

C400 Corpus



*** Indicates a Required Field**

Dealer Information

* **Contact:** _____

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: _____

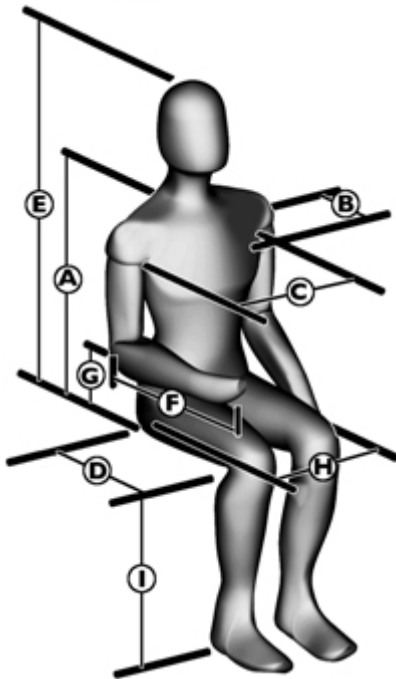
E) Top of Head: _____

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@permobilus.com

Permobil Inc.
6961 Eastgate Blvd.
Lebanon, TN 37090
Tel: (800) 736-0925
Fax: (800) 231-3256
www.permobil.com

Prices effective **August 9, 2010.**

C400 Corpus

Chair Model and Colors

CHOOSE BASE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10475	C400 Base Corpus R-net - C400 PS0 <i>Price Includes: FWD C400 Power Base Set Up For No Power Seat Functions, Shock Absorbing Suspension System, R-net Basic Controller, Tie-Down Hardware for Strap Systems, Charger, Flat Free Tires, and Standard Positioning Belt. Must Choose Flat Free or Pneumatic Tires Below.</i>	9,395.00	K0848
<input type="checkbox"/> I10476	C400 Base Corpus R-net - C400 PS1 <i>Price Includes: FWD C400 Power Base Set Up For One Power Seat Function, Shock Absorbing Suspension System, R-net Controller, Tie Down Hardware for Strap Systems, Charger, Flat Free Tires, and Standard Positioning Belt. Must Choose Flat Free or Pneumatic Tires Below.</i>	9,395.00	K0856
<input type="checkbox"/> I103259-99-0	C400 Base Corpus R-net - C400 PS2 <i>Price Includes: FWD C400 Power Base Set Up For Multiple Power Seat Functions, Shock Absorbing Suspension System, Tie-Down Hardware for Strap Systems, Charger, Flat Free Tires, and Standard Positioning Belt. Must Choose Flat Free or Pneumatic Tires Below.</i>	9,395.00	K0861

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103889-99-0	Tri Spoke Split Rim w/ FF Drive Tires - 2.5 x 8"	No Charge	
<input type="checkbox"/> I103890-99-0	Tri Spoke Split Rim w/ Pneumatic Tire - 2.5 x 8"	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I102190-99-0	C400 Shroud Vintage Wine	No Charge	
<input type="checkbox"/> I103957-99-0	C400 Shroud Onyx Black	No Charge	
<input type="checkbox"/> I102194-99-0	C400 Shroud Crystal Blue	No Charge	
<input type="checkbox"/> I102191-99-0	C400 Shroud Metallic Charcoal Gray	No Charge	
<input type="checkbox"/> I102192-99-0	C400 Shroud Green Metallic	No Charge	
<input type="checkbox"/> I103958-99-0	C400 Shroud Extreme Yellow	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10451	Match Hub Cap to Shroud Color <i>If this is selected, the Tri-Spoke Hub Cap will be matched to the selected shroud color.</i>	No Charge	
<input type="checkbox"/> I103537-99-0	Hub Cap Platinum Silver <i>If this is selected, the Tri-Spoke Hub Cap will be Platinum Silver.</i>	No Charge	

Base Options

MUST CHOOSE EITHER SEAT ELEVATOR OR FIXED SEAT TUBE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I102085-99-0	Seat Tube Fixed	No Charge	
<input type="checkbox"/> I103865-99-0	Power Adjustable Seat Height, 8" Travel (R-net)	2,645.00	E2300

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> IM24 SLD G FT	Batteries, Group 24 Sealed LA/Gel, Installed	775.00	E2363
<input type="checkbox"/> I102210-99-0	Anti-Tippers for C400/C500	406.00	
<input type="checkbox"/> I103635-99-0	Light Kit, R-net, C400/C500	972.00	
<input checked="" type="checkbox"/> I100570-99-0	Seat Stabilizer	No Charge	
<input type="checkbox"/> I103241-99-0	Articulating Vent Tray for C400/C500 <i>If selecting this part, you MUST also pick: PN I104082-99-0 - ESP Unit. Fits an LP10 Sized Vent and a Group 34 Battery. Cannot be ordered with backrest height less than 26.5", a tubular back, or a 13" seat depth. Customization may be required if ordered with any of the following items Co-Pilot, any standard attendant control, push handles, or an oxygen holder. Only available with expandable controllers (R-net Electronics.)</i>	1,318.00	E1030

C400 Corpus

Base Options

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I104082-99-0	R-net ESP w C400/C500 Mounting Bracket	No Charge	K0108
<i>MUST be selected if ordering any ventilator tray (I102769-99-0, I103241-99-0, or I102768-99-0). Recommended item with switched drive inputs for improved tracking.</i>			
<input type="checkbox"/> ID51113	Programming Key for R-net - Permobil Version	443.00	

