

APPLICATION FOR RULE FOR POSSESSION OF PREMISES

EVICCTIONS DIVISION

FIRST CITY COURT ~ PARISH OF ORLEANS, STATE OF LOUISIANA

421 LOYOLA AVENUE, ROOM 201 ~ NEW ORLEANS, LA. 70112

Telephone: (504) 407-0400

MUST BE TYPED OR PRINTED

Plaintiff: (Landlord or Property Owner)

Full Name _____

Street Address _____

Full Name _____

City, State, Zip _____

Landlord/Owner Phone Number (above) _____

Defendant(s): (Tenant(s) being evicted)

Landlord/Owner Email Address (above) _____

Full Name _____

Street Address (**Eviction Address**) _____

New Orleans, LA. (ZIP CODE) _____

Full Name _____

TENANT'S PHONE NUMBER: _____

Full Name _____

Check One:

Residential

Commercial

Person Filing:

(Choose One) Same as Plaintiff (Skip to next section) Owner Attorney Agent Other

Full Name _____

City, State, Zip _____

Street Address _____

Phone _____

NEED LEGAL HELP? COURT STAFF CANNOT GIVE LEGAL ADVICE.

Consider calling a lawyer right away. The New Orleans Bar Association's Lawyer Referral Service can be reached at **561-8828**. If you qualify, you may be able to get free legal help from

SOUTHEAST LOUISIANA LEGAL SERVICES - call 529-1000.

Information on evictions can also be found at www.louisianalawhelp.org.

IF YOU NEED TO CONTACT THE COURT

Is there a written lease in effect?

Yes

No

Section 'A' Judge Monique Morial 504-407-0340

Section 'B' Judge Marissa Hutabarat 504-407-0350

Section 'C' Judge Veronica Henry 504-407-0360

Section 'D' Judge Ernestine Trahan 504-407-0431

REASON(S) FOR EVICTION: For AMERICAN WITH DISABILITIES ACT (ADA) accommodation requests, contact Ambrose Pratt at (504) 407-0401. An ADA request form can also be found at www.orleanscdc.com.

OWNER WANTS POSSESSION DUE TO NON-PAYMENT OF RENT.

MANDATORY (if the information below is not provided, the Rule For Possession may be dismissed).

Rent Amount: \$ _____ per _____. Number of rent period(s) late: _____.

Total Owed: \$ _____ Date Beginning: _____ Date Ending: _____.

Court Fees Owed: \$ _____.

DEFENDANT VIOLATED LEASE PROVISION(S) OTHER THAN PAYING RENT.

Please provide specific provision and explain (2 copies of lease must be provided and attached):

LEASE HAS EXPIRED AND/OR OWNER WANTS POSSESSION OF THE PREMISES. The defendant in rule herein has been notified to vacate according to law. (May require 10 days or more notice.)

Select if applicable:

Lease attached - **REQUIRED**

Five day notice waived (lease must be current and attached)

Is this a Section 8 property:

Yes

No

Date Filed: _____

Print Name – Person Filing _____

Signature of Filer _____

NOTICE: FACE COVERINGS/MASKS ARE REQUIRED.
The attached document explains the Court's COVID-19 protocols and Americans with Disabilities Act (ADA) accommodation requests. If you are disabled or seek a COVID-19 accommodation, contact **Ambrose Pratt at (504) 407-0401 before your scheduled hearing date.**