

M1 - SPO



Dealer Information

* Contact: _____
 Dealer Code: _____
 * Dealer Name: _____
 Address: _____
 * City: _____
 * Province/Postal Code: _____
 * Phone#: _____
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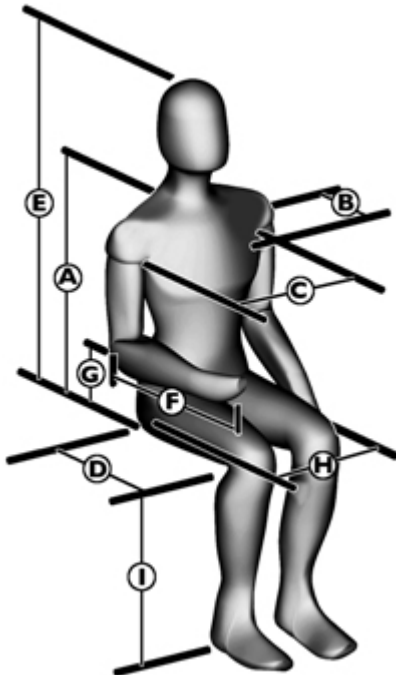
Client Information

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:

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.ca

Prices effective April 15, 2019 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 |

SHROUD COLORS:

| Part Number | Description | MSRP - CA |
|---------------------------------------|---|-----------|
| | SHROUD COLOR: | |
| <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 | 240.00 |
| <input type="checkbox"/> I108206-99-0 | M1 Color Kit - Carbon Fiber | 240.00 |
| <input type="checkbox"/> I108207-99-0 | M1 Color Kit - CDG Poly | 240.00 |

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 | BATTERY OPTIONS: Batteries, Grp 34 (60Ah) Sealed Gel, x2, Installed | 953.00 |
| <input type="checkbox"/> I108105-99-0 | Compact Laptop Ventilator Tray - M1 <i>Accommodates Pulmonetic Systems / CareFusion LTV Series and similar sized Laptop Ventilators. The tray is 330mm Tall, adjustable Width between 200mm - 330mm, and adjustable Depth between 50mm - 165mm. Custom Option.</i> | 1,732.00 |
| <input type="checkbox"/> I10787 | Battery Tray for Laptop Ventilator Tray <i>Mounts to rear of Laptop Ventilator Tray. Measures 290mm W x 170mm H x 42mm D. Accommodates Pulmonetic Systems Lithium-Ion Battery Pack, CareFusion SprintPack Battery System, or Richardson PowerTech Vent Power Center. Custom Option.</i> | 277.00 |
| <input type="checkbox"/> I10788 | O2 Holder for Laptop Ventilator Tray <i>Mounts to Left or Right Side of Laptop Vent Tray. O2 Holder is 175mm Tall. Width infinitely adjustable 90mm - 170mm. Depth infinitely adjustable 95mm - 125mm. Custom Option.</i> | 391.00 |

Base Options**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 |
| <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

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

Seat Sizing

CHOOSE SEAT WIDTH:

| Part Number | Description | MSRP - CA |
|---------------------------------------|--|-----------|
| | 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. The seat width must match the backrest width.</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 | MSRP - CA |
|---------------------------------------|---|-----------|
| | 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" <i>User weight cannot exceed 165lbs.</i> | 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 |

Seat Sizing

CHOOSE SEAT CUSHION:

| Part Number | Description | MSRP - CA |
|---------------------------------------|---|-----------|
| | PLEASE NOTE: <i>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.</i> | |
| <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 <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> | 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 |
|---------------------------------|---|-----------|
| | 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 SET ARMREST HEIGHT AT: _____ | No Charge |

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"/> I107591-99-0 | 4"x10" Corpus Arm w/ Permobil Gel Pad - Right | 197.00 |
| <input type="checkbox"/> I107593-99-0 | 4"x13" Corpus Arm w/ Permobil 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"/> I107590-99-0 | 4"x10" Corpus Arm w/ Permobil Gel Pad - Left | 197.00 |
| <input type="checkbox"/> I107592-99-0 | 4"x13" Corpus Arm w/ Permobil 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 |

Armrest Options

OPTIONAL ITEMS:

| Part Number | Description | MSRP - CA |
|---------------------------------------|--|-----------|
| <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

CENTER MOUNT LEGREST OPTIONS:

| Part Number | Description | MSRP - CA |
|---------------------------------------|---|-----------|
| <input type="checkbox"/> I108015-99-0 | Center Mount Legrest Options: Manual Elevating Legrest - Center Mount | No Charge |
| <input type="checkbox"/> I108016-99-0 | Power Elevating Legrest - 140° - Center Mount | 3,250.00 |
| <input type="checkbox"/> I108212-99-0 | Center Mount Footplate Options: 2pc Narrow Footplates - 8.5"D x 5.5"W, Short Ext <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 Ext <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" Risk of caster interference possible. Legrest angle must be adjusted to ensure footplates clear casters while driving.</i> | 390.00 |
| <input type="checkbox"/> I108203-99-0 | Center Mount Calf Support Options: 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 |