Permolock

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I102843-99-0	Permolock C Kit - COMPLETE	2,528.00	
<i>Includes: Locking Base, Plunger, Manual Release Handle, and Vehicle Mounted Release Button. The Locking Base must be installed by a NMEDA Dealer. Please provide the NMEDA Dealer Name & Address where the locking Base will ship to</i>			
NAME: _____			
ADDR: _____			
<input type="checkbox"/> I102842-99-0	Plunger ONLY for Permolock C	1,026.00	
<i>Price Includes: Plunger only. This item may be purchased by any Permobil Inc or NMEDA certified dealer. The standard mounting position for the button to control the plunger is at the end of the armrest pad, opposite the joystick.</i>			

Joystick Options

CHOOSE JOYSTICK TYPE:

Part Number	Description	Price	HCPCS Code
PLEASE NOTE:			
<i>For all remote joystick modules shown below, you must also select an expandable controller. For additional input devices, refer to Alternative Drive Systems Section.</i>			
<input type="checkbox"/> I10410	R-net Remote Joystick w/ Mono Jacks - No Charge	No Charge	
<input type="checkbox"/> I103544-99-0	R-net Remote Joystick w/ Mono Jacks	539.00	
<input type="checkbox"/> ID51040	R-net Remote Joystick w/ Toggle Switches	616.00	
<input type="checkbox"/> ID51042	R-net Remote Joystick w/ Speed Pot & Single Toggle	743.00	
<input type="checkbox"/> ID51153	R-net Remote Color Screen Joystick w/ Mono Jacks	850.00	
<input type="checkbox"/> ID51149	R-net Remote Color Screen JS w/ Toggle Switches	890.00	
<input type="checkbox"/> ID51190	R-net Remote Color JS w/ Speed Pot & Single Toggle	890.00	

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	96.00	E2324
<input type="checkbox"/> I100961-99-0	"T" Handle For Joystick Knob	141.00	E2323
<input type="checkbox"/> I100962-99-0	"Large Ball" For Joystick Knob	96.00	E2323
<input type="checkbox"/> I100963-99-0	"Softball" For Joystick Knob	129.00	E2323
<input type="checkbox"/> I100964-99-0	"Mushroom" For Joystick Knob	129.00	E2323
<input type="checkbox"/> I100965-99-0	"Stick" For Joystick Knob	129.00	E2323
<input type="checkbox"/> IPC101B	Bodypoint J/S Handle 3" U-Shaped w/ Flex-Shaft	129.00	E2323
<input type="checkbox"/> IPC102B	Bodypoint J/S Handle 4" U-Shaped w/ Flex-Shaft	129.00	E2323
<input type="checkbox"/> IPC107B	Bodypoint J/S Handle Dome Shaped, Rubber	129.00	E2323

CHOOSE JOYSTICK MOUNT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10412	Joystick Mount Right - Fixed, R-net Only	No Charge	
<input type="checkbox"/> I10413	Joystick Mount Left - Fixed, R-net Only	No Charge	
<input type="checkbox"/> I102537-99-0	Joystick Mount Right - Swing Away, R-net & VR2	297.00	E1028
<input type="checkbox"/> I102538-99-0	Joystick Mount Left - Swing Away, R-net & VR2	297.00	E1028
<input type="checkbox"/> I103820-99-0	Retractable Joystick Mnt Right - R-net, VR2 Only	495.00	E1028

C400 Corpus

Joystick Options

CHOOSE JOYSTICK MOUNT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103819-99-0	Retractable Joystick Mnt Left - R-net, VR2 Only	495.00	E1028
<input type="checkbox"/> I101260-99-0	Midline Control Mount - Pilot+ & R-net Only <i>Please indicate which armrest to mount midline below.</i> Mount Midline Joystick on Left Armrest: _____ Mount Midline Joystick on Right Armrest: _____	268.00	E1028

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I10411	Expandable Controller - R-net <i>Must be ordered with the expandable/remote joysticks (PN: I10410, I103544-99-0, ID51040, ID51108, ID51042, and I103814-99-0) OR when ordering Alternative Drive Packages.</i>	545.00	E2377
<input checked="" type="checkbox"/> I10513	Harness for Expandable Controller <i>Must be ordered with any Expandable Controller (I10411 or I10450)</i>	475.00	E2313
<input type="checkbox"/> I104003-99-0	Co-Pilot Attendant Control, Corpus R-net <i>Custom charge may apply if ordering a Corpus Tubular Backrest OR a backrest height of 21" or Lower. Not available with VR2 Controllers.</i>	4,248.00	E2331
<input type="checkbox"/> ID50882	Attendant Control for R-net Control System Only <i>Not available with VR2 Controllers.</i>	1,103.00	E2331
<input type="checkbox"/> ID51111	R-net BT Mouse Module <i>The R-net BT Mouse Module allows for mouse control through a standard R-net Joystick or other type of input device (ex: Mini Joystick w/ Omni). It is only usable as a mouse on a computer. It CANNOT be paired to work with other Bluetooth devices such as cell phones, wireless headsets, etc. This kit includes: an R-net BT Mouse Module, a 1.5m R-net Bus Cable, and a USB Style Bluetooth Adapter for the user's computer. Note: The Bluetooth Adapter may not work with all computers.</i>	809.00	
<input type="checkbox"/> I10582	Output Module (IOM) for R-net Control System <i>This allows a user to control an external device (ex: Communication Device, ECU, Door Opener, etc.) through the drive input (JSM, Head Array, etc.). One output module is required for each separate external device to be controlled. Up to three output modules can be installed on one wheelchair.</i>	1,012.00	E2351

