

**Application for Mutual Exchange** 

# Please return to Riverside Scotland, 44-46 Bank Street, Irvine, KA12 OLP

Please complete this form as fully as possible. If you need help in completing the form contact our office. Your application will be treated in confidence and in compliance with the Data Protection Act 1984. This form must be signed by the tenant(s).

# **Applicant's Details**

Title:	FOR OFFICE USE
Surname:	Date Received
First Name:	
Address:	Dates all info available:
Town:	
Postcode:	Date applicants notified:
Tel Number:	
Date of Birth:	
National	
Insurance No.	
Marital Status	

Household Details (Please give details of everyone living at your current address).

Full Name	Date of birth	Relationship to you (M/F)	National Insurance No.

#### **Property Details**

Type of Present House i.e. house, flat

If flat what floor i.e ground

No of bedrooms

Alterations made to property

Name & address of present landlord

Your reasons for wishing to exchange

Does your property have any features to help you access facilities within your home eg level access shower, a ramp or adaptations for a wheelchair?

If yes, please give details of the features

Do you have pets? If so, please provide details

### Details of Tenant with whom you wish to Exchange

Title:	
Surname:	
First Name:	
Address:	
Town:	
Postcode:	
Tel Number:	
Date of Birth:	
National Insurance No.	
Marital Status	

# Household Details (Please give details of everyone living at your current address).

Full Name	Date of birth	Relationship to you (M/F)	National Insurance No.

# **Property Details**

Type of Present House i.e. house, flat	
If flat what floor i.e ground	
No of bedrooms	
Alterations made to property	
Name & address of present landlord	
Your reasons for wishing to exchange	
Does your property have any features to help you access facilities within your home eg level access shower, a ramp or adaptations for a wheelchair?	
If yes, please give details of the features	
Do you have pets? If so, please provide details	

If the exchange is approved, it will be expected that both tenants will reside in the properties for a minimum period of one year. If either tenant terminates their tenancy within one year the association will consider the Recovery of Possession of the other tenancy. This would be in circumstances where the association believed that it was induced to grant the tenancy by a false statement made knowingly by the tenant.

# **Declaration and Mandate**

I declare that the details contained in this application are true to the best of my knowledge, and I agree to notify you in writing of any changes that may take place affecting the particulars supplied by me.

I also understand that any false or misleading information given, or relevant information withheld now or at any time may result in any tenancy being granted being terminated by Riverside Scotland.

I authorise my present and any previous landlords to disclose any relevant information to Riverside Scotland.

Signature of Tenant	Date			
Signature of Joint Tenant(s)	Date			
Tenant whom you wish to Exchange with				
Signature of Tenant	Date			
Signature of Joint Tenant	Date			

We can supply this document in a print size to suit. It is also available in Braillie, audio and other formats, and in other languages. Our website also has several accessibility features which you may find useful.

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