

Application for a
Mutual Exchange of Tenancies



PLEASE FILL IN THIS APPLICATION IF:

You have found someone to exchange properties with and wish this exchange to be considered

1. Your details

Mr / Mrs / Miss / Ms (Delete as applicable)

Full Name	<input type="text"/>	Home	<input type="text"/>
Address	<input type="text"/>	Daytime	<input type="text"/>
	<input type="text"/>	Mobile	<input type="text"/>
Date of Birth	<input type="text"/>		

2. How long have you lived at the above address? Years Months

3. Who is your landlord?
What is his/her address?

4. Are you the sole tenant of the above property?

Yes If your answer is yes, please go to question 5 No If your answer is no, please give details below

4a. Who else is a tenant of the above property?

Mr / Mrs / Miss / Ms (Delete as applicable)

Full Name
Date of Birth

4b. Do they live at the property with you?

Yes No If your answer is no, please give details below

If no, please give their address;

What type of property do they live in? (Please tick)

House Flat Bungalow Maisonette
Warden served Accommodation

6. How many bedrooms are there in your property?

7. If your property is a flat, is it on the:

Ground Floor 1st Floor Above 1st Floor

8. Who else lives at the property with you?

Full Name	Date of Birth	Sex	Relationship to you

9. Are you or anyone else in your household expecting a child?

Yes No

If yes, who is pregnant?
When is the baby due?

10. Is there anyone else not mentioned above who you wish to live with you if you exchange?

Yes No

If yes, please give details below;

Mr / Mrs / Miss / Ms (Delete as applicable)

Full Name

Address

Date of Birth Sex Relationship (to applicant)

11. Do you have any pets?

Yes No

12. Are you or your partner employed?

Yes No

If yes, please give details below;

13. Details of the person who you wish to exchange with

What is their name?

What is their address?

Who is their landlord?

What type of property do they live in? (Please tick)

House Flat Bungalow Maisonette
Warden served Accommodation

How many bedrooms does the property have?

If your property is a flat, is it on the:

Ground Floor 1st Floor Above 1st Floor

THE FOLLOWING MUST BE COMPLETED BY ALL APPLICANTS

14. Why do you wish to move from your current home?

15. Do you currently have tenancy of a Company garage?

Yes No

If yes, please give the address

16. Have you made any improvements or alterations to your home?

Yes No

If yes, please give the address

17. Please note that a property inspection is required prior to your request being authorised. Please confirm which weekday would be convenient for an officer to call at your home?

The details given on this form are true to the best of my knowledge. I have read and understood the conditions of mutual exchange supplied by Aspire Housing.

(Both tenants must sign the form if you have a joint tenancy)

Signed

Date of Birth

Signed

Date of Birth

**PLEASE NOTE:
IF YOU ARE CURRENTLY IN ANY RENT ARREARS YOUR APPLICATION WILL NOT BE
CONSIDERED UNTIL THEY ARE CLEARED.**