

Mutual Exchange Request Form

SECTION 1 – Please give details about you and your household

For both the **main and joint applicants** named in section 1 of your application, we will require:

- 1 PHOTOGRAPHIC PROOF of ID (e.g. passport or driving licence and
- 2 PROOFS OF RESIDENCE (e.g. recent utility bill, bank statement, benefit letter) AND
- 2 PROOFS OF INCOME (e.g. recent bank statement, wage slip, P60 form, benefit letter)
- PROOF OF NATIONAL INSURANCE NUMBER (e.g. benefit letter, wage slip, NI card)

Main Tenants Name:			
Joint Tenants Name:			
Current Address:			
Postcode:			
Telephone Number(s)			
E-mail Address:			

Your Household – Please give details about yourself and the people who will be moving with you

First Name	Surname Name	Gender	Date of Birth	National Insurance Number	How are they related to you?

Is any member of your household pregnant? <input type="checkbox"/> - Yes <input type="checkbox"/> - No	
If yes, please provide a copy of MATB1 form and state expected due date	
Are you or any of your household subject to an anti-social behaviour order? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you or any member of your household have any unspent criminal convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you or any member of your household have any health or wellbeing issues that require adaptations to the property? (I.e. Level access shower, wheelchair access) <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please give details of the adaptations required:	
Do you have any pets that will be moved with you? <input type="checkbox"/> - Yes <input type="checkbox"/> - No	
If yes, please give details	

Please give your reasons for seeking an exchange:

Where did you find your home swap? <input type="checkbox"/> - Swap and move <input type="checkbox"/> - Homeswapper <input type="checkbox"/> - Social Media <input type="checkbox"/> - Other Swap website <input type="checkbox"/> - Other (please state)
--

Your current home - Please give details about your current property

Date you moved in	Type of property (i.e. house, flat)	Number of bedrooms	What floor level is your property on?	Landlord

What is your current weekly rent charge?	£
Do you have any rent arrears?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please state total of rent arrears owed	£

Please provide details for your current Landlord

Landlords Name	
Landlords Address	
Telephone Number	
E-mail Address (if known)	

Please give details of yours and any joint applicant's income

Main Applicants Name

Current employment status: -Full time work -Part-time work -Job seeker -Retired
-Not seeking work -Long-term sick/disabled -Full time student/training scheme
-Other (please state

Occupation: _____ Hours worked (if part time) _____
 Net Earnings: £ _____ - Week - Month

Please give details of any of the following benefits or pensions that you are in receipt of

Universal Credit	£	Week/Month	Housing Benefit	£	Week/Month
Income Support	£	Week/Month	Jobseekers Allowance	£	Week/Month
ESA (work)	£	Week/Month	ESA (support)	£	Week/Month
Child Tax Credit	£	Week/Month	Child Benefit	£	Week/Month
Working Tax Credit	£	Week/Month	State pension	£	Week/Month
Pension credits	£	Week/Month	Occupational pension	£	Week/Month
Other Income/earnings	£			£	Week / Month

Joint Applicants Name

Current employment status: -Full time work -Part-time work -Job seeker -Retired
-Not seeking work -Long-term sick/disabled -Full time student/training scheme
-Other (please state

Occupation: _____ Hours worked (if part time) _____
 Net Earnings: £ _____ - Week - Month

Please give details of any of the following benefits or pensions you are in receipt of

Universal Credit	£	Week/Month	Housing Benefit	£	Week/Month
Income Support	£	Week/Month	Jobseekers Allowance	£	Week/Month
ESA (work)	£	Week/Month	ESA (support)	£	Week/Month
Child Tax Credit	£	Week/Month	Child Benefit	£	Week/Month
Working Tax Credit	£	Week/Month	State pension	£	Week/Month
Pension credits	£	Week/Month	Occupational pension	£	Week/Month
Other Income/earnings	£			£	Week / Month

