



*** Indicates a Required Field**



Dealer Information

* ATP: _____
 Dealer Code: _____
 * Dealer Name: _____
 Address: _____
 * City: _____
 * State/Zip: _____
 * Phone#: _____
 * Fax#: _____
 PO#: _____
 Email Address: _____

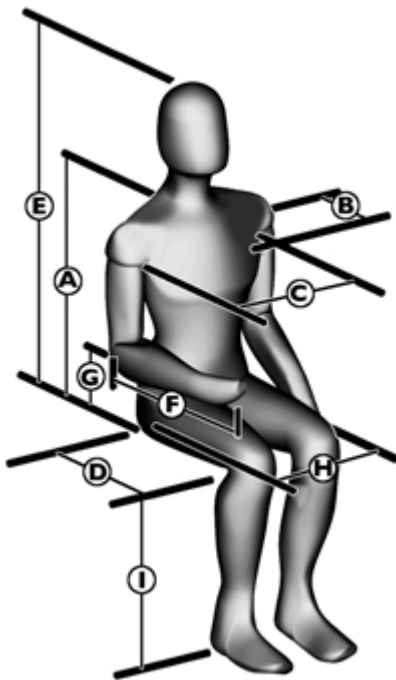
Client Information

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: _____



Three column pricing on order/quote:
 Display HCPCS Codes on order/quote:

Please send order/quote to fax#: **(800) 231-3256**
 Email to: sales@permobil.com

Permobil Inc.
 300 Duke Dr.
 Lebanon, TN 37090
 Tel: (800) 736-0925
 Fax: (800) 231-3256
www.permobil.com

M1 - NPO

Chair Model and Colors

CHOOSE BASE:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I11215	M1 Base - NPO <i>Price Includes: MWD M1 Power Base Set Up For No Power Seat Functions, FlexLink Suspension System, 7" Flat Free Casters, Tie-Down Hardware for Strap Systems and Charger. Max Speed = 5mph, Weight Capacity = 300lbs, STFH = 16".</i>	7,895.00	K0848

CHOOSE DRIVE TIRES:

Part Number	Description	Price	HCPCS Code
<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	Price	HCPCS Code
<input type="checkbox"/> I107976-99-0	Pneumatic/Snow Tire 3"W x 14"T Black <i>Snow tires are designed for use in cold weather conditions. The nylon compound in these tires remains flexible at low temperatures, but wears more easily. Therefore, the snow tires (sold as wheel assemblies) are not recommended for year-long use and must be ordered along with standard drive wheels. Does not include caster wheels.</i>	456.00	

CHOOSE SHROUD COLOR:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107967-99-0	M1 Color Kit - Sunburst Orange	No Charge	
<input type="checkbox"/> I107968-99-0	M1 Color Kit - Galactic Green	No Charge	
<input type="checkbox"/> I107969-99-0	M1 Color Kit - Midnight Black	No Charge	
<input type="checkbox"/> I107970-99-0	M1 Color Kit - Ocean Blue	No Charge	
<input type="checkbox"/> I107971-99-0	M1 Color Kit - Power Pink	No Charge	
<input type="checkbox"/> I107973-99-0	M1 Color Kit - Radiant Red	No Charge	
<input type="checkbox"/> I108205-99-0	M1 Color Kit - Mossy Oak Break-Up Country	198.00	
<input type="checkbox"/> I108206-99-0	M1 Color Kit - Carbon Fiber	198.00	
<input type="checkbox"/> I108207-99-0	M1 Color Kit - CDG Poly	198.00	

Base Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	PLEASE NOTE: <i>Additional parts are required to change the seat to floor height in the field.</i>		
<input type="checkbox"/> I108026-99-0	Seat to Floor Height - 16" - No Tilt	No Charge	
<input type="checkbox"/> I108025-99-0	Seat to Floor Height - 17" - No Tilt	No Charge	
<input type="checkbox"/> I108024-99-0	Seat to Floor Height - 18" - No Tilt	No Charge	

