



TERMINAL ELEVATOR APPLICATION ON THE PROPOSED USE OF MINERAL OIL		
APPLICANT INFORMATION		
Date of application: (dd/mm/yy)		Applicants name:
Address:		
City:	Province:	Postal Code:
Applicants email:		Applicants phone:
TERMINAL ELEVATOR INFORMATION		
Grain company:		Terminal elevator manager name:
Terminal elevator address:		
City:	Province:	Postal Code:
Terminal elevator manager phone:		Terminal elevator manager email:
MINERAL OIL EQUIPMENT		
<p>Provide a description of the equipment that would be installed and maintained in order to apply mineral oil including equipment such as storage tank, oil pump, regulators, application rate meters, oil volume meter, application nozzles, supply lines etc. Supporting documentation to include a schematic which identifies all the equipment and intended installation locations.</p> <p><i>This information can be included as an attachment to this application.</i></p>		
<p>Identification of visual monitors and/or devices that are accessible to Canadian Grain Commission inspectors to verify application of mineral oil.</p>		
<p>Detailed description of the measures in place for the terminal elevator operator to verify, on an ongoing basis, even application and applications rates of mineral oil are within permitted tolerances.</p>		



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MINERAL OIL APPLICATION			
Intended application rate of mineral oil (% by weight)			
Identify all locations where mineral oil will be applied		<input type="checkbox"/> on receipt of grain <input type="checkbox"/> during handling and/or cleaning <input type="checkbox"/> on discharge	
Identify whether mineral oil be applied once to the grain or multiple applications not exceeding 0.02% by weight		<input type="checkbox"/> One application	<input type="checkbox"/> Multiple applications
Number of application nozzles		Location where application nozzles will be installed	
Will the location of application allow for an even application of oil to the grain		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Detailed description of the measures in place, or the work instruction, to be followed in the event of excess application of mineral oil or mineral oil spills.			
MINERAL OIL SPECIFICATIONS			
Will the mineral oil purchased and applied meet food grade the specifications as prescribed by Health Canada as described in the Memorandum to the Trade?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you included documentation confirming that mineral oil from the intended supplier meets food grade specifications in Canada?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you included documentation confirming density values for the intended mineral oil?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
RECORDS			
Identify where the following records will be maintained for a minimum of 2 years and made available to the CGC upon request?			
Mineral oil application rates applied on receipt, during handling or cleaning or upon discharge			
Volumes of mineral oil purchased			
Quality properties and specifications of mineral oil purchased			
Maintenance and/or replacement of equipment used in the application of mineral oil			



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SIGNATURE

Name of applicant:

Date:

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