Seating System

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	The Seating Systems Listed Below Include: <i>Corpus Seat Frame, Solid Backrest (Standard Size) with Adjustable Recline Angle, Height Adjustable Armrest Assembly, Solid Seat Pan (17"w x 18"d), Legrest Assembly with Adjustable Elevation. Weight Limit 250lbs (310 lbs/ HD Package).</i>		
<input type="checkbox"/> I10025	Corpus Seat without Power Tilt or Power Recline	5,995.00	K0108
<input type="checkbox"/> I10479	Corpus Seat w/ 45° Power Tilt & Manual Recline	6,640.00	E1002
	<i>NOTE: If clients weight is between 266-310lbs, the 45° Power Tilt Kit will be limited to a MAXIMUM of 30° of posterior tilt and a manual center mount recline actuator will be provided.</i>		
<input type="checkbox"/> I10480	Corpus Seat w/ 120° Power Recline <i>Includes power recline actuator mounted behind the back with a reinforced mounting system.</i>	6,955.00	E1004
<input type="checkbox"/> I10481	Corpus Seat w/ 150° Power Recline <i>Includes a side mounted powered recline actuator. NOTE: This configuration is not available for users who weigh between 251-310lbs.</i>	6,955.00	E1004
<input type="checkbox"/> I10482	Corpus Seat w/ 175° Power Recline <i>Includes a side mounted power recline actuator. This configuration cannot be selected with seat depths less than 18", and is not available for users who weigh between 251-310lbs.</i>	7,850.00	E1004
<input type="checkbox"/> I10486	Corpus Seat w/ 45° Power Tilt & 120° Power Recline <i>Includes power recline actuator mounted behind the back with a reinforced mounting system. NOTE: If clients weight is between 266-310lbs, the 45° Power Tilt Kit will be limited to a MAXIMUM of 30° of posterior tilt.</i>	11,395.00	E1007

C400 Corpus

Seating System

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10487	Corpus Seat w/ 45° Power Tilt & 150° Power Recline <i>Includes a side mounted powered recline actuator. NOTE: This configuration is not available for users who weigh between 251-310lbs.</i>	10,795.00	E1007
<input type="checkbox"/> I10488	Corpus Seat w/ 45° Power Tilt & 175° Power Recline <i>Includes a side mounted power recline actuator. This configuration cannot be selected with seat depths less than 18", and is not available for users who weigh between 251-310lbs.</i>	11,395.00	E1007

Seating System Options

CHOOSE SEAT FUNCTION CONTROL TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10418	Single Seat Function Control Switch for R-net <i>Please choose either Push Buttons or Toggle Switches below.</i>	No Charge	
<input type="checkbox"/> I10419	Single Seat Function Control Kit for R-net <i>For operation of a single seat function through the wheelchair electronics via the drive control and/or ICS Switchbox. Order with R-net Controller or remote joystick options. Please indicate below if you want push buttons or toggles on the Seat Function Control Kit.</i>	1,495.00	E2310
<input type="checkbox"/> I10585	Multiple Seat Function Control Kit for R-net <i>MUST be selected if ordering two or more seat functions. This device is used to operate two or more seat functions through the wheelchair electronics via the drive control and/or ICS switch box. Order with R-net electronics or remote joystick options. Please indicate below if you want push buttons or toggles on the Seat Function Control Kit.</i>	2,925.00	E2311

CHOOSE PUSH BUTTONS OR TOGGLES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I102798-99-0	Push Buttons on Seat Function Control Kit	No Charge	
<input type="checkbox"/> I102799-99-0	Toggle Switches on Seat Function Control Kit	249.00	

CHOOSE MOUNTING POSITION OF SEAT FUNCTION CONTROL KIT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10626	Mount ICS Switchbox onto R-net Joystick Bracket <i>ICS Switchbox will be mounted to the same bracket as the R-net Joystick Module. If this item is selected, the ICS Switchbox will swing away with the Joystick Module.</i>	No Charge	
<input type="checkbox"/> I103471-99-0	Mount ICS Switchbox to End of Arm Pad - Corpus <i>ICS Switchbox will be mounted to the end of the armrest pad. If this item is selected, the ICS Switchbox will NOT swing away with the Joystick Module. Please indicate below if you would like it mounted onto the left or right arm pad.</i> Mount ICS Switchbox on Left Armpad _____ Mount ICS Switchbox on Right Armpad _____	No Charge	
<input type="checkbox"/> I103470-99-0	Mount ICS Switchbox on Backrest	127.00	

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10495	Heavy Duty Package, R-net C400/C500 Corpus <i>This item MUST be selected for any user between 251-310lbs. Available with the following seating systems: I10480 & I10486. Includes: Anti-tippers, Heavy Duty Arm Supports, & Heavy Duty Mount for Recline. NOTE: For users between 266-310lbs: (1) The 45° Power Tilt Kit will be limited to a MAXIMUM of 30° of posterior tilt, (2) The overall back angle CANNOT exceed 150° in any seat position, and (3) driving will be inhibited if the seat elevator is raised.</i>	2,590.00	
<input type="checkbox"/> I10013	Mount Seat Frame in Tall Position	323.00	
<input type="checkbox"/> I104196-99-0	ICS Alternative Switchbox for R-net Electronics <i>Not available with VR2 Electronics. Seat function interface box which accommodates up to 8 momentary switches. Provides an additional method to accessing the seat functions. You must still order the Multiple Seat Function Control Kit if ordering this part. 1/8" mini-mono switches not included.</i>	1,002.00	K0108

