

HMO SPD REVIEW - SURVEY RESPONSES

Do you agree with the section 'Living conditions / quality of living environment'? What changes do you think we should make?

Ensure properties are not overcrowded. Ensure living conditions are appropriate and of good quality.

HMO landlords should be legally obliged to make sure rubbish and weeds are regularly removed and that noise levels are controlled.

The Saturation of C4 / HMOs in my area is far beyond 20 percent. This is causing a strain on both limited parking and the local area

Yes

Minimum floor space remains too small. Occupants should get a distinct and separate 'Living' Rm space from kitchen diners. Removal of gardens by building extensions should be declined. Need to maintain greenery in Britains most populated city.

I agree No changes

Paragraph 1.16 does not make any comment about providing adequate security for the room in order to provide a good standard of living environment. Part Q of the building regulations now ensures that all new dwellings and dwellings created by a material change of use, have a 'front' door to a security standard. 10% of burglaries reported to Hampshire Constabulary for the year 22/09/16 to 21/09/17 occurred in HMOs. With the implementation of Part Q the security of dwellings will improve over time, however, with HMO's this may not be the case. Therefore, I would include a requirement that room access doors should be to PAS24 standard.

sounds good to me. Agree

I agree with section 1.18 of this. However, I am not sure 2 toilets between 10 people would be adequate!

Broadly agree

Yes. I agree with the proposals about space and standards. I presume fire and smoke alarms are already mandatory in HMO's?

Agreed.

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Proposals 1-16:- Refuse all further C4 applications in this area is a very good idea. Also, a way is needed to bring down the number of HMOs in areas where HMOs are above 10%. 1-17 through 1-18:- Identification of bedrooms (single/Double) - In our area, we wish to reduce the number of HMOs, so I will not promote any ideas that encourage the use of HMOs. If a house was built and designed as a two/three/four bed roomed house, then that is what it should be used for. 1-19 through 1-22 floor and height requirements. The measurements may be legal, but are not generous. The average height of a human male, approximately 20 years old, is around 1.8 to 1.9 meters, which means that a person of average height, could not only touch the ceiling with his hands stretched, but once the room is furnished, with just a bed and wardrobe, there would be little, if any space left for a comfortable chair, work/study area etc...

It is good to see that some attempt is being made to make the accommodation suitable and appropriate for its tenants. Certainly, due to maximising the use of internal space for sleeping space, we have seen an increased use of outdoor space and even the street as communal areas which has increased noise issues.

I do agree with the living conditions, but should be acknowledged that several houses now have combined kitchen/dining/living areas.

If the purpose of 1.16 is to ensure that a proposed HMO [C4 or sui generis] complies with the floorspace standards to be imposed by the document it should be more explicit. A property that does comply would be taken as providing a good standard of living environment for its future occupiers. However, the Council has recourse under the Housing Act to impose and enforce its own guidance which raises the issue as to whether the Council as the Local Planning Authority should be intervening in such matters. In para 1.17 the floor plans should be to a set scale of 1:100 or 1:50. The NDSS should not impose a higher standard than that included within other [housing] legislation. Whilst para 1.18 refers to the imposition of a performance condition the document does not explore the implications of future monitoring.

This statement is too wishy washy. It can be interpreted in any number of ways subject to an individual's views. **EXCEEDINGLY BAD PRACTICE!** "fail to protect the amenity of, and the provision of a good standard of living environment for future occupiers." People want to rent rooms often because they cannot afford to rent flats and don't want to sleep on friends' floors! - It will actually increase homelessness!

I don't know the section living conditions. I think that if a house is built as a 3 bed it should only be an HMO as a 3 bed. If the house is suitable for another bedroom in the loft then this can be let as another bedroom. I think there should be 2 toilets and a communal living room and kitchen to allow people the space to live.

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I disagree. The size of a room does not reflect the quality of accommodation offered. Some tenants prefer a smaller room at a lower cost for shorter tenancy periods. It is not a case of 'one size fits all'.

I agree

Licensed landlords will provide much needed accommodation to a good standard, most HMO landlords keep their properties in very good order to attract good tenants

None

I agree on the whole, although this does not include privately rented properties, which had not been build for HMO use but are used as such by minor internal changes - such as changing the use of dining room to a bedroom.

Living environment should be a quality environment of a particular standard e.g. Heat, natural light

Agree in principle: the remaining quality of our living environment in Southsea has been, and continues to be, irrevocably harmed & greatly reduced whilst the living density rises completely unchecked.

Generally yes.

Quality of living environment has less to do with space than how people choose to use it. If HMO tenants live in squalor it is down to them, not their landlords.

