

NEW MEXICO





Thank you for choosing our eComply downloadable labor law posters with one year of free mandatory updates!

Your posters must be posted in a conspicuous location. Be sure to download all files.

Printing & Posting Instructions

- These PDF documents should be **printed on 8.5" x 11" paper** with the printer set to the "fit to page" or comparable option. Following these printing instructions will help ensure that you are complying with state and federal size and font requirements.
- Posters have a Publication Code in the lower left corner, below the red line, such as D-CA_1 (*date*) MINIMUM WAGE. **Post pages with the same code together.**
- **Color requirements:** (for Colorado, Maryland, New Mexico, and North Carolina ONLY).*
- The Attention Employers letter that follows is for your information but should not be posted.

IMPORTANT: If your email address changes, be sure to notify us so that you continue to receive updates.

We are proud to be your most reliable resource for labor law compliance and we look forward to keeping you in compliance. Please contact us at 800-322-3636 if you have any questions.

- *• **Background color requirement** (applies to Colorado *Anti-Discrimination*, and Maryland *Workers Compensation*)

These posters will appear on your computer screen and print with the required color background *if you have a color printer*. If not, you must print these posters on the appropriate colored paper.

- **Identical poster requirement** (applies to North Carolina *Workers Compensation* and New Mexico *Workers Compensation*)

These posters must be identical to the state-issued poster which is in color. The posters will appear in color on your computer screen and *must be printed using a color printer* to match the original.



ATTENTION NEW MEXICO EMPLOYERS

Our goal as your **RELIABLE** labor law poster company is to ensure that you are always in compliance! We would like to make you aware that there may be **other requirements** your company is subject to in addition to posting your labor law posters in a conspicuous location.

- ☐ You are required by law to **post a supply of "Notice of Accident" (NOA) forms** with the Workers' Compensation notice on your state poster. The Workers' Compensation notice without these "Notice of Accident" forms does not comply with the law.

NOA forms can be downloaded at <https://workerscomp.nm.gov/NMWCA-Publications> or you can call **800-255-7965**. Forms should be attached at the bottom of the Workers' Compensation notice where indicated.

- ☐ **Post a copy of the "New Mexico Unemployment Insurance Notice."** This poster is issued at the time of initial Unemployment Insurance tax registration and never needs to be updated. It contains information specific to your business and must be obtained directly from the state. If you need an additional copy of the Unemployment Insurance Notice, you can log into your employer account in the Unemployment Insurance Tax & Claims System at www.dws.state.nm.us. The poster will be located under "Correspondence," and "Tax Correspondence." Under the "Correspondence Class" dropdown menu, select "Registration." If you do not have the Unemployment Insurance Notice in your correspondence, please contact the Unemployment Insurance Operations Center at 877-664-6984, Monday through Friday, from 8:00 a.m. to 4:30 p.m.

- ☐ If **applicants for employment** are normally seen in an area **other than where you post your federal labor law poster**, you need to post four federal notices in this area where applicants can easily see them. Poster Compliance Center publishes a Federal Applicant Edition poster that includes all four of these notices. Call Customer Service at 800-322-3636 if you would like to order this poster.

- ☐ If your state has an **E-Verify law** (used to determine if workers are eligible for employment), covered employers must register for E-Verify through the U.S. Department of Homeland Security (DHS) and must post required participation posters.
 - Only employers who have registered should post the required posters which can be downloaded free during registration.
 - DHS prohibits commercial sale of these posters by third parties.

For these reasons E-Verify posters are not included on our state posters. For further information or to register for E-Verify, go to the DHS E-Verify home page at <https://www.e-verify.gov/> or call 888-464-4218.

- ☐ Your state has a **No Smoking law**, and covered employers must post required signs in their places of business. The signs must be posted in specific locations, such as building or room entrances. These location requirements cannot be met by including a no smoking sign on your labor law poster. Poster Compliance Center provides Free Specialty Posters that include certain state-specific signs. You can find a No Smoking Including Electronic Cigarettes sign for New Mexico on our Free Specialty Labor Law Posters page at the following address: <https://www.postercompliance.com/labor-law-posters/free-specialty-labor-law-posters/>

Poster Compliance Center publishes labor law posters that include all general required notices for employers. Depending on a company's industry, type of commerce, sector, location, or workforce, **additional specialized notices may be required** by federal, state, or local governments or agencies. Examples could include notices for a municipality, notices for federal contractors, notices that must be posted for the public or job applicants (in addition to those posted for employees), a labor law notice required in another language for employees who do not speak English, public sector notices, signage that must be posted at a specific location in your business such as the entrance, or a notice that can only be obtained through an insurance company.

