



Order Date: \_\_\_\_\_ Purchase Order Number: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 E-Mail Address for Confirmation: \_\_\_\_\_

**BILL TO:** Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Suite No: \_\_\_\_\_  
 City/Province: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_  
 Attention: \_\_\_\_\_  
 Canadian Customers TAX ID# \_\_\_\_\_  
 (Canadian Revenue Business Number)

**SHIP TO:** Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Suite No: \_\_\_\_\_  
 City/Province: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_  
 Contact Name/Number: \_\_\_\_\_  
 Dock: YES or NO \_\_\_\_\_

### EVACUATION CHAIRS

EVAC+CHAIR<sup>®</sup> 300H  
 EVAC+CHAIR<sup>®</sup> 400H  
 EVAC+CHAIR<sup>®</sup> 500H (500 lb)  
 EVAC+CHAIR<sup>®</sup> 600H  
 EVAC+CHAIR<sup>®</sup> IBEX<sup>®</sup> 700H  
 EVAC+CHAIR<sup>®</sup> 750H  
 EVAC+CHAIR<sup>®</sup> POWER 800  
 EVAC+CHAIR<sup>®</sup> POWER 900  
 CarryLite Transit Chair 200H

QTY ORDERED	UNIT PRICE	EXT. PRICE
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$

### ACCESSORIES/PRODUCTS

Replacement Vinyl Dust Cover  
 Comfy Seat  
 EVAC+ALARM<sup>®</sup> Anti-Theft device  
 EVAC+CHAIR<sup>®</sup> Patient Carrier Seat  
 Ulti-Mat  
 Rescue Sheet  
 Evac+Sled  
 EVAC+CHAIR<sup>®</sup> Flatpack Cabinet  
 Replacement Battery  
 Replacement Charger  
 In Person Training  
 Online Training  
 Other *(Please specify)* \_\_\_\_\_

@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$
@	\$	\$

Shipping & Handling Charges  
 Sales Tax

**Total Charges (CANADIAN DOLLARS)**

\$

If paying by credit card the billing address must match the credit card used.

Special instructions/Comments  
**NOTE: ORDER IN CANADIAN DOLLARS**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Card Number \_\_\_\_\_  
 Cardholder Name \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ CSV# \_\_\_\_\_  
 Card Type (Visa, MasterCard, Amex) \_\_\_\_\_

**RETURNED INVENTORY POLICY:** Goods may be returned \* within 30 days of invoice date if they do not meet evacuation requirements. Customer is responsible for cost of freight to return goods to Evac+Chair North America LLC. A restocking fee of 20% will apply. Customer will also be charged for cost of any required repairs and replacement of any missing items. Customer must receive a returned goods authorization number from Evac+Chair North America LLC before goods will be accepted. \* Customer must retain all original packaging material.