Space standards are important as is the living environment for those close to the HMO

yes -

Families need homes - less hmo

Ensure outlets glazed and kept to high standard

I agree with the requirement to specify the intention of double or single occupancy of a room. As this significantly affects the impact of the increase in occupancy.

There is little evidence that licensing schemes improve housing standards.

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Overcrowding, parking limitations in over crowded city streets

Stop granting family homes to become HMO properties. Cramming many people in causes problems for the infrastructure, schools, Dr's, etc. Not to mention the strain put on parking which is already stretched to the limits!

Agree

Prevent any further HMO's for properties that do not provide off road parking for the increased amount of people living in the property. Increase the radius to 500m

Yes

Rules on Sound proofing should be included

I think is important not to "shoehorn" rooms into a property. With the increase in large student halls of residents in the city, we need to make sure that HMO accommodation is attractive to young professionals

Yes

No information available to review

Agree

Limit the numbers of HMOs in streetsstop condoning "student ghettos"

i disagree with these shared houses in busy areas

No

Less overpowering highrise buildings.

Make the Tenant responsible for themselves and there actions stop blaming the landlord. Make them accountable example rubbish.

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Quality of living conditions is an important factor. In my experience people of Portsmouth be students or professionals would rather have modern living facilities. Planning needs to be re-aligned with Licensing & HMO. Having different departments is confusing for homeowners and makes the process more difficult.

Enforcement of regulations about noise, safety of property, disposal of rubbish etc.

Remove the need for a wash hand basin in 5 bed properties, make it so that they should have two bathrooms instead

Yes

Yes

Not applicable to me

We agree that this section presents HMO's in a contemporary setting clearly

.....

changes to include maximum occupancy per room should be included

I agree with the amendments however I think this should be extended to apply retrospectively. PCC should inspect those HMOs which have already been granted permission but may not be conforming to these standards. I. E. PCC should seek to enforce these standards in HMOs which may have already flouted these standards.

OK as far as it goes, but it is as much about local residents as occupiers

there is insufficient attention to fire and health and safety.the rake of stairs, quality of light (the drift to use of basements and roof space in sui generis is of concern)

I don't agree with 10% . Our city island can look rubbish strewn and decayed in those high density areas with people in the HMOs having poor accommodation and no personal attachment or investment within the community. Student lifestyles too do not sit well in residential areas..Having looked at your worked example, and in reality noting the severe imbalance of HMOs and C4s in some areas , 10% is far too high as the number of people in the 50 meter radius. It would be significantly and disproportionately higher . This would tilt the demographic to the transient and could destabilise cohesion. The policy is tilted to greedy landlords

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and not a concern for singles nor to ordinary families and older people nor to decent housing - do write to everyone in the 50 meter radius when there is a planning app and charge the applicant

Do not agree. It is not the function of the planning system to determine what is acceptable as is specified in the proposals. This is the purpose of HMO licensing and a plethora of existing legislation. Planning applicants should be made aware of the requirements and reminded that they are actively policed.

Checking over-intensive use of the property and refusing the application where this would result is supported. Also supported is the requirement for floor plans. Floor plans should be compared with the floor plans of immediate neighbours. Many conversations are of older terraced properties where sound proofing is poor and having a 'community room/lounge' on the first floor next to your bedroom is no joke.

When considering living conditions within many of the cities HMOs special regard needs now to be taken as to how intensively they are occupied, this is particularly true of smaller properties under sui generis. The fire risk assessment needs to be particularly rigorous. The width of stairs and their make needs consideration. the quality of light when basements are occupied is of particular concern.

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Do you agree with the section on 'Bedroom space standards'? What changes should we make?

Prevent overcrowding and lack of space.

Bedroom standards need to be consistent with Planning and Licencing having the same guidelines taking into account sloping ceilings in loft conversions head height allowances

There should be enforceable rules on the size of the living space offered to tenants i.e. not too many crammed into a building not designed for that number.

Any C4 being upgraded by any number of rooms (even below 7) should require full planning permission

No i do not agree. 6.5m² limit does not allow well designed smaller rooms with happy occupants any flexibility.

No. Rm heights vs Floor area remains unacceptable. Heights below stairs or less then 1.5 m should not count towards available floor area, and not counted in proposed width limitations..

I agree No changes

Agree

I do not believe the bedrooms are big enough.

Consideration should be made for houses with smaller bedrooms where the tenant is happy to pay less for reduced space compared to teh rest of the house, or also for provision of micro flats. As these are increasingly popular in cities. However, poor accommodation should not be allowed

Yes.

Agreed.

