

M1 - SPO



Dealer Information

* Contact: _____

Dealer Code: _____

* Dealer Name: _____

Address: _____

* City: _____

* Province: _____

* Phone#: _____

* Fax#: _____

PO#: _____

Email Address: _____

Client Information

Permobil recommends that the client is evaluated by a certified rehab specialist.

* First Name: _____

* Last Name: _____

Diagnosis: _____

Funding Source: _____

Client Age: _____

Client Measurements

* Weight: _____

* Height: _____

A) Top of Shoulders: _____

B) Chest Depth: _____

C) Chest Width: _____

D) Seat Depth: _____

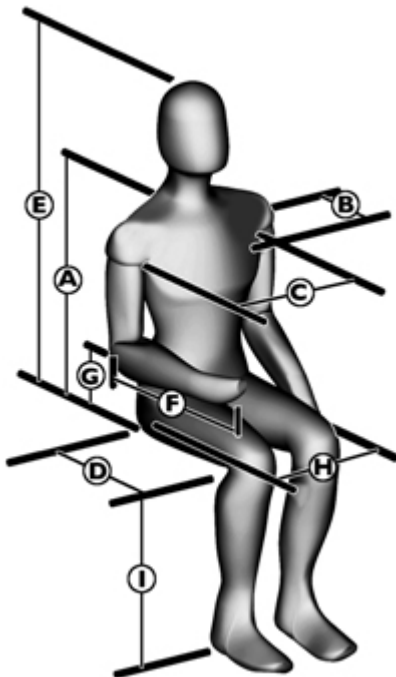
E) Top of Head: _____

F) Elbow to Hand: _____

G) Seat Pan to Elbow: _____

H) Hip Width: _____

*I) Knee to Foot: _____



Display ADP Codes on order/quote:

Three column pricing on order/quote:

Please send order/quote to fax#: (800) 231-3256

Email to: sales@permobil.com

Permobil Ltd.
12 - 75 Mary St.
Aurora, Ontario
L4G 1G3
Tel: (800) 736-0925
Fax: (800) 231-3256
www.permobil.com

Prices effective **March 05, 2018** and payable in Canadian dollars.

Chair Model and Colors

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I108006-99-0	M1 Base - SPO <i>Price Includes: MWD M1 Power Base Set Up For One Power Seat Function, FlexLink Suspension System, 7" Flat Free Casters, Tie-Down Hardware for Strap Systems and Charger. Max Speed = 5mph, Weight Capacity = 300lbs, STFH = 16".</i>	7,495.00

CHOOSE DRIVE TIRES:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I107974-99-0	Flat Free Tire 3"W x 14"T - Black	No Charge
<input type="checkbox"/> I107975-99-0	Pneumatic Tire 3"W x 14"T - Black	No Charge

OPTIONAL DRIVE TIRES:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I107976-99-0	Pneumatic/Snow Tire 3"W x 14"T Black	540.00

CHOOSE SHROUD COLOR:

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I107969-99-0	M1 Color Kit - Midnight Black	No Charge

Base Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
	PLEASE NOTE: <i>Additional parts are required to change the seat to floor height in the field.</i>	
<input type="checkbox"/> I108021-99-0	Seat to Floor Height - 16"	No Charge
<input type="checkbox"/> I108022-99-0	Seat to Floor Height - 17"	No Charge
<input type="checkbox"/> I108023-99-0	Seat to Floor Height - 18"	No Charge

MUST CHOOSE BATTERIES:

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I107032-99-0	Batteries, Grp 34 (60Ah) Sealed Gel, x2, Installed	953.00

OPTIONAL ITEMS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I101161-99-0	PP1A Programmer - VR2	716.00

Joystick Options

CHOOSE JOYSTICK TYPE:

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I103613-99-0	VR2 Advanced Joystick <i>Non expandable joystick capable of controlling up to 2 power functions through the joystick.</i>	No Charge
<input type="checkbox"/> I11237	VR2 90 Amp Upgrade <i>Select this option to upgrade the power module on a tilt only chair to allow future addition of power elevating legrests.</i>	258.00

CHOOSE JOYSTICK HANDLE TYPE:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I10045	Cone Shaped Joystick Knob - Standard	No Charge
<input type="checkbox"/> I100960-99-0	Chin Cup For Joystick Knob	123.00
<input type="checkbox"/> I100961-99-0	"T" Handle For Joystick Knob	181.00
<input type="checkbox"/> I100962-99-0	"Large Ball" For Joystick Knob	123.00
<input type="checkbox"/> I100963-99-0	"Softball" For Joystick Knob	165.00
<input type="checkbox"/> I100964-99-0	"Mushroom" For Joystick Knob	165.00
<input type="checkbox"/> I100965-99-0	"Stick" For Joystick Knob	165.00
<input type="checkbox"/> I105442-99-0	1.75" Black Foam Ball For Joystick Knob	123.00

