

APPLICATION FOR MUTUAL EXCHANGE

Please ensure all parts are completed as incomplete forms will be returned

Part 1:

CASTLE POINT BOROUGH COUNCIL TENANT:

NAME(S) (Block Capitals): _____

FULL ADDRESS (Block Capitals): _____

HOME TEL NO: _____

MOBILE NO: _____

EMAIL : _____

PRESENT ACCOMMODATION:

Bedrooms

Living Rooms

Please tick:

House	☐	Studio Flat/Bedsit	☐
Bungalow	☐	Sheltered Accommodation	☐
Maisonette	☐	If flat, what floor level	☐
Flat	☐		

PLEASE LIST ANY ADAPTATIONS IN YOUR PROPERTY:

Details / Type of adaptation	What Adapts are already Installed in the Property	What Adapts are Required in a New Property
• Stairlift		
• Through-floor lift		
• Level access shower / wetroom		
• Over bath shower		
• External steplift		
• Ramps for access to and from the property		
• Wheelchair adapted property (lower kitchen units, doorways widened etc)		
• Disabled parking bay		
• Door entry system		
• Ceiling Hoist		
• Ground floor bedroom		
• Ground floor bathroom		
• Walk-in bath		
• Scooter Store		
• Lever taps		
• Grab rails		

ARE YOU IN RENT ARREARS? (Please Circle) YES / NO IF SO HOW MUCH: £ _____

ARE YOU IN RECEIPT OF HOUSING BENEFIT? (Please Circle) YES / NO

ARE YOU IN RECEIPT OF UNIVERSAL CREDIT (Please Circle) YES / NO

PLEASE STATE ANY PETS AT THE PROPERTY AND TYPE: _____

FAMILY DETAILS (Block Capitals):

Full Name of Tenant(s) & Family	Age	Date of Birth	Date Moved into Address	Relationship to Tenant	Are they moving with you? YES/NO

DOES ANYONE IN YOUR FAMILY HOUSEHOLD HAVE ANY MEDICAL CONDITIONS?

IF YES, GIVE DETAILS:

.....
.....

DOES ANYONE IN YOUR HOUSEHOLD RECEIVE ANY SUPPORT FROM ANY OTHER AGENCIES

IF YES, GIVE DETAILS:

.....
.....

DECLARATION:

- I/We declare that all information given in this application is true.
- I/We understand that any misleading or false information may result in the cancelling of this application.
- I/We understand that to give false information or withhold information is an offence and that a person found guilty of an offence may be fined up to £5,000.
- I/We accept that the information given may be stored and processed by computer.
- It may be checked with other data held by the Council and may be disclosed for other purposes under the control of the Council in line with the data protection register entry (Data Protection Act 1998)

SIGNED (In cases of joint tenants both parties must sign):

..... (Tenant)

..... (Joint Tenant)

..... Date

Part 2:

DETAILS OF PERSON(S) YOU ARE EXCHANGING WITH:

NAME (Block Capitals): _____

FULL ADDRESS (Block Capitals): _____

HOME TEL NO: _____ **MOBILE:** _____

EMAIL _____

NAME & FULL ADDRESS OF LANDLORD (If not CASTLE POINT BOROUGH COUNCIL):

NAME & CONTACT TELEPHONE NO OF OFFICER DEALING WITH THE MUTUAL EXCHANGE:

PRESENT ACCOMMODATION:

Bedrooms

Living Rooms

Please tick:

House	☐	Studio Flat/Bedsit	☐
Bungalow	☐	Sheltered Accommodation	☐
Maisonette	☐	If flat, what floor level	☐
Flat	☐		

PLEASE LIST ANY ADAPTATIONS IN YOUR PROPERTY:

Details / Type of adaptation	What Adapts are already Installed in the Property	What Adapts are Required in a New Property
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• Ceiling Hoist		
• Ground floor bedroom		
• Ground floor bathroom		
• Walk-in bath		
• Scooter Store		
• Lever taps		
• Grab rails		

FAMILY DETAILS (Block Capitals):

Full Name of Tenant(s) & Family	Age	Date of Birth	Date Moved into Address	Relationship to Tenant	Are they moving with you? YES/NO

HAVE YOU EVER HAD A TENANCY AT CASTLEPOINT BOROUGH COUNCIL? YES / NO

IF YES PLEASE GIVE DETAILS

.....