Make the size of the rooms bigger (I.e. Single bedrooms size should be 3.5 meters by 2.7 meters wide [9.45 Sq. Meters], and double bedrooms should be 3.7 meters by 3.7 meters wide[13.6 Sq. Meters)

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I cannot comment on the exact measurements required to form standards but would press for these being as large as practicably possible, in order to avoid situations like those in our area where 'standard' / medium sized homes have been converted to 9 bedrooms ! This is insane !

I do agree with bedroom standards but really don't think people want sinks in their rooms any longer as this is an old fashioned idea - the regulation for more than 5 people sharing should either be a min number of bathrooms (2) or en suite rooms

This question should refer to both 'bedroom space standards' and 'amenity space' standards. As outlined in the previous comment, these standards should not exceed any requirements that would more appropriately be enforced by the Council under the Housing Act.

NO - If anyone wants to leave home but has aliited income they have a right to pay for accommodation at a cost that they can afford.- Not everyone is on council pay and pension schemes!

Yes

I don't know this standard, see my statement above.

I disagree. The current space standard meets requirements of tenants and enables those who require a room to rent at an acceptable rate. Increases in room size increases the cost to the tenant which creates an exclusive rather than inclusive community.

I believe that the minimum allowed bedroom size is about 6 square metres. This should be INCREASED for an adult who needs to have room for his belongings.

I agree

yes, the current sizes are suitable and should not be made smaller

No change

I agree with the sizes of bedroom but do not agree with how many people could live in one property if this is in a 'normal' living street in a 'family' sized property.

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Bedroom space should be a particular standard e.g. If a single room, large enough to accommodate a bed drawers and wardrobe with space to move and live a quality existence

All space standards must remain as generous as possible. If commercial pressure and the desire to maximise return on investment is not challenged, we slide back towards Victorian densities in the heart of our communities.

Generally yes, although I would like to see the minimum spaces increased

Minimum standards are good but if you exclude smaller rooms entirely you are leaving empty rooms rather than providing budget accommodation for those with few resources.

Yes I agree.

yes it is right to ensure that people living in an HMO have the same space standards as are expected for others in non HMO properties

Agreed

Room sizes: These cannot be prescribed. Each property needs to be assessed as to its suitability as a HMO.

Bedroom sizes standards are perfectly adequate at the moment

Not yet familiar to comment

Should be in line with current legislation that determines whether a box room is eligible for the bedroom tax

Agree

Make them so they aren't too small

Rules on Sound proofing would be beneficial those those having to live alongside HMO's

No-3 bedrooms = 1 family or 3 single adults. Any additional adults impacts negatively on neighbours through parking issues, noise issues etc Pcc has shown complete disregard for homeowners over these issues in the past

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The bedroom space standards should be larger where landlords are not providing communal space (i.e. converting the lounge into a bedroom)

Yes

No information available to review

Agree

If its a 2 bedroom house with 2 living rooms max no of students /renters = 3 people max.....Use some common sense! Stop letting landlords use every room as a bedroom

Yes I agree.

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No - Bedroom space should be relevant. Rooms of 11-13SQ Metres can still be sufficient if brand new that is the importance of managing the finish and condition of the room.

Do not permit living rooms to be used as additional bedrooms

No. 6.5m² has been the historic space standard. Many properties within the city will fall below this space standard. 6.5 is sufficient for most people

Yes

Yes

Yes

Not applicable to me

Matters covered in this section are relevant and clear

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The standards are generic and appear fit for purpose

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I agree, but as above, these standards should be applied retrospectively and PCC should enforce this among all HMO license-holders in all categories.

Yes

Bedrooms need to be in complimentary locations to neighbouring properties- having a studen kitchen put in illegally next to my baby's bedroom was a nightmare in Devonshire Ave and the noise blighted the terrace

Most definitely not. I have formally objected to government proposals to prevent rooms under 6.5 sq m being used and now PCC want to prevent even larger rooms begin used. We know of many tenants very happy living with small bedrooms. It is the overall space in the house that is important. HMO licensing suggest a minimum of 6.5 sq m and are prepared to be flexible on that. If there is to be any standard it must be common. Is PCC aware that there is a housing shortage and we cannot afford to waste any habitable space. With homelessness increasing this is a nonsense. I accept that new build rooms require a standard and that a recommended size is necessary. Rejecting the change of use because one bedroom is under 7.5 m2 would be crazy and I would certainly support an appeal against such a decision. Have the supporters of this specification even been in a bedroom of say 7 m2? Have they spoken to any residents of these rooms? Housing Standards officers have tried to take enforcement action against landlords renting rooms under 6.5m2 and on appeal they have lost. THERE IS NO EVIDANCE TO DEMONSTRATE ANY NEGATIVE IMPACT ON THE OCCUPANTS OF ROOMS UNDER 6.5 M2 LET ALLONE 7.5 M2. The same argument applies to the other proposals.

