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.

__________________________________________
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.