

# APPLICATION FOR MUTUAL EXCHANGE OF ACCOMMODATION



The Mutual Exchange Register will be available to members of the public once this form has been submitted. The register will also be passed to other housing agencies from time to time. When completed this form should be returned to: **Housing Management Department, Granta Housing Society, 1 Horizon Park, Barton Road, Comberton, Cambs, CB23 7AF. Tel: 01223 576756**

The register will be updated periodically, if you wish your name to be removed from the Register please advise us as soon as possible to avoid unnecessary enquiries being made by other persons wishing to exchange.

A false statement will invalidate this form and any accommodation allocated to you as a result of providing false information allocated to you could result in the property being repossessed.

**No exchanges may take place without the prior written permission of both landlords concerned.**

**Please answer all questions.**

**1. Applicant's Surname ..... (Mr/Mrs/Miss/Ms)**

Address .....

.....

Telephone No.: Home: ..... Work: .....

**2. Details of persons for whom application is made (including applicant):**

Surname	Forenames	Relationship to Applicant	Sex M/F	Occupation/ School/Other	Date of Birth	Gross Income i.e. Wages, Benefits, Pensions etc.

3. Will all those listed above be moving with you? **YES/NO**

4. If a baby is expected, please give date it is due .....

5. Do you have any pets? **YES/NO** Is yes, please state what .....

**Please Note** – It is Society Policy not to allow pets in flats without our prior permission.

6. What is your ethnic group? (Please tick appropriate)

		<i>Please tick appropriate</i>	
<u>YOU</u>		<u>YOUR PARTNER</u>	
1	White: British	<input type="checkbox"/>	1 White: British <input type="checkbox"/>
2	White: Irish	<input type="checkbox"/>	2 White: Irish <input type="checkbox"/>
3	White: Other	<input type="checkbox"/>	3 White: Other <input type="checkbox"/>
4	Mixed: White & Black Caribbean	<input type="checkbox"/>	4 Mixed: White & Black Caribbean <input type="checkbox"/>
5	Mixed: White & Black African	<input type="checkbox"/>	5 Mixed: White & Black African <input type="checkbox"/>
6	Mixed: White & Asian	<input type="checkbox"/>	6 Mixed: White & Asian <input type="checkbox"/>
7	Mixed: Other	<input type="checkbox"/>	7 Mixed: Other <input type="checkbox"/>
8	Asian: Indian	<input type="checkbox"/>	8 Mixed: Other <input type="checkbox"/>
9	Asian: Pakistani	<input type="checkbox"/>	9 Asian: Pakistani <input type="checkbox"/>
10	Asian: Bangladeshi	<input type="checkbox"/>	10 Asian: Bangladeshi <input type="checkbox"/>
11	Asian: Other	<input type="checkbox"/>	11 Asian: Other <input type="checkbox"/>
12	Black: Caribbean	<input type="checkbox"/>	12 Black: Caribbean <input type="checkbox"/>
13	Black: African	<input type="checkbox"/>	13 Black: African <input type="checkbox"/>
14	Black: Other	<input type="checkbox"/>	14 Black: Other <input type="checkbox"/>
15	Other: Chinese	<input type="checkbox"/>	15 Other: Chinese <input type="checkbox"/>
16	Other: Gypsy / Romany / Irish Traveller	<input type="checkbox"/>	16 Other: Gypsy / Romany / Irish Traveller <input type="checkbox"/>
17	Other: Arab	<input type="checkbox"/>	17 Other: Arab <input type="checkbox"/>
18	Other: Other	<input type="checkbox"/>	18 Other: Other <input type="checkbox"/>
19	Prefer not to say	<input type="checkbox"/>	19 Prefer not to say <input type="checkbox"/>

**DETAILS OF PRESENT ACCOMMODATION**

7. Please give details of your tenancy type e.g. Council Tenancy, Housing Association Secure Tenancy, Housing Association Assured Tenancy etc.  
.....
8. How long have you lived at your present address? .....
9. Please give the name and address of your Landlord (If Council or Housing Association please give name of Housing Officer):  
.....  
.....

