

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	

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

3. Employee's pay rate(s): State if pay is based on an hourly, salary, day rate, piece rate, or other basis.	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.
Employers may not pay a non-hourly rate to a non-exempt employee in the Hospitality Industry, except for commissioned salespeople. 4. Allowances taken:	Check one: I have been given this pay notice in English because it is my primary language.
☐ None ☐ Tips per hour ☐ Meals per meal ☐ Lodging ☐ Other	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.
5. Regular payday:	Print Employee Name
6. Pay is: Weekly Bi-weekly Other:	Employee Signature Date
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.	Preparer Name and Title The employee must receive a signed copy of this form. The employer must keep the original for 6 years.
This employee is exempt from overtime under the following exemption (optional):	