ARE YOU IN RENT ARREARS? (Please Circle) YES / NO IF SO HOW MUCH: £

ARE YOU IN RECEIPT OF HOUSING BENEFIT? (Please Circle) YES / NO

ARE YOU IN RECEIPT OF UNIVERSAL CREDIT (Please Circle) YES / NO

PLEASE STATE ANY PETS AT THE PROPERTY AND TYPE:

DOES ANYONE IN YOUR FAMILY HOUSEHOLD HAVE ANY MEDICAL CONDITIONS?

IF YES, GIVE DETAILS:

.....

DOES ANYONE IN YOUR HOUSEHOLD RECEIVE ANY SUPPORT FROM ANY OTHER AGENCIES

IF YES, GIVE DETAILS:

.....

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DECLARATION:

- I/We declare that all information given in this application is true.
- I/We understand that any misleading or false information may result in the cancelling of this application.
- I/We understand that to give false information or withhold information is an offence and that a person found guilty of an offence may be fined up to £5,000.
- I/We grant Castle Point Borough Council permission to make any enquiries needed to confirm the information given in this form.
- I/We accept that the information given may be stored and processed by computer.
- It may be checked with other data held by the Council and may be disclosed for other purposes under the control of the Council in line with the data protection register entry (Data Protection Act 1998)

SIGNED (In cases of joint tenants both parties must sign):

..... (Tenant) Date

..... (Joint Tenant) Date

TENANTS REQUESTING A MUTUAL EXCHANGE MUST READ THE FOLLOWING CONDITIONS AND WAIT FOR WRITTEN PERMISSION FROM THE COUNCIL BEFORE A MOVE MAY TAKE PLACE

If my application is approved, are any conditions made?

The main conditions are that the move is made entirely at the tenant's expense and each accepts the property, garden, (shed and garage if present) in its present condition without calling upon the Council to do any decorating as though the tenancy was unbroken.

Any none standard items in the property will become the responsibility of the incoming tenant including all subsequent maintenance of those items.

Any agreed outstanding repairs will be done within routine maintenance timescales.

All persons resident at the address from which an application is made will move with the tenant should a mutual exchange be arranged.

Following the inspections NO FIXTURES OR FITTINGS may be removed by the outgoing tenant without the prior knowledge and consent of the Council and incoming tenant. The property should be checked for gas/electricity points as the Council is not responsible for providing them.

The assignment or type of tenancy offered will depend on the type of tenancy currently held.

Can permission to exchange be refused?

Yes, if either exchange partners are in rent arrears.

Yes, if either exchange partners has a current Notice.

Yes, if either exchange partner does not pass a pre-void inspection.

Moves which result in substantial overcrowding or under-occupation will not be approved.

Permission will also be refused if an exchange would result in a property specially designed or adapted for a disabled or elderly person being occupied by someone without similar needs.

Yes, if you are on a licence or temporary tenancy.

Data Protection

The information provided by you will be held and processed by Castle Point Borough Council in accordance with the Data Protection Act 1998. It will be used for its intended purpose but may also be used for internal statistical analysis as well as being processed and disclosed for the prevention or detection of crime, assessment of tax or where we have a legal obligation to do so.

We may also need to share your information with a third party. such as a contractor, in order for them to provide the service you have requested. However, the Council requires any third parties to abide by the Data Protection Act 1998 when they process your data on our behalf and to follow our procedures or instructions. Your information will be held and disposed of in line with the Council's Document Retention and Disposal Guidance. You are entitled to copies of any information that the Council holds about you. This can be obtained by making a request in writing by using a Subject Access Request form.