MUST CHOOSE BATTERIES:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I107032-99-0	Batteries, Grp 34 (60Ah) Sealed Gel, x2, Installed	932.00	E2359

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107998-99-0	Enhanced Steering Perform Unit (ESP), R-net	1,475.00	K0108
<input type="checkbox"/> I101161-99-0	PP1A Programmer - VR2	550.00	
<input type="checkbox"/> ID51113	Programming Key for R-net - Permobil Version	511.00	

Joystick Options

CHOOSE JOYSTICK TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103612-99-0	VR2 Basic Joystick <i>The VR2 Basic Joystick does not support any power functions.</i>	No Charge	
<input type="checkbox"/> I108289-99-0	R-net LED Remote Joystick <i>This Joystick does NOT have a Display Screen and does NOT contain mono jacks. Limited to five profiles with this Joystick Module.</i>	No Charge	

CHOOSE JOYSTICK HANDLE TYPE:

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Joystick Options

CHOOSE JOYSTICK HANDLE TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10045	Cone Shaped Joystick Knob - Standard	No Charge	
<input type="checkbox"/> I100960-99-0	Chin Cup For Joystick Knob	123.00	E2324
<input type="checkbox"/> I100961-99-0	"T" Handle For Joystick Knob	174.00	E2323
<input type="checkbox"/> I100962-99-0	"Large Ball" For Joystick Knob	123.00	E2323
<input type="checkbox"/> I100963-99-0	"Softball" For Joystick Knob	162.00	E2323
<input type="checkbox"/> I100964-99-0	"Mushroom" For Joystick Knob	162.00	E2323
<input type="checkbox"/> I100965-99-0	"Stick" For Joystick Knob	162.00	E2323
<input type="checkbox"/> I105442-99-0	1.75" Black Foam Ball For Joystick Knob	123.00	E2323
<input type="checkbox"/> I105846-99-0	Bodypoint J/S Handle 3" U-Shaped w/ Flex-Shaft	162.00	E2323
<input type="checkbox"/> I105847-99-0	Bodypoint J/S Handle 4" U-Shaped w/ Flex-Shaft	162.00	E2323
<input type="checkbox"/> I105848-99-0	Bodypoint J/S Handle Dome Shaped, Rubber	162.00	E2323

CHOOSE JOYSTICK MOUNT:

Part Number	Description	Price	HCPCS Code
<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	479.00	E1028
<input type="checkbox"/> I108038-99-0	Slimline Retractable Joystick Mount - Left	479.00	E1028
<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>	265.00	E1028

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11238	Expandable Controller - R-net <i>This item is required with upgrade to R-net electronics or when ordering an Alternative Drive Control.</i>	679.00	E2377
<input type="checkbox"/> I10513	Harness for Expandable Controller <i>Must be ordered with any Expandable Controller.</i>	602.00	E2313

Seating System

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I108027-99-0	Seating System Only, No Tilt - M1 <i>Backrest angle can be manually adjusted up to 110°.</i>	No Charge	

Backrest Options

CHOOSE TUBULAR BACKREST FRAME:

Part Number	Description	Price	HCPCS Code
	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.</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	

CURVED, SOLID BACKREST OPTIONS:

Part Number	Description	Price	HCPCS Code
	PLEASE NOTE: <i>The Curved, Solid Backrests will come with a leatherette backrest cushion. The backrest shell will be set 3" above the seat pan.</i>		
<input type="checkbox"/> I108086-99-0	Curved, Solid Backrest - 14"W x 16"T	No Charge	
<input type="checkbox"/> I108085-99-0	Curved, Solid Backrest - 16"W x 20"T	No Charge	

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Backrest Options

CURVED, SOLID BACKREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I108087-99-0	Curved, Solid Backrest - 18"W x 20"T	No Charge	
<input type="checkbox"/> I108088-99-0	Curved, Solid Backrest - 20"W x 20"T	No Charge	
<input type="checkbox"/> I108089-99-0	Curved, Solid Backrest - 22"W x 20"T	No Charge	
<input type="checkbox"/> I11231	Omit Backrest	No Charge	

