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In order for your rental application to be fully completed, please also provide the following:

- \$60 Application Fee (*Adults, 18 and over, must fill out a separate application*)
- Copy of ID; Last 2 Paystubs; Current W-2; and, Proof of Security Deposit. If on Housing Assistance/Section 8, please provide proof.

Application fee can be paid via cash or PayPal if completing a paper application.

All support can be emailed to [Rental@ShiftingPayroll.com](mailto:Rental@ShiftingPayroll.com) if not readily available.

## Applicant Information

Name:			
Date of birth:	SSN:	Phone:	
Driver's License #/State ID #:			
Email address:			
Current address:			
City:	State:	ZIP:	How Long?
Monthly Rent: \$	Housing portion of rent: \$	Tenant portion of rent: \$	
Landlord's Name:		Landlord's Number:	

## Previous Address

Previous address:			
City:	State:	ZIP:	How Long?
Monthly Rent: \$	Housing portion of rent: \$	Tenant portion of rent: \$	
Previous Landlord's Name:		Previous Landlord's Number:	

## Employment Information

Current employer:			
Employer address:			
Phone:			How Long?
City:	State:	ZIP:	
Position:	Hourly Salary: \$	Annual income: \$	

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Co-applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
Email address:			
Current address:			
City:	State:	ZIP:	How Long?
Monthly Rent: \$	Housing portion of rent: \$	Tenant portion of rent: \$	
Previous address:			
City:	State:	ZIP:	How Long?
Monthly Rent: \$	Housing portion of rent: \$	Tenant portion of rent: \$	
Co-applicant Employment Information			
Current employer:			
Employer address:			
Phone:		How Long?	
City:	State:	ZIP:	
Position:	Hourly Salary: \$	Annual income: \$	
Additional Residents: <i>(Please note that Adults must fill out a separate application)</i>			
Name	DOB	SSN	Relationship

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## Screening Questions

1.) Have you filed a petition of bankruptcy?

Yes  No

If "Yes", please explain:

2.) Have you ever been evicted from any tenancy, had an eviction notice served to you, or been a defendant in an unlawful detainer lawsuit?

Yes  No

If "Yes", please explain:

3.) Have you willfully and intentionally refused to pay any rent when due?

Yes  No

If "Yes", please explain:

4.) Have you ever been convicted of a felony misdemeanor other than a traffic or parking violation or the simple possession of a controlled substance?

Yes  No

If "Yes", please explain:

5.) Have you ever been convicted of the illegal manufacture or distribution of a controlled substance?

Yes  No

If "Yes", please explain:

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6.)Are you a smoker of tobacco products?

Yes  No

If “Yes”, please explain:

7.)Do you currently have any pets?

Yes  No

If “Yes”, please explain:

8.)If on Housing Assistance/Section 8, what number of bedrooms are you approved for on your voucher?

9.)If on Housing Assistance/Section 8, do you currently pay a portion of your rent? If so, how much?

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Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP:	Phone:
Relationship:			
References			
Name:		Phone:	
<p>I acknowledge that I have reviewed the selection criteria, disclaimers and state that all of the information provided is correct. I understand that if I do not meet the selection criteria or if I fail to answer any questions or provide false information, my application may be rejected and any or all application fees (if applicable) may be forfeited.</p> <p>I understand that I am providing the "written instructions" to ShiftingPayroll, its Trusts and representatives, who will obtain information from my personal background from TransUnion and public records sources for the purpose of tenant screening.</p> <p>I authorize ShiftingPayroll, its Trusts and representatives, to obtain such information and provide it to certain identified third parties who are requesting this information about me. The partners must obtain "written instructions" from me prior to sharing any credit history and/or public records with certain identified third parties.</p> <p>I am aware that ShiftingPayroll, its Trusts and representatives, may conduct an inspection of my current residence as part of the verification process for tenancy suitability.</p>			
Signature of applicant:		Date:	
Signature of co-applicant:		Date:	