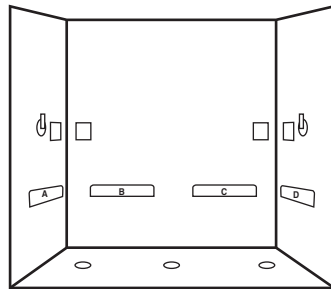


**ACCESSABATH SYSTEM ORDER FORM - PAGE 1 OF 2**

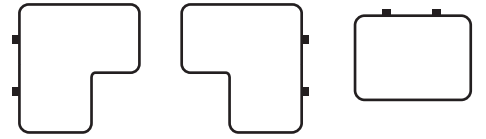
**AB-6030BF AccessaBath Wheel Chair Access System \$2,395\***



Shown above is our Model AB-6030BF wheel chair accessible system with a left drain location.



**Instructions:** In the above schematic, please indicate your desired locations of the soap dish and shower pan drain.



Left hand return    Right hand return    Rectangular

**AB-6030BF Components**

| DESCRIPTION   | ITEM #  | SPECIFICATIONS   | INDICATE DESIRED OPTIONS |
|---|---|--|--------------------------|
| AmeriWall Shower Enclosure<br>With or Without A Molded In Soap Dish | 603072SA  | 60"w x 30"d x 71 1/4"h   |                          |
| Barrier-Free Shower Pan   | AB-6030BF-L (Left Drain)<br>AB-6030BF-R (Right Drain)             | 60 3/8"w x 30"d  |                          |
| Barrier-Free Ramp   | FBF-1260  | 60"w x 12"d  | N/A                      |
| Flexible Threshold  | BF-FT   | 60"w x 1 1/4"d x 1"h   | N/A                      |
| Folding Rectangular or<br>Folding L-Shape Seat                      | SSB-1801<br>SSL-235225 (Left Return)<br>SSR-235225 (Right Return) | 18" x 15" (Mount in position A,B,C or D)<br>23 1/2" x 22 1/2" (Mount in position A or C)<br>23 1/2" x 22 1/2" (Mount in position B or D) |                          |
| Shower Wand   | 75800   | 20" Adjustable Hand Held<br>Shower Wand  | N/A                      |
| Pressure Balanced, Scald Guard,<br>Mixing Valve & Trim Kit          | R10000<br>T113420   | Mixing Valve<br>Trim Kit   | N/A                      |
| Satin Stainless Steel Grab Bars (2)                                 | GSS-180 or GSS-240<br>GSS-360                                     | (1) 18" or 24" Grab Bar<br>(1) 36" Grab Bar  |                          |

NOTE: Final height and width dimensions of the delivered product shall be within reasonable tolerances of the quoted height and width dimensions  
 \* Price does not include sales tax or freight charges, and is subject to change without notice

**ACCESSABATH SYSTEM ORDER FORM - PAGE 2 OF 2**

**PURCHASE ORDER FORM**

**PO #** \_\_\_\_\_

|   |   |
|---|---|
| <b>SOLD TO</b><br>_____<br>_____<br>_____<br>TEL _____ FAX _____<br>E-MAIL: _____ | <b>SHIP TO</b><br>_____<br>_____<br>_____<br>TEL _____<br>E-MAIL: _____ |
|---|---|

| QTY | DESCRIPTION | COST | EXTENDED |
|-----|-------------|------|----------|
|     |             |      |          |
|     |             |      |          |
|     |             |      |          |
|     |             |      |          |
|     |             |      |          |

**Pre-Payment Required:**

Visa, Master Card, Cashier's Check or Bank Wire Transfer

15% Re-stocking fee may apply to some return orders

**Payment information:**

Visa \_\_\_\_ M/C \_\_\_\_ Expires \_\_\_\_ Sec Code \_\_\_\_

Card number: \_\_\_\_\_

Name as it appears on card  
 \_\_\_\_\_

Billing address if different from above  
 \_\_\_\_\_

**Box charge:** \_\_\_\_\_

**Sub Total:** \_\_\_\_\_

**Sales Tax:** \_\_\_\_\_

**Shipping:** \_\_\_\_\_

**TOTAL:** \_\_\_\_\_

Commercial Delivery: \_\_\_\_\_

Residential Delivery: \_\_\_\_\_

Will Call: \_\_\_\_\_