ROHO AGILITY BACKREST OPTIONS:

Part Number	Description	Price	HCPCS Code
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>			
<input type="checkbox"/> I11219	ROHO AGILITY Mid Contour Back System Shell Width (14", 16", 18", 20"W): _____ Shell Height (16", 18", 20"H): _____	665.00	E2620
<input type="checkbox"/> I11220	ROHO AGILITY Max Contour Back System Shell Width (14", 16", 18", 20"W): _____ Shell Height (16", 18", 20"H): _____	779.00	E2620

Seat Sizing

CHOOSE SEAT WIDTH:

Part Number	Description	Price	HCPCS Code
PLEASE NOTE:			
<i>The Seat Width is available in 2" increments from 14"-22" and is not adjustable without additional parts. Please select Seat Width below.</i>			
<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	Price	HCPCS Code
PLEASE NOTE:			
<i>The Seat Depth is adjustable from 14"-22" in 1" increments without additional parts. Please select the Seat Depth below.</i>			
<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	Price	HCPCS Code
PLEASE NOTE:			
<i>ROHO seat cushions may not be available to fit all width & depth seat size combinations.</i>			
<input type="checkbox"/> I11222	ROHO AirLITE Cushion < 22"W Registered in PDAC under ROHO model numbers AL1414HD - AL2018HD.	188.00	E2605
<input type="checkbox"/> I11166	ROHO QUADTRO SELECT HIGH PROFILE < 22"W Registered in PDAC under ROHO model numbers QS98C - QS1114C.	586.00	E2624

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Seat Sizing

CHOOSE SEAT CUSHION:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11167	ROHO QUADTRO SELECT HIGH PROFILE > or = 22"W <i>Registered in PDAC under ROHO model numbers QS128C - QS1413C.</i>	628.00	E2625
<input type="checkbox"/> I11223	ROHO Hybrid Elite SR Cushion < 22"W <i>Registered in PDAC under ROHO model numbers 1RHE1414C-SR - 1RHE2020C-SR.</i>	530.00	E2622
<input type="checkbox"/> I11224	ROHO Hybrid Elite SR Cushion - 22"W <i>Registered in PDAC under ROHO model numbers 1RHE2218C-SR - 1RHE2220C-SR.</i>	552.00	E2623
<input type="checkbox"/> I107505-99-0	ROHO Smart Check Device <i>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.</i>	254.00	
<input type="checkbox"/> I105118-99-0	Omit Seat Cushion	No Charge	

Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	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	Price	HCPCS Code
<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	169.00	
<input type="checkbox"/> I106488-99-0	4"x13" Corpus Arm w/ Stealth Gel Pad - Right	174.00	
<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	Price	HCPCS Code
<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	169.00	
<input type="checkbox"/> I106489-99-0	4"x13" Corpus Arm w/ Stealth Gel Pad - Left	174.00	
<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	Price	HCPCS Code
<input type="checkbox"/> I107339-99-0	Armrest Pouch - Right	236.00	
<input type="checkbox"/> I107338-99-0	Armrest Pouch - Left	236.00	
<input type="checkbox"/> I107840-99-0	UT Armrest Side Support - Right Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	340.00	
<input type="checkbox"/> I107863-99-0	UT Armrest Side Support - Left Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	340.00	
<input type="checkbox"/> I107864-99-0	UT Armrest Side Support - Right Inner <i>Includes 2"T x 6.5"W tapered pad. May require an increase to the width between the armrests to ensure armrests will flip-up.</i>	340.00	

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Armrest Options

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107865-99-0	UT Armrest Side Support - Left Inner <i>Includes 2"T x 6.5"W tapered pad. May require an increase to the width between the armrests to ensure armrests will flip-up.</i>	340.00	
<input type="checkbox"/> I107839-99-0	UT Elbow Support - Right <i>Must also select PN I10881.</i>	168.00	
<input type="checkbox"/> I107838-99-0	UT Elbow Support - Left <i>Must also select PN I10882.</i>	168.00	
<input type="checkbox"/> I10881	Adjustable Elbow Support Hardware - Right	247.00	E1028
<input type="checkbox"/> I10882	Adjustable Elbow Support Hardware - Left	247.00	E1028

