

Appendix 3

Ms Amanda Brown also submitted some comments at the beginning of Planning Committee. These are as follows:

Good evening councillors and officers. My name is Ms Amanda Brown and I am a town planning consultant with 23 years practice working in councils and private sector. I advise many HMO landlords across the country. Because of this I have a lot of current experience of the new HMO legislation and how this is being interpreted by councils and the planning inspectorate. I represent Mr Steve Latham one of your most respected local HMO landlords, and the no of landlords he advises through his letting agency - Concentric Lettings in Bootle.

Steve provides homes for some local people in his shared houses. Some are vulnerable, many are older and separated, many work in low paid jobs and many in the docks. Steve receives requests for rooms in shared houses each year. We all know this demand is increasing not least with the amendments to the benefit system and a requirement for people to move to accommodation appropriate to their needs and a restriction on the payment of room only benefit to single people under 35. Mr Latham is recognised by the council for the high quality of accommodation he provides and in restoring and using many derelict attractive Victorian properties.

Firstly we welcome the planning department's shift in policy that previously would only accept proposals for 2 bed flats and finally an acknowledgement that shared accommodation is needed and provides a crucial role in the Districts housing provision. The previous stance has involved Mr Latham in extremely long and costly Public Inquiries.

We have commented formally on the first Draft. However there remains deep concerns that the SPD is not clear; confuses flats and shared HMO accommodation trying to impose the same standards on bedsitting rooms, and if taken literally, will result in future proposals at least be taken through the expensive appeal process or being abandoned as unviable with investment going instead to adjacent Districts. We wish to work with the council to ensure a workable document that is realistic.

We are concerned about the following

- 1 The SPD suggests that the planning officers can agree proposals during pre application discussion - I understand that this can only ever be informal advice not binding on the council.*
- 2 Fundamentally there should be separate guidance for flats /houses and HMO accommodation. A flat is a separate C3 dwelling / planning unit with separate facilities and services and can be sold or let on a self contained rate to LHA tenants. A HMO comprises bedsitting rooms with varying facilities and all sharing kitchens or living rooms or bathrooms. They can only be let on a room rate, cannot be sold / have finance raised on them and have shared utilities. This accommodation is not let on the basis that the tenant lives only in the*

room. There is confusion in the SPD over bedsitting rooms within the planning definition of a HMO and studio flats.

- 3 *In reality the SPD requirements relate only to larger HMOs which are materially different to C4 HMO for 6 or so tenants that does not require planning permission if it was previously a dwelling. This is not made clear.*
- 4 *Noise insulation for flats and HMO should be set out separately. The guidance suggests that each individual bedroom within a HMO is to be noise insulated on all walls ceiling and floor as if it were a separate dwelling. It has been established at inquiry that a HMO is 1 separate planning unit / dwelling not several. If any noise insulation work is required it would be between the dwelling and any adjoining properties not between individual rooms in a shared house. The principle of this was established at the Inquiry. The requirements for build regs are different for a shared dwelling than for a flat. This level of unnecessary work makes HMOs unviable when most HMOs are in Victorian properties with thick walls that already achieve building regs standards. It exceeds new build requirements.*
- 5 *What noise readings have been taken and reports provided to justify the policy – it is not enough to say that houses with many people make a lot of noise and cause disturbance – so do large houses with large young families and it is not borne out in inspector's decisions.*
- 6 *The guidance suggests that terraced properties cannot be used for HMOs – or that only if stairs are adjoining stairs in the adjacent building – most terraces are rows of houses with the same layout – confirmation is required what is meant and which terraced houses are suitable for those HMOs which are materially different to C4. Taken literally, this precludes most of the most suitable accommodation in the district being used for HMOs and providing the much needed accommodation. Kitchens and living rooms are located along 1 wall, and hall and stairs along the other which repeats along the terrace. This cannot be changed.*
- 7 *We seek confirmation that the SPD does not preclude bedrooms with roof lights within HMOs as long as there is access to communal living rooms with windows. Liverpool requires them to be cill height. Clearly there are many bedrooms in roof spaces with roof lights across the district. Does the no bedrooms with roof lights rule also apply to all houses / flats and extensions of houses? Clearly the vast majority of HMO are C4 HMO and alterations to roofs are within PD rights which do not need consent. How will this policy be implemented on existing HMOs. If converting from a dwelling to HMO can existing bedrooms in roof with roof lights no longer be occupied? The document states that HMO occupiers should have access to rooms with outlook – later it says that all rooms should have windows and not roof lights. The licensing and housing teams accept roof lights and access to communal rooms with windows.*
- 8 *Side distance of 12m to two storey flank wall of adjacent building when considering side windows. Please confirm this does not relate to distance to boundary treatment which is not 2 storey.*
- 9 *Accessibility is unclear - does the SPD suggest HMOs in 3 and 4 storey buildings require a lift to be installed to give access throughout. This makes*

no sense whatsoever. Are you requiring ramps to all HMOs? Indeed does this apply to all houses as well as all flats???