SWING AWAY LEGREST OPTIONS:

| Part Number | Description | MSRP - CA |
|---------------------------------------|--|-----------|
| <input type="checkbox"/> I108158-99-0 | Swing Away Legrest Options: Swing Away Legrest Assembly - Standard, Pair <i>Angle Adjustable from 65-80°. Footplate height range is from 13-16".</i> | 305.00 |
| <input type="checkbox"/> I108318-99-0 | Swing Away Legrest Assembly - Short, Pair <i>Angle Adjustable from 65-80°. Footplate height range is from 9-12". Calf Supports are not available with this configuration.</i> | 305.00 |
| <input type="checkbox"/> I108153-99-0 | Swing Away Footplate Options: Small, Multi-Axis Adj. Footplates w/ Heel Loops <i>Footplate size is 5.5"W x 6"L. Only available with 14" seat widths.</i> | 54.00 |
| <input type="checkbox"/> I108154-99-0 | Medium, Multi-Axis Adj. Footplates w/ Heel Loops <i>Footplate size is 6.5"W x 8"L. Only available with 16 - 18" seat widths.</i> | 59.00 |

Legrest Options

SWING AWAY LEGREST OPTIONS:

| Part Number | Description | MSRP - CA |
|---------------------------------------|--|-----------|
| <input type="checkbox"/> I108155-99-0 | Large, Multi-Axis Adj. Footplates w/ Heel Loops <i>Footplate size is 8.5"W x 10"L. Only available with 20-22" seat widths. Not available with 14" seat depth. The legrest angle will be set to ensure the footplates clear the casters.</i> | 68.00 |
| Swing Away Calf Support Options: | | |
| <input type="checkbox"/> I108287-99-0 | SA Calf Support Kit (B) w Mesh Cover <i>Pad size is 3.5"W x 4.5"T.</i> | No Charge |
| <input type="checkbox"/> I108284-99-0 | SA Calf Support Kit (J) w Mesh Cover <i>Pad size is 5"W x 6.5"T.</i> | No Charge |
| <input type="checkbox"/> I108288-99-0 | SA Calf Support Kit (A) w Mesh Cover <i>Pad size is 5.5"W x 6"T.</i> | No Charge |
| <input type="checkbox"/> I108285-99-0 | SA Calf Support Kit (H) w/ Mesh Cover <i>Pad size is 7"W x 7"T, curved pads. The footplates will not flip up with these calf supports.</i> | 404.00 |

CHOOSE ONE OF THE FOLLOWING:

| Part Number | Description | MSRP - CA |
|-------------|---|-----------|
| | SET FOOTPLATE HEIGHT AT: _____ <i>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.</i> | |

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 |
| <input type="checkbox"/> I108267-99-0 | Bodypoint Padded Hip Belt "Airplane" Latch - Med | 260.00 |
| <input type="checkbox"/> I108266-99-0 | Bodypoint Padded Hip Belt "Airplane" Latch - Large | 275.00 |

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 |
| <input type="checkbox"/> I11307 | Swing Away Facial Pad Assembly 4"L x 2"T <i>Mount on Upper Left: _____ Mount on Upper Right: _____</i> | 500.00 |
| <input type="checkbox"/> I11308 | Swing Away Facial Pad Assembly 6"L x 2"T <i>Mount on Upper Left: _____ Mount on Upper Right: _____</i> | 500.00 |

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"/> 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"/> I108336-99-0 | Repositioning Handles for 1" Diameter Tube | 466.00 |
| <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"/> I108231-99-0 | Permobil Adjustable Tray - 11"W | 345.00 |
| <input type="checkbox"/> I108230-99-0 | Permobil Adjustable Tray - 13"W | 345.00 |
| <input type="checkbox"/> I108228-99-0 | Permobil Adjustable Tray - 15"W | 345.00 |
| <input type="checkbox"/> I108227-99-0 | Permobil Adjustable Tray - 17"W | 345.00 |
| <input type="checkbox"/> I108229-99-0 | Permobil Adjustable Tray - 19"W | 345.00 |
| <input type="checkbox"/> I108232-99-0 | Permobil Tray Hardware Right Side Adjustable | 250.00 |
| <input type="checkbox"/> I108233-99-0 | Permobil Tray Hardware Left Side Adjustable | 250.00 |
| <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.