

## **HOUSE EXCHANGE APPLICATION**

**East Suffolk Council – Housing Department** 

**EAST**SUFFOLK Please use this application when you want to exchange your home with another tenant.

Read it carefully – <u>AND COMPLETE EVERY SECTION</u>

Your attention is drawn to the Important Notes on the last page

	Your FULL name: Your address:			3)				
2)	Tour address.			4)	Tour email a	uuress.		
5)	Your landlord:			6)	Your landlord's address:			
7)	The name of your current h	polycing officer:		8)	Contact data	ile for your current	housing officer:	
,,	) The name of your current housing officer:			0)	,			
					Telephone N	0	Email:	
_				_	_		<del>_</del>	
Your family details (including yourself and everyone who will be moving)								
Mr/Mrs/ Miss/ Ms/Etc	Surname	First name(s)	Relationship to you	Da	te of Birth	Nationality	Ethnic Origin	National Insurance Number
			Myself					

	Please provide proof of Child Benefit for every child on the application under the age of 16 (or 19 if in full time education). Failure to do so may mean that your application cannot proceed.									
Does anyone in the household have any Criminal Co						Yes 1	No			
Is anyone in the household a Registered Sex Off						Yes	No			
What type of accommodation do you live in now? House Flat Bungalow Maisonette								onette		
	How many bedrooms do you have?									
Who do	Who do you wish to Exchange with?									
4)	Their <b>FULL</b> name:			Their telephone number:						
1) <u></u> 	Their address:			3)						
2)				4) Their email address:						
,,										
_	Their landlord:			6) The	eir landlor	rd's address:				
5)_				<i>5)</i> 110	on landio	a c addi ooo.				

7) The name of their current housing officer:  8) Contact details for their current housing officer:  Telephone No Email:							
Do you have any pets? Yes No If 'Yes' please give details:  If the property is unsuitable for pets this application may be refused if the policy prevents this							
Does your present accommodation have any Disabled Adaptations?  Yes  No If 'Yes' please give details:							
If the property is designed for disabled, or has disabled adaptations, this application may be refused if the not need these facilities Do you have a current application with Gateway to Homechoice? Yes No  Have you ever been a tenant with East Suffolk Council? Yes No							
Please read the following statement and sign below to confirm you understand and agree:  I/We have personally inspected  [Enter address of property you are moving to]							

and understand that if approval is given to this application, I/we accept the property in its existing condition of cleanliness, repair and decoration.

I/We declare that all information given on this application is true and correct, that no information has been withheld, and that the particulars stated are true with regard to my/our living conditions and circumstances.

I/We further agree to notify East Suffolk Council should my/our circumstances change before the exchange.

We understand that Eas	it Suffolk Council reserves the right to refuse or withho	old permission to exchange in accordance with the Housing Act 198
	Signed:	Date:
	Signed:	Date:

By signing this, it is important that you understand that the Council is not responsible for the condition of the property you move into. We aim to ensure that the person moving out takes a responsible view in handing over the property in a clean and undamaged state, but we cannot control this and will not be held liable for the cleanliness, decorative state, or damage to the property above our statutory obligations. See the Important Notes overleaf.

East Suffolk Council must protect the public funds it handles and may use the information you have provided on this application to detect fraud.

East Suffolk Council may also share this information for the same purposes with other organisations that handle public funds.

## **Data Protection Act 1998**

The information collected on this form will be used for the purpose of the administration of your tenancy. This will include any Benefits you may apply for. The information will only be disclosed for these purposes and any other purposes permitted by the Data Protection Act 1998.

## **East Suffolk COUNCIL**

## **HOUSE EXCHANGE - IMPORTANT NOTES**

You are strongly advised to obtain from the outgoing tenant:

- A current 'Landlord Safety Certificate' for any gas appliance installed by the tenant
- A current NICEIC certificate covering the safety of any electrical installation by the outgoing tenant

I/We understand that if my/our application is approved, I/we accept

[Enter address of property you are moving to]

in its present condition/state of repair/decoration.

I/We understand that if there are any fittings that have been installed by the present tenant, or previous tenants, I/ We become responsible for the maintenance and repair of such fittings. Any 'non-standard' fittings will be replaced at the end of my tenancy and I / We will be responsible for the cost of this.

I/We also understand that East Suffolk Council will not be responsible for any fittings that the outgoing tenant and I/we come to an arrangement over. If such fittings are not left as agreed, I/we understand that I/we will have to pursue the outgoing tenant.

I/We have checked the following items at:

[Enter address of property you are moving to]									
and am/are satisfied with the condition of the following:									
Decoration standard	Fixtures & fittings	oft Shed(s)	Garden(s)						
Fittings which have NOT b Heating appliances	een installed by East Suffolk Council:  Light fittings	Ktichen units	Bathroom equipment						
Signed:	Date:	Signed:	Date:						

When complete and signed please return this form to:

The Housing Team, East Suffolk Council, Riverside, 4 Canning Road, Lowestoft, Suffolk NR33 0EQ