



spiff enrollment

Spiff Program Dealer Salesperson Enrollment

For every standard izzy+ product sold at standard dealer discount, izzy+ will pay you a 3% SPIFF! To sign up for participation in the Spiff program, simply complete this form along with your completed W9 form, and email back to us at icare@izzyplus.com.

Spiff Recipient Name: _____

Dealership Name: _____

Address (street): _____

(city, state, zip): _____

Phone: _____ Email: _____

W-9/ Tax ID Information: _____

To make sure you receive your izzy+ SPIFF payment:

We require that you indicate on your qualifying purchase order your request for SPIFF payment.

To ensure the proper processing of payment, please indicate on the order "izzy+SPIFF plus your name."

Example: **izzy+SPIFF, Jane Thomas**

Or send an e-mail to the applicable Customer Service Department at the time we receive your dealership's PO, requesting "izzy+ SPIFF," plus your name be added to the purchase order.

Checks will be issued the month following the month of shipment.