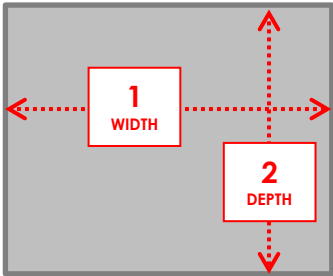
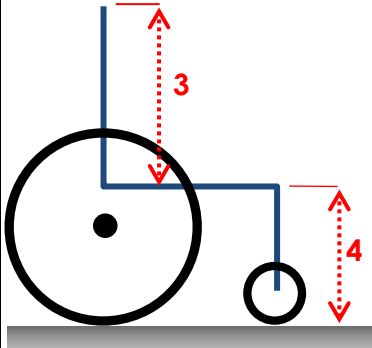




105 E. Rankin Street Jackson, MS 39201 • Phone: 601-353-3193 ext. 215 • Fax: 353-0411
 Email: saferlock@att.net • www.saferwheelchairs.com

Name: _____	Wheelchair Make: _____
Address: _____	Model/Model Number: _____
City: _____	Serial Number: _____
State: _____	
Zip: _____	Print and complete with as much information as possible
Phone: _____	regarding your current wheelchair.
Email: _____	
Date: _____	Please email or fax back to Safer Locks

Seat Dimensions	In.	1 WIDTH	2 DEPTH
BACK OF CHAIR LOOKING DOWN AT SEAT	16	<input type="checkbox"/>	<input type="checkbox"/>
	18	<input type="checkbox"/>	<input type="checkbox"/>
	20	<input type="checkbox"/>	<input type="checkbox"/>
	22	<input type="checkbox"/>	<input type="checkbox"/>
	24	<input type="checkbox"/>	<input type="checkbox"/>
	MEASURE IN INCHES		

Back Height (BH) & Seat to Floor Height (STFH)	In.	3 BH	In.	4 STFH
	15	<input type="checkbox"/>	15.5	<input type="checkbox"/>
	16	<input type="checkbox"/>	16.5	<input type="checkbox"/>
	17	<input type="checkbox"/>	17.5	<input type="checkbox"/>
	18	<input type="checkbox"/>	18.5	<input type="checkbox"/>
	19	<input type="checkbox"/>	19.5	<input type="checkbox"/>

Armrest Style	
Desk Length Arms	<input type="checkbox"/>
Full Length Arms	<input type="checkbox"/>
Flip Back	<input type="checkbox"/>
Detachable	<input type="checkbox"/>
Height Adjustable	<input type="checkbox"/>

Front Riggings	
Swing Away Footrest	<input type="checkbox"/>
Elevating Leg Rest (ELR)	<input type="checkbox"/>
Heel Loops	<input type="checkbox"/>
Articulating Leg Rest	<input type="checkbox"/>

Accessories	
Rear Anti-Tippers	<input type="checkbox"/>
Wheel Lock Extensions	<input type="checkbox"/>
Seat Cushion	<input type="checkbox"/>
Back Cushion	<input type="checkbox"/>
O2 Tank Holder	<input type="checkbox"/>