

**REPORT TO: PLANNING AND TRANSPORTATION COMMITTEE -
13 NOVEMBER 2006**

**REPORT ON: HOUSES IN MULTIPLE OCCUPATION - SUPPLEMENTARY
PLANNING GUIDANCE**

REPORT BY: DIRECTOR OF PLANNING & TRANSPORTATION

REPORT NO: 430-2006

1 PURPOSE OF REPORT

- 1.1 To advise the Committee of the results of the consultation process and to seek approval of the Policies for Houses in Multiple Occupation as set out in Appendix 1 as Supplementary Planning Guidance to the Dundee Local Plan Review 2005.

2 RECOMMENDATION

- 2.1 It is recommended that the Committee:
- a notes the results of the consultation process as set out in Appendix 2;
 - b approves the policies for Houses in Multiple Occupation as set out in Appendix 1 as Supplementary Planning Guidance to the Dundee Local Plan Review 2005;
 - c refers the Supplementary Planning Policy Guidance for Houses in Multiple Occupation to the Development Quality Committee as a material planning consideration in the determination of future planning applications; and
 - d remits the Director of Planning and Transportation to review the operation of the Policies after 12 months and report the findings and any proposed modifications to the Policies to this Committee.

3 FINANCIAL IMPLICATIONS

- 3.1 There are no financial implications arising from this report.

4 SUSTAINABILITY POLICY IMPLICATIONS

- 4.1 Built Environment - to help sustain the diversity of tenure and character of existing residential areas.

5 EQUAL OPPORTUNITIES IMPLICATIONS

- 5.1 There are no equal opportunities implications associated with this report.

6 BACKGROUND

- 6.1 Members of the Committee will recall that at the meeting of this Committee on the 12 September 2005 (Report 449-2005 refers) they agreed to the publication of the draft Supplementary Planning Guidance for Houses in Multiple Occupation for consultation purposes, and remitted the Director of Planning and Transportation to report back on the results of the exercise within 6 months with any proposed

modifications with a view to adopting the Guidance as a material consideration for planning applications.

- 6.2 The consultation process on the Supplementary Planning Guidance for HMOs was carried out over a 6 week period from the 10 March 2006 to 21 April 2006. In total 155 individuals and groups were consulted. These included Community Councils, Universities, Students Bodies, Landlords, Letting Agents/License Holders, House-builders, Housing Associations and other interested groups.
- 6.3 In response to the consultation process 25 letters of comment were received. Of these 2 were from Community Councils, 4 from residents in the West End, 14 from HMO license holders, 2 from student associations, one from a local firm of solicitors, one from an MSP and one from the University of Dundee.
- 6.4 The responses were split into two broad areas which were firstly, those who welcomed the principle of guidance and the greater control over the number and concentration of HMOs and secondly, those who considered the guidance to be overly restrictive and that it would lead to problems of supply and quality.
- 6.5 Broad support for the policy approach came from the Community Councils, Residents, Solicitor and MSP. The License-holders and Student Associations were generally not supportive of the proposed Policy approach.
- 6.6 A summary of all the consultation replies received and the Councils response to the issues raised are set out in Appendix 2 of this report. In respect of each of the four draft policies, these can be summarised as follows:

Policy HMO1: Assessing the Need for Planning Permission for an HMO

- 6.7 Two main views emerged as a result of the consultation process in regard to this policy. These were firstly to reduce the number to 3 to bring it more in line with Licensing requirements for HMOs and secondly, that it was too restrictive and that proposals should be dealt with on a case by case basis.
- 6.8 On the face of it, there would appear to be some merit in having consistency between when a license is required and when planning permission is required for an HMO. However, this would only be partial as it would only apply in the case of most flats. It should be noted that a license is not required for 3 unrelated persons in a flat where one of them is the landlord. In addition, planning permission for an HMO in a house would still only be required for more than 5 unrelated people. Therefore, there would still be an apparent inconsistency between planning permission and licensing.
- 6.9 It is important to note that Policy HMO1 has to be read in conjunction with Policy HMO3. HMO3 has a presumption against granting planning permission for an HMO in a flat with a shared or common entrance. If the figure of 3 is adopted to bring planning in line with licensing then all planning applications for 3 or more people in flats with shared or common entrances would be contrary to Policy HMO3. This would not be a sustainable approach and would put more pressure on houses and other areas of the City.
- 6.10 It is considered that a balance has to be struck between protecting the amenity of existing residents and providing accommodation for students and others. The two fold approach of Policy HMO1 and HMO3 should be maintained.