DISCLAIMER: This product is not intended to provide legal or financial advice or substitute for the advice of an attorney or advisor.



NEW MEXICO MINIMUM WAGE ACT EMPLOYEE RIGHTS



MINIMUM WAGE IN NEW MEXICO

\$9.00 *per hour*

OVERTIME PAY	At least 1½ times your regular hourly rate of pay for all hours worked over 40 in a workweek.
TIPPED WORKERS	Employers must pay tipped employees an hourly rate of at least \$2.35 per hour. If the tips plus the hourly rate do not equal at least \$9.00 per hour, the employer must make up the difference. Tipped employees have a right to keep all of their tips.
DAMAGES	Employers who violate the minimum wage or overtime requirements are required to pay impacted employees the full amount of their underpaid wages plus interest, plus an additional amount equal to twice the underpaid wages.
RETALIATION PROHIBITED	It is unlawful to retaliate against an employee for asserting a wage claim or for informing other employees of their rights.
ENFORCEMENT	The Labor Relations Division of the Department of Workforce Solutions investigates claims and recovers back wages for employees who have been underpaid in violation of law, regardless of the dollar value of the claim, going back at least three years, or longer if there was a continuing course of conduct. Violations may result in civil or criminal action.
LOCAL MINIMUM WAGES	There are higher minimum wages in the City of Albuquerque, Bernalillo County, the City of Las Cruces, the City of Santa Fe, and Santa Fe County.
ADDITIONAL INFORMATION	Certain jobs or employers are exempt from the minimum wage or overtime pay provisions.

Employers must display this poster where employees can easily see it.

For more information or to file a wage claim, contact the Labor Relations Division at 505-841-4400, or online at www.dws.state.nm.us

NEW MEXICO JOB HEALTH AND SAFETY POSTER

You Have a Right to a Safe and Healthful Workplace
IT'S THE LAW!



**Site Address / La Dirección a la
Agencia:**
525 Camino de los Marquez,
Ste. 3
Santa Fe, NM 87505

**Mailing Address / Dirección de
Envío:**
PO Box 26110
Santa Fe, NM 87502

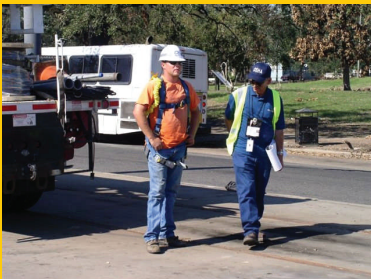
**Telephone No./Número de
Teléfono:**
505-476-8700 or 1-877-610-6742

**Fax Number/Número de
Facsimil:**
505-476-8734



SALUD DE TRABAJO Y CARTEL DE SEGURIDAD

Usted Tiene el Derecho a un Lugar de Trabajo Seguro y Saludable.
¡LO ESTABLECE LA LEY!



Employees:

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request a New Mexico OSHA inspection if you believe that there are unsafe or unhealthful conditions in your workplace. You or your representative may participate in the inspection.
- You can file a complaint with New Mexico OSHA within 30 days of discrimination by your employer for making safety and health complaints or for exercising your rights under the New Mexico Occupational Health and Safety Act.
- You have a right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violation.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records or records of your exposure to toxic and harmful substances or conditions.
- Your employer must post this notice in your workplace.
- You must comply with all OSHA standards issued under the *OSH Act* that apply to your own actions and conduct on the job.

Employers:

- Employers must furnish your employees a place of employment free from recognized hazards.
- Employers must comply with the OSHA standards issued under the *OSHA Act*.

The Occupational Safety and Health Act of 1970 (OSH Act), P.L. 91-956, assures safe and healthful working conditions for working men and women throughout the Nation. The Occupational Safety and Health Administration, in the U.S. Department of Labor, has the primary responsibility for administering the OSHA Act. The rights listed here may vary depending on the particular circumstances. To file a complaint, report an emergency, or seek free OSHA advice and assistance, call 1-877-610-6742 or (505) 476-8700. Our fax number is (505) 476-8734. For information or assistance relative to the State Occupational Health & Safety program, please refer to address on the left side of poster.

