



# EQUALIZER

## RFP4 w/Suspension Base

### w/Medium Tilt - Group 3

Fax this MSRP Order Form  
Toll Free to **1-800-862-8782**  
Leisure-Lift, Inc.  
Effective May 2018

Phone: 1-800-255-0285  
www.pacesaver.com

Page 2 of 2

#### Dealer Account Information

**Please fill out all information completely**

Account No.: _____ PO#: _____ Dealer: _____ Address: _____ City, State, Zip: _____ Phone: _____ Fax: _____ Contact: _____ Date: _____	Ship to: _____ Address: _____ City/ST/Zip: _____ Phone: _____ Notes: _____ E-Mail Address: _____
--	---

## Equalizer Tilt Information *Continued*

<h4>FOOTPLATE OPTIONS</h4> <ul style="list-style-type: none"> <li><input type="checkbox"/> Center Column Footplate (<i>manual</i>) \$ 1000</li> <li><input type="checkbox"/> Center Column-Individ. Footplates(<i>pr</i>) \$ 1000</li> <li><input type="checkbox"/> Custom Footplate \$ 300</li> <li><input type="checkbox"/> Center Col. Footplate (<i>power</i>) \$ 1930</li> <li><input type="checkbox"/> Center Col.-Individ. Ftplates(<i>pr</i>) (<i>power</i>) \$ 2110</li> </ul> <hr/> <h4>LEG RIGGINGS</h4> <ul style="list-style-type: none"> <li><input type="checkbox"/> Elevating Legrest (high) \$180ea           <ul style="list-style-type: none"> <li><input type="checkbox"/> LH                      <input type="checkbox"/> RH</li> </ul> </li> <li><input type="checkbox"/> Elevating Legrest (low) \$180ea           <ul style="list-style-type: none"> <li><input type="checkbox"/> LH                      <input type="checkbox"/> RH</li> </ul> </li> <li><input type="checkbox"/> HD Elevating Leg Rests (L &amp; R) (<i>powered</i>) \$900ea</li> <li><input type="checkbox"/> HD Elevating Leg Rests (L &amp; R) (<i>manual</i>) \$550ea</li> <li><input type="checkbox"/> Amputee Support \$220ea</li> <li><input type="checkbox"/> Heel Straps (ea.) \$ 25</li> <li><input type="checkbox"/> ELR Knee Pads (<i>pr.</i>) \$ 80</li> <li><input type="checkbox"/> Footplate (when used with ELRs) \$200</li> <li><input type="checkbox"/> 1-Pc. Leg Pad (<i>manual</i>) \$700</li> <li><input type="checkbox"/> Thigh Supports (<i>Folding</i>) \$550pr.</li> <li><input type="checkbox"/> Thigh Supports (<i>Fixed</i>) \$300pr.</li> </ul> <hr/> <h4>ANTI-TIP OPTIONS</h4> <ul style="list-style-type: none"> <li><input type="checkbox"/> Center Mount (<i>manual</i>) \$500</li> <li><input type="checkbox"/> Anti-Tips (For custom footplate)           <ul style="list-style-type: none"> <li><input type="checkbox"/> 1"Offset (<i>pr</i>) \$ 80    <input type="checkbox"/> 3"Offset (<i>pr</i>) \$130</li> </ul> </li> <li><input type="checkbox"/> Stanza™ (<i>power</i>) Anti-tips \$700</li> <li><input type="checkbox"/> Stanza™ (<i>power</i>) Ctr Mt. Anti-tips \$700 <i>w. Individ. Footplates</i></li> </ul> <hr/> <h4>COMMENTS:</h4> <p>_____</p> <p>_____</p> <p>_____</p>	<h4>TILT ACCESSORIES</h4> <ul style="list-style-type: none"> <li><input type="checkbox"/> Rehab Headrest Pad (Reg.) \$170</li> <li><input type="checkbox"/> Rehab Headrest Pad (Lg.) \$190</li> <li><input type="checkbox"/> Rehab Headrest Mount Assembly \$180</li> <li><input type="checkbox"/> Rehab Headrest Mount (Bracket only) \$ 70</li> <li><input type="checkbox"/> Rehab Headrest Removable Cover \$ 60</li> <li><input type="checkbox"/> Admiral Headrest \$ 80</li> <li><input type="checkbox"/> 60" Long Lap Restraint Std.</li> <li><input type="checkbox"/> 74" Long Lap Restraint \$ 60</li> <li><input type="checkbox"/> Aircraft Type Lap Restraint \$ 70</li> <li><input type="checkbox"/> Lateral Thoracic Supports (<i>pr.</i>) (<i>not installed</i>) \$460 <i>(Factory installation requires Mounting Tracks)</i></li> <li><input type="checkbox"/> Mounting Tracks \$110</li> <li><input type="checkbox"/> Elbow Block (ea.) \$ 50           <ul style="list-style-type: none"> <li><input type="checkbox"/> Right Mounted    <input type="checkbox"/> Left Mounted</li> </ul> </li> </ul> <hr/> <h4>Dealer's Client Specifications</h4> <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> <p>Client Height _____</p> <p>Client Weight _____</p> <ul style="list-style-type: none"> <li>① Seat to Shoulder _____</li> <li>② Trunk Width _____</li> <li>③ Chest Width _____</li> <li>④ Knee to Back _____</li> <li>⑤ Seat to Top of Head _____</li> <li>⑥ Elbow to Hand _____</li> <li>⑦ Hip Width _____</li> <li>⑧ Knee to Heel _____</li> </ul> <p>Special Client Conditions _____</p> <p>_____</p> </div> <div style="flex: 1; text-align: center;"> </div> </div>
--	---