- 6.11 A request for a definition of what constituted a flat was sought to help clarify when the Policy would apply. A definition of a flat is provided by the Town and Country Planning (General Permitted Development) (Scotland) Order 1992, and it is recommended that this definition is included within the supplementary guidance.
- 6.12 Clarification was also sought as to how the proposed exemption from requiring planning permission would work in practice for current licensed HMOs. An explanation as to the exemption from requiring planning permission for change of use to an HMO in a flat is now included in the supplementary guidance.
- 6.13 No changes to the text of Policy HMO1 are proposed, although minor changes to the supporting text in response comments are accepted.

Policy HMO2: Avoiding Excessive Concentration of HMOs

- 6.14 Two main themes emerged as a result of the consultation process in regard to this policy. Firstly, that the threshold should be lower and applied more widely and secondly that the threshold was too restrictive and should not be imposed. Queries were also raised regarding the use of census output areas as an appropriate area to apply the threshold.
- 6.15 In terms of choosing a threshold level it is accepted that this is a matter of judgement. The Supplementary Guidance approved by the Committee for Consultation purposes suggested that 25% could be an acceptable threshold to apply in the first instance. Responses in support of a threshold generally considered that this was too high a figure and that a lower level be set. In light of this it is considered that the threshold should be set at 12.5%, except where there are exceptional material considerations which would justify otherwise.
- 6.16 Identifying an appropriate area to apply the threshold is one of the main difficulties in trying to control the concentration of HMOs. There is no easy way to break down an area into a consistently and recognisable unit against which to apply a threshold. It is considered that Census Output Areas are a suitably recognised definition against which to assess excessive concentration.
- 6.17 Given the issues surrounding the level of the threshold and the use of Census Output Areas it is considered that the Policy should be reviewed after a year of operation to assess the effectiveness of the approach and provide the opportunity to make any necessary amendments.

Policy HMO3: Assessing HMO Proposals

- 6.18 This policy raised concern from those opposed to the policy approach being proposed and in particular to criteria (a). The main concern was that when combined with Policy HMO1 it would mean that any planning application for an HMO in a flat with a shared or communal entrance would be contrary to Criteria (a) of this Policy and a resultant presumption against approval. As a result it was considered that this would more or less prohibit any further HMOs in flats throughout the City. As a consequence it was considered that this would reduce the supply of HMOs in flats and direct new HMOs to houses throughout the City. It was also suggested that it would encourage unlicensed HMOs.

- 6.19 It is considered that the concerns raised require to be carefully addressed. It is not the purpose of the guidance to divert HMOs to houses as opposed to flats or encourage unlicensed HMOs. Rather the aim of the guidance is to avoid excessive concentration of HMOs. The guidance as it stands would still allow for HMOs in flats for 3 unrelated persons as these would not require planning permission. It would only be flats with 4 or more unrelated people that would be contrary to policy.
- 6.20 In recognition of the concerns raised it is considered that that the Policy should be reviewed after a year of operation to assess the effectiveness of the approach and provide the opportunity to make any necessary amendments.

Policy HMO4: Controlling Multiple Occupancy in New Residential Developments

- 6.21 This policy was generally well received but did raise some concerns over the potential for the lack of new build accommodation which could be for used for HMOs. There was also some concern that this would result in poorer quality HMO accommodation and reduce opportunities for young professionals. It is considered that the approach proposed seeks to address the current imbalance of all new accommodation (including substantial conversions) within the Central Housing Investment Focus Area going to HMO use rather than owner occupiers. The opportunity for first time buyers and young professionals who wish to buy should be increased as a result of this policy.
- 6.22 It is considered that no amendments are necessary to the wording of Policy HMO4. However, it is considered that the operation of this policy should also be reviewed after a year of operation to assess the effectiveness of the approach and provide the opportunity to make any necessary amendments.