Joystick Options

CHOOSE JOYSTICK HANDLE TYPE:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I105846-99-0	Bodypoint J/S Handle 3" U-Shaped w/ Flex-Shaft	158.00
<input type="checkbox"/> I105847-99-0	Bodypoint J/S Handle 4" U-Shaped w/ Flex-Shaft	158.00
<input type="checkbox"/> I105848-99-0	Bodypoint J/S Handle Dome Shaped, Rubber	158.00

Part Number	Description	MSRP - CA
<input type="checkbox"/> I11216	Joystick Mount Right - Fixed	No Charge
<input type="checkbox"/> I11217	Joystick Mount Left - Fixed	No Charge
<input type="checkbox"/> I108037-99-0	Slimline Retractable Joystick Mount - Right	466.00
<input type="checkbox"/> I108038-99-0	Slimline Retractable Joystick Mount - Left	466.00
<input type="checkbox"/> I11232	Adjustable Height Panel Bracket <i>Provides 1.77" of vertical adjustment below the armrest and 25° of angle adjustment. Compatible with all Permobil joystick mounts except for the M1 Fixed Joystick Mount.</i>	361.00

OPTIONAL ITEMS:

Seating System

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I107978-99-0	50° Power Tilt - M1 <i>Backrest angle can be manually adjusted up to 110°. A 1/2 speed limitation is applied when the tilt angle is > or = to 20°.</i>	5,995.00
<input checked="" type="checkbox"/> I11279	M1 Seating System	995.00
<input type="checkbox"/> I108185-99-0	EZ Fold Backrest <i>This feature allows the tubular backrest frame to be easily folded forward to reduce the transport height of an unoccupied wheelchair.</i>	275.00

Seating System Options

CHOOSE SEAT FUNCTION CONTROL TYPE:

Part Number	Description	MSRP - CA
<input checked="" type="checkbox"/> I11239	Single Seat Function Control - No Charge	No Charge

Backrest Options

CHOOSE TUBULAR BACKREST FRAME:

Part Number	Description	MSRP - CA
	PLEASE NOTE: <i>Tubular Backrest features 1" diameter back canes. The Tubular Backrest Frame and the Backrest Width Must match the Seat Width. The Backrest cane height is 20" from the seat pan to the bend of the canes. Must select Either a ROHO AGILITY Back System OR a ROHO seat cushion on an NPO M1.</i>	
<input type="checkbox"/> I107985-99-0	Tubular Backrest Frame - 14"W	No Charge
<input type="checkbox"/> I107986-99-0	Tubular Backrest Frame - 16"W	No Charge
<input type="checkbox"/> I107987-99-0	Tubular Backrest Frame - 18"W	No Charge
<input type="checkbox"/> I107988-99-0	Tubular Backrest Frame - 20"W	No Charge
<input type="checkbox"/> I107989-99-0	Tubular Backrest Frame - 22"W	No Charge

ROHO AGILITY BACKREST OPTIONS:

Part Number	Description	MSRP - CA
	ROHO AGILITY NOTE: <i>The ROHO AGILITY Back Systems are available in widths of 14", 16", 18" and 20" and shell heights of 16", 18" and 20". Includes backrest shell, cushion, air inserts, UT rail for lateral adjustment of the headrest and quick release attachment hardware. The backrest shell will be set 3" above the seat frame.</i>	

Backrest Options

ROHO AGILITY BACKREST OPTIONS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I11219	ROHO AGILITY Mid Contour Back System Shell Width (14", 16", 18", 20"W): _____ Shell Height (16", 18", 20"H): _____	945.00
<input type="checkbox"/> I11220	ROHO AGILITY Max Contour Back System Shell Width (14", 16", 18", 20"W): _____ Shell Height (16", 18", 20"H): _____	1,155.00

Seat Sizing

CHOOSE SEAT WIDTH:

Part Number	Description	MSRP - CA
	PLEASE NOTE: The Seat Width is available in 2" increments from 14"-22" and is not adjustable without additional parts. Please select Seat Width below. The seat width must match the backrest width.	
<input type="checkbox"/> I107980-99-0	Set Seat Width at 14"	No Charge
<input type="checkbox"/> I107979-99-0	Set Seat Width at 16"	No Charge
<input type="checkbox"/> I107982-99-0	Set Seat Width at 18"	No Charge
<input type="checkbox"/> I107981-99-0	Set Seat Width at 20"	No Charge
<input type="checkbox"/> I107984-99-0	Set Seat Width at 22"	No Charge

