

10455 Jefferson Highway  
Suite 100  
Baton Rouge, Louisiana 70809-7211  
Tel: (225) 297-7888  
Fax: (225) 297-7880

Dear Applicant:

Thank you for your interest in 438 Main Street Apartments. The attached application packet is designed to give you all of the applicable information required during our application process.

There is a \$35 application fee per adult 18 years of age and over, as well as a security deposit in the amount of \$500 that is required to be paid when you submit your application for processing. If your application is rejected, we will refund the security deposit in a timely manner.

We look forward to working with you toward moving in to your beautiful new apartment home.

Sincerely,

Latter & Blum Property Management, Inc.

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## 438 Main Street Homes Resident Qualifications

Our credit policy is to thoroughly investigate everyone making application within a community managed by Latter & Blum Property Management, Inc. All financially responsible parties living in our apartment homes must be 18 years of age or older, qualify and sign a lease. Each applicant must qualify on his/her own ability and a picture ID will be necessary to verify applicant and addresses with the application. The following qualifications are to ensure uniformity in leasing standards to all applicants and compliance with local, state and federal governmental regulations.

1. **Rental History** – Applicant must have 2 years verifiable present and past rental and/or mortgage history. Positive rental is no more than two late payments and no more than one paid NSF check within the 2-year period. In addition the resident must have no resident problem issues with current or prior landlord. If an eviction was filed, your application is automatically declined.
2. **Employment / Income Verification** – We verify your employment; name of employer; length of employment; any anticipated layoffs; gross salary. You Gross Monthly Income must be 3 times the monthly rental amount. (to include a \$100.00 monthly variance). If unemployed, you must show proof of unearned income that meets required gross monthly income ratio. If self-employed, applicant must provide copies of immediate past (2) years IRS tax returns and current bank statement that supports income stated. If child support and/or alimony is to be considered as income to qualify, applicant must provide proof that child support has been received for the past six months and a copy of the court order to verify monthly amount awarded.
3. **Credit Report** – Applicant must have a good credit record with no late payments beyond 60 days. All credit must be rated acceptable per community guidelines. Should you have outstanding balances on utilities and/or apartment communities, a receipt showing proof that all balances have been paid in full is necessary to be considered for residency. Applicants with less than positive credit records, discharged bankruptcy, repossessions, or first time renters may be considered with additional deposits and/or prepaid rent if approved by management.
4. **Non-U.S. Citizen** – You must qualify based on Numbers 1-4 above in addition to providing a temporary social security number as issued for a temporary work visa. Applicant's passport must be inspected to verify the time spent in the US is consistent with the residency disclosed on the rental application. We reserve the right, based upon our findings, to accept or reject your application.
5. **Background/Police (Check)**: All applicants 18 years or older residing at the community must have a Positive background. (This includes all lease holders and all occupants residing in the apartment.) A Negative Background Check will automatically disqualify an applicant. Positive Background is considered when: No record is found. All misdemeanor convictions will be evaluated based on the crime committed. Negative Background Check will automatically disqualify an applicant. Includes any felony convictions or guilty pleas committed (includes 3<sup>rd</sup> offense or greater DWI convictions) –OR– Violent crimes such as murder, rape, armed robbery and any sexual crime against children or adults committed at any time.
6. **Vehicle Parking** – All vehicles must have current licenses and inspection stickers as required by Louisiana Law. No unlicensed or inoperable vehicles allowed on the property. Each apartment is allowed 2 automobiles and must be owned by resident. No boat, RV, trailer or commercial truck (more than 2 axles) storage allowed on the premises.
7. **Pet Approval** – No pets are allowed at 438 Main Street Apartments. This does not apply to service animals.
8. **Smoking** – 438 Main Street Apartments is a non-smoking apartment community.
9. **Occupants** – only those listed on the lease can occupy an apartment.
10. **Occupancy Limits** – Number of occupants per apartment shall not exceed:
  - For 1 Bedroom – 2 persons
  - For 2 Bedroom – 4 persons
11. **Fees Owed to Process Application** – Non-refundable application fee and administrative fee plus the security deposit must be paid with application in order to process for occupancy. Upon move in, a copy of all occupants 18 years or older's valid driver's license or state identification card will be made for your permanent file.

