

**New York Labor Law Section 195(1)
Mandatory Notice and Acknowledgement of Wage Rate and Designated Payday**

Employer/Production Co. Name _____
Physical address _____ City _____ State _____ Zip _____
Mailing address _____ City _____ State _____ Zip _____
Phone (____) ____ - _____ **Employer of Record:** Extreme Reach Crew Services
1633 Broadway, 5th Floor, New York, NY 10019

Employee: Name _____ Your Job/Occupation Category is: _____
Project Name/# _____ Work Start Date _____

Non-Exempt Employees : Your rate of pay is: \$ _____ per hour.
Your rate of pay is: \$ _____ per hour.
Your rate of pay is: \$ _____ per hour.

Weekly Overtime : Your overtime rate of pay is: \$ _____ per hour.
(Overtime rate must be at least 1½ times the worker's regular rate, to be paid after 40 regular hours in work week.)
----- **OR** -----

Daily Overtime: Daily after _____ hours \$ _____ per hour, and after _____ hours \$ _____ per hour and for all hours over 40 weekly.

IF working under union contract: Other terms and conditions per CBA Agmt/Local _____

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.

Exempt Employees: Employee's pay rate(s): State if pay is based on an hourly, salary, day rate, or other basis. Contact your local union business representative for more information on non-exempt position.

This employee is exempt from overtime under the following exemption(s) (optional): _____
Other terms and conditions as per CBA Agmt/Local _____

Allowances taken: None, Tips _____ per hour, Meals _____ per meal, Lodging _____, Other _____

Regular pay day: _____ Weekly Bi-Weekly Other _____ If more frequent.

Employee Acknowledgement: On this date, 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:** _____

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

Preparer's Name and Title _____