

# HAULWAY™ Scooter & Power Chair Lift


## Ordering Checklist




Please complete the following information before quoting or ordering equipment.

Customer Name			Today's Date	
Customer Address		City		State
Phone	Cell Phone	Email		


**Mobility Device**



3-Wheel Scooter



4-Wheel Scooter



Power Chair

**Mobility Device Details**

Make \_\_\_\_\_ Model \_\_\_\_\_ Weight \_\_\_\_\_ pounds

Wheelbase (if known) \_\_\_\_\_ inches Dimensions (L x W) \_\_\_\_\_ inches \_\_\_\_\_ inches

**Hitch**

Does your vehicle currently have a hitch?  Yes Class \_\_\_\_\_  No *Product requires a hitch, please contact a local hitch installer*

Hitch Height (Working distance from ground) \_\_\_\_\_ inches *If distance is greater than 17.5", drop L-tube is required*

**Tongue Weight Capacity**

\_\_\_\_\_ + \_\_\_\_\_ < 300 pounds = Class II

Weight of Mobility Device                      Weight of Lift

\_\_\_\_\_ + \_\_\_\_\_ < 500 pounds = Class III

Weight of Mobility Device                      Weight of Lift

**Ordering Equipment**

*Follow these easy steps to select your perfect setup*

<p><b>STEP 1: Choose the main unit</b></p> <p><input type="checkbox"/> Lite</p> <p><input type="checkbox"/> Standard</p> <p><input type="checkbox"/> Heavy Duty (Universal Tray)</p>	<p><b>STEP 2: Select tray configuration</b></p> <p><input type="checkbox"/> 3-Wheel (1 center tray)</p> <p><input type="checkbox"/> 4-Wheel (2 side trays)</p> <p><input type="checkbox"/> Deluxe (center and side trays)</p> <p><input type="checkbox"/> Power Chair (2 wide side trays)</p> <p><input type="checkbox"/> Power Chair Deluxe (center and wide side trays)</p> <p><input type="checkbox"/> Universal (Only available on HD)</p>	<p><b>STEP 3: Select <u>optional</u> equipment</b></p> <p><input type="checkbox"/> Standard Swingaway</p> <p><input type="checkbox"/> Heavy Duty Swingaway</p> <p><input type="checkbox"/> Scooter Cover</p> <p><input type="checkbox"/> Power Chair Cover</p>
--	--	--