



## NEIGHBOURHOOD SERVICES

### MUTUAL EXCHANGE BETWEEN

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AND**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Conditions of Mutual Exchange

If you need help to complete this form please contact your Neighbourhood Housing Team.

When we receive your form we will assess the suitability of the exchange. We may share the information you give us with other registered social landlords or local authorities to help us decide whether to give you permission to exchange. We must agree or refuse permission for your mutual exchange within 42 days.

**If you owe us any rent or other money, you cannot exchange until you have paid it off.**

You may not pay the same rent when you move as the person with whom you are exchanging and your rights may change, for instance you may lose the Right to Buy.

You can only exchange if the property is the right size for your family. This table shows the types of property that are generally suitable for different sizes of family; but please discuss your personal circumstances with your housing officer.

A couple / Single person	1 Bedroom
Family with 1 child	2 Bedroom
Family with 2 children same sex under 14 yrs	2 Bedroom
Family with 2 children same sex over 14 yrs	3 Bedroom
Family with 2 children opposite sex under 6	2 Bedroom
Family with 2 children opposite sex over 6	3 Bedroom
2 Single people	2 Bedroom
Family with 3 children	3 Bedroom
Family with 4 children (all same sex or 2 of each)	4 Bedroom
Family with more than 4 children	4 Bedroom

If you are unsure whether you will be allowed to exchange, please contact your Neighbourhood Housing Team.

**Marden - North Team Areas** (Malmesbury, Calne, **01249 466130**  
Wootton Bassett, Cricklade, Swindon and surrounding  
villages)

**Avon - South Team Areas** (Chippenham, Corsham, **01249 466140**  
Box, Trowbridge, Westbury, Melksham and  
surrounding villages)

**IF YOU MOVE WITHOUT OUR WRITTEN PERMISSION, YOU MAY LOSE  
YOUR HOME AND ALL THE RIGHTS THAT GO WITH IT.**

Please use block capitals and tick box as appropriate

**1 Your Details – Tenant A**

<b>Sole tenancy</b>	<b>Partner - Please indicate if you are a Joint Tenant YES / NO</b>
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>
Surname: First Names:	Surname: First Names:
<b>Age:                      Date of Birth:</b>	<b>Age:                      Date of Birth:</b>
<b>Are you:</b> <input type="checkbox"/> Male? <input type="checkbox"/> Female? <input type="checkbox"/> Transgender?	<b>Are you:</b> <input type="checkbox"/> Male? <input type="checkbox"/> Female? <input type="checkbox"/> Transgender?
<b>How do you define your sexuality?</b> <input type="checkbox"/> Heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay Man <input type="checkbox"/> Lesbian or Gay Woman <input type="checkbox"/> Other <input type="checkbox"/> Unsure <input type="checkbox"/> I prefer not to say	<b>How do you define your sexuality?</b> <input type="checkbox"/> Heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay Man <input type="checkbox"/> Lesbian or Gay Woman <input type="checkbox"/> Other <input type="checkbox"/> Unsure <input type="checkbox"/> I prefer not to say
<b>Marital status :</b> Civil Partnership <input type="checkbox"/> Co-Habitee <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/>	<b>Marital status :</b> Civil Partnership <input type="checkbox"/> Co-Habitee <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/>
<b>What is your ethnic group?</b> <input type="checkbox"/> White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Mixed White & Black Caribbean <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Mixed Other <input type="checkbox"/> Asian or Asian British Indian <input type="checkbox"/> Asian or Asian British Pakistani <input type="checkbox"/> Asian or Asian British Bangladeshi <input type="checkbox"/> Asian or Asian British Other <input type="checkbox"/> Black or Black British Caribbean <input type="checkbox"/> Black or Black British African <input type="checkbox"/> Black or Black British Other <input type="checkbox"/> Chinese <input type="checkbox"/> Gypsy, Romany or Irish Traveller <input type="checkbox"/> Other ethnic group	<b>What is your ethnic group?</b> <input type="checkbox"/> White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Mixed White & Black Caribbean <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Mixed Other <input type="checkbox"/> Asian or Asian British Indian <input type="checkbox"/> Asian or Asian British Pakistani <input type="checkbox"/> Asian or Asian British Bangladeshi <input type="checkbox"/> Asian or Asian British Other <input type="checkbox"/> Black or Black British Caribbean <input type="checkbox"/> Black or Black British African <input type="checkbox"/> Black or Black British Other <input type="checkbox"/> Chinese <input type="checkbox"/> Gypsy, Romany or Irish Traveller <input type="checkbox"/> Other ethnic group
<b>What is your religion?</b> <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Sikh <input type="checkbox"/> Any other religion (please state) .....	<b>What is your religion?</b> <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Sikh <input type="checkbox"/> Any other religion (please state) .....