Legrest Options

CHOOSE LEGREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I108015-99-0	Manual Elevating Legrest - Center Mount	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I108094-99-0	2pc Narrow Footplates - 10.5"D x 5.5"W	No Charge	
<input type="checkbox"/> I108156-99-0	2pc Wide Footplates - 9"D x 7.5"W	261.00	

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 range is 11"-16" and must be set at least 2" less than the seat height. Higher footplate heights may be possible depending upon configuration. Height may need to be reduced for shipping.

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<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>	373.00	
<input type="checkbox"/> I108202-99-0	UT Calf Support Kit (D) w Mesh Cover & Adj Hardware <i>8"W x 8"T Pad.</i>	373.00	

Accessories

MUST CHOOSE POSITIONING BELT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I100518-99-0	Positioning Belt	No Charge	
<input type="checkbox"/> I104520-99-0	Bodypoint Padded Hip Belt - Medium	149.00	E0978
<input type="checkbox"/> I104516-99-0	Bodypoint Padded Hip Belt - Large	198.00	E0978

HEADREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<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>	385.00	E0955
<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>	385.00	E0955
<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>	385.00	E0955
<input type="checkbox"/> I107480-99-0	Adj/Removable Headrest Link Hardware - Standard	265.00	E1028

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Accessories

HEADREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107481-99-0	Adj/Removable Headrest Link Hardware - Extended <i>Includes an additional 3" link to extend headrest pad range.</i>	285.00	E1028

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<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>	280.00	E0956
<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>	280.00	E0956
<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>	280.00	E0956
<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>	280.00	E0956
<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>	280.00	E0956
<input type="checkbox"/> I10550	Adj Removable - Thigh Support Hardware (Pair)	535.00	E1028
<input type="checkbox"/> I105260-99-0	Transfer Handles, Corpus Seat	488.00	K0108
<input type="checkbox"/> I106210-99-0	RAM Self-Leveling Cup Holder	83.00	
<input type="checkbox"/> I106806-99-0	RAM X-Grip Phone Holder	83.00	
<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 (I103476-99-0). Customization may be required if ordered with an Omni.</i>	415.00	E1028
<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 ordered with 23" or 24" tall Ergo backrest. Custom required if ordered with a ROHO AGILITY backrest.</i>	98.00	K0108
<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>	284.00	
<input type="checkbox"/> I10843	Small Angle Adjustable Tray <i>Must also select PN I10556.</i>	300.00	E0950
<input type="checkbox"/> I10556	Adj Removable - Tray Hardware (1 Each) <i>Mount on Left: _____ Mount on Right: _____</i>	272.00	E1028

Alternative Drive Systems

ALTERNATIVE PROPORTIONAL JOYSTICK SYSTEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10751	Mini-Joystick for Omni / IOM (9-pin connector) <i>Operating Force = 0.5 oz (13 g) Neutral to Full Deflection = 0.2" (5mm)</i>	3,187.00	E2312
<input type="checkbox"/> I103893-99-0	Compact Joystick for Omni / IOM (9-pin connector) <i>Operating Force = 7.8 oz (220 g) Neutral to Full Deflection = 1.1" (28mm) Joystick includes two 1/8" mono jacks for Mode and On/Off. Includes Standard Joystick Knob and 1.75" (42mm) Foam Ball Knob.</i>	1,559.00	E2373
<input type="checkbox"/> I103894-99-0	Compact Joystick LITE for Omni / IOM (9-pin conn) <i>Operating Force = 1.8 oz (50 g) Neutral to Full Deflection = 0.7" (17mm) Joystick includes two 1/8" mono jacks for Mode and On/Off. Includes Standard Joystick Knob and 1.75" (42mm) Foam Ball Knob.</i>	1,763.00	E2373