7 CONCLUSIONS

- 7.1 The Supplementary Planning Guidance has been drafted to provide a more robust and clear approach to dealing with the planning issues of HMOs in the future. In addition, it seeks to address the concerns with regard to the potential for excessive concentration of HMOs within existing residential areas particularly the Perth Road/West End.
- 7.2 It is considered that this Guidance will complement the Council's powers under licensing and ensure that the standard of HMO properties in the City is high and that the important contribution that this type of property makes to the housing stock can be achieved without adverse impact on existing residential areas.
- 7.3 Given the complex nature of the issues it is considered that the operation of the Policies in the Supplementary Guidance be reviewed after 12 months to assess the effectiveness of the approach and to establish whether any amendments are required.
- 7.4 Following approval of this new guidance, publicity will be undertaken through the Universities and Property Agents in the city to ensure full public awareness of the Council's policies HMO's.

8 CONSULTATIONS

- 8.1 The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Assistant Chief Executive (Community Planning) have been consulted and are in agreement with the contents of this report.

9 BACKGROUND PAPERS

"Mandatory Licensing of Houses in Multiple Occupation: Guidance for Licensing Authorities" - The Scottish Executive - 2004

Planning Circular 4/2004: Houses in Multiple Occupation - Guidance on the Interface Between Planning and Licensing

Report 449-2005: Houses in Multiple Occupation-Supplementary Planning Guidance

Mike Galloway
Director of Planning & Transportation

Ian Mudie
Head of Planning

IGSM/ES

6 November 2006

Dundee City Council
Tayside House
Dundee

APPENDIX 1

HOUSES IN MULTIPLE OCCUPATION - SUPPLEMENTARY PLANNING GUIDANCE

1 INTRODUCTION

- 1.1 A house or flat can be termed a House in Multiple Occupation (HMO) if it is the principal residence of a number of unrelated people. HMOs include:
- individual flats and houses occupied by unrelated people, most commonly students and young professionals;
 - purpose built student accommodation;
 - supported community care accommodation; and
 - hostels for homeless people.
- 1.2 Houses in Multiple Occupation provide an important supply of housing, particularly for some groups of people such as students, young professionals and those who require support in a homely setting. HMOs provide affordable housing for those working and studying in the city and for those unable or unwilling to buy their own property.
- 1.3 There exists both a licensing and planning regulatory regime for HMOs. However, it is a cause of some confusion that differences exist between these regimes as to what constitutes an HMO.

2 THE LICENSING OF HMOs

- 2.1 It is mandatory under the Civic Government (Scotland) Act 1982 (Licensing of Houses in Multiple Occupation) Order 2000 (as amended) that a license is obtained to occupy a house as an HMO. In this context, a "house" includes any part of a building occupied as a separate dwelling and therefore covers not only ordinary houses but flats and bedsits.
- 2.2 Licensing provides that a house is an HMO if it is the only or principal residence of 3 or more qualifying persons from 3 or more families (definitions of terms are given in the HMO legislation and the HMO guidance). The purpose of HMO licensing is to control standards in 3 main areas:
- the suitability of the property owner to be an HMO landlord;
 - his management of the premises; and
 - the physical condition and facilities of the accommodation.
- 2.3 A license may be granted for any period up to 3 years. It is a criminal offence to operate an HMO without a license. The licensing of HMOs in the Dundee City Council area is administered by the Housing Department in co-operation with other Council departments, including Support Services, Planning and Transportation and Environmental Health and Trading Standards, as well as Tayside Police and Tayside Fire Brigade.

3 HMOs AND THE PLANNING SYSTEM

- 3.1 The planning system in Scotland does not give such a clear picture of when planning permission for an HMO is required. Indeed, the term HMO does not appear in planning legislation. In land use planning terms, there is a material

change to the use of property where a house is occupied by 6 or more unrelated people, including a household where care is provided for the residents, and planning permission is required.

