WC0897952



WC0897952



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897953

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location:

<input type="checkbox"/> Main Engine	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Port
<input type="checkbox"/> Winch	<input type="checkbox"/> Transmission Rear	<input type="checkbox"/> Starboard
<input type="checkbox"/> Bow Thruster	<input type="checkbox"/> Crane	<input type="checkbox"/> Center
<input type="checkbox"/> Stern Tube	<input type="checkbox"/> Steering Gear	<input type="checkbox"/> Other _____
<input type="checkbox"/> Var. Pitch Prop	<input type="checkbox"/> Other _____	

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: 1000-600

▲ 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: _____

WC0897953



WC0897953



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897955

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location:

<input type="checkbox"/> Main Engine	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Port
<input type="checkbox"/> Winch	<input type="checkbox"/> Transmission Rear	<input type="checkbox"/> Starboard
<input type="checkbox"/> Bow Thruster	<input type="checkbox"/> Crane	<input type="checkbox"/> Center
<input type="checkbox"/> Stern Tube	<input type="checkbox"/> Steering Gear	<input type="checkbox"/> Other _____
<input type="checkbox"/> Var. Pitch Prop	<input type="checkbox"/> Other _____	

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: 1000-600

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

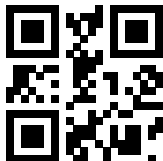
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0897955



WC0897955



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897957

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CUSTOMER CODE: CCGSSWA

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

▲ 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:

WC0897957



WC0897957



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0897958

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

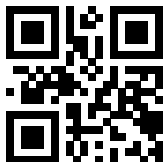
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: _____

WC0897958



WC0897958



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0897959

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CUSTOMER CODE: **CCGSSWA**

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location: _____

Main Engine Gearbox Port

Winch Transmission Rear Starboard

Bow Thruster Crane Center

Stern Tube Steering Gear Other _____

Var. Pitch Prop Other _____

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: _____ 1000-600

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

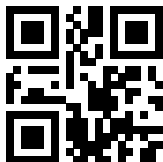
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0897959



WC0897959



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0897960

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CUSTOMER CODE: CCGSSWA

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

SHIP NAME: _____

UNIT NUMBER: _____ S/N: _____

Sample From: Hydraulic System Location:

<input type="checkbox"/> Main Engine	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Port
<input type="checkbox"/> Winch	<input type="checkbox"/> Transmission Rear	<input type="checkbox"/> Starboard
<input type="checkbox"/> Bow Thruster	<input type="checkbox"/> Crane	<input type="checkbox"/> Center
<input type="checkbox"/> Stern Tube	<input type="checkbox"/> Steering Gear	<input type="checkbox"/> Other _____
<input type="checkbox"/> Var. Pitch Prop	<input type="checkbox"/> Other _____	

OIL TYPE: _____ CAPACITY: _____

TOTAL TIME ON UNIT: _____ hrs / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO

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

SAMPLE DATE: MM / DD / YY

Comments:

Add Tests: 1000-600

▲ 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:

WC0897960



WC0897960