Mutual exchange form



Mutual Exchange Request Form Part A

This form is to be completed only once an exchange partner has been found.

Please ensure the checklist below is complete before this form is submitted to avoid refusal/delay

Outgoing Tenant

| My rent account including any sub accounts, court cost or former tenant arrears for previous accounts are either up to date or will be cleared prior to sign up (any arrears details are shared with other Landlord and can result in them refusing the exchange) |
|---|
| All occupants listed on my application match with my tenancy account (any occupants that L&Q are not aware of will need to be added prior to submission of this application) |
| I have completed all repairs that are Tenant responsibility including replacing any doors that have been removed |
| I will not remove or change any electrical fittings after my electrical test has been completed |
| All exchange parties have completed and signed their part of exchange request |
| If this exchange is more than a 2-way swap, I have included a diagram of who is moving to which property |
| I understand that if I hold a Protected Right to Buy or Protected Assured Tenancy, |

Only continue if you can confirm that all the above criteria are met.

Please note, a person is only accepted as a Joint Tenant if they are currently named as a Joint tenant on your current Tenancy.

On completion of your Mutual Exchange, you will be assigned a new tenancy.

Please note that if you currently hold a Protected Right to Buy or Protected Assured Tenancy, this will not be reassigned to you if you are leaving your current Housing Association or Local Authority. This can only be carried with you if you are staying within the same Housing Association.

To discuss options about buying your L&Q home, please contact the Right to Buy/Right to Acquire Team.

| Signed: Dated: |
|----------------|
| oigned. |

Section A is to be completed by yourself.

Email:

Section B is to be completed by the person you wish to exchange with.

Section C only needs to be completed if more than one exchange partner is involved and would be moving into or out of an L&Q property.

For any exchange partner involved not moving into or out of an L&Q property please complete **Section D**.

| Section A: Your personal details (please complete in full) | | | | | | | |
|--|--|--|--|--|--|--|--|
| Please give details of everyone included in this application (including yourself): | | | | | | | |
| Name: | | | | | | | |
| Address: | | | | | | | |
| Tel: | | | | | | | |

| First names(s) | Surname | Gender | Date of birth | Age | Relationship to tenant |
|----------------|------------------------|--------|---------------|--------------------|---------------------------------|
| | | | | | Tenant |
| | | | | | Joint Tenant (if applicable) |
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| Is any member of your household pregnant? | Yes | No | |
|---|-----|---------|----------|
| If yes , please state the baby due date | | | |
| Type of property? Studio Flat House | Mai | sonette | Bungalow |
| How many bedrooms does your property have? | 1 2 | 3 4 | 5 6 |
| Is your home adapted (wet room/wheelchair adapted/hoist/lifts/ramps) if yes please circle | Yes | No No | |
| Are you currently under occupying? | Yes | No | |
| Are you currently receiving Housing benefit or Universal Credit | Yes | No | |
| Do you have any pets? | Yes | No | |
| If yes please provide details | | | |
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| lease provide any details of any medical needs regarding your exchange. ou may be required to provide supporting evidence and we may need to share this with the other Landlord) | | | | | | | | |
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| I confirm that all the information provided is true to | o the best of my knowledge. | | | | | | | |
| Signed (tenant): | Signed (joint tenant): | | | | | | | |
| Print name: | Print name: | | | | | | | |
| Date: | Date: | | | | | | | |
| Where did you find your exchange partner? | HomeSwapper East London Lettings Company (ELLC) | | | | | | | |

Mutual Exchange Request Form Part B

This form is to be completed **only** once an exchange partner has been found.

Please ensure the checklist below is complete before this form is submitted to avoid refusal/delay

| Inc | oming Tenant |
|------|--|
| | My rent account including any sub accounts, court cost or former tenant arrears for previous accounts are either up to date or will be cleared prior to sign up (any arrears can result in the refusal of the Exchange) |
| | All occupants listed on my application match with my tenancy account |
| | I have visited the property I wish to move to and am happy to accept the property in its current condition |
| | I am aware I will need to pay one weeks rent in advance prior to signing the assignment |
| | If I have medical need to move, I have been assessed by my Housing Provider who will be able to provide proof of my need. (L&Q will not be able to accept doctors' letters regarding additional bedroom needs, adapted properties etc, we can only accept Housing Provider confirmation) |
| | I will be submitting a request to Mutual Exchange to my Housing provider |
| | I understand that if I hold a Protected Right to Buy or Protected Assured Tenancy, this will not be reassigned to me if I am leaving my current Housing Association or Local Authority and joining L&Q. |
| On | ly continue if you can confirm that all the above criteria are met. |
| | ase note, a person is only accepted as a Joint Tenant if they are currently named as a Joint tenant your current Tenancy. |
| On | completion of your Mutual Exchange, you will be assigned a new tenancy. |
| will | ase note that if you currently hold a Protected Right to Buy or Protected Assured Tenancy, this not be reassigned to you if you are leaving your current Housing Association or Local Authority. s can only be carried with you if you are staying within the same Housing Association. |
| | discuss options about buying your L&Q home, please contact the Right to Buy/Right to quire Team. |
| Sig | ned: Dated: |

Title: First name(s): Surname: Full address: Tel (required): Email (required):

Please give details of everyone included in this application (including yourself):