C400 Corpus

Seating System Options

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I104746-99-0	Remote Stop System - R-net, Pilot+ <i>Consists of a Radio Frequency (RF) handheld transmitter and an RF receiver mounted on the wheelchair. Each transmitter and receiver is a serialized matched pair, meaning they must be used together. Custom charge may be required if ordering with a low backrest height or a pediatric wheelchair. If ordering Remote Stop System with a K450, push handles must also be selected.</i>	1,002.00	
<input type="checkbox"/> I10497	Memory Seat Program, C400 or C500 Corpus w R-net <i>If this is selected, the chair will be programmed to allow the user to store and save up to 3 different memory seat positions. On the C400/C500 Corpus and Lowrider, the following seat functions are capable of remembering a seat position: Power Tilt, Power Recline, & Power Legs. The Power Adj Seat Height Function is NOT capable of recalling a saved memory seat position. Please refer to the Corpus Seat Owner's Manual for more information on saving and recalling memory seat positions.</i>	100.00	

Backrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
BACKREST HEIGHT NOTE: <i>Backrest heights are measured from the seat pan to the top of the backrest shell with the backrest set at 90°.</i>			
<input type="checkbox"/> I101853-99-0	Ergo Back Fixed 14" W x 21" H - Leatherette	852.00	E2620
<input type="checkbox"/> I101863-99-0	Ergo Back Fixed 14"W x 26.5" High - Leatherette	852.00	E2620
<input type="checkbox"/> I101854-99-0	Ergo Back Sliding 16"W x 21"H - Leatherette	852.00	E2620
<input type="checkbox"/> I101861-99-0	Ergo Back Sliding 16"W x 26.5" H - Leatherette	852.00	E2620
<input type="checkbox"/> I101855-99-0	Ergo Back Sliding 18"W x 21"H - Leatherette	852.00	E2620
<input type="checkbox"/> I101862-99-0	Ergo Back Sliding 18"W x 26.5"H - Leatherette	852.00	E2620
<input type="checkbox"/> I305510-00-90-0	Ergo Back Fixed Tall 16"W x 29.5"H - Leatherette	852.00	E2620
<input type="checkbox"/> I10455	Ergo Back Fixed 14" W x 21" H - Black Mesh	874.00	E2620
<input type="checkbox"/> I10456	Ergo Back Fixed 14"W x 26.5" High - Black Mesh	874.00	E2620
<input type="checkbox"/> I10457	Ergo Back Sliding 16"W x 21"H - Black Mesh	874.00	E2620
<input type="checkbox"/> I10458	Ergo Back Sliding 16"W x 26.5" H - Black Mesh	874.00	E2620
<input type="checkbox"/> I10459	Ergo Back Sliding 18"W x 21"H - Black Mesh	874.00	E2620
<input type="checkbox"/> I10460	Ergo Back Sliding 18"W x 26.5"H - Black Mesh	874.00	E2620
<input type="checkbox"/> I10004	Rectangular Backrest 16"W - Plastic, Fixed	1,139.00	
<i>Choose backrest height from seat pan (19"-29"): _____ "</i>			
<input type="checkbox"/> I10005	Rectangular Back 18"W - Metal Fixed <i>Choose backrest height from seat pan (19"-29"): _____ "</i>	1,330.00	
<input type="checkbox"/> I10240	Solid Back 16"W X 21"H <i>Standard Option with Tilt and/or Recline Systems. Includes Leatherette Back Cushion ONLY.</i>	No Charge	
<input type="checkbox"/> I10130	Solid Back 16"W x 26.5"H <i>Standard Option with Tilt and/or Recline Systems. Includes Leatherette Back Cushion ONLY.</i>	No Charge	
<input type="checkbox"/> I10241	Solid Back 18"W x 21"H <i>Standard Option with Tilt and/or Recline Systems. Includes Leatherette Back Cushion ONLY.</i>	No Charge	
<input type="checkbox"/> I10131	Solid Back 18"W x 26.5"H <i>Standard Option with Tilt and/or Recline Systems. Includes Leatherette Back Cushion ONLY.</i>	No Charge	
<input type="checkbox"/> I10111	Tubular Backrest Frame Corpus, 16" Wide	363.00	
<i>Backrest canes to mount aftermarket backrest systems. For tilt only systems. Measurement between the armrests is 17.5". Seat pan to top of canes is 22".</i>			
<input type="checkbox"/> I10112	Tubular Backrest Frame Corpus, 18" Wide <i>Backrest canes to mount aftermarket backrest systems. For tilt only systems. Measurement between the armrests is 19.5". Seat pan to top of canes is 22"</i>	363.00	

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
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C400 Corpus