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Do you agree with the section on 'Amenity of neighbours and local occupiers'? What changes do you think we should make?

I agree that the amenity of neighbours and local occupiers should be paramount. Strict enforcement of the rules on numbers of HMOs in an area should be practised.

Yes. But proposal does not go nearly far enough. There needs to be proportional considerations. Eg large HMOs in areas with smaller residential populations: increase in population is more noticeable. Population density needs to be a consideration, and further conversion of homes to HMOs not based solely on the 50m radius. Also, shared burden concept. More expensive housing areas should not escape their share of HMOs. Perhaps making clear areas which will not and those that can get HMO approval will limit prospective developers to investing in areas outside the cheaper housing stocks.....

I agree No changes

Section 1.24 (i-iii) I believe this radius should be larger.

Yes. This is a good move to ensure quality housing, and work towards more balanced communities. I would like the Council to go further and consider how it will re-balance 'unbalanced' communities. This could be by: + Reviewing HMO status if the property comes up for sale + Reviewing HMO status every 5 years in areas with over 10% HMO's + PCC buying HMO's when they come up for sale and changing use + Incentives for Housing Associations to buy up HMO's when they come on the market and changing use I am very pleased with the proposal to consult within a 50m radius. A recent application for Planning Permission near me only consulted 6-7 households. Consultations in areas with well over 10% of HMO's, even if it does cover 50m will include maybe half HMO's who are not permanent residents - this will 'screw' any results.

1.23:- protect the amenity. If by 'Amenity' the proposal means:- the Pleasantness, or attractiveness of the area, then:- Reverse (i.e. bring down) the number of HMOs in the PO4 area. Bring back the Parking Scheme for our areas. Introduce a one-way-traffic scheme for the PO4 area. Don't house problem tenants in the PO4 area. Encourage green spaces in the PO4 area. Stop approving loft conversions to those landlords that want to house even more tenants in HMOs. Bins and Rubbish:- In streets/Roads where HMOs can account for 50% or more of the properties, HMOs can generate a lot of rubbish/waste, and human traffic (going to and from the clubs/nightlife/events), which in turn, generates a lot of litter, noise, and Urine, yes Urine. This means the streets should be swept at least three times a week in areas where HMOs are above the average, and landlords of HMOs should be encouraged to have extra bins to cater for the amount of extra rubbish the tenants generate in an HMO property. Pets:-

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Cats. Dogs etc... Controls are needed in the PO4 area, to limit the amount of Pets a property can have. Defining the number of HMOs a street can have should be down to distance from your nearest HMO. This proposal defines a 50 meter radius as a starting point, which, in my street, is every 10th house. I would like HMO properties to be detached, with a 100 meter radius between HMO properties, calculated along the X.Y.Z (left and right. Back and front. Up and Down) axis. This would also go a long way to solving the noise problem associated with HMOs. If PCC really want to help achieve an 'Amenable' place for all members of our society to live, then Members of the planning team should always ask, and answer the following question, before granting planning permission - 'Would I like to live next door to what this client, is proposing?' If your honest answer is 'No', then decline the planning permission.

This is the area of greatest concern to ourselves and the inclusion of knock on effects may prove helpful. There is certainly a difficult to measure effect of a population changing annually where the inevitable moving in parties suddenly tear the fabric of the area. Parking becomes impossible overnight. Noise levels rise dramatically. Refuse soars and this situation takes time to settle, with obvious peaks around individual birthdays and leading towards academic holiday periods. Where concentrations of students reach a level where they are aware of even one other similar property on their vicinity, this sets a perceived 'norm' for antisocial behaviour and community adhesion is difficult to maintain. HMOs MUST form part of a community and NOT become a setting of their own within a community.

I don't think this has changed

This section sets out the 'amenity' criteria by which applications will be judged. This section should apply to sui generis HMOs. By definition there should be no demonstrable harm between what would otherwise have been a permitted change from a C3 use to a C4 use under the GPDO. This section sets out three criteria; (a) protect amenity, (b) protect a good standard of living environment for neighbouring and local residents, and (c) prohibit an over-intensive use. It does not, however, set out or otherwise explain what would amount to failing to: (a) protect amenity, (b) protect a good standard of living environment for neighbouring and local residents, and (c) prohibit an over-intensive use. Criteria (a) and (b) should refer to whether the proposed HMO would have such a significant impact on the amenity of the adjoining residents by virtue of an unacceptable extraneous impact through noise and disturbance to warrant refusal. This harm would, however, need to be evidenced from an objective standpoint rather than just fear. In relation to criteria (c) this would only occur where the proposed HMO fails to meet the required minimum floor space standards set out in paras 1.17 to. 1.20.

