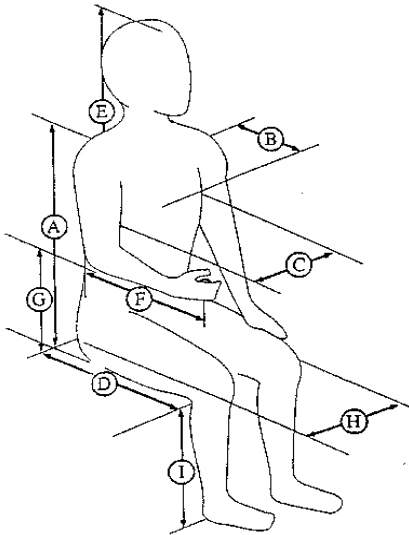


C500 Corpus



** Indicates a Required Field*

Dealer Information

* Contact: _____

Dealer Code: _____

* Dealer Name: _____

Address: _____

* City: _____

* State/Zip: _____

* Phone#: _____

* Fax#: _____

PO#: _____

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**

Prices effective July 1, 2009.

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

Base

Select Options:

Part Number	Description	Price	HCPCS Code
I103257-99-0	C500 Base Rnet, 5.0mph - C500 PS2 <i>Price Includes: FWD C500 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>	10,795.00 <input type="checkbox"/>	K0884/K0014
I103258-99-0	C500 Base HS Rnet, 6.5mph - C500 PS2 <i>Price Includes: FWD C500 Power Base Set Up For Multiple Power Seat Functions, Shock Absorbing Suspension System, ESP (Enhanced Steering Performance), High Speed Motors, 120 Amp Electronics, Tie-Down Hardware for Strap Systems, Charger, Flat Free Tires, and Standard Positioning Belt. Must Choose Flat Free or Pneumatic Tires Below.</i>	11,945.00 <input type="checkbox"/>	K0884/K0014

Required Items

Part Number	Description	Price	HCPCS Code
I103499-99-0	Tri-Spoke Split Rim w/ Flat Free Drive Tire 3x8"	No Charge <input type="checkbox"/>	
I103498-99-0	Tri-Spoke Split Rim w/ Pneumatic Tires - 3x8"	No Charge <input type="checkbox"/>	

Required Items

Part Number	Description	Price	HCPCS Code
I103816-99-0	C500 Shroud Onyx Black	No Charge <input type="checkbox"/>	
I102260-99-0	C500 Shroud Vintage Wine	No Charge <input type="checkbox"/>	
I102261-99-0	C500 Shroud Crystal Blue	No Charge <input type="checkbox"/>	
I102262-99-0	C500 Shroud Metallic Charcoal Gray	No Charge <input type="checkbox"/>	
I102263-99-0	C500 Shroud Green Metallic	No Charge <input type="checkbox"/>	
I103833-99-0	C500 Shroud Platinum Silver	No Charge <input type="checkbox"/>	
I103632-99-0	C500 Shroud Pearl White	No Charge <input type="checkbox"/>	

Required Items

Part Number	Description	Price	HCPCS Code
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 <input type="checkbox"/>	

Base Options

Required Items

Part Number	Description	Price	HCPCS Code
I103865-99-0	Power Adjustable Seat Height, 8" Travel (R-net) <i>To assist in transfers and improve access for function.</i>	2,595.00 <input type="checkbox"/>	E2300
I102271-99-0	Seat Tube Fixed	No Charge <input type="checkbox"/>	

Select Options:

Part Number	Description	Price	HCPCS Code
IM24 SLD G FT	Batteries, Group 24 Sealed LA/Gel, Installed	762.00 <input type="checkbox"/>	E2363
I102210-99-0	Anti-Tippers for C400/C500	399.00 <input type="checkbox"/>	
I103635-99-0	Light Kit, R-net, C400/C500	955.00 <input type="checkbox"/>	
I100570-99-0	Seat Stabilizer	No Charge <input checked="" 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>	1,295.00 <input type="checkbox"/>	E1030
I104082-99-0	R-net ESP w C400/C500 Mounting Bracket <i>MUST be selected if ordering any ventilator tray (I102769-99-0, I103241-99-0, or I102768-99-0).</i>	1,250.00 <input type="checkbox"/>	K0108

Select Options:

Part Number	Description	Price	HCPSC Code
ID51113	Programming Key for R-net - Permobil Version	435.00	<input type="checkbox"/>