- 3.2 In determining the use of a flat as an HMO, it is matter of fact and degree whether the nature of the use is materially different from that of a family flat. It is considered however that 4 or more unrelated people living together is materially different from family use on account of the more independent lifestyles of individual occupants.

4 DUNDEE LOCAL PLAN REVIEW 2005

Policy 11 of the Dundee Local Plan Review sets the context for considering planning applications for multiple occupation of a dwelling. The Policy background highlights that multiple occupancy intensifies pressure on amenity, particularly mutual areas and parking, and can increase the prospect of disturbance and nuisance. Notwithstanding these issues, it is acknowledged that it would be unreasonable to attempt to exclude HMOs from a city where there is demand for a variety of housing convenient for higher education establishments and where some properties are too large for modern family occupation. The Local Plan highlights that previous policy approaches sought to restrict the granting of planning permission for a new HMO within a specific distance of an existing HMO. However, this approach lacked the flexibility to take account of the range of residential environments that exist in the city and was open to challenge. In essence, non-compliance with a distance restriction alone would not be a reasonable ground for the refusal of planning permission if it could be demonstrated that the proposal would not significantly affect residential amenity.

Policy 11 - Houses in Multiple Occupancy of the Dundee Local Plan Review 2005 states:

"Proposals for multiple occupation of a dwelling that require planning permission will only be supported where:

- a *it does not involve the change of use of a tenement flat or other form of flat with a common stair or a shared entrance, unless within the city centre; and*
- b *it will not be detrimental to traffic or pedestrian safety on account of increased parking pressures; and*
- c *it will not have a detrimental impact on residential amenity. In this regard each proposal must provide adequate refuse storage space, garden ground and car parking. Where dedicated car parking cannot be provided the proposal must not exacerbate existing car parking problems in the local area; and*
- d *it will not result in an excessive concentration of such uses to the detriment of the character of the local area."*

5 THE LAND USE ISSUES ASSOCIATED WITH HOUSES IN MULTIPLE OCCUPANCY

Whilst many of the concerns relating to HMOs can be more appropriately dealt with through the licensing regime, there are a number of land use issues that HMOs can raise, including:

- a Property specific issues:
- increased pressure on parking and traffic movement;
 - the more independent lifestyles of occupants can increase demand for refuse facilities, drying areas, gardens etc; and
 - increased pedestrian movement and noise.
- b Wider community issues:
- the demands for community services and facilities can change should the proportion of HMOs increase. Where this is driven by students, outwith term time the impact on a locality can be significant; and
 - established communities can be eroded by the more transient nature of occupants who do not have a long-term commitment to an area.

The Dundee Local Plan Review provides through Policy 11 a basis for assessing the suitability of an individual property as an HMO and this approach is considered to accord with Scottish Executive guidance. The flexibility to assess the adequacy of parking, garden and refuse storage provision in each instance reflects the diversity of residential environments and properties that exist across the city. However, there is growing concern regarding the impact of an increasing number of HMOs on the wider community. Whilst Policy 11 does not support proposals that would result in an excessive concentration of such uses to the detriment of the character of the local area, the Policy does not quantify what constitutes excessive concentration.

The locations of existing licensed HMOs in Dundee have been studied to provide a basis for assessing concentration. This clearly demonstrates that the geographic concentration of HMOs is focused in the area surrounding the city centre. Expressing this number as a proportion of the total number of residential dwellings that exist in the area enables the concentration of HMOs to be monitored. It also enables the establishment of a policy approach that does not support the granting of planning permission for an HMO if the proportion of licensed HMOs in that area exceeds an expressed threshold. However, such a policy only applies to HMOs requiring planning permission. It will not prevent an increase in the concentration of licensed HMOs in an area if no planning application is required.

6 MULTIPLE OCCUPANCY OF NEW BUILD PROPERTIES

The Supplementary Guidance responds to concerns regarding multiple occupancy within new build housing in certain parts of the city. This is a particular issue in relation to the occupation of new housing close to the Universities by students. The Supplementary Guidance proposes that the occupation of new build properties and substantial residential conversions by 3 or more unrelated people should be prevented through the use of legal agreements.

