**HPM GREASE CERTIFICATION PROGRAM**

**Supplier Affidavit**

**Instructions:** This form should be filled out in its entirety by the HPM Grease Supplier for each HPM grease formulation sold to a HPM Grease Marketer (“Rebrander”) for resale. Complete, sign, and return the form to Grease@CenterForQA.com.

Date

Grease Supplier (company name)

Mailing Address

Mailing Address

Mailing Address

Country

|  |  |
| --- | --- |
| The HPM Grease Supplier identified above, represented by |  |
| declares that s/he is its  |  |  and makes this affidavit on its behalf.(Name of Authorized Company Representative) |
| (Title of Authorized Company Representative) |
| Supplier will make available to  |  | herein called |
| “Rebrander”, the identical\* HPM grease formulation that Supplier supplies under the HPM (HPM Grease MARKETER Company Name) |
| Sample Approval Code(Supplier’s HPM Sample Approval Code provided by CQA) |  | , and that all future products which  |
| Supplier supplies as the above-identified HPM grease product to Rebrander for resale  |
| shall be identical\* in composition and characteristics. |
| *\* Dye color is the only permissible modification. Remaining formulation composition must be identical to the originally approved formulation, recognizing that there may be substitutions of substantially equivalent base oils and commodity chemicals or additives resulting in grease with equivalent performance.* |

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| Signature |

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|  | (Signature of Supplier’s Authorized Company Representative) |