Section B: Details of the person(s) you wish to exchange with

| First name(s) | Surname | Gender | Date of birth | Age | Relationship to tenant |
|---------------|---------|--------|---------------|-----|---------------------------------|
| | | | | | Tenant |
| | | | | | Joint Tenant (if applicable) |
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| Do all of the above currently live with you on | a perr | manent basis? | | ⁄es | No | | |
|---|---------|------------------|---------|-----------|-------------|--------|---------|
| If no , please state their name(s) and the reaso | n(s) th | ney have been ir | ncluded | l in this | application | n. | |
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| Is any member of your household pregnant? | | | | ⁄es | No | | |
| , , , , , , | | | | | | | |
| If yes , please state the baby due date | | | | | | | |
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| Type of property? Studio | Flat | House | | Mais | sonette | В | ungalow |
| | | | | | | | |
| How many bedrooms does your property hav | e? | Studio | 1 | 2 | 3 | 4 5 | 6 |
| Is your home adapted | | | | | | | |
| (wet room/wheelchair adapted/hoist/lifts/ra | mps) | | | /es | No | | |
| if yes please circle | | | | | | | |
| Are you currently under occupying? | | | | ⁄es | No | | |
| , the you currently under occupying. | | | | .00 | | | |
| Do you have any pets? | | | | ⁄es | No | | |
| If yes please provide details | | | | | | | |
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| What type of tenancy do you hold? | | Secure | | Assurec | I | | |
| , , | | Fixed term | | Interme | diate Marke | t Rent | |
| | | | | | | | |
| | | Private rented | | Don't kr | iow | | |

| Landlord's name: | |
|---|-----------------------------|
| Address: | |
| Contact name: | |
| Tel: | |
| Email: | |
| | |
| I confirm that all the information provided is true t | o the best of my knowledge. |
| Signed (tenant): | Signed (joint tenant): |
| Print name: | Print name: |
| Date: | Date: |

Section B continued: Landlord details

Title: First name(s): Surname: Address: Tel: Mobile:

Please give details of everyone included in this application (including yourself):

Section C: Details of the person(s) you wish to exchange with

| First name(s) | Surname | Gender | Date of birth | Age | Relationship to tenant |
|---------------|---------|--------|---------------|-----|---------------------------------|
| | | | | | Tenant |
| | | | | | Joint Tenant (if applicable) |
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| Do all of the above currently live with you on | a perr | manent basis? | Y | 'es | No | | |
|---|---------|------------------|---------|-----------|-------------|--------|---------|
| If no , please state their name(s) and the reaso | n(s) th | ney have been ir | ncluded | l in this | application | n. | |
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| Is any member of your household pregnant? | | | Y | 'es | No | | |
| , , , , , , | | | | | | | |
| If Yes , please state the baby due date | | | | | | | |
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| Type of property? Studio | Flat | House | | Mais | onette | В | ungalow |
| | | | | | | | |
| How many bedrooms does your property hav | e? | Studio | 1 | 2 | 3 | 4 5 | 6 |
| Is your home adapted | | | | | | | |
| (wet room/wheelchair adapted/hoist/lifts/ra | mps) | | Y | 'es | No | | |
| if yes please circle | | | | | | | |
| Are you currently under occupying? | | | П | 'es | No | | |
| , no you carrently and of coopying. | | | Ш. | | | | |
| Do you have any pets? | | | Y | 'es | No | | |
| If yes please provide details | | | | | | | |
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| What type of tenancy do you hold? | | Secure | | Assured | I | | |
| | | Fixed term | | Interme | diate Marke | t Rent | |
| | | Private rented | | Don't kr | | | |
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| Section C continued: Landlord | details | |
|--------------------------------------|--|--|
| Landlord's name: | | |
| Address: | | |
| Contact name: | | |
| Tel: | | |
| Email: | | |
| | | |
| I confirm that all the information p | rovided is true to the best of my knowledge. | |
| Signed (tenant): | Signed (joint tenant): | |
| Print name: | Print name: | |
| Date: | Date: | |

Title: First name(s): Surname: Address: Tel: Mobile:

Please give details of everyone included in this application (including yourself):

Section D: Details of the person(s) you wish to exchange with

| First name(s) | Surname | Gender | Date of birth | Age | Relationship to tenant |
|---------------|---------|--------|---------------|-----|---------------------------------|
| | | | | | Tenant |
| | | | | | Joint Tenant (if applicable) |
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| Do all of the above currently live with you on a | perr | nanent basis? | | res | No | | |
|---|---------|-----------------|--------|------------|-------------|---------|---------|
| If No , please state their name(s) and the reason | n(s) tł | ney have been i | nclude | ed in this | applicatio | n. | |
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| Is any member of your household pregnant? | | | | Yes | No | | |
| If yes , please state the baby due date | | | | | | | |
| Type of property? Studio I | Flat | House | | Mais | sonette | В | ungalow |
| How many bedrooms does your property have | e? | Studio | 1 | 2 | 3 | 4 5 | 6 |
| ls your home adapted (wet room/wheelchair adapted/hoist/lifts/ramps) if yes please circle | | | | Yes | No No | | |
| Are you currently under occupying? | | | | Yes | No | | |
| Do you have any pets? | | | | Yes | No | | |
| If yes please provide details | | | | | | | |
| | | | | | | | |
| What type of tenancy do you hold? | | Secure | | Assured | i | | |
| | | Fixed term | | Interme | diate Marke | et Rent | |
| | | Private rented | | Don't kr | now | | |

| occion b continued. Landiord details | | | | |
|--|------------------------|--|--|--|
| Landlord's name: | | | | |
| Address: | | | | |
| Contact name: | | | | |
| Tel: | | | | |
| Email: | | | | |
| | | | | |
| I confirm that all the information provided is true to the best of my knowledge. | | | | |
| Signed (tenant): | Signed (joint tenant): | | | |
| Print name: | Print name: | | | |
| Date: | Date: | | | |

Please complete and return the form to:

L&Q - Central Support Services

Section D continued: Landlord details

Cray House 3 Maidstone Road Sidcup, Kent DA14 5HU

Email: CentralSupportServices@lqgroup.org.uk

