

Date: _____ Ship To: _____
 Account: _____ Address: _____
 PO Number: _____ City: _____ State: _____ Zip: _____
 Marked For: _____ Phone: _____

Heavy Duty - 350 lb. Weight Capacity

	<u>Retail</u>	<u>Part #</u>
<input type="checkbox"/> 12 1/2" Solid Insert Drive Wheel System	\$7,600.00	03 01 0026-12
<input type="checkbox"/> 24" x 1 3/8" Pneumatic Drive Wheel System	\$7,600.00	03 01 0026-24

Who will install e.fix?
 FMS Dealer

Is wheelchair shipping to FMS?
 Yes No



Wheelchair type is required to determine the correct bracket for installation. Brackets are NOT included!

Manufacturer/Model: _____ \$345 03 01 99(xx)
 Seat Width: _____ *Part # will vary based on type of wheelchair.*

Joystick Controller

Controller Mount: **Right Mount** **Left Mount**
Arm Rest Style: Desk or Full Length "Pad" Style
 "Tubular" Flip-up or Swing Away Style
 Other _____

<input type="checkbox"/> Snap-On Hand Rest	Std	031467455
<input type="checkbox"/> Extended Hand Rest <i>with non-slip pad</i>	\$125	031467456
<input type="checkbox"/> Joystick Protection Bumper	\$165	03 05 1658
<input type="checkbox"/> Swing Away Mount	\$455	03 05 1615
<input type="checkbox"/> Plastic Ball 30 mm	\$35	03 07 0352
<input type="checkbox"/> Plastic Ball 40 mm	\$35	03 05 1652
<input type="checkbox"/> Plastic Ball 50 mm	\$35	03 05 1653
<input type="checkbox"/> **Foam Ball Grip 70 mm	\$35	03 05 1651
<i>**30 mm Plastic Ball Required</i>		
<input type="checkbox"/> Acrylic Tray, <i>Center Mount Cut-Out</i>	\$485	
<i>Wheelchair must have arm rests</i>		
<input type="checkbox"/> 15" - 17" Seat Width		03 05 1701
<input type="checkbox"/> 17" - 19" Seat Width		03 05 1702
<input type="checkbox"/> Attendant Mount <i>For Std Controller</i>	\$265	
<input type="checkbox"/> Right	03 05 1635	<input type="checkbox"/> Left 03 05 1636
<input type="checkbox"/> Opti-Box [®]	\$465	031489081
<i>*Remote Interface for external devices. Required for some e.fix accessories.</i>		
<input type="checkbox"/> *Intuitive Attendant Controller	\$995	031467695
<i>Push/Brake Aid - Please also select mounting side below</i>		
<input type="checkbox"/> *Intuitive Control Mounting Hardware	\$115	031489073
<input type="checkbox"/> Control Right Mount		031467804
<input type="checkbox"/> Control Left Mount		031467804
<i>w/ Opposing Handle Left w/ Opposing Handle Right</i>		
<input type="checkbox"/> *Speed Stop/Speed Limit Switch	\$185	031467698
<i>For Standing/Lift Chairs</i>		
<input type="checkbox"/> *External On/Off Button	\$235	031467958

Drive Wheel Options

<input type="checkbox"/> 24" Spoke Covers - Deco	\$195	031467700
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Battery Pack / Charger

<input type="checkbox"/> 2 x 12 Volt, 12 Ah	Std	031467687
<input type="checkbox"/> 17 Ah Upgrade	\$375	031467686
<input type="checkbox"/> 12 Ah EXTRA Battery Pack	\$485	031467547
<input type="checkbox"/> 17 Ah EXTRA Battery Pack	\$625	031467548
<input type="checkbox"/> Battery Tray, 12 Ah	\$405	03 05 1800
<i>Adjustable - Fits 12" to 18" inner frame widths.</i>		
<i>Wheelchair will not fold with tray installed! Required for some models.</i>		
<input type="checkbox"/> Automatic Charger, 2.5Ah	Std	031467531
<input type="checkbox"/> Remote Charging Socket	\$105	031467697

Other Accessories

<input type="checkbox"/> Anti-Tippers, <i>Pair</i>	\$775	031467694
<i>Curb Climbing Feature</i>		

Notes

*Opti-Box[®] Required.

Total _____