

Application for a mutual exchange

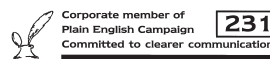
Please use this form if you want to exchange properties. Both you and the person you are exchanging properties with will need to fill in your own form. Once you have filled it in, please return it by post to:

Berneslai Homes, PO Box 627, Barnsley S70 9FZ

You can also deliver in person to any Barnsley Connects Office. We will consider your request and give you our decision within 20 working days of receiving your application.



A fresh approach to people, homes and communities



Berneslai Homes Limited is a company controlled by Barnsley Metropolitan Borough Council. A company limited by guarantee, registered in England and Wales, number 4548803. Registered Office: Springfield House, Springfield Street, Barnsley, S70 6HH. www.berneslaihomes.co.uk

Please read the following notes before filling in the mutual exchange form.

General instructions and advice

- 1 Make sure that you are satisfied that the district and surroundings are suitable.
- 2 Examine the inside and outside of the house.
- 3 Consider whether the public transport will meet your needs.
- 4 Is the property close enough to local facilities (for example schools or shops)?
- 5 Some houses have outside steps. Would this create problems for you getting around?
- 6 You must accept the property as it is. We will not be responsible for any decoration or extra repairs, other than those that are needed as a result of normal wear and tear.
- 7 Your rent account must be clear, and you must not owe any other money to Barnsley Metropolitan Borough Council.
- 8 We will not approve an exchange where you are breaking the terms of your tenancy.
- 9 Does the house meet your needs (for example, bathroom facilities)?

Important permission you need for the exchange

Fill in this form in no way means we have agreed to allow you to make the exchange. You must have our written permission before any exchange takes place. If you exchange properties before we give you written permission, you may have to move back to your original property. We will give you our decision within 20 days of us receiving the forms or within 42 days at the latest.

Housing-association and private-sector rents

Rents in the private sector and housing associations are usually a lot higher than council rents. Even if you qualify for Housing Benefit, you may not receive Housing Benefit to cover the whole of the rent. Please contact the Borough Treasury and fill in a 'pre-tenancy determination' form. The Borough Treasury will then be able to tell you how much Housing Benefit you could receive. However, you may receive less than this amount. You should not enter into a mutual exchange in the private sector without making sure you can pay the rent set out in the contract.

Shorthold tenancy - private sector

You should be aware that by leaving your council accommodation you are giving up a secure tenancy. This means that if you move into less secure accommodation (for example, a property rented by a private landlord) and you are asked to leave (but have nowhere else to live, you may not be eligible to be rehoused by the council. Private lettings are usually six month tenancies. This means that your landlord can ask you to leave at the end of this six months, if they have given you notice. Private lettings are clearly not secure for you or your family. You may reapply for council housing but you will have to join the housing register. This means you may have to wait a long time before you are offered a property.

Your details

Your full name:

Your date of birth:

Your address and postcode:

Your telephone number:

What type of property is it?

For example – bungalow.

How many bedrooms does it have?

Who is the landlord?

What is their address and postcode?

When did your tenancy begin?

Why do you want to exchange?

Details of people moving with you

Surname

First name

Date of birth

Who do you want to exchange with?

Their full name:

Their date of birth:

Their address and postcode:

What type of property is it?

For example – bungalow.

How many bedrooms does it have?

Who is their landlord?

What is their landlord's address and postcode?

Inspecting your home

We will need to inspect your home. If you are not a Barnsley council tenant we will ask your landlord for a reference. Please tell us how we can contact you to arrange an inspection.

Declaration

I have read and understood the notes and instructions, and will (if allowed) take over the tenancy as a permanent tenant.

I understand you may share my information with other agencies detect and prevent fraud.

Signature of applicant/s

Date

Equal opportunities section (We will only use information to check our policy on equal opportunities.)

You:

Are you: male? female?

How would you describe your ethnic origin?

- | | | |
|--|--|---|
| <input type="checkbox"/> White British | <input type="checkbox"/> White Irish | <input type="checkbox"/> Any other white background |
| <input type="checkbox"/> Mixed white and black Caribbean | <input type="checkbox"/> Mixed white and black African | <input type="checkbox"/> Mixed white and Asian |
| <input type="checkbox"/> Any other mixed background | <input type="checkbox"/> Indian | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Asian British | <input type="checkbox"/> Any other Asian background |
| <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> Black African | <input type="checkbox"/> Black British |
| <input type="checkbox"/> Any other Black background | <input type="checkbox"/> Chinese | <input type="checkbox"/> Gypsy traveller |
| <input type="checkbox"/> Gypsy Romany | <input type="checkbox"/> Any other ethnic group | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Don't know | | |

What is your first language?

- | | | | | | | |
|----------------------------------|-----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|---------------------------------|
| <input type="checkbox"/> English | <input type="checkbox"/> Albanian | <input type="checkbox"/> Farsi | <input type="checkbox"/> Polish | <input type="checkbox"/> Hindi | <input type="checkbox"/> Russian | <input type="checkbox"/> French |
| <input type="checkbox"/> Urdu | <input type="checkbox"/> Spanish | <input type="checkbox"/> Bengali | <input type="checkbox"/> Punjabi | <input type="checkbox"/> Chinese | <input type="checkbox"/> Arabic | <input type="checkbox"/> Other |

(If 'other', please give details)

What is your faith?