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NO. The government of this country have decided the rules so Portsmouth city Councilors have NO RIGHT to over rule the government of the country. There are already ample regulations and laws that can be applied to fully protect all individuals - Try using them rather than searching for excuses to make new rules.

Multiple occupiers means multiple vehicles. Fawcett road is a very difficult area to park when students are in residence. It was a lot better when limited parking for residents was in operation for a few months.

No alteration to the current requirement is necessary.

None bureaucratic attempts at regulation will not assist people in their responsibility to live together.

Many of Portsmouth's HMO tenants don't drive so will not impact on their neighbours

Fair and balanced

I agree with this. There is currently little encouragement for family residents, which can drive residents into moving out of town and returning to work only, which in turn increases traffic and pollution

Neighbours and local occupiers must be given thought, many hmos are a breeding place for anti social behaviour

Neighbours and Local Occupiers have been generally unheard. There needs to be a consensual understanding that neighbours and occupiers actually means all of us. This is less understood when any form of landlord does not need to live themselves in the conditions they actively create. I must assert this again: we are irreversibly harming our communities by creating urban and living density that the housing and amenity infrastructure cannot support.

this should be strengthened, with a non-exhaustive list of issues to consider, eg noise, rubbish, parking provision, general cleanliness. This should also apply to sui generis applications, not just new applications for change of use to C4. Furthermore, the area surrounded the property to consider should be increased to a radius of 100m

Limit parking permits to 1 or 2 per house.

Adequate car and or bike storage and space for bins

yes

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Overcrowding, parking limitations in over crowded city streets

I dont believe non local occupiers are a problem.

Infrastructures need to be supported and neighbours and families needs should be considered

Agree

Cap on the number of HMO's per Road

Yes

Consideration of impact of HMOs on the area parking spaces noise levels etc.

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The community is important but restricting homeowners is not necessariirly the right way forward. People should have the option to proceed on the best way to use their home be it residential, buy to let or HMO. Neighbours are important but students bring in a lot of income to the area.

Stiff fines for allowing rubbish to pile up outside theproperty

No

Yes

I would like to make the point that I live opposite 3 HMOs. Given the amount of HMOs that are necessary can these not be spread out. I am constantly bombarded with noise disputes and disturbances due to mental disabilities. There is also an issue of sub-letting and drug dealing.

We agree that it is essential that the 10% limit in a given area is defined but wonder whether a linear approach rather than a radius would be better.

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Over intensive use of the property needs to be defined for the specification to be meaningful. Equally "protect the amenity, and the provision of a good standard of living environment, for neighbouring and local occupiers" needs defining for it to be measurable and manageable

I think this is an improvement but quite vague and perhaps still allows wriggle room. Over-intensive use has a negative impact in terms of noise, parking, council services. I understand that there are HMOs where no one in the property pays any Council Tax. Because of the disproportionate affect on local services, all HMO license holders should be held liable for an appropriate share of Council Tax dues.

what are the baselines? Making four storey houses out of two bed, two up two down is frankly ridiculous and a massive over-use of local amenities/resources. 10% threshold is much too high, 5% is more realistic in densely packed areas. Landlords are stripping the city of small 2 and 3 bedroomed houses previously used by local families.

See above no 10% less

Greater consideration needs to be given to the increasing population density in parts of the city as a result of HMOs. This is particularly a problem in areas consisting of small flat fronted homes which have been granted sui generis. The quantity of refuse generated in these areas has increased dramatically with a consequential increase in vermin. Many residents of these small properties now suffer increased noise from adjoining HMO properties, particularly with regard to these relating again to sui generis. Residents have also had to deal with reduced water pressure as increasing number of these properties have ensuite facilities. Times of overlooking have arisen as a result of rear roofs being raised.

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Do you agree with the section on 'Other Issues to consider'? What changes do you think we should make?

Rubbish is an ongoing problem in our area - Norman Road. HMO occupants regularly disregard the collection dates. Parking is a serious problem during term time.

Oblige landlords to oversee rubbish and weed clearance and police noise and nuisance levels

Yes. Nice to see more punitive actions. Section 1.36 should state all C3 and C3/C4 properties must have a license. Licenses must be obtained in all cases of commercial HMOs. Fines and barring should be applied to both company and persons on license. Because PCC is top of population density list, there should be additional legislation and planning scrutiny applied, to ensure alternative areas are utilised, not just cheapest options. We are all in this together.....