Backrest Options

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10014	Custom Backrest Height _____" <i>Backrest height measured from seat pan and cannot be lower than 19". Price in addition to above backrest.</i>	636.00	
<input type="checkbox"/> I100972-99-0	Split Backrest <i>Split Backrest 8" from top to allow for transfers and/or transportation. This modification cannot be made on back heights lower than 26.5". Must select either PN: I10429 or I10430 below.</i>	544.00	
<input type="checkbox"/> I10429	Split Backrest Cushion	No Charge	
<input type="checkbox"/> I10430	Do NOT Split Backrest Cushion	No Charge	
<input type="checkbox"/> I10284	Flat Backrest Cushion for Ergo Back - Leatherette <i>This style of cushion is ONLY available in Leatherette. Recommended cushion when ordering lateral supports. Lateral wedges will be omitted if ordering this part.</i>	91.00	
<input type="checkbox"/> I10318	ROHO Backrest Cushion For Ergo Back <i>Price Includes: ROHO MID PROFILE Backrest Cushion which will be matched to fit the Ergonomic Backrest that you select. Approximate height of MID PROFILE cells is 3" in their inflated state. Also includes a Mesh Cover for the ROHO Backrest Cushion, Hand Pump, and Patch Kit. This will NOT fit these part numbers: (I10004, I10005, I10111, I10112, I305510-00-90-0). Please indicate below if you would like to OMIT the Ergo Back Cushion.</i>	636.00	
<input type="checkbox"/> I10319	ROHO Backrest Cushion For Ergo Back - Notched <i>Recommended ROHO cushion when ordering Lateral Trunk Supports. Please indicate below if you would like to OMIT the Ergo Back Cushion.</i>	636.00	
<input type="checkbox"/> I10320	Omit Ergonomic Backrest Cushion	No Charge	

Seat Sizing

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I100681-99-0	Corpus Seat 17"W x 14"D <i>An additional custom charge will be applied if ordering an 18" wide sliding backrest with this seat size (17" x 14").</i>	No Charge	
<input type="checkbox"/> I100684-99-0	Corpus Seat 17"W x 16"D	No Charge	
<input type="checkbox"/> I100689-99-0	Corpus Seat 17"W x 18"D	No Charge	
<input type="checkbox"/> I100695-99-0	Corpus Seat 17"W x 20"D	No Charge	
<input type="checkbox"/> I100720-99-0	Corpus Seat 17"W x 22"D	No Charge	
<input type="checkbox"/> I100690-99-0	Corpus Seat 19"W x 18"D	No Charge	
<input type="checkbox"/> I100696-99-0	Corpus Seat 19"W x 20"D	No Charge	
<input type="checkbox"/> I100721-99-0	Corpus Seat 19"W x 22"D	No Charge	
<input type="checkbox"/> I10007	Special Seat Size 21"W x 18"D	No Charge	
<input type="checkbox"/> I10008	Special Seat Size 21"W x 20"D	No Charge	
<input type="checkbox"/> I10009	Special Seat Size 21"W x 22"D	No Charge	
<input type="checkbox"/> I10010	Special Seat Size 23"W x 18"D	No Charge	
<input type="checkbox"/> I10011	Special Seat Size 23"W x 20"D	No Charge	
<input type="checkbox"/> I10012	Special Seat Size 23"W x 22"D	No Charge	

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10038	Ergonomic Seat Cushion Leatherette <i>Not available with seat widths less than 16" or seat depths less than 14".</i>	483.00	E2601,E2602
<input type="checkbox"/> I10461	Ergonomic Seat Cushion - Black Mesh <i>Not available with seat widths less than 16" or seat depths less than 14".</i>	493.00	E2601

Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103339-99-0	4"x10" Corpus Arm Right - Dual Taper, Leatherette	No Charge	

C400 Corpus

Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103341-99-0	4"x12" Corpus Arm Right - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103343-99-0	4"x14" Corpus Arm Right - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103345-99-0	4"x16" Corpus Arm Right - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103331-99-0	4"x10" Corpus Arm Right - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103333-99-0	4"x12" Corpus Arm Right - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103335-99-0	4"x14" Corpus Arm Right - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103337-99-0	4"x16" Corpus Arm Right - Dual Taper, Black Fabric	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103338-99-0	4"x10" Corpus Arm Left - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103340-99-0	4"x12" Corpus Arm Left - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103342-99-0	4"x14" Corpus Arm Left - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103344-99-0	4"x16" Corpus Arm Left - Dual Taper, Leatherette	No Charge	
<input type="checkbox"/> I103330-99-0	4"x10" Corpus Arm Left - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103332-99-0	4"x12" Corpus Arm Left - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103334-99-0	4"x14" Corpus Arm Left - Dual Taper, Black Fabric	No Charge	
<input type="checkbox"/> I103336-99-0	4"x16" Corpus Arm Left - Dual Taper, Black Fabric	No Charge	