ALT PROPORTIONAL JOYSTICK MOUNTING HARDWARE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I104690-99-0	Alt JS Swing Away Mount Kit - Armrest <i>NOTE: Please see the PERMOfix Mounting Solutions, within the Alt Drive Accessories section, for additional mounting options.</i> <i>Mount in front of Left Arm: _____ Mount in front of Right Arm: _____</i>	273.00	E1028

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Alternative Drive Systems

ALT PROPORTIONAL JOYSTICK MOUNTING HARDWARE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107135-99-0	Alt JS / Omni Combo Swing Away Mount Kit - Armrest <i>Used to mount Omni and Alternative Proportional Joystick to the same armrest. Includes Swing Away Omni/Tablet Mount, with a longer mounting rod, two PERMOfix modules, one 3" rod and one 4" rod.</i> Mount in front of Left Arm: _____ Mount in front of Right Arm: _____	516.00	E1028
<input type="checkbox"/> I104695-99-0	Alt JS Adjustable Mount Kit - Midline Mount on Left Arm: _____ Mount on Right Arm: _____	801.00	E1028
<input type="checkbox"/> I10752	Alt JS Adjustable Mount Kit - Haims Harness, Lrg <i>For neck width up to 7½".</i>	605.00	E1028
<input type="checkbox"/> I10753	Alt JS Adjustable Mount Kit - Haims Harness, Sml <i>For neck width up to 5½".</i>	605.00	E1028

ALT PROPORTIONAL JOYSTICK ACCESSORIES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I104904-99-0	Dual Switches for Compact Joystick - Fixed Mount <i>Includes two pushbutton switches mounted on rigid arms. Switches can be used for Mode & On/Off. Switch operation force = 4.5oz (130 g)</i> Mount at front of Joystick: _____ Mount at rear of Joystick: _____ Mount at left of Joystick: _____ Mount at right of Joystick: _____	253.00	K0108
<input type="checkbox"/> I104641-99-0	Dual Switches for Compact Joystick -Gooseneck Mount <i>Includes two pushbutton switches mounted on adjustable gooseneck arms. Switches are positioned on Left and Right sides of Compact Joystick. Switches can be used for Mode & On/Off. Switch operation force = 4.5oz (130 g)</i>	456.00	K0108

SIP & PUFF SYSTEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10573	Sip & Puff System for Omni <i>Requires Omni Control Module. Cannot use this part with an Input Module. Includes breath tube kit.</i>	1,705.00	E2325,E2326
<input type="checkbox"/> I10574	Sip & Puff System with Fiber Optic Opti-Stop <i>Requires Omni Control Module. Cannot use this part with an Input Module. Includes breath tube kit.</i>	2,269.00	E2325,E2326
<input type="checkbox"/> I106807-99-0	Sip & Puff Kit for Total Control Head Array <i>For use with Total Control Head Array. Requires Omni Control Module. Cannot be used with an Input Module. Includes breath tube kit.</i>	879.00	E2325
<input type="checkbox"/> I10762	Adjustable Mounting Hrdw - Sip & Puff <i>Required when selecting PN I10573, I10574 or I106807-99-0.</i>	273.00	E1028

Total Control Head Array

CONFIGURE HEAD ARRAY:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106805-99-0	Permobil Head Array - 3-Switch System <i>Features an occipital pad sensor and two stainless steel arms configured with proximity sensors. The arms are mounted to the upper attachment points on the head array. Longer arms are also included to extend the sensor adjustment range. ESP recommended. Choose Omni Control Module (ID51154IR) separately.</i>	4,750.00	E2330
<input type="checkbox"/> I11072	Program Head Array as a 5-Switch System <i>Select additional arms/sensors below and indicate the intended use of each sensor in the Notes & Comments section. Choose Omni Control Module (ID51154IR) or Input Module (I10581) separately.</i>	No Charge	

CHOOSE OCCIPITAL PAD SIZE (REQUIRED):