I agree No changes

Bins left outside properties outside of collection days are a problem as well as parking space which is highlighted here. also young students can be noisy in the nights and there isn't any one to police this on the streets.

They should not be 'encouraged', it should be compulsory. That way if they are 'rogue' landlords, they can be tracked down.

I agree with these proposals. I would like the Planning Dept to have a plan for how to respond if substantial changes are made to a property before planning consent. I would also like to see the Transport Committee to consider making Residents Parking schemes a priority in areas with more than 10% HMO's if residents want it.

Only large houses? Licences should be compulsory for all HMOs. at least this way the authorities can keep an eye on the standards (building and letting) of an HMO.

As above, these issues, whilst more difficult to quantify, are very important to note. The knock on effect of a regular change in large numbers of the community, whose focus is demonstrably not shared with the local community, is massively detrimental to the living. Not enough parking conditions of the everyday voting public for whom the area is a permanent home. Bringing up children in close proximity to what have increasingly become 'party houses' is extraordinarily difficult at times and required input from University and Policing staff. The parking issue, despite the arrogant ignorance displayed by certain council leaders, is a genuine issue which affects every resident in the area at a personal level every single 'term-time' day of their life. It simply isn't good enough to pretend

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that this is not the case. As a case in point, over the last week or two this area has moved from being relatively easy to park in to being literally impossible after about 6 o'clock. PLEASE STOP PRETENDING THIS IS ANYTHING OTHER THAN AN HMO ISSUE and reintroduce a parking permit per household, which would provide an enormous lever upon the precisely the issues the HMO consultation and amendments are attempting to improve. I have been regularly shocked at the short-sighted nature of any approach to parking which fails to see this link.

The decision re the continuation of the HMO licensing scheme in some post codes needs to be made - as majority of HMO's in these areas are now licensed, the council should leave those to self regulate with the councils licensing scheme and it should be extended to the other areas of Portsmouth to bring those houses up to standard to.

Suggest 1.37 is reworded as follows - Where required it is a criminal offence not to have an HMO licence. In the event that a Landlord operates an HMO without a licence an unlimited fine could be imposed by the Court upon successful proceedings. Alternatively, the City Council could serve a 'notice of intent' as a precursor to the issue of a Civil Penalty, the amount of which is currently limited to £30,000. A landlord can, within 28 days, appeal to the First Tier Tribunal.

No changes should be made to the legislative rules that are already in place. Use your existing rules properly then you wont need to change anything.

Implement limited parking per household for limited periods.

I think there should be a cap on what an HMO can be rented for. 3 bedroom if rented as a family home £1000 should be capped at not much more. This will discourage greedy landlords and help with the renting shortage as more homes will be available.

No. The increase in sui generis applications demonstrates an inclusive society. A landlord accreditation scheme run by the PDPLA would be well equipped to ensure standards of housing provision are high.

If the property is in an area suitable for HMO living the council should grant a license

Parking can be an issue with increase of HMO residents if there are not enough room for this. Refuse storage is an issue, especially in densely student populated street, which have resulted in unhealthy and unsafe environments, increase of seagulls and rats.

Front gardens should not be used as an individual rubbish dump along with the back garden also

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Review the policy regularly

I see that in section 1.32 you discuss Parking and refer to the Parking standards for cars but to appendix 9 of the local plan for bicycles. The Parking Standards SPD also includes information about the cycle parking requirement. This is usually not on a one for one basis and given that most properties cannot provide car parking space perhaps the number of cycle parking spaces should be increased to 1 per occupant?

Specific restrictions on number

Not enough parking

Consider all issues

Too many students in a residential area means children not having a good night's sleep and failing to achieve at school!

Agree

Parking, anti social behaviour and noise levels

There is so much purpose built student housing where I live it is so noisy late at night, especially at weekends, with students returning from their night out, surely it is not necessary for students to take up housing that is needed for residents of Portsmouth.

HMOs for students especially impact on neighbours maybe limiting number of car parking spaces available to house better communication with and action taken by letting agents for badly behaved tenants.

Parking becomes even worse when you add more potential of 6+ cars added to the street

Consider the other residents that live in the street and especially the parking !!!

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Bring in line C4 & HMO. It should be apparent if you have one you gain the other. Two separate departments conflicting with one another is ridiculous in the modern age .

Yes

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No

Parking arrangements should be considered

What about the changes to the environment, more rubbish, more cars, more disturbances both noise and general upkeep of the property etc.

it is good that encouragement is given to landlords to join the landlords association in that reference is made to more information on the councils website.

