RENTAL APPLICATION



5817 CITRUS BLVD., SUITE D, HARAHAN, LA 70123

504-736-0544

AGENT: KITTY PAULK EMAIL: kitty@bourgrealtygroup.net PHONE: 504-884-1005

INCOMPLETE OR PARTIAL APPLICATIONS WILL NOT BE ACCEPTED

SUBMIT COMPLETED AND SIG	NED APPLICATION TO THE O	OFFICE WITH THE FOLLOWING:						
	R \$50 PER PERSON FOR APPL							
2. MONEY ORDER OR								
 MONEY ORDER OR CASHIER'S CHECK FOR FULL DEPOSIT COPY OF PHOTO I.D. (STATE ID OR DRIVERS LISC, PASSPORT OR MILITARY ID) 								
4. PROOF OF INCOME (LAST 2 PAYCHECK STUBS OR A TAX RETURN) YOUR								
SECUIRTY DEPOSIT WILL BE I								
APPROVED/ACCEPTED. CHECK								

Date of Application:	Property address:							
Requested Monthly rental amount:	Deposit amount:	Move in date:						
	PERSONAL INFORMATION							
Applicant's full name		Date of Birth						
Social Security No	Driver's License No./S							
Primary phone No	E-mail address							
Co-Applicant's full name								
Social Security No.	Driver's License No./	'State						
	E-mail address							
List any other occupants that will reside	with you at this address:							
		Date of Birth						
Full name	Relationship to You	Date of Birth						
Full name	Relationship to You Date of Birth							
Full name	Relationship to You Date of Birth							
How many pets do you have?	Breed, Age, Weight							
Emergency contact name & phone numb	er:							
Do you or any of the occupants smoke? _								
	RESIDENCE HISTORY							
Present Address	City, State, Zip							

How long there? Are you breaking your lease? _____ Did you give notice? _____

Reason for Moving					
Monthly rental amount	Were	ou ever late?			
Landlord's Name		Telephone			
Previous Address (if at present add	tress less than 2 years)	Telephone			
Landlord's Name		Telephone			
How long there? Mo	nthly Rental amount_	TelephoneReason you moved			
	EMPLOYME	NT INFORMATION			
Employer					
Employer's Address					
Company's					
Telephone	Supervi	sor's name & extension			
Position/little		How long have you worked there?			
Gross Monthly Income	Other inc	come you receive: amount / source			
Co-Applicant's Employer					
reteptione	Superviso	or's name			
Position /Title		How long there?			
Gross Monthly Income	Other inco	me you receive: amount / source			
PLEASE PRO	VIDE PROOF O	F INCOME FOR VERIFICATION			
Bank Name & Branch		VFORMATION			
Checking Account?	Coringo Assessed	Telephone			
Checking Account?	_ Savings Account?	Loan?			
	OTHER I	NFORMATION			
Total number of vehicles (includ					
Year/Make/Model/Color	e company contoros,	License			
Year/Make/Model/Color		License			
Year/Make/Model/Color		License			
Have you or Co-Applicant ever:					
Had an eviction(s) filed on you?		_If yes, when and number of times:			
Been Sued for non-payment of re	ent?	_ If yes, Explain			
Been Sued for damage to rental p	property?	If yes, Explain			
Broken a Lease or rental agreement? If yes, Explain					
Filed for Bankruptcy? If yes, when?					

APPLICATION CHECK LIST:

DRIVERS LISC OR STATE ID FOR YOU AND CO-APPLICANT (2) MONEY ORDERS: 1- APPLICATION FEE \$50 PER PERSON 1- DEPOSIT AMOUNT COPIES OF YOUR LAST 2 PAYCHECK STUBS APPLICATION AND ACKNOWLEDGEMENT SIGNED BY ALL PARTIES

application is approved and application as liquidates damages to cover the and holding same for applicant. responsible the Lease Agreement is understanding that it is subject to a	licant fails or refuses to enter the cost of taking and processing In the event this application is a not consummated, this deposit acceptance by the owner and subacceptance by the owner	receipt of which is hereby acknowledged, as a non-interest-inafter provided in the Lease Agreement. In the event the into the contemplated lease, owner shall retain the said depositing this application and removing the premises from the market disapproved, or for any other reason for which the owner is it will be returned to applicant. This application is made with the bject to execution by an officer of said company and delivery of a to seven (7) days to process your application for both credit and
and any other means. Such authoricabove inquiries shall entitle owner application (2) retain the application application, and (3) terminate resid laws of this state. In any lawsuit rethe prevailing party is entitled to rethe right to regularly and routinely	zation does not require owner to reject this application. False on fee(s) and deposit as liquidate lents right to occupancy. False is lating to this application, application to this application, application attorney's fees and all other furnish information to consume the reported at any time and may be rules and financial obligation	
It is understood that the above info	rmation will be held in strict co	nfidence.
Applicant Signature:		Date:
Co-Applicant Signature:		Date:
only. A Seller's/Lessor's agent or a loyalty in dealings with the Seller/I about what price, terms or motivati. To the Buyer/Lessee & the Seller/L b) A duty of honest and fair dealing required by Louisiana Law. (d) Mu A licensee acting as the agent for the obtained from the Seller/Lessor exception.	subagent has the following obluessor. (b) Unless authorized by on the Seller/Lessor will accept essor: a) Exercise of reasonabling and good faith (c) A duty to dist disclose that by this disclosure Seller/Lessor is not obligated the performing to perform its	ement with a Seller/Lessor acts as the agent for the Seller/Lessor igations: A fiduciary duty of utmost care, integrity, honesty, and Seller/Lessor, may not disclose to a Buyer/Lessee information other than the price or terms listed. e skill and care in performance of the licensee's duties. isclose all material facts about the property known to the licensee as the the licensee acts for the Seller/Lessor. to reveal to the Buyer/Lessee any confidential. information duties to the Buyer/Lessee set out above. e undersigned licensee is acting as the agent for the Seller/Lessor.
LESSEE:	Date	
LESSEE:		

FOR OFFICE USE ONLY - DO NOT WRITE BELOW

This application is APPROVED

NOT APPROVED

5817 Citrus Blvd. Suite D Harahan, La. 70123 (504)736-0544

VERIFICATION OF RENTAL HISTORY

present or former tenant.	on of rental histor	y for the individual named below, who	states they are a			
Please complete the information and fax to (504)736-0535		I HEREBY AUTHORIZE YOU TO RELEASE INFORMATION REGARDING MY TENANCY TO THE INQUIRING LANDLORD.				
Thank you for your cooperate	tion.					
Cordially,						
Anthony Bourg (Property Manager)		TENANT SIGNATURE	DATE			
Rental history of						
Date moved in	Moved out _	Monthly rent \$				
Was rent paid on time?Number of times late?						
What was included in rent?						
Number of persons in family? Did they follow the rules?						
Complaints by others (explain)?						
Care of rental unit:						
Any damage?Any pets?						
Overall rating as a tenant (g	ood, fair, poor,ex	plain)				
Would you rent to them again	n?					
Did they give notice to move?If former tenant, did you return full security deposit?						
If not, why?						
Person providing information):					
Title:	Phone:					