



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

**Ship To:**

\*\*\*Beaches Marine Brokerage  
 2146 A Queen Street East Suite 106  
 Toronto, ON M4E 1E3  
 CANADA



**Carton Contents:**



5 x Sample Bottles  
 5 x Sample Mailers  
 5 x Sample Information Forms (SIFs)  
 SIF# PP0001447 to PP0001451



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



**CARTON ID**  
**258052**

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



◀ scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 258052**

**ID# 258052**



# WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



## PP0001447

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: FAR227MIS

▼ 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**



## PP0001447

◀ scan to track sample

ID or S/N:

\_\_\_\_\_

Sample Date:

\_\_\_\_\_



## PP0001447



# WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



## PP0001448

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SHIP NAME: \_\_\_\_\_

UNIT NUMBER: \_\_\_\_\_ S/N: \_\_\_\_\_

Sample From:	<input type="checkbox"/> 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)

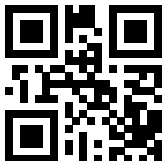
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:  
\_\_\_\_\_

Sample Date:  
\_\_\_\_\_

## PP0001448



## PP0001448



# WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



## PP0001449

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

SHIP NAME: \_\_\_\_\_

UNIT NUMBER: \_\_\_\_\_ S/N: \_\_\_\_\_

<i>Sample From:</i>	<input type="checkbox"/> Hydraulic System	<i>Location:</i>
<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)

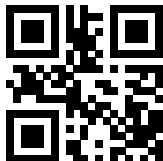
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:  
\_\_\_\_\_

Sample Date:  
\_\_\_\_\_

## PP0001449



## PP0001449



# WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



## PP0001450

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### CUSTOMER CODE: FAR227MIS

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

SHIP NAME: \_\_\_\_\_

UNIT NUMBER: \_\_\_\_\_ S/N: \_\_\_\_\_

Sample From:	<input type="checkbox"/> 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**

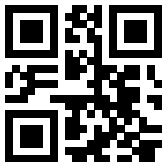


## PP0001450

◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

\_\_\_\_\_



## PP0001450



# WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



## PP0001451

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### CUSTOMER CODE: FAR227MIS

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SHIP NAME: \_\_\_\_\_

UNIT NUMBER: \_\_\_\_\_ S/N: \_\_\_\_\_

<i>Sample From:</i>	<input type="checkbox"/> Hydraulic System	<i>Location:</i>
<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)

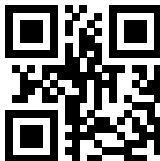
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

## PP0001451



## PP0001451