CHOOSE SEAT DEPTH:

Part Number	Description	MSRP - CA
	PLEASE NOTE: The Seat Depth is adjustable from 14"-22" in 1" increments without additional parts. Please select the Seat Depth below.	
<input type="checkbox"/> I107991-99-0	Set Seat Depth at 14" User weight cannot exceed 165lbs.	No Charge
<input type="checkbox"/> I107992-99-0	Set Seat Depth at 15"	No Charge
<input type="checkbox"/> I107993-99-0	Set Seat Depth at 16"	No Charge
<input type="checkbox"/> I107994-99-0	Set Seat Depth at 17"	No Charge
<input type="checkbox"/> I107995-99-0	Set Seat Depth at 18"	No Charge
<input type="checkbox"/> I107996-99-0	Set Seat Depth at 19"	No Charge
<input type="checkbox"/> I107997-99-0	Set Seat Depth at 20"	No Charge
<input type="checkbox"/> I108028-99-0	Set Seat Depth at 21"	No Charge
<input type="checkbox"/> I108029-99-0	Set Seat Depth at 22"	No Charge

CHOOSE SEAT CUSHION:

Part Number	Description	MSRP - CA
	PLEASE NOTE: ROHO seat cushions may not be available to fit all width & depth seat size combinations. Must select Either a ROHO AGILITY Back System OR a ROHO seat cushion on an NPO M1.	
<input type="checkbox"/> I11222	ROHO AirLITE Cushion	309.00
<input type="checkbox"/> I11166	ROHO QUADTRO SELECT HIGH PROFILE	769.00
<input type="checkbox"/> I11223	ROHO Hybrid Elite Sensor Ready Cushion	851.00
<input type="checkbox"/> I107505-99-0	ROHO Smart Check Device Sensing device that allows users to setup and maintain proper inflation pressure in ROHO Sensor Ready cushions. Only available when ordered with a ROHO Sensor Ready cushion.	295.00
<input type="checkbox"/> I105118-99-0	Omit Seat Cushion	No Charge

Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
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Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
PLEASE NOTE:		
<i>The Low Mount Armrest Assembly can be adjusted from 7"-12" from the seat pan. The High Mount Armrest Assembly can be adjusted from 10"-14" from the seat pan. Please select the High or Low Mount Armrest Assembly and Armrest Height below.</i>		
<input type="checkbox"/> I11225	Locking Flip Back Height Adj Armrests - High	No Charge
<input type="checkbox"/> I11226	Locking Flip Back Height Adj Armrests - Low	No Charge
SET ARMREST HEIGHT AT: _____		

CHOOSE ARMREST PAD RIGHT:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I105100-99-0	4"x10" Corpus Armrest Pad Right - Leatherette	No Charge
<input type="checkbox"/> I105104-99-0	4"x13" Corpus Armrest Pad Right - Leatherette	No Charge
<input type="checkbox"/> I107212-99-0	4"x10" Corpus Armrest Pad Right - Black Fabric	No Charge
<input type="checkbox"/> I106047-99-0	4"x13" Corpus Armrest Pad Right - Black Fabric	No Charge
<input type="checkbox"/> I106486-99-0	4"x10" Corpus Arm w/ Stealth Gel Pad - Right	197.00
<input type="checkbox"/> I106488-99-0	4"x13" Corpus Arm w/ Stealth Gel Pad - Right	203.00
<input type="checkbox"/> I108091-99-0	2"x10" Narrow Armrest Pad - Right	No Charge
<input type="checkbox"/> I108092-99-0	2"x14" Narrow Armrest Pad - Right	No Charge

CHOOSE ARMREST PAD LEFT:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I105098-99-0	4"x10" Corpus Armrest Pad Left - Leatherette	No Charge
<input type="checkbox"/> I105102-99-0	4"x13" Corpus Armrest Pad Left - Leatherette	No Charge
<input type="checkbox"/> I107213-99-0	4"x10" Corpus Armrest Pad Left - Black Fabric	No Charge
<input type="checkbox"/> I106046-99-0	4"x13" Corpus Armrest Pad Left - Black Fabric	No Charge
<input type="checkbox"/> I106487-99-0	4"x10" Corpus Arm w/ Stealth Gel Pad - Left	197.00
<input type="checkbox"/> I106489-99-0	4"x13" Corpus Arm w/ Stealth Gel Pad - Left	203.00
<input type="checkbox"/> I108090-99-0	2"x10" Narrow Armrest Pad - Left	No Charge
<input type="checkbox"/> I108093-99-0	2"x14" Narrow Armrest Pad - Left	No Charge

