Notice and Acknowledgement of Pay Rate and Payday
Under Section 195.1 of the New York State Labor Law
Notice for Exempt Employees

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(s): State if pay is based on an hourly, salary, day rate, piece rate, or other basis.

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:
   Most workers in NYS must receive at least 1½ times their regular rate of pay for all hours worked over 40 in a workweek, with few exceptions. A limited number of employees must only be paid overtime at 1½ times the minimum wage rate, or not at all.

   This employee is exempt from overtime under the following exemption (optional): ________

8. Employee Acknowledgement:
   On this day, I received notice 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.