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

Name:

Doing Business As (DBA) Name(s):

FEIN (optional):

Physical Address:

Mailing Address:

Phone:

2. Notice given:

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

3. Employee’s rate of pay:

$ ___________ per hour

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 pay day on the date given below. 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’s Name and Title

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