1. Temporary Help Firm Information
   Name:
   Doing Business As (DBA) Name(s):
   FEIN (optional):
   Physical Address:
   Mailing Address:
   Phone:

2. Notice given:
   □ At hiring
   □ Before a change in pay rate (s),
     allowances claimed or pay day

3. Payday (check one):
   □ Regular payday:______________
   □ Unknown: The payday is based on
     the payday of the assigned
     organization.

4. Rate of Pay (check one):
   □ Average Wage Rate Range for
     Assignment(s):________________
   □ Employee’s rate (s) of pay:
     $_________ per ________
     $_________ per ________
     $_________ per ________

5. Allowances taken:
   □ None
   □ Tips _______ per hour
   □ Meals _______ per meal
   □ Lodging ____________________
   □ Other ______________________

6. Pay is:
   □ Weekly
   □ Bi-weekly
   □ Other: ______________________

7. Overtime Pay Rate: $______ per hour
   For most workers in NYS this rate must
   be at least 1 ½ times the regular rate of
   pay, for all hours worked over 40 per
   workweek (44 hours for certain
   residential employees). The Temporary
   Help Firm should count all hours worked
   in all assignments during a workweek.
   Some assignments are only required to
   receive overtime pay at 1½ times the
   minimum wage. When you receive your
   assignment, your employer will tell you
   the overtime rate and the reason why if
   you are not eligible for overtime for that
   assignment.

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 only, because my primary language
     is English.
   □ 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
   Applicant/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.

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.