SUPPLEMENTARY PLANNING POLICIES ON HOUSES IN MULTIPLE OCCUPANCY

Policy HMO1: Assessing the Need for Planning Permission for an HMO

Planning permission is required for the occupation of a house by more than 5 unrelated people and by 4 or more unrelated people in a flat.

Justification: The Town and Country Planning (Use Classes) (Scotland) Order 1997 includes within the definition of a house that it is the sole or main residence of not more than 5 residents living together, including a household where care is provided for residents. In planning terms therefore, it is only where more than 5 unrelated people are living together in a house that it is considered development and planning permission is required.

In determining the use of a flat as an HMO, it is a matter of fact and degree whether the nature of the use is materially different from that of a family flat. It is considered that 4 or more unrelated people living together in a flat is materially different from family use on account of the more independent lifestyles of occupants.

Planning permission is therefore required where new HMOs are to be created in flats that will be occupied by 4 or more people.

This will not apply retrospectively to existing HMOs in the City where this level of occupation is already licensed. In addition, this requirement will not apply where an existing license is being renewed for the same level of occupation.

Where licenses have been applied for an HMO in a flat prior to the supplementary guidance coming into force the requirement for planning permission will not apply.

(Flat: "means a separate and self contained set of premises whether or not on the same floor and forming part of a building from some other part which it is divided horizontally." Part 1 (2) Town and Country Planning (General Permitted Development) (Scotland) Order 1992))

Policy HMO2: Avoiding Excessive Concentration of HMOs

Within the Central Dundee Housing Investment Focus Area as identified in the Dundee Local Plan Review 2005, planning applications for HMOs that would result in the proportion of licensed HMOs in any Census Output Area exceeding 12.5% of the total residential stock will not be supported unless there are clear material considerations which would justify consent being granted. Purpose built HMO accommodation will be excluded from this assessment. This policy will not apply to the area within the city centre as defined in the Local Plan.

Justification: An excessive concentration of HMOs can have a detrimental impact on a local area by affecting the balance of the population with consequences for the provision of local services and facilities as well as adversely affecting residential amenity and the character of an area. In order to assess excessive concentration, Census Output Areas ¹ have been identified as a measurable planning unit. It is appropriate that purpose built

¹ Census Output Areas were specially created for the release of Census results and are built from postcode units. Each output area has around 100 households. Where possible they follow natural boundaries, although the underlying patterns of streets and postcodes may result in convoluted shapes.

student or other HMO accommodation should be excluded from this assessment as such properties are not available for mainstream residential use and are unlikely to give rise to the same problems.

Policy HMO3: Assessing HMO Proposals

Proposals for multiple occupation of a dwelling that requires planning permission will only be supported where:

- a *it does not involve the change of use of a tenement flat or other form of flat with a common stair or a shared entrance, unless within the city centre;*
- b *it will not be detrimental to traffic or pedestrian safety on account of increased parking pressures;*
- c *it will not have a detrimental impact on residential amenity. In this regard, each proposal must provide adequate refuse storage space, garden ground and car parking.*

Where dedicated car parking cannot be provided the proposal must not exacerbate existing parking problems in the local area.

Justification: Multiple occupancy intensifies pressure on amenity, particularly mutual areas and parking, and can increase the prospect of disturbance and nuisance. It is therefore appropriate that the adequacy of parking, refuse storage space, garden ground etc is demonstrated before planning permission for an HMO is granted. The increased social activity and coming and going associated with HMOs means that the change of use of tenement flats or other form of flat with a common stair or shared entrance is not generally supported. The exception to this is within the city centre, where due to the different residential character and the availability of larger flats, multiple occupancy is considered appropriate.

Policy HMO4: Controlling Multiple Occupancy in New Residential Developments

In order to achieve the objectives of the Central Dundee Housing Investment Focus Area identified in the Dundee Local Plan Review 2005, the occupation of new residential developments and substantial conversions by 3 or more unrelated people will be prevented. The Council will secure this objective through agreements under Section 75 of the Town & Country Planning (Scotland) Act 1997. This approach will also be applied to new build housing developments outwith Central Dundee but in close proximity to higher education institutions.

