Notice and Acknowledgement of Pay Rate and Payday
Under Section 195.1 of the New York State Labor Law
Notice for Employees Paid a Weekly Rate or a Salary for a Fixed Number of Hours (40 or Fewer in a Week)

1. Employer Information

Name:

Doing Business As (DBA) Name(s):

FEIN (optional):

Physical Address:

Mailing Address:

Phone:

2. Notice given:

☐ At hiring
☐ On or before February 1
☐ Before a change in pay rate(s), allowances claimed or payday

3. Employee’s Pay Rate:

$ ___________ per _________

Weekly hours _______ (Specify the number of hours for which the weekly rate or salary will be paid.)

Employers may not pay a non-hourly rate to a non-exempt employee in the Hospitality Industry, except for commissioned salespeople.

4. Allowances taken:

☐ None
☐ Tips _______ per hour
☐ Meals _______ per meal
☐ Lodging _______
☐ Other __________________

5. Regular payday: __________________

6. Pay is:

☐ Weekly
☐ Bi-weekly
☐ Other

7. Overtime Pay Rate:

$ _______ per hour (This must be at least 1½ times the worker’s regular rate, with few exceptions.)

8. Employee Acknowledgement:

On this day, I have been notified of my pay rate, overtime rate (if eligible), allowances, and designated payday. I told my employer what my primary language is.

Check one:

☐ I have been given this pay notice in English because it is my primary language.

☐ My primary language is_______________. I have been given this pay notice in English only, because the Department of Labor does not yet offer a pay notice form in my primary language.

______________________________
Print Employee Name

______________________________
Employee Signature

______________________________
Date

______________________________
Preparer Name and Title

The employee must receive a signed copy of this form. The employer must keep the original for 6 years.