



**INDUSTRIAL
OIL ANALYSIS**

416 E. Pettit Ave., Fort Wayne, IN 46806
(260)744-2380
www.blackstone-labs.com

Name: _____
Address: _____ Unit ID/Machine #: _____
_____ Machine make: _____
Contact: _____ Machine type: _____
Phone: _____ Sample date: _____
Email: _____ Time on oil: _____
Was the oil changed? Yes No Oil type: _____

Additional Tests:
Particle Count / ISO Cleanliness Code? Yes No
Total Acid Number (TAN)? Yes No
(If additional tests are needed, please call.)

Please send more sample containers.

Payment Check enclosed Check # _____ Sample was prepaid

PO #: _____

Credit card: Use card on file **or** Use card listed below
Name on card: _____ CVV code: _____
Credit card number: _____ Exp. date: _____

If billing address is different from the address at the top of the slip, please list below.

Remarks or questions: _____