The Federal Occupational Safety and Health Administration monitors the operation of the state program to assure its continued effectiveness. Anyone wishing to register a complaint concerning the administration of the New Mexico Occupational Health and Safety Program may do so by contacting U.S. Department of Labor, Occupational Safety and Health Administration, 525 Griffin Street, Room 602, Dallas, Texas 75202 at (972) 850-4145.

Empleados:

Usted tiene el derecho de notificar a su empleador o a la OSHA sobre peligros en el lugar de trabajo. Usted también puede pedir que la OSHA no revele su nombre.

Usted tiene el derecho de pedir a la OSHA de Nuevo México que realice una inspección si usted piensa que en su trabajo existen condiciones peligrosas o poco saludables. Usted o su representante pueden participar en esa inspección.

Usted tiene 30 días para presentar una queja ante la OSHA de Nuevo México si su empleador llaga a tomar represalias o discriminar en su contra por haber denunciado la condición de seguridad o salud o por ejercer los derechos consagrados bajo la Ley OSH de Nuevo México.

Usted tiene el derecho de ver las citaciones enviadas por la OSHA a su empleador. Su empleador debe colocar las citaciones en el lugar donde se encontraron las supuestas infracciones o cerca de mismo.

Su empleador debe corregir los peligros en el lugar de trabajo para la fecha indicada en la citación y debe certificar que dichos peligros se hayan reducido o desaparecido.

Usted tiene derecho de recibir copias de su historial o registro médico y el registro de su exposición a sustancias o condiciones tóxicas o dañinas.

Su empleador debe colocar este aviso en su lugar de trabajo.

Usted debe cumplir con todas las normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH que sean aplicables a sus propias acciones y conducta en el trabajo.

Empleadores:

- Usted debe proporcionar a sus empleados un lugar de empleo libre de peligros conocidos.
- Usted debe cumplir con las normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH.



R022607 MMP

La Ley de Seguridad y Salud Ocupacionales de 1970 (la Ley), P.L. 91-596, garantiza condiciones ocupacionales seguras y saludables para los hombres y las mujeres que desempeñen algún trabajo en todo el Estado de Nuevo México. La Administración de Seguridad y Salud Ocupacionales (OSHA), es la responsable principal de supervisar la Ley. Los derechos que se indican en este documento pueden variar según las circunstancias particulares. Para presentar un reclamo, informar sobre una emergencia o pedir consejos y asistencia gratis de la OSHA, llame 1-877-610-6742 or (505) 476-8700. Número de facsímil - (505) 476-8734.

La Administración de Salud y Seguridad Ocupacional Federal supervisa la operación del programa estatal para asegurar su eficacia continuada. Alguien deseando registrar una queja acerca de la administración de OSHA por parte del Estado, puede hacer así por ponerse en contacto New Mexico Environment Department, Occupational Safety and Health Administration, 525 Griffin Street, Room 602, Dallas, Texas 75202, numero de teléfono (972) 850-4145.

**NM OSHA The Best Resource for Health and Safety
El Mejor Recurso para la Salud y Seguridad**

WORKERS' COMPENSATION ACT

If You Are Injured At Work Si Se Lastima En El Trabajo

1) **Notice --** In most cases you must tell your employer about the accident within 15 days, using the Notice of Accident Form.

2) **You have the right** to information and assistance from an information specialist known as an Ombudsman at the Workers' Compensation Administration.

3) **Claims information --** Contact your employer's Claims Representative (see box below).

1) **Aviso --** En la mayoría de los casos usted debe de avisarle a su empleador del accidente dentro de los primeros 15 días usando las formas de Aviso de Accidente.

2) **Usted tiene el derecho** a información y ayuda contactándose con un especialista en información conocido como "Ombudsman" en la Administración para la Compensación a los Trabajadores.

3) **Información acerca de Reclamaciones --** Contáctese con el representante de reclamaciones de su compañía.

Employer's Insurer / Claims Representative:

Name: _____

Phone #: _____

Address: _____

Note: Employer must fill in this insurer / claims representative information.

YOUR RIGHTS

If you are injured in a work-related accident:

Your employer / insurer must pay all reasonable and necessary medical costs.