Permolock

Select Options:

Part Number	Description	Price	HCPSC Code
I102843-99-0	Permolock Kit - COMPLETE <i>Includes: Locking Base, Plunger, and Manual Release Handle. 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: _____	2,485.00	<input type="checkbox"/>
I102842-99-0	Plunger ONLY for Permolock <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>	1,008.00	<input type="checkbox"/>

Joystick Options

Required Items

Part Number	Description	Price	HCPSC Code
I10045	Cone Shaped Joystick Knob - Standard.	No Charge	<input type="checkbox"/>
I100960-99-0	Chin Cup For Joystick Knob	94.00	<input type="checkbox"/> E2324
I100961-99-0	"T" Handle For Joystick Knob	139.00	<input type="checkbox"/> E2323
I100962-99-0	"Large Ball" For Joystick Knob	94.00	<input type="checkbox"/> E2323
I100963-99-0	"Softball" For Joystick Knob	127.00	<input type="checkbox"/> E2323
I100964-99-0	"Mushroom" For Joystick Knob	127.00	<input type="checkbox"/> E2323
I100965-99-0	"Stick" For Joystick Knob	127.00	<input type="checkbox"/> E2323
IPC101B	Bodypoint J/S Handle 3" U-Shaped w/ Flex-Shaft	127.00	<input type="checkbox"/> E2323
IPC102B	Bodypoint J/S Handle 4" U-Shaped w/ Flex-Shaft	127.00	<input type="checkbox"/> E2323
IPC107B	Bodypoint J/S Handle Dome Shaped, Rubber	127.00	<input type="checkbox"/> E2323

Select Options:

Part Number	Description	Price	HCPSC Code
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	292.00	<input type="checkbox"/> E1028
I102538-99-0	Joystick Mount Left - Swing Away, R-net & VR2	292.00	<input type="checkbox"/> E1028
I103820-99-0	Retractable Joystick Mnt Right - R-net, VR2 Only	486.00	<input type="checkbox"/> E1028
I103819-99-0	Retractable Joystick Mnt Left - R-net, VR2 Only	486.00	<input type="checkbox"/> E1028
I101260-99-0	Midline Control Mount - Pilot+ & R-net Only <i>Please indicate which armrest to mount midline below.</i>	263.00	<input type="checkbox"/> E1028
I10428	Mount Midline Joystick on Left Armrest	No Charge	<input type="checkbox"/>
I10427	Mount Midline Joystick on Right Armrest	No Charge	<input type="checkbox"/>
I103544-99-0	R-net Remote Joystick w/ Mono Jacks <i>Expandable/remote joystick used with multiple power option bases or as an upgrade for no power option or single power option bases. Must order expandable controller (PN: I10411) with this part. Comes standard w/ mono jacks.</i>	530.00	<input type="checkbox"/>
ID51040	R-net Remote Joystick w/ Toggle Switches <i>Expandable/remote joystick with toggle switches. Used with multiple power option bases or as an upgrade for no power option or single power option bases. Must order expandable controller (PN: I10411) with this part.</i>	605.00	<input type="checkbox"/>

C500 Corpus

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Select Options:

Part Number	Description	Price	HCPCS Code
ID51042	R-net Remote Joystick w/ Speed Pot & Single Toggle <i>Expandable/remote joystick with a single toggle switch for modes/profiles & a speed pot. Used with multiple power option bases or as an upgrade for no power option or single power option bases. Must order expandable controller (PN: I10411) with this part.</i>	730.00 <input type="checkbox"/>	
ID51153	R-net Remote Color Screen Joystick w/ Mono Jacks <i>Must order expandable controller (PN: I10411) with this part. Comes standard w/ mono jacks.</i>	835.00 <input type="checkbox"/>	
ID51187	R-net Remote Colored JS w/ Speed Pot	875.00 <input type="checkbox"/>	
ID51190	R-net Remote Color JS w/ Speed Pot & Single Toggle <i>Must order expandable controller (PN: I10411) with this part.</i>	875.00 <input type="checkbox"/>	
ID51149	R-net Remote Color Screen JS w/ Toggle Switches <i>Must order expandable controller (PN: I10411) with this part.</i>	875.00 <input type="checkbox"/>	
I10411	Expandable Controller - R-net <i>Must be ordered with the expandable/remote joysticks (PN: I103544-99-0, ID51040, ID51108, ID51042, and I103814-99-0).</i>	525.00 <input type="checkbox"/>	E2377
I10513	Harness for Expandable Controller <i>Must be ordered with any Expandable Controller (I10411 or I10450)</i>	445.00 <input type="checkbox"/>	E2313
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>	4,175.00 <input type="checkbox"/>	E2331
ID50882	Attendant Control for R-net Control System Only <i>Not available with VR2 Controllers.</i>	1,084.00 <input type="checkbox"/>	E2331
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>	795.00 <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>	995.00 <input type="checkbox"/>	E2351

