

Mutual Exchange Application Form

Your	Details

Name (include any joint tenants)	I
Address & Postcode	
Date of birth	
Phone Number(s) Email	

Are you a Tenant of One of the Following Landlords?

Aberdeenshire Council	Osprey Housing	Castlehill H.A.
Grampian HA	Hanover (Scotland) H.A.	Langstane HA
Sanctuary Scotland	Moray Council	
If 'No' who is your Landlor	d? (Name, Address and contact numbe	r)

Date you moved in	Type of property i.e. House, Flat	Number of Bedrooms	Is your home on the ground floor?	Heating Type	
Detail any adaptations in your home		<u>.</u>			
Will these adaptations be used by people who need them once the exchange has taken place? Yes/No					

5 Year Address History

Address	From – To	Landlord	Reason for moving

Please give your reason(s) for requesting an exchange, for example overcrowding or medical reasons.

Please give details of the people who will be moving with you

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Name	Date of birth	Gender	Relationship to tenant

Is anyone moving with you pregnant?

If yes, who?	Due Date	
Do you have any rent arrears or other deb	on your tenancy?	YES/NO
Are you or any member of your household	subject to an Antisocial Behaviour Order?	YES/NO
Have you or any member of household be	en evicted for Antisocial Behaviour?	YES/NO
Are you or any member of your household Sexual Offences Act 2003 or for any other	required to register with the Police under the reason?	YES/NO
Please confirm your nationality U	K resident/other – EU resident/other – Non E	U resident
If you have a partner moving with you, hav in the last 5 years?	e they held a tenancy (Council/RSL/Private)	YES/NO
Do you have any domestic pets/animals th If yes, please state the number and type o	• •	YES/NO
If you have a dog, is your pet classified as (Scotland) Act 2010?	s a dangerous dog under the Control of Dogs	YES/NO
Under the Act, it is illegal to own certain d applies to five types of dogs:	ogs without an exemption from a court. The	Act
Pit Bull TerrierJapanese TosaDogo Argentino		

- Dogo Argentino
- Fila Brasileiro
- XL Bully (Legislation not in place until 1st Aug 2024)

Person moving with you - previous addresses for the past 5 years

Address	From – To	Landlord	Reason for moving

Please provide applicants exchanging with you overleaf.

Details of tenant you are exchanging with

Name (include any joint tenants)	
Address & Postcode	
Date of birth	
Phone Number(s) Email	

Details of their property

Date they moved in	Type of property i.e. House, Flat	Number of Bedrooms	Is your home on the ground floor?	Heating Type	
Detail any adaptation's in their home					
Will these adaptations be used by people who need them once the exchange has taken place? Yes/No					

Please give details of the people who will be moving with them

Name	Date of birth	Gender	Relationship to tenant

Their Landlords Name and Address

Name	
Address	
Postcode	
Phone Number(s)	

Three-way exchange only

Details of third tenant in exchange.

Name (include any joint tenants)	
Address & Postcode	
Date of birth	
Phone Number(s)	
Email	

Details of their property.

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Date they moved in	Type of property i.e. house, flat	Number of Bedrooms	Is their home on the ground floor?	Heating Type	
Detail any adaptations in their home					
Will these adaptations be used by people who need them once the exchange has taken place? Yes/No					
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Please give details of all people who will be moving with them.

Name	Date of birth	Gender	Relationship to tenant

Their Landlords Name and Address.

Name	
Address	
Postcode	
Phone Number(s)	

Please read the following statements and sign to confirm you understand.

I confirm that all the information on this form is correct and I give you my permission to check the details and obtain further information if required. The Landlord you are applying to may seek references about the management of your tenancy from current or previous landlords.

I have viewed the property I plan to exchange to and am happy that it is suitable for my medical needs and I am happy with the condition of the property.

I understand the information provided in this form is covered by the General Data Protection Regulations 2018 and you will not pass it on to others without my permission.

I understand that the landlords involved in this exchange will access the information in this form to assess the application in accordance with their own policy.

I am aware that if I have a right to buy this may be affected by any mutual exchange.

I confirm that my husband/wife/cohabitee (where applicable) has been consulted about the proposed exchange, gives their consent and is not seeking a transfer of tenancy to their sole name under the Matrimonial Homes (Family Protection) (Scotland) Act 1981 as amended.

I confirm that my civil partner (where applicable) has been consulted about the proposed exchange, gives their consent and is not seeking transfer of tenancy to their sole name under the Civil Partnership Act 2004

I understand that I must not exchange properties until both Landlords have given their written consent and both exchange parties and Landlords have signed a new tenancy Agreement.

I am aware that after a mutual exchange has been completed the Landlord will not consider making alterations to the heating system. I have checked that the heating system is suitable for any existing medical conditions.

I am aware that the Landlord will only carry out essential repairs.

I accept the condition of the property and will take over any repairs or alterations which are the outgoing tenant's responsibility.

I am aware that the Landlord will not accept any responsibility for any costs incurred as part of the exchange.

Signature of Tenant Date.....

Joint Tenant Date.....

Please return your application to the landlord who manages your property

Aberdeenshire Council

Housing & Building Standards 93 High Street Inverurie AB51 3AB

Grampian Housing Association

Huntly House Aberdeen AB10 1TD

Grampian Housing Association

21 Culbard Street Elgin IV30 1JT

Osprey Housing

Clifton Road Lossiemouth IV31 6DJ

Osprey Housing

22 Abercrombie Court Westhill AB32 6FE

Hanover (Scotland) Housing Association 12 Institution Road Elgin

IV30 1QX

Sanctuary Scotland

2 Donside Village Square Aberdeen AB24 2PL Castlehill Housing Association 4 Carden Place Aberdeen AB10 1UT

Langstane Housing Association 680 King Street Aberdeen AB24 1SL

Moray Council

PO Box 6760 Elgin IV30 9BX