You may or may not have the right to choose your health care provider. If your employer / insurer has not given you written instructions about who chooses first, call an ombudsman. In an emergency, get emergency medical care first.

If you are off work for more than seven days, your employer / insurer must pay wage benefits to partially offset your lost wages.

If you suffer "permanent impairment," you may have the right to receive partial wage benefits for a longer period of time.

SUS DERECHOS

Si se lastima en el trabajo:

Su empleador / asegurador debe de pagar por los gastos médicos necesarios y razonables.

Es posible que usted tenga, o no tenga, el derecho de escoger el proveedor de servicios para la salud. Si su empleador / asegurador no le ha dado instrucciones por escrito de quien es él que selecciona primero, pregúntele o llame a un ombudsman. En una emergencia, obtenga asistencia médica de emergencia primero.

Si usted está fuera del trabajo por más de siete días, su empleador / asegurador debe de hacerle un pago compensatorio de prestaciones para compensar parcialmente la pérdida de su salario.

Si usted sufre "daño permanente," usted puede tener el derecho a recibir prestaciones parciales de salario por un periodo de tiempo más largo.

Ombudsmen are located at the following offices:

Albuquerque:
1-866-967-5667
1-505-841-6000

Farmington:
1-800-568-7310
1-505-599-9746

Hobbs:
1-800-934-2450
1-575-397-3425

Las Cruces:
1-800-870-6826
1-575-524-6246

Las Vegas:
1-800-281-7889
1-505-454-9251

Roswell:
1-866-311-8587
1-575-623-3997

Santa Fe:
1-505-476-7381

If You Need HELP Call:

Ask for an Ombudsman

Si Usted Necesita Ayuda Llame Al:

Pregunte por un Ombudsman

1 - 8 6 6 - W O R K O M P (1-866-967-5667)

Visit our website at: <https://workerscomp.nm.gov>

For FREE copies of this poster and Notice of Accident Forms call: 1-866-967-5667

USE A NOTICE OF ACCIDENT FORM TO REPORT YOUR ACCIDENT TO YOUR SUPERVISOR

EMPLOYER: You are required by law to display this poster where your employees can read it. Post the Notice of Accident forms with it. The poster without the Notice of Accident forms does not comply with law. You have other rights and duties under the law.

NOTICE ON HUMAN TRAFFICKING

IF YOU OR SOMEONE YOU KNOW IS A VICTIM
OF THIS CRIME, CONTACT THE FOLLOWING:

IN NEW MEXICO, CALL OR TEXT
505-GET-FREE (505-438-3733)

OR CALL THE NATIONAL HUMAN
TRAFFICKING RESOURCE CENTER
HOTLINE TOLL-FREE AT
1-888-373-7888 FOR HELP

YOU MAY ALSO SEND THE TEXT
"HELP" OR "INFO" TO **BEFREE ("233733")**

YOU MAY REMAIN ANONYMOUS, AND YOUR CALL OR TEXT IS CONFIDENTIAL

505-GET-FREE (505-438-3733)

OBTAINING FORCED LABOR OR SERVICES IS A
CRIME UNDER NEW MEXICO AND FEDERAL LAW



AVISO SOBRE EL TRÁFICO HUMANO

SI USTED O ALGUIEN QUE CONOCE ES VÍCTIMA DE
ESTE CRIMEN, COMUNÍQUESE CON ALGUNO
DE LOS SIGUIENTES RECURSOS:

EN NUEVO MÉXICO, LLAME O MANDE UN TEXTO AL
505-GET-FREE (505-438-3733)

O LLAME A LA LÍNEA DE EMERGENCIA
DEL CENTRO NACIONAL DE RECURSOS PARA
EL TRÁFICO HUMANO AL
1-888-373-7888 PARA AYUDA

TAMBIÉN PUEDE MANDAR UN TEXTO QUE DIGA
"HELP" O "INFO" A BEFREE ("233733")

USTED PUEDE PERMANECER ANÓNIMO, Y SU LLAMADA O TEXTO ES CONFIDENCIAL

505-GET-FREE (505-438-3733)

OBTENER TRABAJO O SERVICIOS FORZADOS
ES UN CRIMEN BAJO LA LEY ESTATAL DE NUEVO
MÉXICO Y LA LEY FEDERAL



DISCRIMINATION is against the law.