Seating System

Required Items

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>		
I10025	Corpus Seat without Power Tilt or Power Recline	5,595.00 <input type="checkbox"/>	K0108
I10479	Corpus Seat w/ 45° Power Tilt & Manual Recline <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.</i>	6,340.00 <input type="checkbox"/>	E1002
I10480	Corpus Seat w/ 120° Power Recline <i>Includes power recline actuator mounted behind the back with a reinforced mounting system.</i>	6,872.00 <input type="checkbox"/>	E1004
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>	6,872.00 <input type="checkbox"/>	E1004
I10482	Corpus Seat w/ 175° Power Recline <i>Includes a side mounted power recline actuator. This configuration cannot be selected with seat seat depths less than 18", and is not available for users who weigh between 251-310lbs.</i>	7,450.00 <input type="checkbox"/>	E1004

C500 Corpus

MSRP Price List

Required Items

Part Number	Description	Price	HCPSC Code
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>	10,995.00 <input type="checkbox"/>	E1007
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>	10,350.00 <input type="checkbox"/>	E1007
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 seat depths less than 18", and is not available for users who weigh between 251-310lbs.</i>	10,995.00 <input type="checkbox"/>	E1007

Seating System Options

Select Options:

Part Number	Description	Price	HCPSC Code
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>	2,545.00 <input type="checkbox"/>	
I10013	Mount Seat Frame in Tall Position	317.00 <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>	1,378.00 <input type="checkbox"/>	E2310
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>	2,675.00 <input type="checkbox"/>	E2311
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	245.00 <input type="checkbox"/>	
I103469-99-0	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>	No Charge <input type="checkbox"/>	
	Mount ICS Switchbox on Left Armpad _____		
	Mount ICS Switchbox on Right Armpad _____		
I103470-99-0	Mount ICS Switchbox on Backrest	125.00 <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>	985.00 <input type="checkbox"/>	K0108
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>	98.00 <input type="checkbox"/>	

Backrest Options

Required Items

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>		
I101853-99-0	Ergo Back Fixed 14" W x 21" H - Leatherette	837.00	<input type="checkbox"/> E2620
I101863-99-0	Ergo Back Fixed 14"W x 26.5" High - Leatherette	837.00	<input type="checkbox"/> E2620
I101854-99-0	Ergo Back Sliding 16"W x 21"H - Leatherette	837.00	<input type="checkbox"/> E2620
I101861-99-0	Ergo Back Sliding 16"W x 26.5" H - Leatherette	837.00	<input type="checkbox"/> E2620
I101855-99-0	Ergo Back Sliding 18"W x 21"H - Leatherette	837.00	<input type="checkbox"/> E2620
I101862-99-0	Ergo Back Sliding 18"W x 26.5"H - Leatherette	837.00	<input type="checkbox"/> E2620
I305510-00-90-0	Ergo Back Fixed Tall 16"W x 29.5"H - Leatherette	837.00	<input type="checkbox"/> E2620
I10455	Ergo Back Fixed 14" W x 21" H - Black Mesh	859.00	<input type="checkbox"/> E2620
I10456	Ergo Back Fixed 14"W x 26.5" High - Black Mesh	859.00	<input type="checkbox"/> E2620
I10457	Ergo Back Sliding 16"W x 21"H - Black Mesh	859.00	<input type="checkbox"/> E2620
I10458	Ergo Back Sliding 16"W x 26.5" H - Black Mesh	859.00	<input type="checkbox"/> E2620
I10459	Ergo Back Sliding 18"W x 21"H - Black Mesh	859.00	<input type="checkbox"/> E2620
I10460	Ergo Back Sliding 18"W x 26.5"H - Black Mesh	859.00	<input type="checkbox"/> E2620
I10004	Rectangular Backrest 16"W - Plastic, Fixed <i>Choose backrest height from seat pan: 19"-29" ____ "</i>	1,119.00	<input type="checkbox"/>
I10005	Rectangular Back 18"W - Metal Fixed <i>Choose backrest height from seat pan: 19"-29" ____ "</i>	1,307.00	<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 <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>	357.00	<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>	357.00	<input type="checkbox"/>

