

*Only to be completed when you have found someone you want to exchange with
Please complete this form in full using type or black ink.*

Return the completed form to:
Tenancy Services
Alexandra House, Level 6,
10 Station Road, London, N22 7TR

1 Tenant details

Mr Mrs Ms

Family name First name

Date of birth dd/mm/yy

Address

Address

Postcode

Phone

Email address

2 Details of the person I want to exchange with

Family name First name

Address

Address

Postcode

Phone

Email address

3 Name and contact details of the other landlord

Name

Address

Address

Postcode

Phone

Housing manager (if known)

Email address

My household details						How long at this address
Family name	First name	Relationship to tenant	Male or female	Date of birth		
Does anyone in your household have a disability? If yes - please give details						
Is anyone in your household pregnant? If yes - please give details						
Do you have any pets? If yes - please give details						
Property details						
Property type	Flat <input type="checkbox"/>	Maisonette <input type="checkbox"/>		House <input type="checkbox"/>		
Number of bedrooms						
Which floor						
Does the property have adaptations? If yes - please give details						
Have you made any alterations to the property? If yes - please give details						
Did you get written permission? If yes - please provide copy of permission						
Reasons why you want to exchange?						
How did you find your exchange partner?						

6	Eligibility		
	Is your tenancy secure/ assured? <i>Note: only secure/assured tenants can exchange</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Will you be over or under occupying the other property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Is this your only or principal home?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Do you have any rent arrears or other debts on your property? <i>Note: you may not get permission to move if you have arrears</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Are you affected by the bedroom tax? Or other welfare or housing changes? If yes - please give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Are you, or is any member of your household subject to an anti social behaviour order? If yes - please give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Have you, or has any member of your family ever been evicted for anti-social behaviour? If yes - please give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Is there any outstanding legal action against you? If yes - please give details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7	Any other information		
8	About the property I want to move to		
	I have carefully inspected the property and understand that the proposed exchange is subject to the following:		
✓	I accept the property in its present condition including decoration and cleanliness.		
✓	The property is suitable for my medical needs.		
✓	I am aware that the landlord will only carry out essential repairs.		
✓	I accept full responsibility for any defects or damages to the property caused by the previous tenant.		
✓	I have been told in writing what will be taken and what will be left in the property.		

9	Declaration	
✓	I understand that I must not exchange properties until BOTH landlords have given written consent and BOTH sets of tenants have signed a new tenancy agreement.	
✓	I confirm that all the information I have provided on this form is correct.	
✓	I understand that my landlord may reject my application or seek to evict me if I give false or misleading information.	
✓	I understand that the landlord I am applying to may seek references about the management of my tenancy from both current and previous landlords.	
✓	I am aware that if I have a 'right to buy' this may be affected by any mutual exchange.	
✓	I confirm that my husband/wife/cohabite (if I have one) has been consulted about the proposed exchange, gives their consent and is not seeking transfer of tenancy to their sole name.	
✓	I am aware that the landlord will not accept any responsibility for any costs incurred as part of the exchange.	
	Signed	
	Signature	
	Name	
	Date	
	For office use only	
	<input type="checkbox"/> Supporting documentation received	
	<input type="checkbox"/> Approved	
	<input type="checkbox"/> Rejected	
	Tenancy Management Officer	
	Signature	Date
	Name	
	Team Leader	
	Signature	Date
	Name	
	<input type="checkbox"/> Letter sent	Date