Disclaimer: All prospective residents are screened to meet the above qualifications based on information supplied by sources deemed to be reliable. There may be occasions wherein limited information is available or supplied for screening and events may have occurred since the application was obtained. We, therefore, do not warrant representation that these qualifications are absolute for all existing residents. Management also reserves the right to offer residency to Corporate Companies. Corporate companies may utilize an independent screening process in qualifying their occupants.

\_\_\_\_\_  
Lessee

\_\_\_\_\_  
Lessor

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Date:

**\*If applying for residency via fax and / or mail a copy of a federally issued picture ID  
is required and all applications must be notarized.**





Desired Date of Occupancy: \_\_\_\_\_

Apt. Size \_\_\_\_\_

Apt. # \_\_\_\_\_

# LATTER & BLUM

PROPERTY MANAGEMENT INC. / REALTORS®  
ACCREDITED MANAGEMENT ORGANIZATION®

## RENTAL APPLICATION

The information collected below will be used to determine whether you qualify as a tenant. It will not be disclosed without your consent except to your employers for verification of income and employment and to financial institutions for verification of assets, and as required and permitted by law. You do not have to provide the information. However, if you do not, your tenant application may be delayed or rejected.

Applicant's Name					Present Phone #:
Present Street Address	Apt. #	City	State	Zip	Monthly Rent: \$
Present Community Name			Landlord Phone #:		Length of Residence:
Former Street Address	Apt. #	City	State	Zip	Monthly Rent: \$
Reason For Leaving:			Landlord Phone #:		Length of Residence:

Spouse's Name					Present Phone #:
Present Street Address	Apt. #	City	State	Zip	Monthly Rent: \$
Present Community Name			Landlord Phone #:		Length of Residence:
Former Street Address	Apt. #	City	State	Zip	Monthly Rent: \$
Reason For Leaving:			Landlord Phone #:		Length of Residence:

## HOUSEHOLD COMPOSITION

	Full Name	Relationship	Age	Social Security #	Date of Birth	Full Time Student?
1					____/____/____	[ ] Yes [ ] No
2					____/____/____	[ ] Yes [ ] No
3					____/____/____	[ ] Yes [ ] No
4					____/____/____	[ ] Yes [ ] No
5					____/____/____	[ ] Yes [ ] No
6					____/____/____	[ ] Yes [ ] No

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Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.

Are any household members listed above foster children? ☐ Yes ☐ No If yes, who? \_\_\_\_\_

Are any household members listed above live-in attendants? ☐ Yes ☐ No If yes, who? \_\_\_\_\_

Are any household members planning to attend school full-time? ☐ Yes ☐ No If yes, who? \_\_\_\_\_

Does anyone live with you now who is not listed above? ☐ Yes ☐ No

Does anyone plan to live with you in the future who is not listed above? ☐ Yes ☐ No

Do you anticipate any changes to your household composition in the next twelve months? ☐ Yes ☐ No

Please explain if you answer "Yes" to a question above: \_\_\_\_\_

### CURRENT EMPLOYMENT INFORMATION

Applicant's Name:		Occupation:		Employer's Phone:	
Name and Address of Employer:		City		State	Zip Code
Date Hired	Salary \$ <input type="radio"/> Hourly <input type="radio"/> Weekly <input type="radio"/> Bi-weekly <input type="radio"/> Semi-monthly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Other			Employer Fax:	
Name and address of previous employer (if employed at present position less than 2 yrs.)		# of years with previous employer		Employer's Phone:	

Spouse's Name:		Occupation:		Employer's Phone:	
Name and Address of Employer:		City		State	Zip Code
Date Hired	Salary \$ <input type="radio"/> Hourly <input type="radio"/> Weekly <input type="radio"/> Bi-weekly <input type="radio"/> Semi-monthly <input type="radio"/> Monthly <input type="radio"/> Yearly <input type="radio"/> Other			Employer Fax:	
Name and address of previous employer (if employed at present position less than 2 yrs.)		# of years with previous employer		Employer's Phone:	

If you have no salary, from what source will you pay your rent? \_\_\_\_\_



### OTHER SOURCES OF INCOME

Do you receive income from any of the following? Please mark "yes" or "no" for each source of income.