Select Options:

Part Number	Description	Price	HCPCS Code
I10014	Custom Backrest Height ____" <i>Backrest height measured from seat pan and cannot be lower than 19". Price in addition to above backrest.</i>	625.00	<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>	535.00	<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>	89.00	<input type="checkbox"/>

Select Options:

Part Number	Description	Price	HCPCS Code
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>	625.00 <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>	625.00 <input type="checkbox"/>	
I10320	Omit Ergonomic Backrest Cushion	No Charge <input type="checkbox"/>	

Seat Sizing

Required Items

Part Number	Description	Price	HCPCS Code
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 <input type="checkbox"/>	

Select Options:

Part Number	Description	Price	HCPCS Code
I10038	Ergonomic Seat Cushion Leatherette <i>Not available with seat widths less than 16" or seat depths less than 14".</i>	475.00 <input type="checkbox"/>	E2601,E2602
I10461	Ergonomic Seat Cushion - Black Mesh <i>Not available with seat widths less than 16" or seat depths less than 14".</i>	485.00 <input type="checkbox"/>	E2601

Armrest Options

Required Items

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

C500 Corpus

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Required Items

Part Number	Description	Price	HCPCS Code
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	<input type="checkbox"/>

Select Options:

Part Number	Description	Price	HCPCS Code
I10137	Height Adjustable Armrest Assembly	284.00	<input type="checkbox"/> E0973
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 <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"/>
I101002-99-0	Armrest Mount Low (High Position Standard) <i>Range of adjustment in low position is 9" - 11.5" 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	265.00	<input type="checkbox"/>
I10001	Corpus Armbar for 20" Btw the Arms - Installed	295.00	<input type="checkbox"/>
I100523-99-0	Armrest Height Ext (+2")	125.00	<input type="checkbox"/>
IARMADAP1"	Arm Trough Adaptor 1" Pair <i>For aftermarket arm troughs.</i>	274.00	<input type="checkbox"/>
IARMADAP7/8"	Arm Trough Adaptor 7/8" Pair <i>For aftermarket arm troughs.</i>	274.00	<input type="checkbox"/>
I100671-99-0	Armrest Pouch-Right	190.00	<input type="checkbox"/>
I100672-99-0	Armrest Pouch-Left	190.00	<input type="checkbox"/>
I101261-99-0	Armrest Side Support Right Outer <i>For Corpus Armrest Pads only.</i>	142.00	<input type="checkbox"/>
I101262-99-0	Armrest Side Support Left Outer <i>For Corpus Armrest Pads only.</i>	142.00	<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>	142.00	<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>	142.00	<input type="checkbox"/>
I101510-99-0	Armrest Supports HD <i>Cannot be ordered with 175 degree power recline seating systems. (I10482, I10485, I10488).</i>	486.00	<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	<input type="checkbox"/>

Legrest Options

Required Items

Part Number	Description	Price	HCPCS Code
I103867-99-0	Power Articulating Center Mount Elevating Legrest	2,749.00	<input type="checkbox"/> K0108
I102212-99-0	Manual Adjustment Legrest Elevation <i>Includes Calf Supports.</i>	No Charge	<input type="checkbox"/>

Select Options:

Part Number	Description	Price	HCPCS Code
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"/>

C500 Corpus

MSRP Price List

Select Options:

Part Number	Description	Price	HCPSC Code
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>	312.00 <input type="checkbox"/>	E1028
I100561-99-0	Legrest Assm. 1pc Footplate (Complete)	395.00 <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>	275.00 <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>	495.00 <input type="checkbox"/>	

Accessories

Select Options:

Part Number	Description	Price	HCPSC Code
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	92.00 <input type="checkbox"/>	K0108
I10408	Bodypoint Padded Hip Belt UniTrack - Large	155.00 <input type="checkbox"/>	K0108
I100519-99-0	Positioning Belt Retractable	235.00 <input type="checkbox"/>	K0108
I100600-99-0	Positioning Belt Retractable Long	255.00 <input type="checkbox"/>	K0108
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>	263.00 <input type="checkbox"/>	E0955
I103460-99-0	UT Ergo Headrest w/ Black Fabric Cover <i>Must also select PN I10552.</i>	292.00 <input type="checkbox"/>	E0955
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>	55.00 <input type="checkbox"/>	
IHEADADAPTER	Universal Headrest Adapter <i>For aftermarket headrests.</i>	197.00 <input type="checkbox"/>	K0108
I10552	Adj Removable - Headrest Hardware (1 Each)	212.00 <input type="checkbox"/>	E1028
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>	125.00 <input type="checkbox"/>	E1020
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>	125.00 <input type="checkbox"/>	E1020
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>	212.00 <input type="checkbox"/>	E1028
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>	225.00 <input type="checkbox"/>	E0956
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>	225.00 <input type="checkbox"/>	E0956
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>	225.00 <input type="checkbox"/>	E0956
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>	225.00 <input type="checkbox"/>	E0956
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>	225.00 <input type="checkbox"/>	E0956
I10550	Adj Removable - Thigh Support Hardware (Pair)	424.00 <input type="checkbox"/>	E1028

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MSRP Price List

Select Options:

Part Number	Description	Price	HCPCS Code
I305266-28-90-0	Lateral Supports Std. Leatherette-ErgoBack Only <i>Must also select PN I10551.</i>	246.00 <input type="checkbox"/>	E0956
I100521-99-0	Swing Away Trunk Supports Leatherette-For Ergo Back <i>Must also select PN I10551.</i>	250.00 <input type="checkbox"/>	E0956
I10551	Adj Removable - Trunk Support Hardware (Pair)	424.00 <input type="checkbox"/>	E1028
I100978-99-0	Abductor Kit - Leatherette <i>Must also select PN I10555.</i>	306.00 <input type="checkbox"/>	E0957
I10555	Adj Removable - Abductor Hardware (1 Each)	212.00 <input type="checkbox"/>	E1028
I10015	Knee Block Assembly Corpus	630.00 <input type="checkbox"/>	K0108
I103651-99-0	Transfer Handles for UniTrack Accessory Rail	390.00 <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>	339.00 <input type="checkbox"/>	
I307103-00-0	Push Handles for Tubular Backrest <i>Order with Corpus Tubular Backs (PN: I10111 & I10112).</i>	337.00 <input type="checkbox"/>	
I101473-99-0	Back Pack Clips Carabiner Style	75.00 <input type="checkbox"/>	
I102059-99-0	Medical Necessities Bag <i>Includes Back Pack Clips (Carabiner Style).</i>	265.00 <input type="checkbox"/>	
I102697001331	Medical Necessities Bag - Case Logic	265.00 <input type="checkbox"/>	
I101500-99-0	Essentials Carrier for Chassis	379.00 <input type="checkbox"/>	
I100578-99-0	Upper Extremity Support Small, Angle Adjustable <i>Must also select PN I10556.</i>	238.00 <input type="checkbox"/>	E0950
I100575-99-0	Upper Extremity Support Angle Adjustable. 14" W <i>Must also select PN I10556.</i>	267.00 <input type="checkbox"/>	E0950
I100576-99-0	Upper Extremity Support Angle Adjustable. 16" W <i>Must also select PN I10556.</i>	279.00 <input type="checkbox"/>	E0950
I100577-99-0	Upper Extremity Support Angle Adjustable. 18" W <i>Must also select PN I10556.</i>	306.00 <input type="checkbox"/>	E0950
I100571-99-0	Upper Extremity Support Joystick Cutout 16" W <i>Must also select PN I10556.</i>	322.00 <input type="checkbox"/>	E0950
I100572-99-0	Upper Extremity Support Joystick Cutout 18" W <i>Must also select PN I10556.</i>	322.00 <input type="checkbox"/>	E0950
I100573-99-0	Upper Extremity Support Mid Joystick Cutout 16"W <i>Must also select PN I10556.</i>	395.00 <input type="checkbox"/>	E0950
I100574-99-0	Upper Extremity Support Mid Joystick Cutout 18"W <i>Must also select PN I10556.</i>	395.00 <input type="checkbox"/>	E0950
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>	296.00 <input type="checkbox"/>	E0950
I10556	Adj Removable - Tray Hardware (1 Each)	212.00 <input type="checkbox"/>	E1028
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.</i>	224.00 <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.</i>	224.00 <input type="checkbox"/>	

Alternative Drive Systems

Required Items

Part Number	Description	Price	HCPCS Code
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Required Items

