

## **APPLICATION TO EXCHANGE PROPERTIES**

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

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## **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	<b>(</b> )	
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 univers	al credit Y/N. If yes pl	ease give details of p	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:		

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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	
☐ 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):	
3 1 (1 ) , ,	
Your gender	
☐ Male ☐ Female ☐ Transgender	☐ Cisgender ☐ Prefer not to say
□ Male □ Terriale □ Transgerider	Cisgeriaer refer not to say
Your age	
	5 - 54 55 - 64 65+
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	
☐ Single ☐ Married	
Married Married	
<ul><li>☐ Married</li><li>☐ Civil Partnership</li></ul>	
<ul><li>☐ Married</li><li>☐ Civil Partnership</li><li>☐ Co Habiting</li></ul>	
<ul><li>☐ Married</li><li>☐ Civil Partnership</li><li>☐ Co Habiting</li><li>☐ Separated</li></ul>	
<ul><li>☐ Married</li><li>☐ Civil Partnership</li><li>☐ Co Habiting</li><li>☐ Separated</li><li>☐ Divorced</li></ul>	
<ul><li>☐ Married</li><li>☐ Civil Partnership</li><li>☐ Co Habiting</li><li>☐ Separated</li></ul>	

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Your religion	or belief			
No religion		Jewish		
Buddhist		Muslim		
	ncluding Church of England,	∐ Sikh		
•	estant and all other Christian		specify if yo	ou wish):
denominations	3)	☐ Prefer r	not to say	
Hindu				
Disability				
	A at 2010 defines a disable due			
	Act 2010 defines a disabled pe			
•	hich has a substantial and long	g-term advers	se ellect of	i their ability to carry out
normai day-to	-day activities.			
Do you consid	der yourself to be disabled?			
Yes.	lei yoursell to be disabled!			
□ No				
☐ Prefer not	to say			
	io say			
ondition. It is reconondition of the garde	preeing to exchange properties, you m nmended that in making your decision n(s) and any alterations which may ha ons which may have been carried out t	n, you pay parti ve been carried	icular attention out by the pre	on to decorative condition, the evious tenant. The landlord will
	ington Housing Association permission exchange may be refused if either part of the properties.			
Signature:			Date:	
Signature.			Date.	

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