

# Living Wage Ordinance Three Language Statement

## Living Wage Review Period (01/01/20\_\_ – 12/31/20\_\_)

In accordance with Section 26-102 (i) of the Living Wage Ordinance, employers are required to include notifications to their covered employees about the living wage rate in three languages. The employer must provide the following statement to each covered employee with the employee's first paycheck and every six (6) months thereafter:

**English**  
 Effective January 1, 20\_\_, you are required by Broward County ordinance to be paid at least \$\_\_\_\_\_ dollars an hour with \$\_\_\_\_\_ dollars an hour in health benefits or \$\_\_\_\_\_ dollars an hour without benefits. If you are not paid this hourly rate, you should contact your supervisor or a lawyer. Also, by Broward County Ordinance, you are entitled to accrue paid time off or be awarded forty (40) hours of paid time off on an annual basis.

**Spanish**  
 A partir de Enero 1, 20\_\_, usted debe recibir, según lo establece el Estatuto u Ordenanza del Condado de Broward, por lo menos \$\_\_\_\_\_ dólares más \$\_\_\_\_\_ dólares por hora de beneficios de salud o \$\_\_\_\_\_ dólares por hora sin beneficios de salud. En caso de que usted no este recibiendo un salario por hora según lo indicado anteriormente, debe ponerse en contacto con su supervisor o consultar con un abogado. Además, según la ordenanza del condado de Broward, usted tiene derecho a acumular tiempo libre remunerado o recibir cuarenta (40) horas de tiempo remunerado anualmente.

**Creole**  
 Anvigè 1ye Janvyè 20\_\_, òdonans Broward County egzije w pou w peye omwen \$\_\_\_\_\_ dola pa èdtan ak \$\_\_\_\_\_ dola yon èdtan nan benefis sante oswa \$ dola yon èdtan san benefis. Si yo pa peye w pousantaj èdtan, kontakte sipèvizè w la oswa yon avoka. Epitou, dapre Òdonans Broward County, ou gen dwa akimile konje peye oswa resevwa karant (40) èdtan tan peye sou yon baz chak ane.

Covered Employee Name	Job Title	A-Health Benefits or B-No Health Coverage	Paid Time Off (PTO) <b>40 Hrs.</b> A-Accrual <sup>1</sup> or L-Lump Sum <sup>2</sup>	Signature	Date

Accrual Method - Covered employees earn at least one (1) hour of paid time off for every thirty (30) hours worked.<sup>1</sup>  
 Lump Sum Method - Covered employees are awarded no less than forty (40) hours of paid time off at the beginning of each twelve-month period of employment, which compensation must be made by 90 days after the covered employee's effective date of hire<sup>2</sup>