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No it is shallow. Other issues to consider include, publishing the details of the Managing Company, formal manifesto's for issue resolution and a governing body in PCC charged with ensuring compliance

1.36 - it says 'may' need to apply. This sounds like a get-out clause from the off-set.

HMOs mean that family bedrooms are next door to kitchens and lounges in multi occ houses. The noise disruption is awful for those residents. Even the noise of feet going up (perhaps several) staircases is loud and disruptive. Portsmouth is a densely packed city which has been traditionally full of terraced two and three bedded properties, a system that worked well for generations. the HMO policy appears to massively favour landlords over local residents needs. Landlords work for profit not community cohesion. 10% in 50 metres is way to high, especially when the HMOs themselves are much fuller than is traditional.

You should build for singles in the "Manhattan Plan" if the university wants to expand beyond its 10% of the population , it must build and house its students in quality accommodation, purpose built- engage the help of citizens when your decisions against rogue apps are appealed - we know it's hard- make your website and consultation better- I've already taken this up with Kelly duBock.

I would like to see PCC suggest landlords join a landlord association so that they can be kept up to date on legislation and have their interests represented locally and nationally.

HMO SPD REVIEW - SURVEY RESPONSES

Are there any other changes you would like to see the final amendments?

No Student-occupied HMOs should be allowed vehicle parking permits. No HMO exemptions from Council Tax. Noise control is a problem, difficult to control with HMOs - a good reason to restrict them in residential areas. Purpose built student accommodation is easier to monitor.

The rules are mainly in place but they should be strictly enforced. The major change I would recommend is for landlords to take more responsibility, by financial penalties in place. This is vital because the dilapidation of housing stock, the destruction of community life and the reduction in value of surrounding properties is a raft of serious problems.

Student populations 100% of the year to be included in any planning. Green spaces and gardens to be preserved. Moreover, intensive residential developments must make strong considerations to provision of communal and external space for resident's well-being.

The 50 meter radius formula seems too high. In my opinion the formula need to be re-evaluated and new one introduced. If you were to look at my area there are more than 10 % of HMO properties in the surrounding but if the formula is applied from each door each one qualifies to be a HMO. also the policy relies on neighbors reporting it to the council. there must be regular surveys done and the data captured and validated on HMO's.

The policy goes up to 15 people. This is too many! However I suspect some landlords would like to squash more people in. What happens then? And also what happens if everyone living there has a car? Parking is awful already!

I am really pleased to see these proposed changes, and would be keen to see proposals once the consultation has ended..

Changes that make the removal of HMOs from our streets 1:- Faster. 2:- Easier

A way to check out if a house has got an HMO licence or been given planning permission if you suspect a house is being used as an HMO - your list just says if its a class 4 but does not cover planning permission for houses with 6 or more occupants

In the third line from the bottom of the foreword there is a typo. Of all the changes to the current SPD the most significant has not been addressed within this survey! It is hoped that this oversight is a simple error rather than an attempt at concealment. At para 1.14 it would seem the proposed amendment seeks to legitimise the recent decision making of the Planning Committee. Where

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a property is already used as a C4 HMO and the number of HMOs within the 50m radius exceeds 10% its change from a C4 use to a sui generis HMO would not increase the number of HMOs within that area. Such a change of use could not therefore cause an imbalance as that already exists. Without any further explanation the proposed revision is clearly flawed. It is suggested that given the importance placed on the need to protect family housing [ie three or more bedrooms] the criteria for change of use to sui generis HMOs protects all family houses with an original floor space of up to 150sqm. This would prevent landlords from using permitted development rights to enlarge houses and thereby make either C4 or sui generis HMOs more financially attractive, and reduce pressure on areas that characteristically have the greater density of population.

There should be NO amendments at all. - Just have the courage to use the existing laws/rules and all the perceived problems will be resolved.

No

The housing sector is over regulated already there is already a failure to enforce existing powers which are quite adequate.

License conditions should be clearer and the process of knowing if a license will be granted needs to be quicker

I would like to see how already densely populated streets, such as Hudson Road, could be encouraged back to family use.

I do not believe the authorities are fully aware of just how much change has truly been wrought into Southsea by aggressive tenancing and unwise over development. Individual streets are now in effect becoming highly ghetto-ised. Space, light, cleanliness, peace, security, healthy living, sociability, are all amenities. I believe these are now critically pressured and the balance must be redressed to stop ANY further overly aggressive redevelopment of stock or land. Personal financial gain and opportunity may have been allowed to expand without constraint, and the results will be felt by all who live our lives in areas of Southsea that can no longer support such high dwelling numbers and densities, with such a wide range of demographics, values and expectation. A profound reassessment is required going forward. Any further mistakes now will mean generation upon generation living in and with the consequences.