Source – Employment	Check One	Source – Benefit/Pensions	Check One	Source – Other	Check One
Second Job	<input type="checkbox"/> Yes <input type="checkbox"/> No	Workers Compensation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Grants	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bonuses	<input type="checkbox"/> Yes <input type="checkbox"/> No	Unemployment	<input type="checkbox"/> Yes <input type="checkbox"/> No	Scholarships	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tips	<input type="checkbox"/> Yes <input type="checkbox"/> No	Alimony	<input type="checkbox"/> Yes <input type="checkbox"/> No	Recurring Gifts	<input type="checkbox"/> Yes <input type="checkbox"/> No
Commissions/Fees	<input type="checkbox"/> Yes <input type="checkbox"/> No	Child Support	<input type="checkbox"/> Yes <input type="checkbox"/> No	AFCD/TANF	<input type="checkbox"/> Yes <input type="checkbox"/> No
Overtime Pay	<input type="checkbox"/> Yes <input type="checkbox"/> No	Social Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other	<input type="checkbox"/> Yes <input type="checkbox"/> No

For each "yes" marked above, please complete the following:

Household Member Name	Amount Received	Source
	\$ Per	
	\$ Per	
	\$ Per	
	\$ Per	

### HOUSEHOLD ASSETS

Does anyone in your household have any of the following types of assets? Please mark "yes" or "no" for each type of asset.

Type of Asset	Check One	Type of Asset	Check One	Type of Asset	Check One
Checking Account	<input type="checkbox"/> Yes <input type="checkbox"/> No	IRA/Keogh Account*	<input type="checkbox"/> Yes <input type="checkbox"/> No	Revocable trust fund	<input type="checkbox"/> Yes <input type="checkbox"/> No
Savings Account	<input type="checkbox"/> Yes <input type="checkbox"/> No	Retirement/Pension Fund*	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mortgage/Note Held	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cash	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mutual Funds/Stocks*	<input type="checkbox"/> Yes <input type="checkbox"/> No	Life Insurance Policy*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Certificate of Deposit*	<input type="checkbox"/> Yes <input type="checkbox"/> No	Real Estate/Land*	<input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Property Held As Investment	<input type="checkbox"/> Yes <input type="checkbox"/> No

For each "yes" marked above, please complete the following:

Household Member Name	Type of Asset	Cash value (see note)	Interest asset will earn next 12 mos
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Note: \*When listing the cash value of any of the items that have an asterisk, remember penalties for withdrawal, or any fees deducted to convert the asset to cash (e.g., if you owned a home and sold it, how much cash would you have after you paid off the mortgage, the realtor, etc?) That is the amount to be listed in the "cash value" column.

Have you sold or disposed of any property for less than fair market value within the past two years preceding the date of this application? (If sale due to bankruptcy, foreclosure, divorce, answer no.) ☐ Yes ☐ No

If yes, explain. \_\_\_\_\_

**Vehicles:** Number of automobiles, boats, motorcycles, trailers, RV's, etc. you would keep on this property.

Vehicle Make/Model: _____	Year: _____	License Plate #: _____
Vehicle Make/Model: _____	Year: _____	License Plate #: _____
Vehicle Make/Model: _____	Year: _____	License Plate #: _____

**DO YOU HAVE PETS?**

[ ] Yes [ ] No

If Yes, please list:

Type	Breed	Weight	Color	Age
Type	Breed	Weight	Color	Age

**Background Information**

Have you, your spouse or any other prospective residents or occupants listed on this Application ever (check if applicable; you represent the answer is "NO" to any item not checked below):

<input type="checkbox"/> been evicted or asked to move out?	<input type="checkbox"/> received deferred adjudication for either a
<input type="checkbox"/> broken a rental agreement or lease contract?	Felony, a sex related offense or a
<input type="checkbox"/> been or are currently delinquent to a previous landlord?	Misdemeanor? If yes, please explain: _____
<input type="checkbox"/> declared bankruptcy; if so, when?: _____	
<input type="checkbox"/> been convicted for either a felony, a sex-related offense	<input type="checkbox"/> been arrested for any crime, which has not
or a misdemeanor? If yes, please explain: _____	been fully adjudicated (by dismissal, acquittal
	deferred adjudication or conviction)? If yes,
	please explain: _____

**Emergency Contact (preferable a relative over the age of 18 years)::**

Name	Address
City, State, Zip	Relationship
Phone	

The information provided above is true and complete to the best of my/our knowledge and belief. I/We consent to the disclosure of income and financial information from my/our employer and financial references for purposes of income and asset verification related to my/our application for tenancy. By signing below, I/We authorize \_\_\_\_\_ to make inquiries through the Credit Bureau and/or from my/our employer and other references that I/We have supplied on this rental application.

