



Mutual Exchange Application Form

How many households are involved in this swap? 2 3

Are you already registered on the Choice Homes Pembrokeshire Register? Yes No

Choice Based Lettings Membership Number: _____

YOUR DETAILS

1. Title: Mr Mrs Miss Ms

2. First name: _____ Last name: _____

3. Address: _____

Postcode: _____

4. Email address: _____

5. Telephone number: Day: _____ Evening: _____

6. Details of family size:

Name (self):	D.O.B:	Sex:
Name:	D.O.B:	Sex:
Name:	D.O.B:	Sex:
Name:	D.O.B:	Sex:

(Please continue on separate sheet if necessary).

YOUR PRESENT HOME

7. Type of property (please tick):

House Bungalow Flat in converted house Maisonette Flat

8. How many bedrooms do you have? (If bedsit mark 'B')

B 1 2 3 4 5 6

9. Is the home adapted for people with disabilities? Yes No

If yes, is it adapted so that a wheelchair can be used indoors? Yes No

DETAILS OF THE PERSON YOU WISH TO EXCHANGE WITH

Are you already registered on the Choice Homes Pembrokeshire Register? Yes No

Choice Based Lettings Membership Number: _____

10. First name: _____ **Last name:** _____

11. Address: _____

_____ **Postcode:** _____

12. Email address: _____

13. Telephone number: Day: _____ Evening: _____

14. Details of family size:

Name (self):	D.O.B:	Sex:
Name:	D.O.B:	Sex:
Name:	D.O.B:	Sex:
Name:	D.O.B:	Sex:

(Please continue on separate sheet if necessary).

15. Name of landlord: _____

16. Address of landlord: _____

Postcode: _____ **Telephone number:** _____

Name of person to contact i.e name of housing officer: _____

17. Do you have any criminal convictions or any anti-social behaviour allegations?

Yes No

18. Do you have a support worker? Yes No

19. Do you have any pets? Yes No

If yes, please state what and how many _____

REASON FOR EXCHANGE

Reason for mutual exchange: _____

Date exchange is required: ____/____/____

Statement

I have inspected the property and understand that the proposed exchange can only be approved subject to the following conditions:

- I accept full responsibility for any defects or damage to the fittings and fixtures which are not due to fair wear and tear.
- I accept full responsibility for any alterations carried out by the outgoing tenant.
- I will rectify any breach in my tenancy agreement, such as payment of outstanding rent arrears.

I declare that I have not accepted any payment in connection with this exchange. I give permission for ateb* to disclose information to the proposed exchangee's landlord regarding my rent account, any action taken against me in respect of possession proceedings and any breach of tenancy.

Thank you for submitting your application. Your request will be sent to the housing team and they will contact you in due course. Please note: tenants of each property must submit a Mutual Exchange Application Form to their own landlord.

By ticking the below box I am allowing ateb to use my personal data to respond to this service request. My personal data will be securely held and used to fulfil the selected service request in accordance with the ateb privacy statement. Please refer to the ateb privacy statement to understand how we protect your personal data www.atebgroup.co.uk/privacy-cookie-policy. For personal data queries, data access requests, amends or removal please email mydata@atebgroup.co.uk

I agree for you to use my personal data