

MUTUAL EXCHANGE APPLICATION (Slough Borough Council Tenant)

This is an application only. Formal consent to move must be obtained from the council.

One form by each incoming and outgoing tenant must be completed.

			Tenant Deta	ils			
Address an	d Postco	de.					
Address an	u i ostoo	uc.					
Contact Det		1					
Home Telep Mobile	none						
Work							
Email							
Occupant d						_	
Occupant	First	Name	Surname	Sex	DOB	N	l Number
Tenant 1							
Joint							
Tenant 2							
TCHAIR Z							
Other house	ehold me	mbers to l	be included				
Relationshi	. F:	st Name	Curnomo	NII I	\	D0D	***************************************
	b Lits	si maine	Surname	NII	Number	DOB	*Moving with
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	p Firs	St Name	Surname	NII	Number	DOR	
	p Firs	st Name	Surname	NII	Number	DOR	you?
	p Firs	st Name	Surname	NI	Number	DOR	you?
	p Firs	st Name	Surname	NII	Number	DOR	you?
	p Firs	st Name	Surname	NII	Number	DOR	you?
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*If anyone is they will hav	not movi	ng with you vacated be	u please give reasons efore the move takes	s, forwar place.	rding addr	ress, and	you? Yes/No
*If anyone is they will hav	not movi e already	ng with you vacated be	ı please give reasons	s, forwar place.	rding addr	ress, and	you? Yes/No
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*If anyone is they will hav	not movi e already	ng with you vacated be	u please give reasons efore the move takes	s, forwar place.	rding addr	ress, and	you? Yes/No

About vo	our property	/ :				
	property (tic					
Flat / Ma			House	9	Bung	alow
What floo	or					
	T	T			1	1
Number of living rooms	Number of double bedrooms	of sing	gle	cy Type (tick)	Weekly Rent	Pets – type and how many
			Secure	e		
			Secure	e Fixed	1	
			Term*			
			Assure	ed Fixed		
			Term*			
			Assure	ed		
			Afford	able		
Other In	formation			anted for and h	_	eft?
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		Conta	act details	State Landiord address, ar	nd full contact details
	Address				
	Addices				
			Post code		
If this	io o multiple o	vohenge v	vha alaa ia in	welved?	
2	is a multiple e Name		act details	State Landlord address, ar	nd full contact details
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	Address				
			Doct code		
3	Also part of the	exchange	Post code	State Landlord address, ar	nd full contact details
	Name		act details	Otato Landiora address, an	ia ian contact actano
	Address				
			Post code		
4	Also part of the	exchange		State Landlord address, ar	nd full contact details
	Name	Conta	act details		
	Address				
	Address				
			Post code		
be fina rubbis share	ancially or other sh or identified a d between the la	rwise liable at the inspec andlords in	for issues suc ction stage. I/N volved or, whe	on the property as seen, and th as the condition of the pro We agree that information a ere necessary, between othe e consent to a credit check t	operty, decoration, bout me/us can be er statutory agencies,
Tenar	nt 1 Signed:				Date:
Tenar	nt 2 Signed:				Date:
If the	tenancy is in joi	nt names, b	ooth of you mu	ıst sign above.	
Office	e Use Only: Ex	change	Agreed	Refused	
Signe	d				Date:
Neigh	bourhood Hous	ing Officer	name:		
Appro	ved by Neighbo	ourhood Lea	ad		
Signe	d				Date:



MUTUAL EXCHANGE APPLICATION (Incoming tenant)

This is an application only. Formal consent to move must be obtained from the council.

One form by each incoming and outgoing tenant must be completed.

			Tenant Deta	ils			
Address and	Postco	de:					
Contact Deta	ils:						
Home Teleph							
Mobile							
Work							
Email							
•							
Occupant de							
Occupant	First	Name	Surname	Sex	DOB	l l	II Number
Tenant 1							
Joint							
Tenant 2							
Other house	hold mo	mhore to	ha inaludad				
Other house	_						1
RUSTIONENIN	Fire	st Nama	Surnama	NI Ni	ımhar	DOB	*Moving with
Relationship	Firs	st Name	Surname	NI Nu	ımber	DOB	*Moving with vou?
e.g son	Firs	st Name	Surname	NI Nu	ımber	DOB	*Moving with you? Yes/No
_	Firs	st Name	Surname	NI Nu	ımber	DOB	you?
_	Firs	st Name	Surname	NI Nu	ımber	DOB	you?
	Firs	st Name	Surname	NI Nu	ımber	DOB	you?
_	Firs	st Name	Surname	NI Nu	ımber	DOB	you?
	Firs	st Name	Surname	NI Nu	ımber	DOB	you?
e.g son							you? Yes/No
e.g son *If anyone is r	not movi	ng with you	u please give reasons	s, forward			you? Yes/No
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	ur property					
	property (tic	k)				
Flat / Mai			House	Э	Bung	alow
What floo	r					
Number of living rooms	Number of double bedrooms	Number of sing	gle	cy Type (tick)	Weekly Rent	Pets – type and how many
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				e Fixed	7	
			Term*			
				ed Fixed	=	
			Term*			
			Assur	ed		
			Afford	able		
			,			
If a fixed	term tenanc	y how lo	Other	ranted for and h	ow long is I	eft?
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Other Inf	ormation		Other ong was it gr	ranted for and h		eft?
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Please turn over the page

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Who	are you exchang	jing with?	
1	Name	Contact details	State Landlord address, and full contact details
	Address		
	71001000		
		Post code	
If this	s is a multiple ex	change, who else is ir	ivolved?
2	Name	Contact details	State Landlord address, and full contact details
	Address		
		Post code	
3	Also part of the	exchange:	State Landlord address, and full contact details
	Name	Contact details	
	A 1.1		
	Address		
		Post code	
4	Also part of the	exchange:	State Landlord address, and full contact details
	Name	Contact details	,
	Address		
		Post code	

I/We confirm that I/We understand I/We take on the property as seen, and the Council will not be financially or otherwise liable for issues such as the condition of the property, decoration, rubbish or identified at the inspection stage. I/We agree that information about me/us can be shared between the landlords involved or, where necessary, between other statutory agencies, or partners of the council. Where required I/We consent to a credit check to prevent fraud.

Tenant 1 Signed:	Date:
Tenant 2 Signed:	Date:
If the tenancy is in joint names, both of you must sign above.	