This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by an officer of said company and delivery of a lease covering said premises. Please allow a minimum of 5 days to process your application for both credit and character references. I/We have no objection to inquiries for the purposes of verification of the above statements. This includes a police check. It is understood that the above information will be held in strict confidence.

Falsification of application information will result in termination of application and/or Lease Agreement. I/We have been advised and understand that residency at \_\_\_\_\_ entails certain income restrictions and that residency is subject to qualification. I/We agree that in addition to a Lease Agreement that



I/We will execute a **Tenant Income Certification** attesting to the information contained herein which certification will be made under the penalty of perjury.

**APPLICATION DEPOSIT AND NON-REFUNDABLE FEES:**

Simultaneously with the execution of this Application, Applicant has paid:

Application Deposit (the "Application Deposit") \$	_____	Check Number: _____
Non-Refundable Application Fee \$	_____	Check Number: _____
Total \$	_____	

*Applicant acknowledges that Owner's acceptance of Applicant as a resident at the property is conditional upon: (i) Owner's approval of this Application; and (ii) receipt of an executed Apartment Lease Agreement from Applicant. In the event any of these conditions have not been met, Owner shall have no obligation to lease to Applicant.*

*The Application Deposit is not considered a security deposit under this Application or applicable law. The Application Deposit will either be: (i) credited to the required security deposit pursuant to an Apartment Lease Agreement executed by Applicant; (ii) refunded to Applicant as provided herein; or (iii) retained by Owner as liquidated damages as provided herein.*

**Application Deposit Credited to Security Deposit**

*In the event that this Application is approved by Owner and Applicant meets all other conditions of occupancy, executes an Apartment Lease Agreement with Owner as and when required by Owner, the Application Deposit shall be credited towards the security deposit identified in the Lease.*

**Application Deposit Refunded**

*If this Application is denied, the Application Deposit will be refunded to Applicant.*

**Application Deposit Retained by Owner**

*Owner shall be entitled to retain the Application Deposit as liquidated damages; in which case, all further obligations to lease the premises to Applicant shall be terminated if: (i) the Application is withdrawn, for any reason, after signing this Application; or (ii) the Application is accepted, but Applicant does not sign an Apartment Lease Agreement as and when required by Owner; or (iii) if the Applicant has provided false or misleading information within this Application. For the purposes of this provision, if the Applicant is required to pay an additional Application Deposit in order to qualify for occupancy, the Applicant shall be deemed conditionally accepted prior to the payment of such additional Application Deposit and the failure to pay the additional Application Deposit will entitle Owner to retain the originally paid Application Deposit, even if the Application is subsequently rejected by the Applicant's failure to pay the required additional Application Deposit.*

Dated effective on the date Owner or Owner's representative has received a completed Application from Applicant, as indicated above.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

Application Approved ☐ Denied ☐ by: \_\_\_\_\_

Date: \_\_\_\_\_

Notification of Approval / Denial by: \_\_\_\_\_

Date: \_\_\_\_\_

Reason NOT Approved (if applicable) \_\_\_\_\_



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EMPLOYMENT VERIFICATION

THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY TENANT

TO: (Name & address of employer)

Date: \_\_\_\_\_

RE: \_\_\_\_\_  
Applicant/Tenant Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Unit # (if assigned)

I hereby authorize release of my employment information.

