

APPLICATION TO EXCHANGE PROPERTIES

Name/s: Mr/Mrs/Ms/Miss:								
Partners Name/s: Mr/Mrs/Ms/Miss:								
Address:								
Tel home: Work: Mobile:								
Email:								
National Insurance number	rs for ap	oplicant and parti	ner:					
Landlord's name:								
Landlord's address:								
Details of ALL persons livin	g at abo	ove address						
Surname	Surname Forenames Date of Birth Relationship to tenant							
Current Property Details: (e.g. house/apartment/bungalow)								
Number of bedrooms:	<u>ga.o.r,</u>							
Details of any pets:								
Reasons wanting to transfer:								
Date you want to move: (Please allow 28 days to process your exchange)								

Document Ref:	Version:	Approved Date:	Approved by:	Expire Date:	No of Pages:
WHA 0158	4	122.03.2019	Director of Customer Svs	01.03.2022	Page 1 of 4

DETAILS OF PERSONS WITH WHOM YOU WANT TO EXCHANGE

Surname	Forenames	Date of Birth	Relationship to tenant		
Economic Status – Please tick	the box which best descri	bes your circumstances	:		
Full time work (30 h	ours or more per week	()			
Part time work (less	than 30 hours per wee	ek			
Government training	g scheme				
Job seeker					
Retired					
Not seeking work					
Full time student(s)					
Unable to work bec	ause of long term sickr	ness or disability			
Other – please expl	ain circumstances				
Are you receiving universal credit Y/N. If yes please give details of payment dates					
Address of their property:					
Their Landlord's name:					
Their Landlord's address:					
Are you related to the perso		nt to exchange? Yes	S No No		
If YES, please give detail	S:				

Document Ref:	Version:	Approved Date:	Approved by:	Expire Date:	No of Pages:
WHA 0158	4	122.03.2019	Director of Customer Svs	01.03.2022	Page 2 of 4

Your ethnic origin	
Asian, Asian British, Asian English, Asian	White
Scottish, or Asian Welsh	British
Asian / Asian British	☐ English
☐ Bangladeshi	Gypsy or Irish Traveller
☐ Chinese	☐ Irish
☐ Indian	☐ Scottish
☐ Pakistani	☐ Welsh
Other Asian background (specify if you	☐ Other White background (specify if you
wish):	wish):
Black, Black British, Black English, Black	Mixed
Scottish, or Black Welsh	
African	☐ White and Black African
☐ Caribbean	
Other Black background (specify if you	White and Chinese
wish):	Other mixed background (specify if you
,	wish):
Other ethnic group	Prefer not to say
Arab	<i>,</i> —
Other ethnic group (specify if you wish):	
Your gender	
☐ Male ☐ Female ☐ Transgender	☐ Cisgender ☐ Prefer not to say
□ Male □ Terriale □ Transgerider	Cisgeriaer refer not to say
Your age	
	5 - 54
Prefer not to say	
Preferred Gender Description	
Heterosexual / straight	
Gay man	
Lesbian	
Bisexual	
Transgender	
Cisgender	
Non - Binary	
Prefer not to say	
Marriage and civil partnership	
L	
Single	
☐ Single ☐ Married	
☐ Single ☐ Married ☐ Civil Partnership	
☐ Single ☐ Married ☐ Civil Partnership ☐ Co Habiting	
☐ Single ☐ Married ☐ Civil Partnership ☐ Co Habiting ☐ Separated	
Single Married Civil Partnership Co Habiting Separated Divorced	
☐ Single ☐ Married ☐ Civil Partnership ☐ Co Habiting ☐ Separated	

Document Ref:	Version:	Approved Date:	Approved by:	Expire Date:	No of Pages:
WHA 0158	4	122.03.2019	Director of Customer Svs	01.03.2022	Page 3 of 4

Your religion	or belief			
No religion		Jewish		
Buddhist		Muslim	1	
	ncluding Church of England,	∐ Sikh		
•	estant and all other Christian	`	specify if yo	u wish):
denominations	3)	Prefer	not to say	
☐ Hindu				
Disability				
	A at 2010 defines a disable due			
	Act 2010 defines a disabled po			
•	nich has a substantial and lon	g-term adver	se ellect on	their ability to carry out
normal day-to-	-uay activities.			
Do you consid	ler yourself to be disabled?			
Yes.	lei yoursell to be disabled!			
☐ No				
Prefer not	to say			
	lo Say			
ondition. It is recon ondition of the garde	reeing to exchange properties, you n nmended that in making your decision n(s) and any alterations which may ho ons which may have been carried out	on, you pay part ave been carried	ticular attention out by the pre	n to decorative condition, the vious tenant. The landlord will
	ington Housing Association permissi exchange may be refused if either par f the properties.			
	, ,			
Signature:			Date:	
orginature.			Date.	

Document Ref:	Version:	Approved Date:	Approved by:	Expire Date:	No of Pages:
WHA 0158	4	122.03.2019	Director of Customer Svs	01.03.2022	Page 4 of 4