<input type="checkbox"/> I105920-99-0	Small Occipital Pad for Head Array - 4.25"W x 3"H	No Charge
<input type="checkbox"/> I105921-99-0	Large Occipital Pad for Head Array - 6"W x 4"H	No Charge

CHOOSE OCCIPITAL MOUNT (REQUIRED):

<input type="checkbox"/> I10847	Fixed Mount for Head Array Occipital Pad	No Charge
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Total Control Head Array

CONFIGURE HEAD ARRAY:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105936-99-0	Adj. Swivel Mount for Head Array Occipital Pad <i>Enables Occipital Pad to be angled up/down and left/right independent of the lateral arms.</i>	426.00	K0108
CHOOSE BACKREST MOUNTING HARDWARE (REQUIRED):			
<input type="checkbox"/> I105927-99-0	Stealth TWB480 Backrest Mounting Hdwr with Links <i>Please select the length of the vertical stem below: Standard length (10"): _____ Short length (6"): _____</i>	284.00	E1028
<input type="checkbox"/> I105941-99-0	Stealth TWB480 Backrest Mnt Hdwr with Flipback	459.00	E1028
<input type="checkbox"/> I105925-99-0	Stealth HMO475 MultiAxis Backrest Mounting Hdwr	252.00	E1028
<input type="checkbox"/> I106319-99-0	Stealth TWB480 Backrest Mnt Hdwr w SubOcptl Mount	493.00	E1028
<input type="checkbox"/> I106282-99-0	Stealth 600 SubOccipital Pad - 8.5" W x 2.75" H <i>Must select when PN I106319-99-0 is ordered.</i>	101.00	K0108
SELECT ADDITIONAL LEFT ARM PACKAGE (OPTIONAL):			
<input type="checkbox"/> I10976	Add Left Lateral Arm w Proximity Sensor <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	612.00	K0108
<input type="checkbox"/> I10977	Add Left Lateral Arm w Egg Switch <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	500.00	K0108
<input type="checkbox"/> I10978	Add Left Lateral Arm w Pad (No Sensor or Switch) <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	408.00	K0108
SELECT ADDITIONAL RIGHT ARM PACKAGE (OPTIONAL):			
<input type="checkbox"/> I10979	Add Right Lateral Arm w Proximity Sensor <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	612.00	K0108
<input type="checkbox"/> I10980	Add Right Lateral Arm w Egg Switch <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	500.00	K0108
<input type="checkbox"/> I10981	Add Right Lateral Arm w Pad (No Sensor or Switch) <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	408.00	K0108

Alt Drive Systems Setup

CHOOSE OMNI OR INPUT MODULE (REQUIRED):

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> ID51154IR	Omni Control Module for R-net w/ Infrared <i>Must also select mounting hardware, either I103476-99-0 or I107135-99-0. Please specify which type of alternative drive input you will be using if not ordering it from Permobil. Input Device: _____</i>	1,772.00	
<input type="checkbox"/> I103476-99-0	Adjustable Swing-Away Hardware - Omni/Tablet <i>Mount in front of Left Arm: _____ Mount in front of Right Arm: _____</i>	273.00	E1028
<input type="checkbox"/> I10581	Input Module (IOM) for R-net Control System <i>This device allows a proportional or switched drive input to be connected to an R-net Control System without the use of an Omni. It must be ordered in conjunction with an R-net Remote Joystick. It does NOT support any of the following input devices: Sip-n-Puff, 3-Switch / 4-switch Head Array or RIM control.</i>	1,254.00	K0108

Alt Drive Accessories

PERMOFIX MOUNTING SOLUTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106655-99-0	PERMOfix UniTrack Fixed Mount Kit <i>Includes two base joints, two 4" rods and one 8" rod.</i>	275.00	K0108