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) Expandable Controller, (3) Adjustable/Removable Alt Drive Hardware, AND (4) Omni or Input Module.</i>		
	(1) INPUT DEVICES FOR ALTERNATIVE DRIVE CONTROL		
I10558	Gimble Joystick set up for Armrest Mount	1,388.00 <input type="checkbox"/>	E2373
I10559	Gimble Joystick set up for Midline Mount	1,388.00 <input type="checkbox"/>	E2373
I10560	Gimble Joystick set up for Swing Away Chin Boom	1,388.00 <input type="checkbox"/>	E2373
I10561	<i>Custom charge may be applied if ordering lower backrest heights.</i> Gimble Joystick w/ Haims Harness - Small <i>For neck width up to 5".</i>	1,555.00 <input type="checkbox"/>	E2373
I10562	Gimble Joystick w/ Haims Harness - Large <i>For neck width up to 7".</i>	1,555.00 <input type="checkbox"/>	E2373
I10563	Gimble Joystick w/ Power Swing Away Chin Boom <i>Custom charge may be applied if ordering smaller backrest sizes and heights.</i>	5,174.00 <input type="checkbox"/>	E2399
I10564	Mini Joystick set up for Armrest Mount	2,035.00 <input type="checkbox"/>	E2312
I10565	Mini Joystick set up for Midline Mount	2,035.00 <input type="checkbox"/>	E2312
I10566	Mini Joystick set up for Swing Away Chin Boom	2,035.00 <input type="checkbox"/>	E2312
I10567	<i>Custom charge may be applied if ordering lower backrest heights.</i> Mini Joystick w/ Haims Harness - Small <i>For neck width up to 5".</i>	2,135.00 <input type="checkbox"/>	E2312
I10568	Mini Joystick w/ Haims Harness - Large <i>For neck width up to 7".</i>	2,135.00 <input type="checkbox"/>	E2312
I10569	Mini Joystick w/ Power Swing Away Chin Boom <i>Custom charge may be applied if ordering lower backrest heights.</i>	5,174.00 <input type="checkbox"/>	E2399
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>	3,614.00 <input type="checkbox"/>	E2328
I10570	Head Array - Adult 5 Switch HDR-A5	3,614.00 <input type="checkbox"/>	E2330
I10571	Head Array - Adult 3 Switch HDR-A4 <i>Requires Omni Control Module. Cannot use this part with an Input Module.</i>	3,614.00 <input type="checkbox"/>	E2330
I10572	Head Array - Pediatric 5 Switch HDR-C5-RR	3,614.00 <input type="checkbox"/>	E2330
I10573	Sip & Puff System <i>Requires Omni Control Module. Cannot use this part with an Input Module.</i>	1,409.00 <input type="checkbox"/>	E2325
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>	1,929.00 <input type="checkbox"/>	E2325,E2326

Select Options:

Part Number	Description	Price	HCPCS Code
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 <input type="checkbox"/>	

Alt Drive Systems Setup

C500 Corpus

MSRP Price List

Required Items

Part Number	Description	Price	HCPCS Code
	(2) EXPANDABLE CONTROLLER (REQUIRED)		
I10576	Expandable Controller - Alternative Drive	525.00 <input type="checkbox"/>	E2377

Required Items

Part Number	Description	Price	HCPCS Code
	(3) ADJUSTABLE REMOVABLE HARDWARE (REQUIRED)		
I10577	Adjustable Removable Hardware - Alt Drive	212.00 <input type="checkbox"/>	E1028

Required Items

Part Number	Description	Price	HCPCS Code
	(4) OMNI PLUS CONTROL MODULE (REQUIRED)		
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>	1,470.00 <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>	995.00 <input type="checkbox"/>	E2351

Alt Drive Accessories

Select Options:

Part Number	Description	Price	HCPCS Code
IMICROSWITCH	Microlite Switch	148.00 <input type="checkbox"/>	
IBUDDYBUTTON	Buddy Button	111.00 <input type="checkbox"/>	K0108
I5808	Mini Cup Switch	108.00 <input type="checkbox"/>	
IZTS-P	Proximity Switch	515.00 <input type="checkbox"/>	
IMINIJOY5SW	Mini Joystick 5 Switch OC	593.00 <input type="checkbox"/>	
I5018	Wafer Board w/5 Switches	497.00 <input type="checkbox"/>	

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.