



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

Ship To:

*** Hydrostor ***
 285 Mill Rd.
 Goderich, On N7A 4A2
 CANADA



Carton Contents:



6 x Sample Bottles
 6 x Sample Mailers
 6 x Sample Information Forms (SIFs)
 SIF# PP0000908 to PP0000913



P P - I N D - 2

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



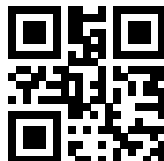
▼ keep for your records * THESE LABELS PEEL OFF * ▼ place on return shipping box



◀ scan to track carton/samples

Customer:

Shipped:



ID# 238096

ID# 238096



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000908

PP 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. PP 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: HYD365TOR

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"/> Gearbox | <input type="checkbox"/> Plain Bearing |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear | <input type="checkbox"/> Roller Bearing |
| <input type="checkbox"/> Pump | <input type="checkbox"/> Gear Extruder | <input type="checkbox"/> Thrust Bearing |
| <input type="checkbox"/> Blower | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil |
| | <input type="checkbox"/> Screw Compressor | <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)**

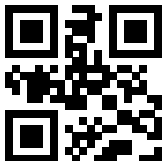
▼ **KEEP FOR TRACKING THIS SAMPLE** ▼ **STICK ON BOTTLE**



◀ scan to track sample ID or S/N:

_____ Sample Date: _____

PP0000908



PP0000908



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000909

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CUSTOMER CODE: HYD365TOR

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

PP0000909



PP0000909



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000910

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CUSTOMER CODE: HYD365TOR

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

PP0000910



PP0000910



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000911

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CUSTOMER CODE: HYD365TOR

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"/> Gearbox | <input type="checkbox"/> Plain Bearing |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear | <input type="checkbox"/> Roller Bearing |
| <input type="checkbox"/> Pump | <input type="checkbox"/> Gear Extruder | <input type="checkbox"/> Thrust Bearing |
| <input type="checkbox"/> Blower | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil |
| | <input type="checkbox"/> Screw Compressor | <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)**

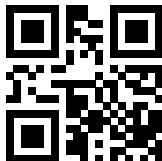
▼ **KEEP FOR TRACKING THIS SAMPLE** ▼ **STICK ON BOTTLE**



◀ scan to track sample ID or S/N:

_____ Sample Date: _____

PP0000911



PP0000911



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000912

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CUSTOMER CODE: HYD365TOR

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"/> Gearbox | <input type="checkbox"/> Plain Bearing |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear | <input type="checkbox"/> Roller Bearing |
| <input type="checkbox"/> Pump | <input type="checkbox"/> Gear Extruder | <input type="checkbox"/> Thrust Bearing |
| <input type="checkbox"/> Blower | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil |
| | <input type="checkbox"/> Screw Compressor | <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)

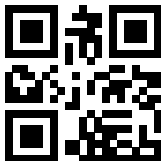
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: _____

PP0000912



PP0000912



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



PP0000913

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CUSTOMER CODE: HYD365TOR

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

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

OIL BRAND & GRADE: _____

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

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

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

Comments:

Add Tests: _____ 1000-200

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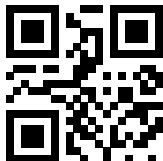
▼ **KEEP FOR TRACKING THIS SAMPLE** ▼ **STICK ON BOTTLE**



◀ *scan to track sample ID or S/N:*

_____ **Sample Date:**

PP0000913



PP0000913