**2024 NY Paid Family Leave Annual Billing**

*The maximum employee contribution in 2024 should be 0.373% of an employee’s weekly wage up to the annualized New York State Average Weekly Wage of $1,718.15.*

*This means in 2024 a maximum contribution of $6.41 per week for employees earning the currently NYSAWW or above. The employee contribution is capped at $333.25 for the year.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ExampleEmployee 1 | Salary $35,280. | x 0.373% | Employer Pre-Paid Annual NYPFL Premium $131.59 | Employee Reimbursed Weekly Deduction($131.5 ÷ 52 weeks) $2.53 |

Your station is currently enrolled in DBL through the Association with ShelterPoint Life Insurance Company. Your monthly DBL premium of $1.80 per covered owner/employee will continue to be billed on your monthly invoice. The NYPFL is covered through your ShelterPoint policy however, the billing for this coverage is a separate annual self-bill.

**To calculate the annual premium, you must use the employer/employee’s current salary.**

**OWNERS:** If you currently only have yourself covered under your DBL policy you must also carry NYPFL for yourself. If you do not, your DBL policy will be termed.

**Please fill in the self-bill form below and return with payment made payable to Service Station Dealers ASAP for your annual NY Paid Family Leave coverage.**

**STATION NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee | Salary | x 0.373% | Annual NYPFL Premium  |
| 1 |  | x 0.373% |  |
| 2 |  | x 0.373% |  |
| 3 |  | x 0.373% |  |
| 4 |  | x 0.373% |  |
| 5 |  | x 0.373% |  |
| 6 |  | x 0.373% |  |
| 7 |  | x 0.373% |  |
| 8 |  | x 0.373% |  |
| 9 |  | x 0.373% |  |
| 10 |  | x 0.373% |  |
|  |  |  | **TOTAL:** |

(Please add any additional employees to the backside of this paper)

**SUM** of Annual Paid Wages for Employees earning **BELOW** $89,343.80 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total number of employees** with Annual Paid Wages **ABOVE** $89,343.80 \_\_\_\_\_\_\_\_\_

Should you have any questions about the Annual Paid Family Leave, or the annual billing please contact our office at the above number.