

## Wheelchair Mounting Details

### Requested by Client

Organisation \_\_\_\_\_ Name \_\_\_\_\_  
 Name \_\_\_\_\_ DOB \_\_\_\_\_ Diagnosis \_\_\_\_\_

### Wheelchair

Manufacturer/Model \_\_\_\_\_  
 Type of chair Manual  Power  How does user drive the chair? \_\_\_\_\_  
 Diameter of frame tubing mount to be fixed to \_\_\_\_\_  
 Shape of frame tubing (eg round, oval, square) \_\_\_\_\_  
 A tray gets attached to the chair? Yes  No

### Device

Manufacturer/Model \_\_\_\_\_  
 Is a device adapter plate required? Yes  No   
 For iPad users, please specify exact iPad model eg. iPad 9.7 \_\_\_\_\_  
 Will the iPad be mounted in a protective case? Yes  No

### Mount side (facing front of wheelchair)

Right  Left  No preference

### Handles for tool-less adjustment

Yes (with QuickShift levers)  No (with screws)

### Any additional notes/considerations

(eg additional equipment on chair, uncontrolled movements/behaviours, environmental considerations)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Photos required

Please take pictures of the wheelchair in the listed viewing angles shot from a straight low angle. Depict the wheelchair clearly, in proper light conditions and with correct focus. Include device at the desired position eg. dummy sheet of paper