Do you have your own Garden? Yes / No

Do you have any pets? If so please give details:

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**6 Issues with Neighbours:**

Have you ever have any problems with your neighbours? YES / NO  
If yes, please give a brief description:

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**7 Declaration**

I/we understand that we cannot move until we have the written consent of our landlord(s).

**If permission is given, I agree to:**

- (1) Leave my present accommodation in perfect order and cleanliness as stated in my conditions of tenancy.
- (2) Accept the new accommodation in its present decorative condition.

**I hereby declare** – I have not offered, nor will I receive, any bribe, present or inducement in money, or kind, from any person or persons, nor has any pressure been brought to bear in connection with the above-mentioned proposed exchange.

Signed (applicant)..... Date .....

Signed (joint applicant) ..... Date .....

Please use block capitals and tick box as appropriate.

**8 Tenant B – Who you want to swap with** – Please ask them to complete this section

<b>Sole tenancy</b>	<b>Partner - Please indicate if you are a Joint Tenant YES / NO</b>
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>  Surname: First Names:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>  Surname: First Names:
<b>Age:</b> <b>Date of Birth:</b>	<b>Age:</b> <b>Date of Birth:</b>
<b>Are you:</b> <input type="checkbox"/> Male? <input type="checkbox"/> Female? <input type="checkbox"/> Transgender?	<b>Are you:</b> <input type="checkbox"/> Male? <input type="checkbox"/> Female? <input type="checkbox"/> Transgender?
<b>How do you define your sexuality?</b> <input type="checkbox"/> Heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay Man <input type="checkbox"/> Lesbian or Gay Woman <input type="checkbox"/> Other <input type="checkbox"/> Unsure <input type="checkbox"/> I prefer not to say	<b>How do you define your sexuality?</b> <input type="checkbox"/> Heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay Man <input type="checkbox"/> Lesbian or Gay Woman <input type="checkbox"/> Other <input type="checkbox"/> Unsure <input type="checkbox"/> I prefer not to say
<b>Marital status :</b> Civil Partnership <input type="checkbox"/> Co-Habitee <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/>	<b>Marital status :</b> Civil Partnership <input type="checkbox"/> Co-Habitee <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/>
<b>What is your ethnic group?</b> <input type="checkbox"/> White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Mixed White & Black Caribbean <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Mixed Other <input type="checkbox"/> Asian or Asian British Indian <input type="checkbox"/> Asian or Asian British Pakistani <input type="checkbox"/> Asian or Asian British Bangladeshi <input type="checkbox"/> Asian or Asian British Other <input type="checkbox"/> Black or Black British Caribbean <input type="checkbox"/> Black or Black British African <input type="checkbox"/> Black or Black British Other <input type="checkbox"/> Chinese <input type="checkbox"/> Gypsy, Romany or Irish Traveller <input type="checkbox"/> Other ethnic group	<b>What is your ethnic group?</b> <input type="checkbox"/> White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Mixed White & Black Caribbean <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Mixed Other <input type="checkbox"/> Asian or Asian British Indian <input type="checkbox"/> Asian or Asian British Pakistani <input type="checkbox"/> Asian or Asian British Bangladeshi <input type="checkbox"/> Asian or Asian British Other <input type="checkbox"/> Black or Black British Caribbean <input type="checkbox"/> Black or Black British African <input type="checkbox"/> Black or Black British Other <input type="checkbox"/> Chinese <input type="checkbox"/> Gypsy, Romany or Irish Traveller <input type="checkbox"/> Other ethnic group
<b>What is your religion?</b> <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Sikh <input type="checkbox"/> Any other religion (please state) .....	<b>What is your religion?</b> <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Sikh <input type="checkbox"/> Any other religion (please state) .....



If you live in a flat is it?

Ground floor

First Floor

Second Floor

How many bedrooms?

Do you have your own Garden?  
Yes / No

Do you have any pets? If so please give details:

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**13 Issues with Neighbours:**

Have you ever have any problems with your neighbours? YES / NO

If yes, please give a brief description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**14 Details of Landlord if not Westlea**

Name of Housing Association or Local Authority:	
Address:	
Your Housing Officer:	
Contact Telephone No:	Date your tenancy start?

**15 About Your Income:**

Is your rent account clear? Yes / No

Are you claiming Housing Benefit? Yes / No

Are you currently employed? Yes / No

Name & Address of Employer:

Have you ever been a tenant of North Wiltshire Housing Association or Westlea? Yes / No

If yes, at what address?

**16 Declaration**

I/we understand that we cannot move until we have the written consent of our landlord(s).

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**I hereby declare** – I have not offered, nor will I receive, any bribe, present or inducement in money, or kind, from any person or persons, nor has any pressure been brought to bear in connection with the above-mentioned proposed exchange

Signed (applicant)..... Date .....

Signed (joint applicant) ..... Date .....

Please return completed form to: **Westlea Housing Association, Neighbourhood Services, Methuen Park, Chippenham, Wiltshire, SN14 0G**