OPTIONAL ITEMS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I107339-99-0	Armrest Pouch - Right	260.00
<input type="checkbox"/> I107338-99-0	Armrest Pouch - Left	260.00
<input type="checkbox"/> I107840-99-0	UT Armrest Side Support - Right Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	372.00
<input type="checkbox"/> I107863-99-0	UT Armrest Side Support - Left Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	372.00
<input type="checkbox"/> I107864-99-0	UT Armrest Side Support - Right Inner <i>Includes 2"T x 6.5"W tapered pad. May need to increase width between the armrests to ensure armrests will flip-up.</i>	372.00
<input type="checkbox"/> I107865-99-0	UT Armrest Side Support - Left Inner <i>Includes 2"T x 6.5"W tapered pad. May need to increase width between the armrests to ensure armrests will flip-up.</i>	372.00
<input type="checkbox"/> I107839-99-0	UT Elbow Support - Right <i>Must also select PN I10881.</i>	200.00
<input type="checkbox"/> I107838-99-0	UT Elbow Support - Left <i>Must also select PN I10882.</i>	200.00
<input type="checkbox"/> I10881	Adjustable Elbow Support Hardware - Right	291.00
<input type="checkbox"/> I10882	Adjustable Elbow Support Hardware - Left	291.00

Legrest Options

Legrest Options

CHOOSE LEGREST OPTIONS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I108015-99-0	Manual Elevating Legrest - Center Mount	No Charge
<input type="checkbox"/> I108016-99-0	Power Elevating Legrest - 140° - Center Mount	3,250.00

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I108212-99-0	2pc Narrow Footplates - 8.5"D x 5.5"W, Short <i>Footplate height range, 7-12.5"</i>	No Charge
<input type="checkbox"/> I108094-99-0	2pc Narrow Footplates - 8.5"D x 5.5"W, Long <i>Footplate height range, 11-16"</i>	No Charge
<input type="checkbox"/> I108156-99-0	2pc Wide Footplates - 9"D x 7.5"W <i>Footplate height range, 11-16"</i>	390.00

SET FOOTPLATE HEIGHT AT: _____

This is measured from the SEAT PAN to the top of the FOOTPLATE, when the legrest assembly is at 90°. Do NOT include cushion thickness in your measurement. In one inch increments, please indicate desired footplate height. NOTE: The footplate height must be set at least 2" less than the seat height. Height may need to be reduced for shipping.

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I108203-99-0	UT Calf Support Kit (B) w Mesh Cover & Adj Hardware <i>3.5"W x 4.5"T Pad.</i>	No Charge
<input type="checkbox"/> I108200-99-0	UT Calf Support Kit (J) w Mesh Cover & Adj Hardware <i>5"W x 6.5"T Pad.</i>	No Charge
<input type="checkbox"/> I108204-99-0	UT Calf Support Kit (A) w Mesh Cover & Adj Hardware <i>5.5"W x 6"T Pad.</i>	No Charge
<input type="checkbox"/> I108201-99-0	UT Calf Support Kit (H) w Mesh Cover & Adj Hardware <i>7"W x 7"T Curved Pad.</i>	404.00
<input type="checkbox"/> I108202-99-0	UT Calf Support Kit (D) w Mesh Cover & Adj Hardware <i>8"W x 8"T Pad.</i>	404.00

Accessories

MUST CHOOSE POSITIONING BELT:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I100518-99-0	Positioning Belt	No Charge
<input type="checkbox"/> I104520-99-0	Bodypoint Padded Hip Belt - Medium	148.00
<input type="checkbox"/> I104516-99-0	Bodypoint Padded Hip Belt - Large	203.00

HEADREST OPTIONS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I107470-99-0	Permobil 7"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	452.00
<input type="checkbox"/> I107469-99-0	Permobil 10"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	452.00
<input type="checkbox"/> I107468-99-0	Permobil 14"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	452.00
<input type="checkbox"/> I107480-99-0	Adj/Removable Headrest Link Hardware - Standard	314.00
<input type="checkbox"/> I107481-99-0	Adj/Removable Headrest Link Hardware - Extended <i>Includes an additional 3" link to extend headrest pad range.</i>	339.00