Are you or any household member claiming housing benefit or universal credit towards the housing costs at your current address? Housing Benefit - Universal Credit - Not claiming -
Does this cover all or part of your housing costs? Yes - No - Don't know -
Do you intend to claim housing benefit or universal credit for the housing costs at your new address?
 Yes - No - Don't know -

Do you or the joint applicant have any savings	Yes - <input type="checkbox"/> No - <input type="checkbox"/>	Please state amount £
Do you or the joint applicant own any property,	Yes - <input type="checkbox"/> No - <input type="checkbox"/>	If, yes, please give details:

land or businesses?		
---------------------	--	--

SECTION 2 – Please give details of the property and tenant(s) you wish to exchange homes with.

2nd tenant's details for 2 way swap

Main Tenants Name:	First Name:	Surname:
Joint Tenants Name:	First Name:	Surname:
Current Address:		
Postcode:		
Telephone Number(s)		
E-mail Address:		

Please give details of the property you want to move to:

Date tenants moved in	Type of property (i.e. house, flat)	Number of bedrooms	What floor level is the property on?	Weekly rent charged (£)
				£

Please provide details of the Landlord for the property

Landlords Name	
Landlords Address	
Telephone Number	
E-mail Address (if known)	

SECTION 3 – If you are requesting a 3 way exchange, Please give details of the property and tenant(s) you wish to exchange homes with.

3rd tenant's details for 3 way swap

Main Tenants Name:	First Name:	Surname:
Joint Tenants Name:	First Name:	Surname:
Current Address:		
Postcode:		
Telephone Number(s)		
E-mail Address:		

Please give details of the property you want to move to:

Date tenants moved in	Type of property (i.e. house, flat)	Number of bedrooms	What floor level is the property on?	Weekly rent charged (£)
				£

Please provide details of the Landlord for the property

Landlords Name	
Landlords Address	

Telephone Number	
------------------	--

Declaration and Consent

Please read the following statement and sign to confirm you understand and agree

- I confirm that all the information on this form is correct and I give my permission to check the details and obtain further information if required. The Landlord you are applying to may seek references about the management of your tenancy from current or previous landlords.
- I have viewed the property I plan to exchange to and am happy that it is suitable for my needs (including any medical requirements) and I am happy with the condition of the property.
- I understand the information provided in this form is covered by the Data Protection Act 1998 and you will not pass it on to others without my permission.
- I understand that the landlords involved in this exchange will access the information in this form to assess the application in accordance with their own exchange policy.
- I am aware that if I have a right to buy this maybe affected by any mutual exchange
- I confirm that any joint tenant has been consulted about the proposed exchange, gives their consent and is not seeking a transfer of tenancy to their sole name
- I understand that I must not exchange properties until all Landlords involved have given their written consent and all exchange parties and Landlords have signed a new tenancy agreement.
- I agree to allow access to my Landlord for a full inspection of my current property.
- I confirm that no money or gifts have or will be given to or accepted from the exchanging parties for the purpose of the mutual exchange. I understand that receiving/giving money or gifts for the purpose of an exchange will be treated as tenancy fraud and could result in the loss of my tenancy.
- I am aware that after a mutual exchange has been completed the Landlord will not consider making any alterations to the property. I confirm that I have checked the property is suitable for any existing medical needs.
- I accept the condition of the property and will take over any repairs or alterations which are the out-going tenant's responsibility
- I am aware that the Landlord will not accept any responsibility for any costs incurred as part of the exchange.

Signature of Main tenant	Date	
Print Name – Main tenant		
Signature of Joint tenant	Date	
Print Name – Joint tenant		

Please return your completed form along with the relevant requested ID. The parties that you are wishing to exchange with should also have completed a Mutual Exchange application form and all forms should be returned to

**Broadacres Housing Association
 Freepost RRBZ-TATA-BYHL
 Mount View, Standard Way, Northallerton, North Yorkshire DL6 2YD**