Ms Amanda Brown also e-mailed some other comments that she wished to refer to. These are as follows:

- 1 *Comment about officer advice is informal and not binding on the council as set out above.*
- 2 *There is still no 1 description in the document for bedsits within a HMO – that has ensuite and some tea making facilities but has access to the main kitchen. We believe this is the bedsitting rooms which are included in the definition of the C4 HMO and as such sui generis HMO - and is 13m2 plus ensuite / tea making area?*
- 3 *Yet a C3 separate dwelling / studio with kitchen and ensuite need only by 13m2 in total?*
- 4 *We consider a studio flat is quite different to a bedsitting room within a HMO.*
- 5 *A bedsitting room with access to communal facilities (communal kitchens, lounges, dining rooms, utilities) is not a separate C3 dwelling / planning unit and cannot be valued /finance raised/ leased / sold as such. It does not have its own metering points for utilities they are paid communally; also you cannot claim a self contained dwelling rate for housing benefit as there are shared facilities at the property. There remains considerable confusion in the draft SPD. They are not self contained flats as described but some have a greater level of independence in the bedsits yet also relying on shared facilities. This accommodation is not let on the basis that the tenants lives only in the room.
Table 1 what is a '2 or more roomed bedsit unit'?
Table 3 refers to 'studio flats' – further more confusing the type / classification of the unit? In our view this is either a completely separate C3 dwelling or it is a bedsit with a greater level of facilities within a HMO, and is NOT a dwelling.*
- 6 *We reiterate that the noise insulation for flats and sui generis HMOs / C4 should be set out separately. Currently the guidance appears to suggest that each individual bedroom within a HMO whether C4 or Sui Generis is to be noise insulated on all walls ceiling and floor as if it were a separate flat. A HMO is 1 separate planning unit / dwelling not several and this was established at the inquiry. If any noise insulation work is required it would be between the dwelling and any adjoining properties not between individual rooms in a shared house. The requirements for build regs are different for a shared dwelling and for a flat.*
- 7 *Should the planning department be suggesting that each room in a shared house is insulated – there is no basis for this and is unviably expensive. Most HMOs that require consent are in large older Victorian terraced / attached properties that have significant party walls between them and within the building. These achieve standards way in excess of that of new build.*
- 8 *What noise readings have been taken and reports provided to justify the policy – it is not enough to say that houses with many people make a lot of*

noise and cause disturbance – so do large houses with large young families and it is not borne out in inspector's decisions.

- 9 *The guidance suggests that terraced properties cannot be used for HMOs – or that only if stairs are adjoining stairs in the adjacent building – most terraces are rows of houses with the same layout – confirmation is required what is meant and which terraced houses are suitable for those HMOs which are materially different to C4*
- 10 *We seek confirmation that the SPD does not preclude bedrooms with roof lights within HMOs as long as there is access to communal living rooms with windows. Clearly there are many bedrooms in roof spaces with roof lights across the district. If this is not the case does it mean that the no bedrooms with roof lights rule also apply to all houses / flats and extensions of houses. Clearly the vast majority of HMO are C4 HMO and alterations to roofs are within PD rights of HMOs and C3 dwellings do not need consent. How will this policy be implemented.*
- 11 *Side distance of 12m to two storey flank wall of adjacent building when considering side windows. Please confirm this does not relate to distance to boundary treatment which is not 2 storey.*
- 12 *Please confirm in outlook and prospect that it is only with a self contained flat that a window is required in each habitable room. Does this also apply to new houses in the district. Does this mean that no flats or houses or extensions to them will be approved with rooms that have roof lights in the rooms created in the roof? There is no reference to HMO – if converting from a C3 dwelling to HMO and the house has existing bedrooms with roof lights – are you suggesting that these rooms can no longer be occupied.*
- 13 *Roof space accom – in 1 part of the document you say that HMO occupiers should have access to rooms with outlook – later it says that all rooms should have windows and not roof lights.*
- 14 *The example given under trees – this does not apply to a HMO that has some shared rooms and some ensuite rooms and some rooms with tea making facilities and all with access to main kitchen – that is 1 planning unit not several.*
- 15 *Please confirm what you mean by accessibility – are you suggesting HMOs in 3 and 4 storey buildings require a lift to be installed to give access throughout. This makes no sense whatsoever. Are you requiring ramps to all HMOs? Indeed does this apply to all houses as well as all flats???*
- 16 *Comings and goings – there are no grounds for these statements and huge generalisations.*
- 17 *Internal layout – kitchens in terraced houses are located normally at the back of the house and often in the single storey extension – these are along the party wall – the ground floor layout has rooms along 1 side and the corridor and stairs along the other – we don't understand how the layout can be changed. Lounges and kitchens, stair and hallways are located on party walls for most terraced / attached houses. Taken literally this precludes most of the most suitable accommodation in the district being used for HMOs and providing the much needed accommodation.*

- 18 *Outdoor amenity space –for children to play? The license for the HMO's only allows 1 person per room/unit so why would children need to play at the property, in our experience any tenants with access to their children take them out for the day and are not allowed to stay over.
The guidance refers back to current standards for new 'FLATS', they are not flats so the 30m2 doesn't apply.*
- 19 *3.6 party walls refers to the SPG in 2003. This surely needs to be looked at again, as the developments comply with the party wall act and building regulations.*