If you feel that you have been discriminated against, visit our website or contact us.

Human Rights Bureau

1596 Pacheco Street, Santa Fe, NM 87505

Office: (505) 827-6838 • Toll-free: (800) 566-9471 • Fax: (505) 827-6878

NEW MEXICO HUMAN RIGHTS ACT

The Human Rights Bureau enforces the provisions of the Human Rights Act of 1969. Additionally, the Human Rights Bureau has a work-sharing agreement with the Equal Employment Opportunity Commission (EEOC) to enforce the provisions of federal law under Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967 (ADEA), and the Americans with Disabilities Act of 1990 (ADA), all as amended. Prohibited discriminatory bases include:

- Race
- Color
- National Origin
- Ancestry
- Sex
- Age
- Physical or Mental Disability or Serious Medical Condition
- Sexual Orientation
- Gender Identity
- Spousal Affiliation
- Religion

Sexual harassment and harassment based on other protected categories is prohibited by the Act.

The Human Rights Act prohibits discrimination in the areas of employment, housing, credit, and public accommodations, and prohibits retaliation for complaining about discrimination in any of these areas.

If you feel you have been discriminated against, contact the Human Rights Bureau by phone or fill out a complaint form online at:

www.dws.state.nm.us

ENFORCEMENT

The New Mexico Department of Workforce Solutions Human Rights Bureau investigates complaints of discrimination and harassment in employment, housing, credit, and public accommodations.

Complaints must be filed with the Human Rights Bureau within 300 days of the last act of discrimination or harassment.

For assistance in filing a complaint, or for any other information on the Human Rights Act, please call (800) 566-9471 (toll-free) or (505) 827-6838, or visit our website at:

www.dws.state.nm.us

Rev. 12/2015

LA LEY DE DERECHOS HUMANOS DE NUEVO MÉXICO

El Buró de Derechos Humanos impone las provisiones de la Ley de Derechos Humanos de 1969. Adicionalmente, el Buró de Derechos Humanos tiene un acuerdo de reparto de trabajo con la Comisión de Igualdad de Oportunidades en el Empleo (Equal Employment Opportunity Commission, EEOC) para hacer cumplir las provisiones de la ley federal bajo el Título VII de la Ley de Derechos Civiles de 1964 (Civil Rights Act), la Ley de Discriminación por Edad en el Empleo de 1967 (Age Discrimination in Employment Act, ADEA), y la Ley de Americanos con Discapacidades de 1990 (Americans with Disabilities Act, ADA), todas según enmendadas. Las bases discriminatorias prohibidas incluyen:

- Raza
- Color
- Origen Nacional
- Ascendencia
- Sexo
- Edad
- Discapacidad Mental o Física o Condiciones Médicas Graves
- Orientación Sexual
- Identificación de Género
- Afiliación Nupcial
- Religión

El acoso sexual y acoso basado en otras categorías protegidas están prohibidos por la Ley.

La Ley de Derechos Humanos prohíbe la discriminación en las áreas de empleo, alojamiento, el acceso al crédito, y hospedaje público, y prohíbe la represalia por quejas en cualquiera de estas áreas.

Si usted siente que ha sido discriminado, comuníquese con el Buró de Derechos Humanos por teléfono o complete el formulario de quejas por Internet en:

www.dws.state.nm.us

CUMPLIMIENTO

El Buró de Derechos Humanos del Departamento de Soluciones de Fuerza Laboral de Nuevo México investiga quejas de discriminación y acoso en el empleo, alojamiento, el acceso al crédito, y hospedaje público.

Las quejas deben ser presentadas al Buró de Derechos Humanos dentro de 300 días de que ocurrió el último acto de discriminación o acoso.

Para ayuda en completar una queja, o por cualquier otra información sobre la Ley de Derechos Humanos, por favor llame al (800) 566-9471 (gratuitamente) o (505) 827-6838, o visite nuestra página por Internet en:

www.dws.state.nm.us

Buró de Derechos Humanos

1596 Pacheco Street, Santa Fe, NM 87505

Oficina: (505) 827-6838 • Línea Gratuita: (800) 566-9471 • Fax: (505) 827-6878

DISCRIMINACIÓN es contra la ley.

Si siente que ha sido discriminado, visite nuestra página por Internet o póngase en contacto con nosotros.