Justification: The Dundee and Angus Structure Plan and Dundee Local Plan Review 2005 promote new residential development in the Central Dundee Housing Investment Focus Area to increase opportunities to live in this accessible location and take advantage of the benefits that this offers. However, many recent developments in this area have been purchased for multiple occupancy ie to be occupied by 3 or more unrelated people. In light of the proximity of higher education institutions, this is a particular issue in relation to students. Whilst such properties require to be licensed as HMOs, they may not fall within the scope where planning permission for multiple occupation is required.

The occupation of new residential development in Central Dundee makes it unavailable to other sectors of the housing market. Furthermore, such occupation can increase pressure in residential areas for facilities such as parking, whilst the relatively "transient" nature of occupants does not contribute to a stable community. In order to achieve the objectives of

the Central Dundee Housing Investment Focus Area and retain residential development for occupation by families, it is appropriate that its occupation by 3 or more unrelated people is prevented. The Council will secure this objective through the use of legal agreements. This control will not apply to purpose built student accommodation, other non-mainstream housing or social rented housing. These occupancy controls may also be applied to housing developments outwith Central Dundee but in close proximity to higher education institutions where demand may exist for multiple occupancy. This will include for example, housing developments close to Ninewells Hospital.

APPENDIX 2

DRAFT SUPPLEMENTARY PLANNING GUIDANCE ON HOUSES IN MULTIPLE OCCUPATION
CONSULTATION RESPONSES

HMO1: ASSESSING THE NEED FOR PLANNING PERMISSION FOR AN HMO	COMMENTS	RESPONSE
<p>Planning permission is required for the occupation of a house by more than 5 unrelated people and by 4 or more unrelated people in a flat.</p>	<p>Support for the principle of defining a material change of use in a flat for an HMO but it should be in line with Licensing i.e. 3 or more unrelated persons rather than the 4 proposed.</p>	<p>Whilst there would appear to be some merit in having consistency between when a license is required and when planning permission is required for an HMO, this would only be partial as planning permission for an HMO in a house would still only be required for more than 5 unrelated people and a license is not always required for 3 unrelated people in a flat eg where one of the three is also the landlord. Therefore, there would still be an apparent inconsistency between planning permission and licensing. It is important to note that Policy HMO1 has to be read in conjunction with Policy HMO3. HMO3 has a presumption against granting planning permission for an HMO in a flat with a shared or common entrance. If the figure of 3 is adopted to bring planning in line with licensing then all planning applications for 3 or more people in a flat would be contrary to policy. In other words all HMO proposals in flats with shared or common entrances would be contrary. This would not be a sustainable approach and would put more pressure on houses and other areas of the City. It is considered that a balance has to be struck between protecting the amenity of existing residents and providing accommodation for students and others. The two fold approach of Policy HMO1 and HMO3 should be maintained. If however Policy 1 were to be changed to 3 in line with licensing then the criteria of Policy 3 would have to be reviewed.</p>

	Need to provide clear definition of what constitutes a house and a flat.	Agree. A definition can be included within the supporting text to the policies.
	HMOs should be dealt with on a case by case basis.	It is considered that a more consistent approach to dealing with planning permission for HMOs in flats is required. The guidance sets out when planning permission is required and the criteria for assessing such applications.
	Flats should be treated the same as houses as there is no difference between a large house and flat.	It is considered that there are differences between a large flat and a house. Flats by their nature of communal/shared facilities generally mean that there is a greater opportunity for disturbance between residents. A large house is much more self-contained with any disturbance more likely to be within the property. Therefore it is considered that there is need for a different approach between a large flat and a large house.
	Clarification required on how the exemption for current licensed HMOs will work in practice. What happens when HMO is sold or licensed renewed.	Agreed. Clarification of the exemption can be incorporated into the supporting text.
	Planning permission and an application for the license for a HMO should be processed in conjunction with each other, so that the applicant knows they will obtain the necessary planning permission before going to the expense of carrying out the HMO improvements to the property.	At present an application for planning permission can be submitted for an HMO before the application for a license is applied for. This means that planning permission can be determined before any works on a property are undertaken. This means that abortive costs on improvement works can be avoided.
	The need to obtain planning permission will add additional time in securing permission to operate an HMO particularly if planning permission is required before a license is applied for. This would bring uncertainty into the system and could leave property vacant for some time and lead to associated problems.	Planning permission is already required for houses with more than 5 unrelated persons and as such these will not be affected. It is only the situation where 4 or more people in a flat is proposed that planning permission will now be required. The implementation of the guidance will make it clear from the start when planning permission in a flat is required. This will provide clarity and certainty which does not exist at the moment