10. Please put a tick in the boxes for the type of property **you currently occupy**.

Size	Type	Floor Level <i>(if applicable)</i>	Lift  Is there a lift?
<input type="checkbox"/> Bedsit	<input type="checkbox"/> Flat	<input type="checkbox"/> Ground	<input type="checkbox"/> Yes
<input type="checkbox"/> One Bedroom	<input type="checkbox"/> Maisonette	<input type="checkbox"/> First	
<input type="checkbox"/> Two Bedrooms	<input type="checkbox"/> Bungalow	<input type="checkbox"/> Second	<input type="checkbox"/> No
<input type="checkbox"/> Three Bedrooms	<input type="checkbox"/> House	<input type="checkbox"/> Third	
<input type="checkbox"/> Four Bedrooms		<input type="checkbox"/> Fourth or above	
<input type="checkbox"/> Five Bedrooms			

**What type of heating do you have?**

<input type="checkbox"/> Coal Fires (Traditional)	<input type="checkbox"/> Electric Heaters	<input type="checkbox"/> Gas Fires	
Central Heating (please tick type) →		<input type="checkbox"/> Gas	<input type="checkbox"/> Electric
		<input type="checkbox"/> Solid Fuel	

11. Do you have a Garden? **YES NO** If yes, please state size:

Small                       Medium                       Large

12. What Parking facilities does your current property have?

Garage attached to House       Front Driveway

Parking space in Car Park       None

13. Please state your reasons for wishing to leave your present accommodation:

14. TYPE OF PROPERTY REQUESTED

Please put a tick in the boxes for all the types of **property that you would consider**.  
*This will be subject to the Landlords policy on eligibility for property types.*

Size	Type	Floor Level (flats only)
<input type="checkbox"/> Bedsit	<input type="checkbox"/> Flat	<input type="checkbox"/> Ground
<input type="checkbox"/> One Bedroom	<input type="checkbox"/> Maisonette	<input type="checkbox"/> Above Ground Floor
<input type="checkbox"/> Two Bedrooms	<input type="checkbox"/> Bungalow	
<input type="checkbox"/> Three Bedrooms	<input type="checkbox"/> House	
<input type="checkbox"/> Four Bedrooms		
<input type="checkbox"/> Five Bedrooms		

15. Please put a tick in the boxes for all the types of heating that you would consider.

<input type="checkbox"/> Any	<input type="checkbox"/> Coal Fires (Traditional)	<input type="checkbox"/> Electric Heaters (including storage heaters)	
Central Heating (please tick types): →	<input type="checkbox"/> Gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Any

16. Please indicate your preference for a garden by ticking the boxes below:

<input type="checkbox"/> Do not want a Garden	<input type="checkbox"/> Do not Mind	<input type="checkbox"/> Must have a Garden
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17. Area – Please list the areas in which you would like to live: .....

.....

18. Name and Address of Next of Kin of Emergency Contact No.: .....

.....

**I declare that the information I have given is correct.**

**IMPORTANT:** If you knowingly give false information, Granta may have the right to terminate a tenancy it may grant you.

Signed: ..... (Applicant)                      Date: .....

Signed: ..... (Partner/Spouse)                      Date: .....

**POINTS TO NOTE**

- Please inform us if any of the details given on this form change, or if you wish to withdraw your application.

Granta is a publicly subsidised housing association we thus reserve the right to ask for proof of earnings and the extent of any personal savings. We will only ask for such information as and when we require it.

Under the terms of the Housing Act 1985 you have the right to inspect information supplied by yourself. However, this does not mean that you can see information supplied by another person such as a doctor or social worker, nor can you see the comments made by a member or officer of the Society.

**Please return this form to: Housing Department, Granta Housing Society Ltd, 1 Horizon Park, Barton Road, Comberton, Cambs, CB23 7AF.**