



New York State Department of Labor  
Division of Labor Standards

Notice and Acknowledgement of Pay and Payday for Hourly Rate Employees

Employer Information

Name:

Doing Business As (DBA) name(s):

FEIN:

Physical Address:

Mailing Address:

Phone:

Employee's rate (s) of pay:

\$ \_\_\_\_\_ per \_\_\_\_\_  
\$ \_\_\_\_\_ per \_\_\_\_\_  
\$ \_\_\_\_\_ per \_\_\_\_\_

Allowances taken:

- None
- Tips \_\_\_\_\_ per hour
- Meals \_\_\_\_\_ per meal
- Lodging \_\_\_\_\_
- Other \_\_\_\_\_

Regular payday: \_\_\_\_\_

Pay is:

- Weekly
- Bi-weekly
- Other

Overtime Pay Rate:

\$ \_\_\_\_\_ per hour (This must be at least 1 ½ times the workers' regular rate with few exceptions.)

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 true primary language is.

Check one:

- I accepted this pay notice in English, because it is my primary language.
- My primary language is \_\_\_\_\_. I accepted this pay notice in English because the Department of Labor does not yet offer a pay notice form in this language on its web site.

\_\_\_\_\_  
Print Employee Name

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Preparer Name and Title

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

Notice given:

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