

## 2022 QUARTERLY SPIFF CLAIM FORM

Please submit once per quarter. Claim forms must be received by the 10<sup>TH</sup> of the month following the end of the quarter (Q1 ends in March, form must be submitted by April 10<sup>th</sup>).

To Qualify for the SPIFF program, you must be employed by an authorized dealer<sup>1</sup>, submit a registration form and a W-9 (attached). SPIFF is awarded in the form of a check, and is payable within a month<sup>2</sup>.

#### **Eligible Products<sup>3</sup> and Spiff Amounts:**

Category	SPIFF Amount	SPIFF for 12+ Sales per category
Fireclay Kitchen Sinks	\$25	\$40
Granite-Composite Kitchen Sinks	\$25	\$40
Stainless Steel Kitchen Sinks	\$15	\$25

Payee Information (please fill out completely. If the information has change, please resubmit a registration form)

Legal Name:		
Mailing Address:		
Date:		
Company:		
Email:		
Your SPIFF Account Number:		

Please fill out completely to make sure your SPIFF is processed in a timely manner.

Item Code	Qty	P.O. #	Spiff Claim Amount
		TOTAL:	

Fax (973) 279-8987 or email to <a href="mailto:spiff@empire-industries.com">spiff@empire-industries.com</a>

- 1. If dealer is not in good standing, Empire reserves the right to delay or cancel the SPIFF payment.
- 2. Payment will be for items already invoiced by Empire.
- 3. Unless noted otherwise, P.O.s with special discounts are not eligible for SPIFF



# **SPIFF REGISTRATION FORM**

This form only needs to be filled out if it's your first claim or if you're updating your information.

	□ NEW	☐ UPDAT	ED INFORMAT	TION	
PERSONAL INFORMATION					
Legal Name (No Nicknames	):				
Home Address:					
	(Street)	(Apt#)	(City)	(State)	(Zip Code)
Company Email:					
Personal Email:					
Social Security Number:					
Company Information					
Company Name:					
Branch / Location:					
Company Address:					
	(Street)	(Apt#)	(City)	(State)	(Zip Code)
Company Telephone:			EX	Т:	
If this is your first submission or if your address and/or legal name has changed, please fill and sign the W-9 form. W-9 form is on the following page.					
FOR EMPIRE INDUSTRIES O	FFICE USE				
Sale Consultant Account Nu	ımber:				

Fax (973) 279-8987 or email to <a href="mailto:spiff@empire-industries.com">spiff@empire-industries.com</a>

Program subject to change without prior notice



### **Request for Taxpayer Identification Number and Certification**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	2 Business name/disregarded entity name, if different from above		
page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Che following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
e. ins or	Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	☐ Trust/estate	Exempt payee code (if any)
t de la compa	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partners	ship) ►	
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member ow LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the or another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any)	
cifi	Other (see instructions)		(Applies to accounts maintained outside the U.S.)
Spe		Requester's name a	nd address (optional)
See			
•	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		
Par	t I Taxpayer Identification Number (TIN)		
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid Social sec	urity number
reside	up withholding. For individuals, this is generally your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to get</i>		] - [ ] - [ ]
TIN, la	ater.	or	
	If the account is in more than one name, see the instructions for line 1. Also see What Name a	nd Employer	identification number
Numb	per To Give the Requester for guidelines on whose number to enter.		-
Par	t II Certification		
Unde	r penalties of perjury, I certify that:		
2. I ar Ser	e number shown on this form is my correct taxpayer identification number (or I am waiting for a n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest o longer subject to backup withholding; and	I have not been no	otified by the Internal Revenue
3. I ar	m a U.S. citizen or other U.S. person (defined below); and		
4 The	PATCA code(s) entered on this form (if any) indicating that I am exempt from EATCA reporting	n is correct	

The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid,

Sign Here	Signature of	Date ▶
		not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.
acquisition	n or abandonment of secu	operty, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments

## **General Instructions**

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

#### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN). individual taxpaver identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,