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10137	Height Adjustable Armrest Assembly	289.00	E0973
<input type="checkbox"/> I10016	Height Adjustable Armrest Assembly - No Charge <i>No charge with power tilt and/or recline.</i>	No Charge	
<input type="checkbox"/> I101003-99-0	Armrest Mount High	No Charge	
<input type="checkbox"/> I101002-99-0	Armrest Mount Low (High Position Standard) <i>Range of adjustment in high position is 11" - 13.5" measured from the seat pan to the top of the armrest pad.</i>	No Charge	
<input type="checkbox"/> I304968-99-0	Corpus Armbar for 18" Btw the Arms - Installed	270.00	
<input type="checkbox"/> I10001	Corpus Armbar for 20" Btw the Arms - Installed	300.00	
<input type="checkbox"/> I100523-99-0	Armrest Height Ext (+2")	127.00	
<input type="checkbox"/> IARMADAP1"	Arm Trough Adaptor 1" Pair <i>For aftermarket arm troughs. Please indicate below if they should be installed or on chair sent as parts.</i>	279.00	
<input type="checkbox"/> IARMADAP7/8"	Arm Trough Adaptor 7/8" Pair <i>For aftermarket arm troughs. Please indicate below if they should be installed on chair or sent as parts.</i>	279.00	
	Install Arm Trough Adapters: _____		
	Send Arm Trough Adapters as Parts: _____		
<input type="checkbox"/> I100671-99-0	Armrest Pouch-Right	193.00	
<input type="checkbox"/> I100672-99-0	Armrest Pouch-Left	193.00	
<input type="checkbox"/> I101261-99-0	Armrest Side Support Right Outer <i>For Corpus Armrest Pads only.</i>	144.00	
<input type="checkbox"/> I101262-99-0	Armrest Side Support Left Outer <i>For Corpus Armrest Pads only.</i>	144.00	
<input type="checkbox"/> I101263-99-0	Armrest Side Support Right Inner <i>Recommend 2" wider width between the armrest to ensure armrests will flip-up.</i>	144.00	
<input type="checkbox"/> I101264-99-0	Armrest Side Support Left Inner <i>Recommend 2" wider width between the armrest to ensure armrests will flip-up.</i>	144.00	

C400 Corpus

Armrest Options

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I101510-99-0	Armrest Supports HD <i>Cannot be ordered with 175 degree power recline seating systems. (I10482, I10485, I10488).</i>	495.00	
<input type="checkbox"/> I10285	Mount Corpus Armrest Pads On Inside of Bracket <i>Used to achieve 14"W between the arm measurement when ordering a 14"W Backrest.</i>	No Charge	

Legrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103867-99-0	Power Articulating Center Mount Elevating Legrest	2,995.00	K0108
<input type="checkbox"/> I102212-99-0	Manual Adjustment Legrest Elevation <i>Includes Calf Supports.</i>	No Charge	

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103055-99-0	UT Calf Support Kit (B) w Mesh Cover & Adj Hardware <i>3.5"W x 4.5"T Pad. Recommended pad to be used with lower leg lengths of 12" or less.</i>	No Charge	
<input type="checkbox"/> I102982-99-0	UT Calf Support Kit (J) w Mesh Cover & Adj Hardware <i>5"W x 6.5"T Pad.</i>	No Charge	
<input type="checkbox"/> I102978-99-0	UT Calf Support Kit (H) w Mesh Cover & Adj Hardware <i>7"W x 7"T Curved Pad.</i>	317.00	E1028
<input type="checkbox"/> I100561-99-0	Legrest Assm. 1pc Footplate (Complete)	402.00	
<input type="checkbox"/> I100560-99-0	Legrest Assm. 2pc Footplates (Complete)	No Charge	
<input type="checkbox"/> I10024	Leg Length Ext Kit (pair) 16-21" From Seat Pan <i>Standard length is 11" - 16" from seat pan to footplate. Set legs at _____" from top of seat pan to footplate.</i>	280.00	
<input type="checkbox"/> I10006	3" Width Between Two- Piece Footplates <i>Not available if chair has anti-tips and lower leg length is greater than 14" (measured from seat pan to top of footplate.)</i>	504.00	

Accessories

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10400	Bodypoint Non-Padded Hip Belt, UniTrack - Medium	No Charge	
<input type="checkbox"/> I10405	Bodypoint Padded Hip Belt UniTrack (N/C) - Medium	No Charge	
<input type="checkbox"/> I10402	Bodypoint Non-Padded Hip Belt, UniTrack - Large	94.00	K0108
<input type="checkbox"/> I10408	Bodypoint Padded Hip Belt UniTrack - Large	158.00	K0108
<input type="checkbox"/> I100519-99-0	Positioning Belt Retractable	239.00	K0108
<input type="checkbox"/> I100600-99-0	Positioning Belt Retractable Long	259.00	K0108
<input type="checkbox"/> I104131-99-0	Headrest for Ergo Back w/ Curved Mount Brkt - Leath <i>Must also select PN I10552. This part consists of a leatherette headrest pad (10"W x 5"T) with a 10"L slotted, curved mounting bracket.</i>	268.00	E0955
<input type="checkbox"/> I103460-99-0	UT Ergo Headrest w/ Black Fabric Cover <i>Must also select PN I10552.</i>	297.00	E0955
<input type="checkbox"/> I1823249	UT Lateral Adjustment Bar for UniTrack Headrest <i>Allows for approximately 4" of lateral adjustment to the UT Ergo Headrest either right or left. NOTE: Due to the width of this item (approx 9"), it may be necessary to send other items such as back pack clips unmounted. Custom charge may apply with lower back heights.</i>	56.00	
<input type="checkbox"/> IHEADADAPTER	Universal Headrest Adapter <i>For aftermarket headrests.</i>	205.00	K0108
<input type="checkbox"/> I10552	Adj Removable - Headrest Hardware (1 Each)	216.00	E1028
<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>	127.00	E1020

