FOR INTERAL USE

Paid:



506 Grand Prix Blvd., New Iberia, Louisiana 70563 | 337.364.6004 office | 337.412.1820 emergency | 337.364.9894 fax

## APPLICATION

## Application fee is \$40.00 per adult and is non-refundable.

Date: \_\_\_\_\_\_ Number of Bedroom's needed: \_\_\_\_\_ Phone #:(

3.

|                        | Application fee is \$40.00 per ad | Date:              |  |
|------------------------|-----------------------------------|--------------------|--|
| e:N                    | lumber of Bedroom's needed:       | _Phone #:( )       |  |
| ne #2: ( )             | Email:                            |                    |  |
| Name (First, Middle, I | ast, Maiden):                     |                    |  |
| DOB:                   | Drivers License:                  | Social Security #: |  |
| Place of Employment    | :                                 | Phone #: ( )       |  |
| Position:              | How Long:                         | Monthly Salary:    |  |
| Name (First, Middle, I | _ast, Maiden):                    |                    |  |
| DOB:                   | Drivers License:                  | Social Security #: |  |
| Place of Employment    | :                                 | Phone #: ( )       |  |
| Position:              | How Long:                         | Monthly Salary:    |  |
| Present Address, inclu | uding Landlord's Name & Phone #:  |                    |  |
| Present Address, inclu | uding Landlord's Name & Phone #:  |                    |  |

| Place of Employment: |                |                |                                | Phone #: ( )    |  |
|----------------------|----------------|----------------|--------------------------------|-----------------|--|
| Po                   | sition:        |                | How Long:                      | Monthly Salary: |  |
| Pre                  | esent Address, | including Land | dlord's Name & Phone #:        |                 |  |
| Pre                  | esent Address, | including Land | dlord's Name & Phone #:        |                 |  |
|                      |                |                | additional family member who v |                 |  |
| a.                   |                |                |                                | DOB:            |  |
| b.                   | Name:          |                |                                | DOB:            |  |
|                      | Age:           | Sex:           | Relationship:                  |                 |  |
| c.                   | Name:          |                |                                | DOB:            |  |
|                      | Age:           | Sex:           | Relationship:                  |                 |  |
|                      |                |                |                                |                 |  |

| 6.  | Have you ever been convicted of a felony? If yes, specify                                          |  |  |  |  |
|-----|----------------------------------------------------------------------------------------------------|--|--|--|--|
| 7.  | Have you ever been evicted or have been refused housing?                                           |  |  |  |  |
| 8.  | Have you ever had a house or car repossessed?                                                      |  |  |  |  |
| 9.  | How many cars do you own?                                                                          |  |  |  |  |
| 10. | Color, Year, Brand, Model & License plate of Car:                                                  |  |  |  |  |
|     | (Example: Blue, 2003, Toyota, Corolla & License plate #)                                           |  |  |  |  |
| 11. | Color, Year, Brand, Model & License plate of 2 <sup>nd</sup> Car:                                  |  |  |  |  |
|     | (Example: Blue, 2003, Toyota, Corolla & License plate #)                                           |  |  |  |  |
| 12. | Do you have any pets? If yes, how many: What kind(s): (WE DO NOT ALLOW PETS)                       |  |  |  |  |
| 13. | How did you hear about Evangeline Trace Apartments?                                                |  |  |  |  |
| 14. | Does anyone on the application smoke? (Circle One) No Yes                                          |  |  |  |  |
|     |                                                                                                    |  |  |  |  |
| Not | e: Manager to make a copy of <u>current Drivers License</u> of each Adult residing in apartment.   |  |  |  |  |
| Not | e: Manager to make a copy of last 60 days Check stubs of each Working Adult residing in apartment. |  |  |  |  |

Note: This application will be discarded after 30 (thirty) days if not completely processed.