WE ARE YOUR DOL

NEW YORK STATE of Labor

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

1. Employer Information	3. Employee's rate of
Name:	\$ per
Doing Business As (DBA) Name(s):	4. Allowances taken: None Tips Meals Lodging
FEIN (optional):	Other
Physical Address:	5. Regular payday: 6. Pay is: Weekly
Mailing Address:	Bi-weekly
Phone:	7. Overtime Pay Rate \$ per hour (7 1½ times the worker few exceptions.)

2. Notice given:

At hiring

Before a change in pay rate(s), allowances claimed or payday

3.	<pre>Employee's rate of pay: \$ per hour</pre>			
4.	Allowances taken None Tips Meals Lodging	per hour _ per meal		
5. Regular payday:				
6.	Pay is: Weekly Bi-weekly Other			
7.	7. Overtime Pay Rate:			

This must be at least

's regular rate with

8. Employee Acknowledgement:

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

Check one:

 \Box 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's Name and Title

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

Please note: It is unlawful for an employee to be paid less than an employee of the opposite sex for equal work. Employers also may not prohibit employees from discussing wages with their co-workers.