\_\_\_\_\_  
Signature of Applicant/Tenant

\_\_\_\_\_  
Date

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

\_\_\_\_\_  
Project Owner/Management Agent

Return Form To:

THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Presently Employed: Yes \_\_\_\_\_ Date First Employed \_\_\_\_\_ No \_\_\_\_\_ Last Day of Employment \_\_\_\_\_

Current Wages/Salary: \$ \_\_\_\_\_ (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other \_\_\_\_\_

Average # of regular hours per week: \_\_\_\_\_ Year-to-date earnings: \$ \_\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_

Overtime Rate: \$ \_\_\_\_\_ per hour Average # of overtime hours per week: \_\_\_\_\_

Shift Differential Rate: \$ \_\_\_\_\_ per hour Average # of shift differential hours per week: \_\_\_\_\_

Commissions, bonuses, tips, other: \$ \_\_\_\_\_ (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other \_\_\_\_\_

List any anticipated change in the employee's rate of pay within the next 12 months: \_\_\_\_\_; Effective date: \_\_\_\_\_

Additional remarks: \_\_\_\_\_

\_\_\_\_\_  
Employer's Signature

\_\_\_\_\_  
Employer's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer [Company] Name and Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Fax #

\_\_\_\_\_  
E-mail

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Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.

**LATTER & BLUM**  
PROPERTY MANAGEMENT INC. / REALTORS®  
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**TENANT RELEASE AND CONSENT**

I/We \_\_\_\_\_, the undersigned hereby authorize all persons or companies in the categories listed below to release without liability, information regarding employment, income, and/or assets for the purposes of verifying information on my/our apartment rental application.

**INFORMATION COVERED**

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are not limited to: personal identity, student status, employment, income, assets, medical or child care allowances. I/We understand that this authorization cannot be used to obtain information about me/us that is not pertinent to my eligibility for and continued participation as a Qualified Tenant.

**GROUPS OR INDIVIDUALS THAT MAY BE ASKED**

The groups or individuals that may be asked to release the above information include, but are not limited to:

Past and Present Employers	Welfare Agencies	Veterans Administration
Previous Landlords (including	State Unemployment Agencies	Retirement Systems
Public Housing Agencies)	Social Security Administration	Banks and other Financial
Support and Alimony Providers	Medical and Child Care Providers	Institutions
Educational Institutions	Utility Providers	

**CONDITITONS**

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and will stay in effect for a year and one month from the date signed. I/We understand I/We have a right to review this file and correct any information that is incorrect.

**SIGNATURES**

Applicant/Resident	(Print Name)	Date
Co-Applicant/Resident	(Print Name)	Date
Adult Member	(Print Name)	Date
Adult Member	(Print Name)	Date

**NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.**

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**LATTER & BLUM PROPERTY MANAGEMENT, INC.**  
**SECURITY DEPOSIT AGREEMENT**

Date: \_\_\_\_\_

Received from \_\_\_\_\_, \$ 500.00 CK / MO as a Security Deposit for Unit # \_\_\_\_\_ of the 438 Main Apartments. Lessee is aware that if their application is not approved, the security deposit will be refunded and Lessee will not be allowed to occupy the apartments. If the application is approved, this deposit will hold the above referenced unit for the Lessee. If Lessee decided not to move in, the security deposit will be forfeited.

Lessor agrees that, subject to the conditions listed below, this Security Deposit will be returned in full.

The undersigned Lessee agrees that this Security Deposit may not be applied as rent, and that the full month's rent will be paid the first day of each month, including the last month of occupancy.

\_\_\_\_\_  
AGENT FOR LESSOR

\_\_\_\_\_  
LESSEE

\_\_\_\_\_  
LESSEE

RELEASE OF THE SECURITY DEPOSIT IS SUBJECT TO THE FOLLOWING PROVISIONS:

1. **Full term of Lease has expired.**
2. **Thirty days written notice was given prior to leaving the apartment.**
3. No damage to property beyond fair wear and tear.
4. Entire apartment, including range, exhaust fan, refrigerator, bathrooms, closets and cabinets are clean.
5. All burned out light bulbs are to be replaced.
6. No damage to carpet beyond normal wear and tear. **Carpet must be professionally steam cleaned by resident upon moveout.**
7. All unpaid charges are current, to include late charges, delinquent rent and maintenance invoice.
8. All keys are returned.
9. All debris, rubbish and discards are removed from the unit and placed in appropriate containers.
10. Forwarding address left with manager.
11. All terms of the lease are complied with.

The costs of labor and materials for cleaning and repairs and delinquent payments will be deducted from Security Deposit if all above provisions are not complied with. The Security Deposit will be refunded by check, mailed to the forwarding address, made payable to all persons signing the lease. Refunds cannot be picked up at the office.

IV-C

Revised 6/04/2001