



TERMINAL ELEVATOR MONTHLY REPORT ON THE APPLICATION OF MINERAL OIL

TERMINAL ELEVATOR INFORMATION

Company name:

Address:

City:

Province:

Postal Code:

Phone:

Email:

Contact name:

Date of reporting : (dd/mm/yy)

REPORTING

The following information shall be reported to the CGC no later than seven (7) calendar days for the preceding month

Month

Year

Total tonnage of grain to which mineral oil was applied, during the month?

Quantity, in litres, of mineral oil applied to that tonnage of grain during the month?

Average application rate of mineral oil expressed in percentage by weight?

MINERAL OIL INFORMATION

Was any mineral oil purchased since last month's submitted report

☐ Yes

☐ No

Number of litres received

If yes

Does the mineral oil meet food grade specifications as prescribed specified by Health Canada?

☐ Yes

☐ No

Have you included copies of all documentation indicating the mineral oil supplier's name, address and date of delivery, litres of mineral oil supplied, and product data to demonstrate the mineral oil meets food grade specifications and density values along with this report?

☐ Yes

☐ No

SIGNATURE

Name :

Date:

Upon completion, email the form and attachment(s) to derek.bunkowsky@grainscanada.gc.ca