		which does not exist at the moment.
	HMO Licensing conditions are stringent enough to raise standards and control over 4 bedroom flats is an over extension of Council power	The HMO licensing arrangements address issues of quality and safety in the standard of accommodation. The Policy guidance does not seek to replicate or add to this rather it is addressing concentration of HMOs.
HMO2: AVOIDING EXCESSIVE CONCENTRATION OF HMOS	COMMENTS	RESPONSE
Within the Central Dundee Housing Investment Focus Area as identified in the Dundee Local Plan Review 2005, planning applications for HMOs that would result in the proportion of licensed HMOs in any Census Output Area exceeding 25% of the total residential stock will not be supported. Purpose built HMO accommodation will be excluded from this assessment. This policy will not apply to the area within the city centre as defined in the Local Plan.	Support for the principle of setting control over excessive concentration of HMOs.	Noted. The draft planning policy guidance seeks to strike a balance between accommodating HMOs whilst maintaining a balanced community.

	<p>25% threshold is too high, a 15% threshold is more appropriate to prevent ghettoisation'. More stringent thresholds including total bans could be applied in other areas eg suburban or resort areas.</p>	<p>Proposing a threshold within the Central Housing Investment Focus Area seeks to strike a balance of accommodating HMOs and maintaining a balance within the community. The main area where issues regarding HMOs have been raised is the West End of the City. It is not considered necessary at this time to impose controls over HMOs outwith the Central Housing Investment Focus Area.</p>
	<p>In family areas containing detached and semi-detached houses the threshold figure should be similar to Glasgow at 5% as any higher threshold would change the character of the area.</p>	<p>The main area of concern is within the Central Housing Focus Area which is not primarily a family area containing detached and semi-detached houses. It is considered that the Draft Supplementary Guidance should only be applied to the Central Housing Focus Area and the effects monitored before any further areas are brought under control.</p>
	<p>Unclear why census output areas are an appropriate unit of measure and why a 25% threshold should be imposed. Neither of these measures takes into account the distribution of HMO's in any one area. Could have all of the 25% concentrated in only one part of the Census Output Area.</p>	<p>This is one of the main difficulties in trying to control the concentration of HMOs. There is no easy way to break down an area into a consistently and recognisable unit against which to apply a threshold. Census Output Areas are considered to be an appropriate designation that breaks areas up into units small enough against which to apply a threshold. In terms of the threshold it is a matter of judgement of what that should be set at. It is accepted that all of the 12.5% could be concentrated within one part of the Census Area. This could also happen between areas. It is considered that there is no easy way to apply a threshold to an area.</p>
	<p>Do not support the view that concentration of HMOs should be considered excessive or a negative development. It is not accepted that HMOs break up communities as occupants in HMOs can integrate into the area as well as owner occupiers.</p>	<p>It is considered that in trying to achieve and maintain a balanced community no one particular residential type should dominate. The draft guidance seeks to try and maintain a balance of residents within the Central Housing Focus Area.</p>