**WARRANTY:**

Please see literature for warranty information.

**NOTE:**

Prices may vary depending on location and dealer. Some part numbers may vary depending on option, color, model, or other factors. Option prices apply only when purchased with a Equalizer. **Please contact PaceSaver customer service to be sure of correct pricing and part numbers.** This price list supersedes all previous price lists.

Dealer: Address:



Phone: 1-800-255-0285  
www.pacesaver.com

City, State, Zip: Phone: Contact: **EQUALIZER**

## Boss 6NS Base

w/Heavy Duty Tilt - Group 2

Page 1 of 2

Fax this MSRP Order Form  
Toll Free to **1-800-862-8782**

Leisure-Lift, Inc.  
Effective May 2018

### Dealer Account Information

**Please fill out all information completely**

Dealer: \_\_\_\_\_ PO#: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, \_\_\_\_\_  
State, \_\_\_\_\_  
Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Ship to: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/ST/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Notes: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

## Power Base Information

<b>Model 82306</b> <input type="checkbox"/> <b>BOSS 6NS Power Base</b> <b>\$7,660</b> 550 lb. weight capacity, FWD, 13" Flat Free Tires, 7" MIR, Programmable, Removable/Height & Angle Adjustable Arms. No Suspension <b>K0826, K0839</b>	<b>MSRP Price</b> <b>\$7,660</b>	<b>BATTERIES</b> <input type="checkbox"/> Group 24 - 75 AMP (2 required) <b>\$340 ea</b>
<b>COLOR - MIRROR GLAZE™ (Check one)</b> <input type="checkbox"/> Blue <input type="checkbox"/> Red <input type="checkbox"/> Black		<b>OTHER ACCESSORIES &amp; OPTIONS</b>
<b>CONTROLLER (Check one)</b> <input type="checkbox"/> Right Hand Std. <input type="checkbox"/> Left Hand NC		<input type="checkbox"/> Basket - Folding <b>\$ 50</b> <input type="checkbox"/> Cup Holder <b>\$ 30</b> <input type="checkbox"/> Flag <b>\$ 50</b> <input type="checkbox"/> Front Bag <b>\$ 68</b> <input type="checkbox"/> Oxygen Cylinder Holder <b>\$150</b> <input type="checkbox"/> Privacy Flap <b>\$ 40</b> <input type="checkbox"/> Saddle Bag <b>\$ 40</b> <input type="checkbox"/> Cane Holder <b>\$ 16</b> <input type="checkbox"/> Tie Downs <b>\$170</b> <input type="checkbox"/> Weather Cover <b>\$200</b>
<b>CONTROLLER OPTIONS</b> <input type="checkbox"/> Integrated (2 Functions) <b>\$300</b> <input type="checkbox"/> Retractable <b>\$200</b> <input type="checkbox"/> Attendant <b>\$600</b> <input type="checkbox"/> Rear Mounted Joystick <b>\$100</b> <input type="checkbox"/> 4-Actuator module <b>\$480</b> <input type="checkbox"/> DX2 w/Color Display <b>\$1350</b>		