C400 Corpus

Accessories

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<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>	127.00	E1020
<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 Right: ____ Mount Amp Suppt on Left: ____</i>	216.00	E1028
<input type="checkbox"/> I103077-99-0	UT Hip Suppt (B) w/ Mesh Cover - Low (Pair) <i>4.5"W x 3.5"T Pad w/ 2" Tall Mounting Bracket. Must also select PN I10550.</i>	229.00	E0956
<input type="checkbox"/> I103079-99-0	UT Hip Suppt (A) w/ Mesh Cover - Low (Pair) <i>6"W x 5"T Pad w/ 2" Tall Mounting Bracket. Must also select PN I10550.</i>	229.00	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>	229.00	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>	229.00	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>	229.00	E0956
<input type="checkbox"/> I10550	Adj Removable - Thigh Support Hardware (Pair)	431.00	E1028
<input type="checkbox"/> I305266-28-90-0	Lateral Supports Std. Leatherette-ErgoBack Only <i>Must also select PN I10551.</i>	250.00	E0956
<input type="checkbox"/> I100521-99-0	Swing Away Trunk Supports Leatherette-For Ergo Back <i>Must also select PN I10551.</i>	254.00	E0956
<input type="checkbox"/> I10551	Adj Removable - Trunk Support Hardware (Pair)	431.00	E1028
<input type="checkbox"/> I100978-99-0	Abductor Kit - Leatherette <i>Must also select PN I10555.</i>	311.00	E0957
<input type="checkbox"/> I10555	Adj Removable - Abductor Hardware (1 Each)	216.00	E1028
<input type="checkbox"/> I10015	Knee Block Assembly Corpus	641.00	K0108
<input type="checkbox"/> I103651-99-0	Transfer Handles for UniTrack Accessory Rail	397.00	
<input type="checkbox"/> I100975-99-0	Push Handles for Ergo Backrest <i>Order with Ergonomic or Rectangular Backs. Custom charge may apply if ordering push handles with an articulating vent tray.</i>	345.00	
<input type="checkbox"/> I307103-00-0	Push Handles for Tubular Backrest <i>Order with Corpus Tubular Backs (PN: I10111 & I10112).</i>	343.00	
<input type="checkbox"/> I102059-99-0	Medical Necessities Bag <i>Includes Medical Necessity Bag Clips (Carabiner Style).</i>	229.00	
<input type="checkbox"/> I101473-99-0	Medical Necessity Bag Clips - Carabiner Style	76.00	
<input type="checkbox"/> I101500-99-0	Essentials Carrier for Chassis <i>It is recommended that you also select Rear Tie Down Points Extension Kit (I101515-99-0) below when selecting this item.</i>	386.00	
<input type="checkbox"/> I101515-99-0	Rear Tie Down Points Extension Kit <i>Recommended when ordering Essentials Carrier for Chassis (I101500-99-0) in order to access rear tiedown points.</i>	115.00	
<input type="checkbox"/> I105144-99-0	Bodypoint Monoflex Large Chest Support Belt Kit <i>21.5"L x 4.5"W Pad Size. Item will be shipped as parts.</i>	145.00	E0960
<input type="checkbox"/> I105143-99-0	Bodypoint Monoflex Medium Chest Support Belt Kit <i>18.25"L x 4"W Pad Size. Item will be shipped as parts.</i>	145.00	E0960
<input type="checkbox"/> I105145-99-0	Bodypoint Monoflex X-Lrge Chest Support Belt Kit <i>24.5"L x 5"W Pad Size. Item will be shipped as parts.</i>	145.00	E0960
<input type="checkbox"/> I100578-99-0	Upper Extremity Support Small, Angle Adjustable <i>Must also select PN I10556.</i>	242.00	E0950
<input type="checkbox"/> I100575-99-0	Upper Extremity Support Angle Adjustable. 14" W <i>Must also select PN I10556.</i>	272.00	E0950

C400 Corpus

Accessories

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I100576-99-0	Upper Extremity Support Angle Adjustable. 16" W <i>Must also select PN I10556.</i>	284.00	E0950
<input type="checkbox"/> I100577-99-0	Upper Extremity Support Angle Adjustable. 18" W <i>Must also select PN I10556.</i>	311.00	E0950
<input type="checkbox"/> I100571-99-0	Upper Extremity Support Joystick Cutout 16" W <i>Must also select PN I10556.</i>	328.00	E0950
<input type="checkbox"/> I100572-99-0	Upper Extremity Support Joystick Cutout 18" W <i>Must also select PN I10556.</i>	328.00	E0950
<input type="checkbox"/> I100573-99-0	Upper Extremity Support Mid Joystick Cutout 16"W <i>Must also select PN I10556.</i>	402.00	E0950
<input type="checkbox"/> I100574-99-0	Upper Extremity Support Mid Joystick Cutout 18"W <i>Must also select PN I10556.</i>	402.00	E0950
<input type="checkbox"/> I103426-99-0	Upper Extremity Support Angle Adjust - UniTrack <i>Side mounted tray that attaches to the UniTrack Accessory Rail. Dimensions are: 19.5"W x 13"D. Can only be ordered with chairs that offer the UniTrack System. Must also select PN I10556.</i>	301.00	E0950
<input type="checkbox"/> I10556	Adj Removable - Tray Hardware (1 Each)	216.00	E1028
<input type="checkbox"/> I101964-99-0	Oxygen Holder for PS or Corpus Seat <i>Cannot be ordered with a Corpus Tubular Backrest. (I10111 or I10112). Custom charge may be applied if ordering in combination with accessories such as medical necessities bags, attendant controls, push handles, back pack clips, etc. This item is mounted to the Ergonomic Backrest. Customization may be required if ordering on a Street.</i>	228.00	E2208
<input type="checkbox"/> I101956-99-0	Crutch Holder for PS or Corpus Seat <i>Cannot be ordered with a Corpus Tubular Backrest. (I10111 or I10112). Accessories such as medical necessities bags and push handles may need to be sent as parts if ordering a crutch holder. This item is mounted to the ergonomic backrest. Customization may be required if ordering on a Street.</i>	228.00	E2207