M1 - NPO

Alt Drive Accessories

PERMOFIX MOUNTING SOLUTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106656-99-0	PERMOfix UniTrack Removable Mount Kit <i>Includes quick release mount and thigh support hardware, two base joints and three different length rods.</i>	483.00	E1028
<input type="checkbox"/> I106657-99-0	PERMOfix UniTrack Swing Away Mount Kit <i>Includes PERMOfix Swing Away module, two base joints, one 2" rod and one 4" rod.</i>	691.00	E1028
<input type="checkbox"/> I105907-99-0	Proximity Sensor + Swivel Assembly <i>Only available with the Total Control Head Array. Swivel assembly allows sensor to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array. Since Proximity Sensors require power, they CANNOT be used as On/Off switches.</i>	349.00	K0108
<input type="checkbox"/> I105919-99-0	Egg Switch + Swivel Mount Assembly <i>Swivel assembly allows switch to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	236.00	K0108
<input type="checkbox"/> I105912-99-0	Solid Oval Pad + Swivel Assembly <i>Swivel assembly allows pad to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	142.00	K0108
<input type="checkbox"/> I106675-99-0	Oval Plate + Swivel Assembly - No Switch <i>Blank plate provides mounting option for Micro Lite, Buddy Button or other switch options. Swivel assembly allows pad to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	125.00	K0108

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I101769-99-0	Micro Lite Switch Qty: _____	190.00	
<input type="checkbox"/> I101767-99-0	Buddy Button Qty: _____	161.00	
<input type="checkbox"/> I106293-99-0	Egg Switch Black Qty: _____	161.00	K0108
<input type="checkbox"/> I101771-99-0	Mini Cup Switch Qty: _____	161.00	
<input type="checkbox"/> I107500-99-0	Proximity Switch Qty: _____	637.00	
<input type="checkbox"/> I107495-99-0	Mini Joystick 5 Switch OC for Omni/IOM (9-pin)	690.00	E2312
<input type="checkbox"/> I107498-99-0	Touch Contact with CR2032 Battery Qty: _____	392.00	
<input type="checkbox"/> I10772	Dome Switch, Backrest Mnt w Gooseneck Qty: _____ <i>Mount on Left: _____ Mount on Right: _____</i> <i>Mounts at top of backrest shell. Custom charge may be applied if ordering with short backrest heights Kit Includes: One PERMOfix joint with Flat Plate, two PERMOfix joints with 45° swivel adjustment, one 6" rod, one 8" rod and one 9" gooseneck switch with 50" cable and mounting clamp.</i>	504.00	K0108
<input type="checkbox"/> I10846	Dome Switch, Backrest Swg Awy Mnt w Gsneck Qty: _____ <i>Mount on Left: _____ Mount on Right: _____</i> <i>w 90° Swing-Away Function. Mounts at top of back. Custom charge applies if ordered with short back. Kit Includes: One PERMOfix joint with Flat Plate, one PERMOfix joint with 45° swivel adjustment, two 6" rods, one 90° Swing-Away joint, one 9" gooseneck switch w 50" cable and mounting clamp.</i>	745.00	K0108
<input type="checkbox"/> I105935-99-0	3.5mm Ext. Cable for Sensor/Switch, 0.3m Long	32.00	K0108
<input type="checkbox"/> I105931-99-0	3.5mm Ext. Cable for Sensor/Switch, 1m Long	35.00	K0108
<input type="checkbox"/> I105932-99-0	3.5mm Ext. Cable for Sensor/Switch, 2m Long	40.00	K0108
<input type="checkbox"/> I105933-99-0	3.5mm Ext. Cable for Sensor/Switch, 3m Long	44.00	K0108
<input type="checkbox"/> I105934-99-0	3.5mm Y-splitter Cable for Sensor/Switch <i>Allows two Proximity Sensors/Mechanical Switches to connect to the same direction jack.</i>	35.00	K0108

Additional Order Instructions (for Permobil):

Notes & Comments (not for Permobil):

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, Inc. 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. *The HCPCS codes provided are not intended to be billing or legal advice, rather our interpretation of the code definitions. Use of the codes does not ensure coverage or payment for the item. For coverage information, verify the policy of the appropriate payer.*