OPTIONAL ITEMS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I103070-99-0	UT Amp. Support Pad (H) w/ Mesh Cover - (1 Each) <i>7"W x 7"T Curved Pad. Must also select PN I10553.</i>	384.00
<input type="checkbox"/> I103071-99-0	UT Amp. Support Pad (D) w/ Mesh Cover - (1 Each) <i>8"W x 8"T Flat Pad. Must also select PN I10553.</i>	384.00

Accessories

OPTIONAL ITEMS:

Part Number	Description	MSRP - CA
<input type="checkbox"/> I10553	Adj Removable - Amp Support Hardware (1 Each) <i>Please indicate if you would like the amputation support mounted on the right or left side of the seat frame: Mount Amp Suppt on Left: _____ Mount Amp Suppt on Right: _____</i>	137.00
<input type="checkbox"/> I106104-99-0	UT Hip Suppt (B) w/ Mesh Cover - High (Pair) <i>4.5"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	313.00
<input type="checkbox"/> I106103-99-0	UT Hip Suppt (A) w/ Mesh Cover - High (Pair) <i>6"W x 5.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	313.00
<input type="checkbox"/> I103094-99-0	UT Thigh/Hip Suppt (J) w/ Mesh Cover - High (Pair) <i>6.5"W x 5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	508.00
<input type="checkbox"/> I103095-99-0	UT Thigh/Hip Suppt (C) w/ Mesh Cover - High (Pair) <i>8"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	508.00
<input type="checkbox"/> I102977-99-0	UT Thigh/Hip Suppt (G) w/ Mesh Cover - High (Pair) <i>12"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	508.00
<input type="checkbox"/> I10550	Adj Removable - Thigh Support Hardware (Pair)	137.00
<input type="checkbox"/> I105260-99-0	Transfer Handles, Corpus Seat	528.00
<input type="checkbox"/> I108336-99-0	Repositioning Handles for 1" Diameter Tube	466.00
<input type="checkbox"/> I106210-99-0	RAM Self-Leveling Cup Holder	91.00
<input type="checkbox"/> I106806-99-0	RAM X-Grip Phone Holder	91.00
<input type="checkbox"/> I107100-99-0	RAM X-Grip 10" Tablet Holder w/Swing Away Mount <i>Compatible with most 10" screen tablets with or without a protective case. Includes adjustable swing away mount. Note: Customization may be required if ordered along with an Omni.</i>	504.00
<input type="checkbox"/> I105805-99-0	Medical Necessities Bag Hooks <i>Please Note: Recline is limited to 165° or less (depending on backrest height) when ordering with 23" or 24" tall Ergo backrest. Custom required if ordered with a ROHO AGILITY backrest.</i>	99.00
<input type="checkbox"/> I102059-99-0	Medical Necessities Bag <i>Includes hardware to attach bag to backrest. Please Note: Recline is limited to 165° or less (depending on backrest height) when ordering with a 23" or 24" tall Ergo backrest. Custom required if ordered with a ROHO AGILITY backrest.</i>	280.00
<input type="checkbox"/> I10843	Small Angle Adjustable Tray <i>Must also select PN I10556. Mount on Left: _____ Mount on Right: _____</i>	469.00
<input type="checkbox"/> I10556	Adj Removable - Tray Hardware (1 Each)	137.00
<input type="checkbox"/> I108107-99-0	Crutch Holder for 1" Diameter Tube	354.00
<input type="checkbox"/> I108106-99-0	O2 Holder for 1" Diameter Tube	341.00

Notes & Additional Instructions:

Chair Order Policy:

You are highly encouraged to contact Permobil Sales with ANY questions regarding proper completion of our order forms at 1-800-736-0925. The order cannot be processed without the following:

- A client name or code, the client's measurements, the client's weight
- The order form must also be signed by a person authorized by your company to acknowledge the items selected. Permobil, LTD. is not responsible for configuration or size discrepancies resulting from customer errors on the order form.
- Order confirmations will be provided by Permobil summarizing the items selected. Please review this carefully.
- Once the order is shipped, any changes are subject to the returns policy and may be prohibited.

Order Acknowledgement:

I, _____, am an agent of the medical equipment provider named on this order form and I have the authority to contract for the purchase of powered wheelchairs and related parts on behalf of said provider. I acknowledge that I have reviewed this order and that it is complete and accurate to the best of my knowledge. I further acknowledge that any changes to this order after submission of this order form are subject to the returns policy and may carry additional charges.

Signed: _____

Printed Name: _____

Title: _____

Date: _____

NOTE: All specifications and prices are subject to change without notice. Please note that prices displayed are only valid if ordered with the wheelchair. Any parts ordered for service or future alterations will carry different pricing and warranty.