No

Restrict houses of multiple occupancy in this neighbourhood, where parking is at a premium.

HMO SPD REVIEW - SURVEY RESPONSES

Large HMO's are not the problem it is poorly managed HMO. Instead of fighting the developers improving living conditions go after the rogue landlords

Complete overhaul of whole system

There needs to be a contactable person prepared to deal with issues as they arise. Not different people/agencies for different parts of the problem. One person should take ownership of issues and deal with them not leave local residents having to contact a multitude of people (eg police, environmental health, asb team etc)

No

It should be made as difficult as possible to create more HMO's in the City. Whole streets are already given over to this type of housing.

I think we should be progressive and in addition to the 10% rule, we should include restrictions on "sandwiching" and "three in a row" as the vast majority of other councils facing this issue have done.

Not only deposits for these lettings but a Good Behaviour Bondalso returnable at end of Tenancy.

Yes to stop multiple occupancy unless you can provide parking spaces which obviously you can't !

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Flexibility on HMO not just a fast rule dependant on density of area

Restriction on parking permits for students

C4 to Suis Gen: It is better to have 8 students in one property than 4 students in one and 4 in another. Allowing suit gen applications where the property is ALREADY an HMO, should lead to a DECREASE in HMO density in areas.

If a property has been accepted for a HMO licence it should automatically have c4 planning use.

do not know

no

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I would like more done to protect the neighbours that have to put up with the noise that HMOs produce, the sub-letting that appears to be going on in my area alone and the mental instability of some of the occupants comes into question too. We are not protected. One occupier, last year, was out in the street waving a big kitchen knife around causing a danger all because he hadn't had his medication and had been drinking alcohol. Proper supervision of these properties should be taken and licences removed upon receipt of multiple complaints. There are drug deals happening in the property opposite to mine and I have a 17 year old in my property. He knows right from wrong but is at an impressionable age. There are also young families in the surrounding houses - surely this is not an environment to bring your children up. Only a few weeks ago an occupier of another property was found on the roof again! This is the second time she was up there. The first time she fell and broke her two ankles. This time the fire brigade were called causing damage to cars and at a huge cost using that resource.

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Yes, it is family homes which are in scarcity in the city, the emphasis of this update is for starter homes and does nothing to protect larger family homes which the city has a short of.

More public accountability and transparency in the whole procedure. The addresses and names of all HMO licence holders in all categories, as well as the official number of occupants should be publicly listed and available for the public to view at any time so that communities can monitor what is going on in their neighbourhoods. Elected council officials and council staff should be required to divulge details of their HMO properties to avoid any instances of advantage or conflicts of interest.

Yes, absolutely reduce the density %. Ensure that matters such as waste, dustbins etc. are not the eyesore they currently are. Work hard in the city plan to build and develop a proper student quarter and give the residents of the city a break. Inspect, inspect, inspect with directly employed staff and not sub contractors - transparency and better communication

While examining HMO planning policy I would like to see some consideration being given to the trapped family residence (C3) surrounded by HMOs and thus have its value held down unfairly and forcing a family to live in a property surrounded by students. Allowing trapped C3 properties to be converted is in everyone's best interests and is a better option than creating a new HMO where few already exist

HMO SPD REVIEW - SURVEY RESPONSES

In general we support the amendments. We were pleased to see under identifying 'the area surrounding the application property' where the 50m radius captures any part of a building containing residential flats, that the City Council will endeavour to establish the number of flats captured instead of counting the whole block. This is a much fairer count. Identifying properties in HMO Use Capturing local knowledge from Ward Members and local residents remains essential. Making a planning application for HMO use Applicants should be dissuaded from the expectation that house garden frontages are a waste storage areas for their tenants. This is especially detrimental to the visual amenity of the street where the front boundary is low or the front boundary is formed of railings and tenants put bags out on a daily basis not taking into account their collection day. Also a collection of bags in a frontage on a terrace where the two front doors sit side by side is often a particularly nasty and smelly welcome to your home. Implementation of Policy PCS20 1.11 bullet point two, 'it should be noted that 10 years from the permission the flexibility of C3/C4 ceases and the use at the time becomes lawful use.' This is supported.

General Issues In parts of southsea the balance between family houses and HMOs has changed. With HMOs taking an increasing share. This is especially true of the smaller dwellings often considered 'first time buyers properties'. To try and halt this change we need to restrict the 10% of HMOs in a 50m radius to 5% in a 50m radius, and it is essential that we find ways of restricting increased density by the use of sui generis.