- | | | | | | | |
|--------------------------------------|--|--|-------------------------------|---------------------------------|--------------------------------|--------------------------------------|
| <input type="checkbox"/> Christian | <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> Sikh | <input type="checkbox"/> Muslim | <input type="checkbox"/> Hindu | <input type="checkbox"/> Rastafarian |
| <input type="checkbox"/> No religion | <input type="checkbox"/> Prefer not to say | <input type="checkbox"/> Other (please give details) | <input type="text"/> | | | |

Disability

Do you consider yourself to be disabled?

Yes No

If you have a disability, please tick any of the following that apply:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Hearing problem | <input type="checkbox"/> Sight problem | <input type="checkbox"/> Speech problem | <input type="checkbox"/> Use a wheelchair |
| <input type="checkbox"/> Mental-health problem | <input type="checkbox"/> Need help to walk | <input type="checkbox"/> Almost unable to walk | <input type="checkbox"/> Learning disability |

If we get in touch with you, do you need any of the following?

- | | | | | |
|--------------------------------------|--|----------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Large print | <input type="checkbox"/> Sign language | <input type="checkbox"/> Braille | <input type="checkbox"/> Audio tape or CD | <input type="checkbox"/> Interpreter |
|--------------------------------------|--|----------------------------------|---|--------------------------------------|

If we visit you should we

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Knock loudly | <input type="checkbox"/> Use the back door | <input type="checkbox"/> Use the side door | <input type="checkbox"/> Wait to be let in |
| <input type="checkbox"/> Use the front door | <input type="checkbox"/> Make a special appointment (see below) | <input type="checkbox"/> Does not apply | |

If we have to make a special appointment to visit you, should we:

- | | |
|--|--|
| <input type="checkbox"/> make the appointment with a key worker?
(for example, social worker) | <input type="checkbox"/> make the appointment with someone
who has the power of attorney for you? |
|--|--|

Contact details

Contact details

How would you describe your sexuality?

- | | | | | | |
|--|-----------------------------------|--|----------------------------------|--------------------------------|---|
| <input type="checkbox"/> Heterosexual
or 'straight' | <input type="checkbox"/> Bisexual | <input type="checkbox"/> Gay woman
or lesbian | <input type="checkbox"/> Gay man | <input type="checkbox"/> Other | <input type="checkbox"/> Prefer not
to say |
|--|-----------------------------------|--|----------------------------------|--------------------------------|---|

For official use only

Rent account

Number
Clear/Arrears/Recharges
Date checked

Amenity checklist

Type of heating
Conditions of outer and inner doors

Condition of kitchen units

Sink unit
Base unit
Wall unit(s)
Fridge

Condition of glass in doors and windows

--

Condition of bathroom fittings

Bath
Basin
Toilet

Cleanliness and decoration

Satisfactory
Unsatisfactory

Outbuildings

Satisfactory
Unsatisfactory

Tenants' repairs

--

General comments

--

Mutual exchange

Approved or not approved
Date
Inspecting officer's signature
Inspecting officer's name
Report checked by manager
Manager's name
Date / /

If you need help filling in this form, please ask one of our staff or call
Customer Services on 01226 772720.

আপনার যদি এই তথ্য বোঝার জন্য সাহায্যের প্রয়োজন হয়, তবে
অনুগ্রহ করে আমাদের কোন একজন স্টাফকে জিজ্ঞাসা করুন,
অথবা গ্রাহক পরিসেবায় যোগাযোগ করুন,
টেলিফোন 01226 772720

अगर आप इस जानकारी को समझने में सहायता चाहते
हैं तो कृपया हमारे किसी कर्मचारी से पूछें, या उपभोक्ता
सेवा, टेलीफोन 01226 772720 पर सपर्क करें

Jeśli nie rozumieją Państwo tych informacji i
potrzebują pomocy, mogą Państwo poprosić o
pomoc kogoś z naszych pracowników lub
zadzwoić pod numer telefonu:
01226 772720 (Biuro Obsługi Klienta)

Если вам требуется помощь в понимании этой
информации, обратитесь к нашим сотрудникам
или позвоните в Отдел обслуживания
клиентов по телефону 01226 772720.

اگر برای درک این مطالب نیاز به کمک دارید، از یکی از
کارکنان ما کمک بخواهید، یا با بخش خدمات رسانی به
مشتریان ما تماس بگیرید، شماره تلفن 01226 772720

اگر آپ کو ان معلومات کو سمجھنے کے لئے مدد کی
ضرورت ہے، تو براہ مہربانی ہمارے عملے کے کسی رکن
کو پوچھیں، یا کسٹمر سروسز سے رابطہ کریں، ٹیلیفون
01226 772720

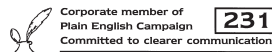
اذا كنت بحاجة للاستفسار عن هذه المعلومات، رجاء اطلب
المساعدة من احد الموظفين او اتصل بخدمات الزبائن على الرقم
01226772720

如果您需要协助，以便更好地了解该信息，
请与我们的员工联系，或致电客户服务：
01226 772720。



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