

# RENTAL APPLICATION

To: Chenier Apartments  
1901 Highway 190  
Mandeville, LA 70448

Agent for Owner: Park Management Services, LLC  
3525 N. Causeway Blvd., Ste. 301  
Metairie, LA 70002

APT. # \_\_\_\_\_

DATE: \_\_\_\_\_

DATE OF OCCUPANCY: \_\_\_\_\_

MONTHLY RENTAL RATE: \_\_\_\_\_



**APPLICANT (MISS, MS., MRS., MR.):**

**FULL NAME:** \_\_\_\_\_  
FIRST MIDDLE LAST

Social Security Number: \_\_\_\_\_ - - Date of Birth: \_\_\_\_\_ - - Age: \_\_\_\_\_ Sex: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Student: Y / N

**SPOUSE/ROOMMATE:**

\_\_\_\_\_ FIRST MIDDLE LAST

Social Security Number: \_\_\_\_\_ - - Date of Birth: \_\_\_\_\_ - - Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Student: Y / N

**OTHER OCCUPANTS:**

<u>Name</u>	<u>SS#</u>	<u>Relationship</u>	<u>Date of Birth</u>	<u>Age</u>	<u>Student</u>	<u>Sex</u>
_____	_____	_____	- -	_____	Y / N	M / F
_____	_____	_____	- -	_____	Y / N	M / F
_____	_____	_____	- -	_____	Y / N	M / F
_____	_____	_____	- -	_____	Y / N	M / F
_____	_____	_____	- -	_____	Y / N	M / F

**CURRENT ADDRESS:** \_\_\_\_\_ Phone Number: \_\_\_\_\_

Property Name: \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_ How Long? \_\_\_\_\_

Street Address: \_\_\_\_\_ Owner/Manager: \_\_\_\_\_

\_\_\_\_\_ City State Zip Owner/Manager Phone No.: \_\_\_\_\_

Expected Move Out Date \_\_\_\_\_ Reason for moving: \_\_\_\_\_

**PREVIOUS ADDRESS:**

Property Name: \_\_\_\_\_ Rent \$ \_\_\_\_\_ How Long? \_\_\_\_\_

Street Address: \_\_\_\_\_ Owner/Manager: \_\_\_\_\_

\_\_\_\_\_ City State Zip Owner/Manager Phone No.: \_\_\_\_\_

Move Out Date \_\_\_\_\_ Reason for moving: \_\_\_\_\_

**EMPLOYMENT:**

Circle all applicable:    Employed full time    Employed part-time    Retired  
   Self-Employed    Not Employed

**Current Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_ Current Salary: \$ \_\_\_\_\_ How long? \_\_\_\_\_

Circle one:    Hourly    Weekly    Bi-weekly    Bi-monthly    Monthly Yearly

**Previous Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_ Current Salary: \$ \_\_\_\_\_ How long? \_\_\_\_\_

Circle one:    Hourly    Weekly    Bi-weekly    Bi-monthly    Monthly Yearly

**EMPLOYMENT: SPOUSE/ROOMMATE**

Circle all applicable:    Employed full time    Employed part-time    Retired  
   Self-Employed    Not Employed

**Current Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_ Current Salary: \$ \_\_\_\_\_ How long? \_\_\_\_\_

Circle one:    Hourly    Weekly    Bi-weekly    Bi-monthly    Monthly Yearly

**Previous Employer:** \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_ Salary: \$ \_\_\_\_\_ How long? \_\_\_\_\_

Circle one:    Hourly    Weekly    Bi-weekly    Bi-monthly    Monthly Yearly

**VEHICLES:**

# of automobiles, boats, motorcycles, trailers, etc. you would keep on the property? \_\_\_\_\_

Please list them for us:

Vehicle Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Plate # \_\_\_\_\_

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**EMERGENCY CONTACT:**

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

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**OTHER INFORMATION:**

Have you ever: Filed for Bankruptcy? ( ) Yes ( ) No  
Been evicted from tenancy? ( ) Yes ( ) No  
Been convicted of a Felony? ( ) Yes ( ) No  
US Citizen? ( ) Yes ( ) No  
Do you have: Pets? ( ) Yes ( ) No

Non US citizens must provide proof of approved presence in the US.  
Convicted felons must provide detailed information as to the circumstances of the conviction.

**CREDIT REFERENCES:**

CHECKING ACCT.: Bank Name \_\_\_\_\_ Account number \_\_\_\_\_

SAVINGS ACCT.: Bank Name \_\_\_\_\_ Account number \_\_\_\_\_

CREDIT CARD: Provider \_\_\_\_\_ Account number \_\_\_\_\_

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LOAN, ETC.: Lender's Name \_\_\_\_\_ Loan number \_\_\_\_\_

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OTHER: Name \_\_\_\_\_ Account number \_\_\_\_\_

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Applicant has deposited herewith the sum of \$ \_\_\_\_\_, receipt of which is hereby acknowledged, as a non-interest bearing deposit (not as a rental payment) to be refunded as hereinafter provided in the Lease Agreement. In the event the application is approved, and the applicant fails or refuses to enter into the contemplated lease, owner shall retain the said deposit as liquidated damages to cover the expense of taking and processing this application and removing the premises from the market and hold the same for applicant. In the event application is disapproved, or for any other reason for which the owner is responsible and the Lease Agreement is not consummated, this deposit will be returned to applicant.

Applicant has paid a non-refundable fee of \$ \_\_\_\_\_, which will be retained by Agent as a fee to cover Agent's time, effort, and cost of processing this application.

Applicant has paid a non-refundable cleaning fee of \$ \_\_\_\_\_, which will be retained by Agent as a fee to cover Agent's time, effort, and cost of a detailed cleaning of the apartment when the applicant vacates.

This application is made with the understanding that it is subject to acceptance by the owner or its agent. Upon acceptance of this application, I agree to execute a lease agreement before possession is delivered and to pay the balance of the security deposit and other move in costs. **The security deposit becomes non-refundable after application has been approved.** Please allow ample time to process this application.

By execution of this application, I hereby authorize such investigations into my history as the owner and its agents may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, rental history, police (criminal) checks and consumer credit reports. I specifically and unconditionally release and hold owner and agent harmless from any unintentional consequences to me, of such inquiries.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

Spouse/Roommate: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

APPLICATION TAKEN BY: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION APPROVED/DISAPPROVED BY: \_\_\_\_\_ Date: \_\_\_\_\_

NOTIFICATION OF APPROVAL/DISAPPROVAL DATE: \_\_\_\_\_

NOTIFIED BY: \_\_\_\_\_ Date: \_\_\_\_\_

REASON NOT APPROVED: \_\_\_\_\_