



Dye Selection/Oil Sample Analysis Form

Company Information:

Contact Name _____

Contact Title _____

Company Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Fax _____

E-mail _____

Oil Part #: _____

Brand Name _____

MSDS (**Please attach**)

Product Specification Sheet (**Please attach**)

System the Oil is Used in _____

Capacity _____

Annual Usage _____

Sample Oil (**For best results, please use new oil.**)

General Comments: _____

NOTE:

May take 1-2 weeks for results after the oil sample is received.

Please read the enclosed packing instructions.