HomeChoice West Berks

Homechoice West Berkshire

www.homechoicewb.org.uk/mx

Mutual Exchange Application Form

A) PERSONAL DETAILS

Title..... First name ..... Surname .....

Date of birth .....

Address .....

.....

..... Postcode .....

Tel number ..... Mobile .....

Email address .....

B) YOUR CURRENT ACCOMMODATION

1. What kind of property is it?

House ☐ Flat ☐ Maisonette ☐ Bungalow ☐

2. Number of bedrooms? .....

3. Is your property sheltered?

Yes ☐ No ☐

4. What kind of heating?

Gas ☐ Electric ☐ Other ☐

5. What kind of cooker?

Electric ☐ Gas ☐ Gas and electric ☐ Other ☐

6. Do you have a garden?

No ☐ Yes shared ☐ Yes ☐ Front ☐ Rear ☐ Both ☐

7.Who is your landlord? .....

8. How much rent do you pay per week? .....

9. If you pay a service charge, how much is this per week? .....

10. If you pay a support charge, how much is this per week? .....

11. Does your property have a garage?

Yes ☐ No ☐

12. Does your property have allocated parking?

Yes ☐ No ☐

13. Does your landlord allow you to have pets?

Yes ☐ No ☐

West Berkshire COUNCIL

C) WHERE YOU WANT TO LIVE

1. All of West Berkshire ☐ Outside West Berkshire ☐

2. Certain areas within West Berkshire (please specify) .....

.....

3. What is the least number of bedrooms you want? .....

4. Do you want a sheltered property?

   Yes ☐ No ☐

5. What kind of property do you want?

   House ☐ Flat ☐ Maisonette ☐ Bungalow ☐

6. What floor?

   Basement ☐ Ground ☐ 1st ☐ 2nd ☐ 3rd or above ☐

7. Do you need a lift?

   Yes ☐ No ☐

(select only if you cannot live above ground floor level)?

8. What kind of heating do you want?

   Gas ☐ Electric ☐ Other ☐

9. What kind of cooker do you want?

   Electric ☐ Gas ☐

10. Do you want a garden?

    Don't mind ☐ No ☐ Yes, but not shared ☐ Yes, any kind ☐

11. What is the most rent you can pay a week? .....

D) IMPORTANT

I understand that my name will remain registered at the discretion of the Council unless I remove it or it is removed on my behalf because I have been successful in achieving a swap.

Completion of this application will be taken as authority for interested parties to be referred to your home without prior notification.

No mutual exchange can take place without the written consent of your landlord, and the landlord of the person you are swapping with.

Tenant's signature ..... **Date** .....

Please return the form to your current Housing Association landlord or, if you live outside West Berkshire, to:

Housing Operations, West Berkshire Council, Council Offices,
Market Street, Newbury, Berkshire. RG14 5LD

If you require this information in a different format, such as audio tape or in another language, please ask an English speaker to contact Elizabeth Wallington on 01635 519287 who will be able to help.