



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

Ship To:

Voith Hydro Inc.
 519 Old Shediac Road
 Memramcook, NB E4K 1V7
 CANADA



Carton Contents:



5 x Sample Bottles
 5 x Sample Mailers
 5 x Sample Information Forms (SIFs)
 SIF# WC0916259 to WC0916263



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



CARTON ID
241431

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

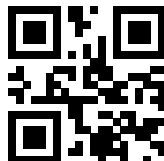


◀ scan to track carton/samples

Customer:

Shipped:

ID# 241431



ID# 241431



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0916259

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: **VOIOAK**

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)

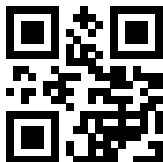
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



← scan to track sample
ID or S/N:

Sample Date:

WC0916259



WC0916259



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0916260

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: **VOIOAK**

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:

WC0916260



WC0916260



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0916261

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: VOIOAK

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**

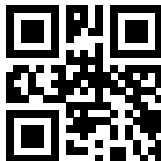
▼ **STICK ON BOTTLE**



◀ *scan to track sample*
ID or S/N:

Sample Date:

WC0916261



WC0916261



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0916262

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: **VOIOAK**

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:

WC0916262



WC0916262



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0916263

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: VOIOAK

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: _____

WC0916263



WC0916263