

# Employer Remittance Report

## INSTRUCTIONS

Thank you for your timely submission of the *Employer Remittance Report* and payment. Please make checks payable to Carpenters Trusts of Western Washington. Contact Employer Services at Carpenters Trusts in Seattle with your questions or concerns: (206) 441-6514 or employerservices@ctww.org.

1. Your report and payment must be submitted by the 15th of the month following the month in which the work is performed.
2. You must include hours for the payroll period closing nearest the first of the month.
3. The carpenters pre-populated on the report are those carpenters your company reported for the previous month.
4. If a carpenter listed on the report did not work during this month, enter "0" under "Hours Worked" or cross out his or her name.
5. If you had a carpenter work during this reporting period whose name was not pre-printed on the report, please add him or her to the report.
6. If no carpenters covered by a collective bargaining agreement worked for you during this reporting period, please report "None."
7. Before submitting your report and payment, please complete all fields in the signature section at the bottom left side of this report – even if you are using your own report. This information allows us to contact you directly with any questions related to this report.
8. Please include the total hours and contribution amounts for all carpenters listed on this report in the totals section on the bottom right side of this report. If you are filing this report electronically, these fields will be auto-filled. Please contact Employer Services at Carpenters Trusts for soft copy versions of the report and/or instructions on how to file electronically.
9. Reports received after the 15th of the month may be subject to interest and liquidated damages.

## HEADER DESCRIPTIONS

**Company Name and Address** – The company name and address in this field reflect the current information on file with Carpenters Trusts. If this information is inaccurate, please make changes directly on this form or send a separate update notice.

**Company ID** – Created by Carpenters Trusts to group all Location IDs/Locations related to your company.

**Location ID & Location** – Created by Carpenters Trusts to specify the project name, geographic location or type of work related to your collective bargaining agreement.

**Agreement ID** – Created by Carpenters Trusts to indicate the collective bargaining agreement which governs the terms and conditions of work related to your Location ID/Location.

**Contract ID** – Created by Carpenters Trusts to specify the benefit funds and corresponding rates related to your Location ID/Location.

**Remittance ID** – Created by Carpenters Trusts to specify the expected reporting month and applicable Contract ID for your Location ID/Location. Each code is unique to each reporting period.

**Lockbox Information** – The mailing address in this field is the lockbox depository where your monthly report and payment should be mailed. Please note: If you do not use this form, please include your "Location ID" and "Remittance ID" on your payment.

## REPORTING FIELDS (Only the fields applicable to your report will appear on your report.)

**Employee Name/Birthdate/SSN** – Provide the last name, first name, date of birth, and social security number for each carpenter who worked for you during this payroll period.

**Hours Worked** – Enter the number of hours worked by each carpenter during the payroll period applicable to the reporting month. Do not include sick, holiday or vacation hours.

**Dues** – Enter the dollar amount that was deducted from each carpenter's paycheck for union dues. See "Schedule A" of your collective bargaining agreement for applicable rates. If you have questions about how to compute and/or report union dues deductions, please contact the Pacific Northwest Regional Council of Carpenters at (800) 573-8333.

**401(k)** – Enter the dollar amount corresponding to the contribution rate (\$1.00/hour, \$2.00/hour, \$3.00/hour, or \$4.00/hour) elected by the carpenter. This information may be obtained from the carpenter's dispatch slip or by contacting Carpenters Trusts at (206) 441-6514. If \$0, please leave this field blank.

**For the following funds**, you may leave the fields blank *unless* the number of hours to be contributed to these funds is different than what was listed in the "Hours Worked" field. If your agreement with the union does not require that you contribute to a specific fund for all or some of the hours worked by a carpenter, please enter either zero (0) or the number of hours you intend to remit.

**H&S** – Carpenters Health and Security Plan.

**RETIRE** – Pension contribution that will be applied to the Carpenters Retirement Plan and/or the Carpenters Individual Account Pension Plan based on rules established by the collective bargaining agreement.

**VAC** – Carpenters-Employers Vacation Plan.

**APPR** – Carpenters Employers Apprenticeship and Training Trust of Washington and Idaho.

**MCED** – Mandatory Continuing Education Requirement which is applicable to some collective bargaining agreements. It requires that a supplemental contribution be made to the Apprenticeship Training Trust on behalf of Journeymen who have not met certain training requirements. This contribution should be made in lieu of an increase to the journeyman wage, and should be reported separately from the regularly billed Apprentice Training Fund rate. Please enter zero (0) in this field if a carpenter is not a Journeyman or Foreman, or if a carpenter is a Journeyman or Foreman who has successfully completed the training requirement. If you have questions about whether a Journeyman or Foreman has met the Mandatory Continuing Education Requirement and is therefore exempt from making this supplemental apprenticeship contribution, please contact the Pacific Northwest Regional Council of Carpenters at (800) 573-8333.

**WCISAP** – Washington Construction Industry Substance Abuse Program. The AGC of Washington established WCISAP as a 501(c)(9) Trust Fund. It is administered by CleanWorkForce, a subsidiary of WPAS, Inc. CleanWorkForce can be reached at (866) 842-9223.

**IND** – Carpenters Industry Fund which is applicable to some collective bargaining agreements.

**DAVISB** – Refers to the Davis-Bacon Act. Please enter the number of hours worked on federally-funded projects covered by the Davis-Bacon Act.