Metairie Towers Settlement Administrator
P.O. Box 3637
Baton Rouge, LA 70821

Your Claim Form Must Be Postmarked On or Before 11/10/2025

Metairie Towers Class Action Sworn Claim Form

24th Judicial District Court, Parish of Jefferson, Civil Action Number 839-979

(NOTE: A separate Sworn Proof of Claim Form MUST be completed for each claimant)
(NOTE: This Sworn Proof of Claim Form MUST be notarized)

GENERAL CLAIM FORM INFORMATION

If you owned a condominium at Metairie Towers Condominium complex located at 401 Metairie Road, Metairie, Louisiana 70005 continuously from August 29, 2021 through April 21, 2023 and/or you bought a condominium at Metairie Towers after August 29, 2021 and owned it until April 21, 2023, you could receive monetary benefits from a partial class action settlement.

Please read the full notice of this settlement at **www.MetairieTowersSettlement.com** carefully before filling out this Form.

To participate, you must fill this claim form out completely and mail it to **Metairie Towers Settlement Administrator, P.O. Box 3637, Baton Rouge, LA 70821 or email it to info@MetairieTowersSettlement.com**. This Claim form must be postmarked no later than **November 10, 2025**. If you provide incomplete or inaccurate information, your claim may be denied.

Keep a copy of your completed Claim Form for your records. Any proof of ownership, identification documentation, or other documents you submit with your Claim Form cannot be returned.

If your claim is rejected for any reason, the Settlement Administrator will notify you of the rejection and the reasons for such rejection.

Part 1: Eligibility Questions

1. Did you own a condominium at Metairie Towers Condominium complex located at 401 Metairie Road, Metairie Louisiana, 70005 continuously, from August 29, 2021 through April 21, 2023 and/or did you acquire ownership of a condominium at Metairie Towers after August 29, 2021 and retain ownership until April 21, 2023?

Yes ☐ No ☐

No: If you checked "No", you are not eligible to participate in this settlement.

Yes: Please complete the remaining Proof of Claim Form including attaching the correct supporting documents.

2. Please provide a listing of the unit number(s) you owned and whether it was a one bedroom unit or a two bedroom unit?

a. Unit No. _____ One Bedroom ☐ Two Bedroom ☐

b. Unit No. _____ One Bedroom ☐ Two Bedroom ☐

c. Unit No. _____ One Bedroom ☐ Two Bedroom ☐

d. Unit No. _____ One Bedroom ☐ Two Bedroom ☐

You are eligible for payment only if you answered "Yes" for Question 1.

To apply for a payment you must complete this Sworn Proof of Claim Form, sign and have notarized your Claim Form and mail it to:

P.O. Box 3637, Baton Rouge, LA 70821 postmarked by November 10, 2025.

You can also e-mail the signed and notarized documents to: **info@MetairieTowersSettlement.com**.

If you have questions about your eligibility to participate or on how the Settlement Fund will be distributed, you should review the Class Notice and other documents at the website. You may also call 1-504-231-9513 if you have any questions.

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(NOTE: This Sworn Proof of Claim Form MUST be notarized)

Part 2: Class Member Information

Type or print neatly in blue or black ink.

First Name _____ Middle Initial _____

Last Name _____ Suffix _____

Entity/Business Name _____

Person to contact if there are questions regarding this claim form. _____

Specify one of the following:

☐ Individual ☐ Business

Due to the estimated claim award, you must provide your SSN/TIN to satisfy tax reporting obligations.
If you do not provide your SSN/TIN, your claim may be delayed or denied.

Individuals: Provide Social Security Number: ☐☐☐ - ☐☐ - ☐☐☐☐

Date of Birth (Month and Year): ☐☐ / ☐☐ / ☐☐☐☐

Businesses: Provide your Federal Taxpayer Identification Number: ☐☐ - ☐☐☐☐☐☐☐

Date of Formation or Incorporation: ☐☐ / ☐☐ / ☐☐☐☐

Contact Information

Current Mailing Address: Number and Street or P.O. Box _____

City _____ State _____ Zip Code _____

Telephone Number (Day) _____ Email Address _____

Claim Information

Claimant must provide (1) proof of ownership and (2) identity. Ownership can be proved by submitting at least one form of documentation including but not limited to, tax bill, property insurance bill, recorded bill of sale or deed, or court order. Identity can be proved by any government-issued identification, such as a driver's license, identification card, or passport.

Part 3: Sign, Date, and Have Notarized

I hereby swear and affirm, under penalty of perjury, that all of the foregoing information is true and correct:

Signature of Class Member _____ Date _____

Printed Name of Class Member _____

Signature of Representative of Class Member (if applicable) _____

Sworn to and Subscribed before me, Notary, on the _____ day of _____, 2025.

NOTARY _____

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Mail Completed Form To:

METAIRIE TOWERS SETTLEMENT ADMINISTRATOR
P.O. Box 3637
Baton Rouge, LA 70821

REMINDER:

Please make sure that you:

1. Complete all three parts of this Claim Form;
2. Sign, date and notarize the Claim Form, and include supporting documentation;
3. Submit your Claim Form via mail **postmarked no later than November 10, 2025** to:

METAIRIE TOWERS SETTLEMENT ADMINISTRATOR

P.O. Box 3637

Baton Rouge, LA 70821 or email it to: info@MetairieTowersSettlement.com.

4. Keep a copy of the completed Claim Form for your records;
5. Retain a copy of any proof of ownership and identification documentation you submit until your claim is closed. You will be notified if you are required to provide additional documentation during the claim verification process.