## HD Equalizer Tilt Information

<input type="checkbox"/> <b>Equalizer Tilt "B" System-30564</b> <b>\$4,600</b> <i>(required for all Heavier Tilt Systems)</i>	<b>SEAT CUSHION TYPE</b> <input type="checkbox"/> General Purpose (non-coded) seat cushion <input type="checkbox"/> 26" <input type="checkbox"/> 28" <input type="checkbox"/> 30" wide <b>\$140</b> <input type="checkbox"/> Wider than 30" <b>\$160</b> <input type="checkbox"/> None
<input type="checkbox"/> <b>Medium Tilt Option (450# max)-30566</b> <b>\$2,595</b> <input type="checkbox"/> <b>Large Tilt Option (550# max) - 30565</b> <b>\$2,895</b>	<b>BACK HEIGHT (above solid pan)</b> <input type="checkbox"/> Back Height (Adj.:19" - 27") <b>Std.</b> <input type="checkbox"/> Custom Cane Ht. _____" <b>\$200</b> <i>(no shorter than 13" - Standard gap is 5")</i> (Top of seat pan to top of back _____")
<b>FRAME WIDTH (Check One)</b> (outside to outside of frame tubes) - 2" increments <input type="checkbox"/> 22" <input type="checkbox"/> 24" <input type="checkbox"/> 26" <input type="checkbox"/> 28" <b>Std.</b> Custom Size _____ (No wider than 30") <b>\$200</b>	<b>ARMPAD TYPE (Choose One)</b> <input type="checkbox"/> 11" upholstered w/flat top (pair) <b>NC</b> <input type="checkbox"/> 14" upholstered w/flat top (pair) <b>Std.</b> <input type="checkbox"/> 11"/14" upholstered w/flat top (1ea.) <b>NC</b> (specify handing (L) ___ (R) ___)
<b>FRAME DEPTH</b> <input type="checkbox"/> Depth 18" - 26" (specify size _____") <b>Std.</b>	<b>ADMIRAL SEAT - Not Available on HD Tilt</b>
<b>SEAT PAN</b> <input type="checkbox"/> Solid seat pan (1/4" ABS-24" x 24") <b>Std.</b> <input type="checkbox"/> Custom Size _____ <b>NC</b> <input type="checkbox"/> Omit seat pan <b>NC</b>	
<b>SEAT BACK (Contoured back - 17" high)</b> Width: <input type="checkbox"/> 22" <input type="checkbox"/> 24" <input type="checkbox"/> 26" 2" increments <b>Std.</b> <input type="checkbox"/> Custom (specify size _____") (No wider than 30") <b>\$200</b> <input type="checkbox"/> Gluteal Shelf (GPS) <b>\$160</b> <input type="checkbox"/> Endomorphic (off-set back canes) <b>\$170</b> <input type="checkbox"/> 2" narrower than seat <input type="checkbox"/> 4" narrower than seat	