

Housing Services
 Civic Centre
 Tannery Lane
 Ashford
 Kent
 TN23 1PL

Tel: 01233 330688



ASHFORD
 BOROUGH COUNCIL

Mutual Exchange Application Form

Notes for Applicants

1. When completed, this form should be returned to Housing Services, Civic Centre, Ashford, Kent, TN23 1PL.
2. Tenants of Ashford Borough council will have their property inspected and a report of the inspection, tenancy and the rent account will be sent to the other Council.
3. A reference will be sought from the other Council and if not entirely satisfactory, permission for the exchange will be refused.
4. No arrangements of any sort should be made for moving until the written permission of both Councils has been given. This Council will not carry out redecoration or incur other expense occasioned by the move.

N.B. You will be required to sign the Tenancy agreement before the move takes place.

| Your Details (The Tenant) | | | |
|---------------------------|--|-----------|---------------|
| Title (Mr/Mrs etc..) | | Surname | First Name(s) |
| Address | | | |
| Home Tel. | | Work Tel. | |

| Household Details | | | |
|---|----------------|------------------------|---------------|
| Tenant's Family | | | |
| First Name & Surname | Male or Female | Relationship to Tenant | Date of Birth |
| | | | |
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| Any other person who would reside with the applicant but who is not living with them at present | | | |
| First Name & Surname | Male or Female | Relationship to Tenant | Date of Birth |
| | | | |
| | | | |
| Other persons in the house not to be re-housed | | | |
| First Name & Surname | Male or Female | Relationship to Tenant | Date of Birth |
| | | | |
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| Are there any adaptations to the Property? If so, please describe below |
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|---------------------------------|
| Please give details of any pets |
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|--|-------------------------------------|-------------------------------------|------------------------------------|-----------------------------|------------------------------|-----------------------------|
| Details of present Accommodation. Please tick all appropriate boxes! <input checked="" type="checkbox"/> | | | | | | |
| House <input type="checkbox"/> | Bungalow <input type="checkbox"/> | Maisonette <input type="checkbox"/> | Flat <input type="checkbox"/> | If a Flat, is there a lift? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Kitchen <input type="checkbox"/> | Living Rm. <input type="checkbox"/> | Parlor <input type="checkbox"/> | Bathroom <input type="checkbox"/> | WC (Inside) | <input type="checkbox"/> | |
| Bedroom 1 <input type="checkbox"/> | Bedroom 2 <input type="checkbox"/> | Bedroom 3 <input type="checkbox"/> | Bedroom 4 <input type="checkbox"/> | | | |
| Garage <input type="checkbox"/> | Garden <input type="checkbox"/> | | | | | |

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|---------------------------------|
| Any other relevant information? |
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|---|--|------|--|
| I wish to exchange with | | | |
| of (address) | | | |
| Address of their Local Authority | | | |
| who is agreeable to accept my property and is making a similar application to the Council. I have inspected their property and agree to accept it in its present condition if the exchange is allowed (if you are concerned about any alterations or the condition of the property, please note these on the application form so they can be checked on inspection. | | | |
| Signed (Tenant) | | Date | |
| Signed (Tenant) | | Date | |