



SpaBath Configurator

Order Number _____

Account Executive _____

Customer Name _____

*Customer Signature _____ Date: _____

Installation Location _____

First SpaBath at This Location? (Yes or No) _____

Requested Delivery Date _____

Lift Gate Needed for Delivery? (Yes or No) _____

Item # _____ Quantity _____

- 1) Lift accessible front service valance is standard.
- 2) If SpaBath is replacing an existing Freedom Bath, which model Generation? _____
 - a) I – Wall-Mounted Water Controls, drain on right (foot end)
 - b) II – Integrated Water Controls, Drain and Water Lines on Left (Seat End)
 - c) III – Integrated Water Controls, Drain and Water Lines on Left (Seat End)
 - d) NOTE: Generation II and III may have been installed with a retro fit kit
- 3) To avoid order confusion, please attach a photo(s) of the model being replaced noting drain, water and electrical service locations. Photo(s) attached? (Yes or No) _____
- 4) SpaBath drain and water service is on right (foot end) and electrical service is on left (seat end). Is a Freedom Bath Retro Fit Kit required to adapt to existing drain, water and electrical service? (Yes or No) _____
- 5) Are side or back panels required? (Yes or No)

Left (seat end) _____ Back _____ Right (foot end) _____
- 6) An Alcove Trim Kit is required to cover SpaBath nail flanges that will not be covered with wall covering (tile, trim, etc.) or a panel. Alcove Trim Kit required?

Left (seat end) _____ Back _____ Right (foot end) _____
- 7) Therapeutic option required (aromatherapy and chromatherapy)? (Yes or No) _____

8) Special instructions: _____

*Customer Signature required to confirm acceptance of terms regarding Assembly and connection program.

- ❖ **This service includes placing the bath on site and connecting the water supply and drain as per the manufacturers rough ins.**
- ❖ **Unity-Healthcare Solutions and Spa Bath Corporation cannot be responsible for relocating water supply or relocating Drain to accommodate assembly and connection.**
- ❖ **Unity-Healthcare Solutions and Spa bath Corporation cannot be responsible for removal and disposal of existing bath.**

Please email completed form back to Renee Gottsch at: rg@unity-healthcare.com

or

Fax: 303-838-4550