

BIDET EVALUATION CHECKLIST

Client Details

NAME	ADDRESS
PHONE	SUBURB
EMAIL	POSTAL CODE
CLIENT HEIGHT / WEIGHT	STATE
ADDITIONAL INFORMATION	

Funding Body Details

DVA
 NDIS
 HOME CARE PACKAGE
 OTHER

DVA FILE NUMBER NDIS NUMBER

PLAN START DATE PLAN FINISH DATE

DOB FUNDING GROUP

EMAIL

Prescribing Therapist Details

NAME

PHONE

EMAIL

SUBURB

POST CODE STATE

Toilet Measurements

A MM A1 MM B MM

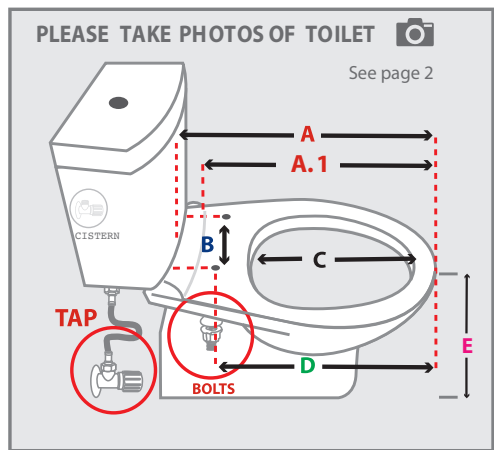
C MM D MM E MM

WHERE IS THE WATER TAP LOCATED?
 ON WALL
 CISTERN

ACCESS TOILET SEAT BOLTS FROM:
 UNDERNEATH
 NO ACCESS

IS THERE ACCESS TO A POWERPOINT?
 YES
 NO

IS THERE TANK WATER IN USE?
 YES*
 NO



Order Form Please tick if required

RAISERS
 50MM
 80MM
 ARMS
 BARIATRIC
 3IN1
 ENDEAVOUR

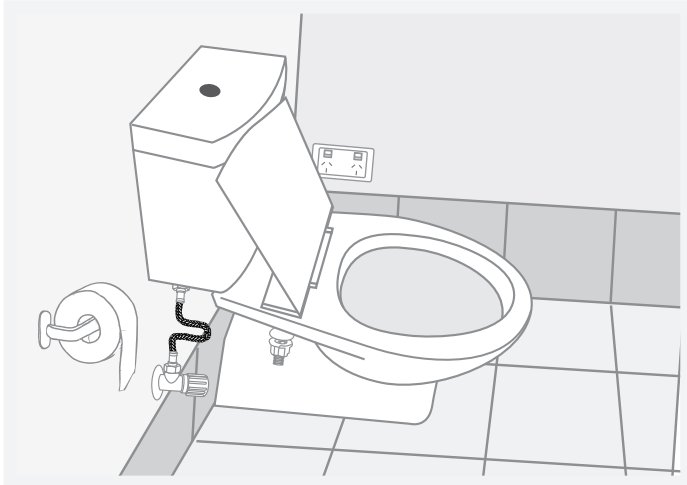
Hiline to recommend best fit
 Inteliclean 9000 (no RPZ required)
 National N 2000 (no RPZ required)

Coway
 BA08 ONLY Tamper Proof Holder
 BA08/BA13 ONLY 3 Way Foot or Hand Control

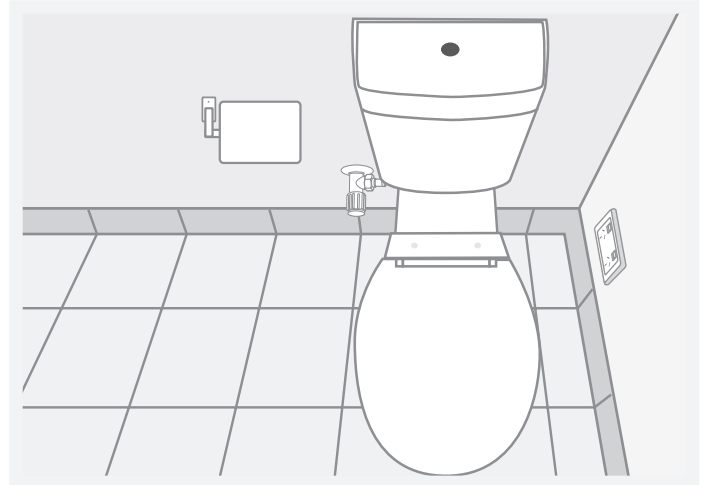
*If using tank water please provide a photo of the pump.

PHOTO GUIDE - Below are examples of photos needed

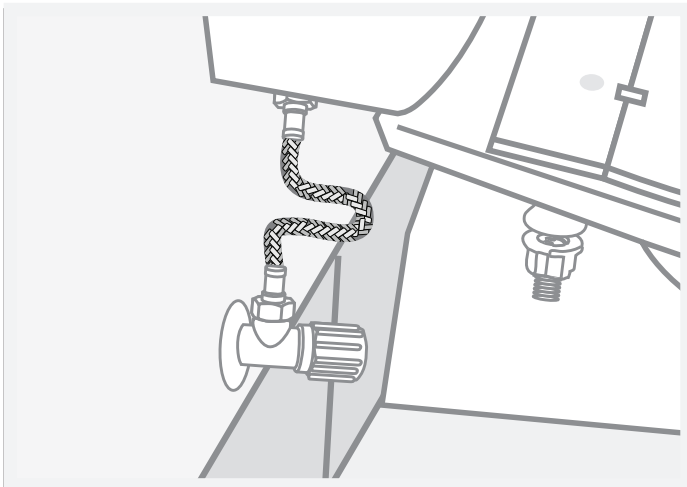
Toilet Area



Above Toilet



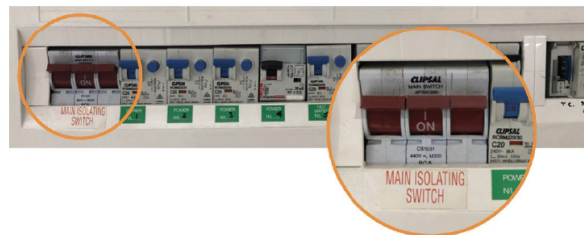
Water Tap



Fitting Measurements Needed

- (A) Front (centre) of cistern to front (centre) of bowl
- (B) Centre to centre of bolt holes
- (C) Back (inside centre) to front (inside centre) of bowl
- (D) Bolt holes to front of bowl
- (E) Measure from the floor to top of toilet bowl
- (A.1) If toilet bowl is not at all the way to the cistern (lip) measure from the lip to front (centre) of bowl.

Safety Switch (Please take a photo(s) of safety switch)



INSTALLATION AND PLUMBING

WARNING: THIS TOILET DOUCHE SEAT MUST BE INSTALLED WITH APPROPRIATE BACKFLOW PROTECTION CONFORMING TO THE NATIONAL CONSTRUCTION CODE - VOLUME THREE.