

# MUTUAL EXCHANGE REQUEST FORM



I HAVE	
No of Bedrooms	<input type="text"/>
Separate Dining Room	<input type="checkbox"/> Yes <input type="checkbox"/> No
Separate WC	<input type="checkbox"/> Yes <input type="checkbox"/> No
Garden	<input type="checkbox"/> Own <input type="checkbox"/> Communal
Floor	<input type="checkbox"/> Ground <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> House <input type="checkbox"/> Other <i>(please specify)</i> .....
Central Heating	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other <i>(please specify)</i> .....
Sheltered	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(please specify)</i> .....
Other Information	
Full Name -	
Address -	
Telephone No -	

I WOULD LIKE	
No of Bedrooms	<input type="text"/>
Separate Dining Rooms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Mind
Separate WC	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Mind
Garden	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Mind
Floor	<input type="checkbox"/> Ground <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> House <input type="checkbox"/> Don't Mind
Central Heating	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Mind
Sheltered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Mind
Areas	
Landlord's Name & Address	

	Initials
Date Received	
Date to Area Offices	
Date to Website	
Date Updated	

**Please note that your details will also appear on our website. If you prefer not to have your details appear, please tick the box below.**

**I do not** wish my details to appear on the website