Alternative Drive Systems

(1) CHOOSE ALTERNATIVE DRIVE INPUT:

Part Number	Description	Price	HCPCS Code
	R-net Alternative Drive Input Devices <i>R-net Alternative Drive Input Devices take the place of, or may be used in addition to, the standard R-net Joystick. They are only usable on wheelchairs that have R-net electronics. You MUST select one of each of the following items: (1) Input Device, (2) Adjustable/Removable Alt Drive Hardware, AND (3) Omni or Input Module.</i>		
<input type="checkbox"/> I10558	Gimble Joystick set up for Armrest Mount	1,412.00	E2373
<input type="checkbox"/> I10559	Gimble Joystick set up for Midline Mount	1,412.00	E2373
<input type="checkbox"/> I10560	Gimble Joystick set up for Swing Away Chin Boom <i>Custom charge may be applied if ordering lower backrest heights.</i>	1,412.00	E2373
<input type="checkbox"/> I10561	Gimble Joystick w/ Haims Harness - Small <i>For neck width up to 5".</i>	1,582.00	E2373
<input type="checkbox"/> I10562	Gimble Joystick w/ Haims Harness - Large <i>For neck width up to 7".</i>	1,582.00	E2373
<input type="checkbox"/> I10563	Gimble Joystick w/ Power Swing Away Chin Boom <i>Custom charge may be applied if ordering smaller backrest sizes and heights.</i>	5,265.00	E2373
<input type="checkbox"/> I10564	Mini Joystick set up for Armrest Mount	2,685.00	E2312
<input type="checkbox"/> I10565	Mini Joystick set up for Midline Mount	2,685.00	E2312
<input type="checkbox"/> I10566	Mini Joystick set up for Swing Away Chin Boom <i>Custom charge may be applied if ordering lower backrest heights.</i>	2,685.00	E2312
<input type="checkbox"/> I10567	Mini Joystick w/ Haims Harness - Small <i>For neck width up to 5".</i>	2,745.00	E2312

C400 Corpus

Alternative Drive Systems

(1) CHOOSE ALTERNATIVE DRIVE INPUT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10568	Mini Joystick w/ Haims Harness - Large <i>For neck width up to 7".</i>	2,745.00	E2312
<input type="checkbox"/> I10569	Mini Joystick w/ Power Swing Away Chin Boom <i>Custom charge may be applied if ordering lower backrest heights.</i>	5,265.00	E2312
<input type="checkbox"/> I1821750	Tablet Control Pad <i>The Tablet Control is a unique drive input which allows a user to control a power wheelchair in a very similar manner to a mouse being controlled by a touchpad on a laptop computer. The dimensions of the Tablet Control Pad are: 12"W x 9.5"D x 1.5"H. Kit also includes: Buddy Button Switch, and Tablet Control Mounting Bracket.</i>	4,375.00	E2328
<input type="checkbox"/> I10570	Head Array - Adult 5 Switch HDR-A5	4,375.00	E2330
<input type="checkbox"/> I10571	Head Array - Adult 3 Switch HDR-A4 <i>Requires Omni Control Module. Cannot use this part with an Input Module.</i>	4,175.00	E2330
<input type="checkbox"/> I10572	Head Array - Pediatric 5 Switch HDR-C5-RR	4,375.00	E2330
<input type="checkbox"/> I10573	Sip & Puff System <i>Requires Omni Control Module. Cannot use this part with an Input Module.</i>	1,475.00	E2325
<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>	1,963.00	E2325,E2326

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10076	Right Side Mount For Joystick	No Charge	
<input type="checkbox"/> I10077	Left Side Mount For Joystick	No Charge	
<input type="checkbox"/> I10074	Right Side Mount For Omni	No Charge	
<input type="checkbox"/> I10075	Left Side Mount For Omni	No Charge	
<input type="checkbox"/> I10078	Mount Seat Control Panel on Right	No Charge	
<input type="checkbox"/> I10079	Mount Seat Control Panel on Left	No Charge	
<input type="checkbox"/> I10080	Mount Seat Control Panel on Backrest	No Charge	

Alt Drive Systems Setup

(2) CHOOSE ADJ ALT DRIVE HARDWARE (REQUIRED):

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10577	Adjustable Removable Hardware - Alt Drive	216.00	E1028

(3) 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>Please specify which type of alternative drive input you will be using if not ordering the input device from Permobil. Input Device: _____</i>	1,496.00	
<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 Head Array or RIM control.</i>	1,012.00	E2351

Alt Drive Accessories

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> IMICROSWITCH	Microlite Switch Qty: _____	151.00	
<input type="checkbox"/> IBUDDYBUTTON	Buddy Button Qty: _____	113.00	K0108
<input type="checkbox"/> I5808	Mini Cup Switch Qty: _____	110.00	
<input type="checkbox"/> IZTS-P	Proximity Switch Qty: _____	524.00	
<input type="checkbox"/> IMINIJOY5SW	Mini Joystick 5 Switch OC	603.00	

C400 Corpus

Alt Drive Accessories

SELECT OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> 15018	Wafer Board w/5 Switches	506.00	

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, 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. MID PROFILE® Cushion is a registered trademark of the The ROHO Group. *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.*