

## Application to Exchange Tenancies

Telephone: 01536 410333

Email: Housing@kettering.gov.uk

Fax: 01536 410795

Name of Tenant(s)			
Address			
Telephone (Home)		Telephone (Mobile)	

### FAMILY LIVING AT YOUR ADDRESS

Full Names	Date of Birth	Sex	Relationship to Tenant
			Applicant

### YOUR ACCOMMODATION DETAILS

House		Flat		Floor		Maisonette		Bungalow		Bedsit	
Number of bedrooms						Number of living rooms, excluding kitchen					
Any disability/mobility adaptations at your property? E.g. stair lift, grab rails, level access shower.											

### EXCHANGING TENANTS' DETAILS

Name of Tenant(s)			
Address			

### EXCHANGING TENANTS' ACCOMMODATION DETAILS

House		Flat		Floor		Maisonette		Bungalow		Bedsit	
Number of bedrooms						Number of living rooms, excluding kitchen					
Any disability/mobility adaptations at this property? E.g. stair lift, grab rails, level access shower.											

### DETAILS OF THEIR LANDLORD IF OTHER THAN KETTERING BOROUGH COUNCIL

Landlord Name:			
Landlord Address:			
Housing Officer Contact Number:			

*Please turn over....*

<b>Ethnic Origin of Applicant: (please circle)</b>		
<b>White</b>	<b>Black or Black British</b>	
British Irish Other white background	African Caribbean Other Black background	
<b>Mixed</b>	<b>Other Ethnic Origin</b>	
White and Black African White and Asian White and Black Caribbean Other Mixed background	Chinese Irish Traveller Romany Gypsy Other Group	
<b>Asian or Asian British</b>		
Indian Bangladeshi Pakistani Other Asian background		
<b>Economic Status of Applicant : (please circle)</b>		
Working full time / Working part time / JSA / ESA / Maternity Benefit / Unemployed / Retired Voluntary Work / Student / Self Employed / Government Supported Training		
<b>Please give the reason/s you want to move:</b>		
e.g. need a bigger property, to be nearer to work etc.....		
<b>Please tell us where you found this exchange property: (please circle)</b>		
House Exchange Website / Word of mouth / Family or Friends / Other		
<b>Please note: You <u>must not</u> move until consent is given. Consent to exchange will not be unreasonably withheld (subject to the Statutory conditions).</b>		
Signature(s):		Date:
<b>Please return to:</b>		
<b>Housing Management, Kettering Borough Council, Bowling Green Road, Kettering NN15 7QX</b>		
<i>For office use only:</i>	<i>Date app received:</i>	<i>Date decision to be made by:</i>
<i>Copy to HomeMove Advisor</i>	YES                  NO	<i>NM signature:</i>