	Suggestion that a head count of HMO bedrooms in a census output area may be a better way of measuring intensity.	This approach would have similar limitations to the approach proposed as outlined above. It would also be more difficult to monitor.
	Do not support the capping of numbers in the area identified as it will only put pressure on availability of accommodation therefore increasing rental levels and the use of unlicensed HMOs undoing all the good work in raising standards of accommodation done by the Council.	It is considered that the approach proposed still allows for HMOs within flats in the Central area and flats within the rest of the Central Focus Area of up to 3 unrelated people. In addition, houses can also be used for up to 5 unrelated people. It is considered that the approach still allows for HMO accommodation. The use of unlicensed HMOs would be a matter for licensing to pursue and adequate powers are available to address these concerns.
	Lack of HMO accommodation within the City may deter students from coming to study in Dundee to the detriment of the City and Educational establishments.	There is already a large quantity of licensed HMO accommodation within the City which caters for students. The draft policy does not prohibit further HMO accommodation but seeks to distribute it throughout the focus area to prevent excessive concentration in any one area.
	Do not support the application of the guidance to additional areas of the City	It is not intended to apply this part of the guidance to any other areas of the City at this time.
	Areas with a history of a large proportion of student housing ie close to the universities should have a much higher threshold than the proposed 25%. This would ensure the status quo in these areas.	There are areas close to the university that already exceed the threshold. Any proposals for HMOs that would need planning permission would not be supported in these areas. However, renewal of licenses would not be affected as the guidance is not to be applied retrospectively. Therefore these areas will remain with a higher level of HMOs.

	Limiting areas close to the university may force students to live further away and put them off attending the University.	As outlined above there is already a significant level of HMO accommodation for students around the university and within the West End. The Draft Guidance does not seek to prohibit further HMOs but seeks to control the concentration of them. In addition, given the size of the City and the existing provision of public transport areas outwith the Central Focus Area would not be remote from the universities.
	Areas within Dundee have not suddenly become concentrated in numbers of a particular housing type. HMO licensing has just highlighted these areas that have historically been used for accommodating three or more unrelated people.	This is a fair comment as it is clear that many of the properties applying for licenses have been operating as HMOs for many years.
	Universities can only provide accommodation for first year students therefore the private housing stock is essential to allow the Universities to grow.	The universities are in the process of improving their existing accommodation. The Draft Guidance recognises that there will be the need for further HMO accommodation for students and as such does not seek to prohibit further HMOs in the Central Focus Area but just to better manage concentration.
	There is still a demand for HMO accommodation in the Central and West End areas of the City. If the draft guidance is adopted there would be little scope for further HMOs in the West End of the City particularly in regard to HMO Policy 3.	As outlined above there is still scope for further HMOs within the Central Focus Area and within the City Centre itself. The Draft Guidance aims to try and strike a balance between the competing demands.
	If HMOs are restricted student demand will shift to the purchase and letting of two bedroom flats. Restricting HMOs will not stop a build up of students within an area but will simply shift it to two bedroom accommodation.	This may well happen but two unrelated people living together do not constitute a HMO in licensing or planning terms. The guidance however is not aiming at controlling an excessive concentration of students but HMOs.

HMO3: ASSESSING HIM PROPOSALS	COMMENTS	RESPONSE
<p>Proposals for multiple occupation of a dwelling that requires planning permission will only be supported where: a) it does not involve the change of use of a tenement flat or other form of flat with a common stair or a shared entrance, unless within the city centre; b) it will not be detrimental to traffic or pedestrian safety on account of increased parking pressures; c) it will not have a detrimental impact on residential amenity. In this regard, each proposal must provide adequate refuse storage space, garden ground and car parking. Where dedicated car parking cannot be provided the proposal must not exacerbate existing parking problems in the local area.</p>	<p>Support for the principle of the approach</p>	<p>Noted</p>
	<p>It would appear that if you take HMO Policy 3 and 4 together there will be virtually no new HMO flats within Dundee outwith the City Centre.</p>	<p>The approach set out in the Draft Guidance does not seek to prohibit further HMOs in flats but rather seeks to limit the size of flats which can become HMOs and prevent excessive concentration.</p>
	<p>The guidance does not go far enough. There is no consideration given to villas where residents may have main door access, but still share other amenities such as parking areas, refuse bins and garden ground.</p>	<p>The Draft Guidance cannot cover every situation that may arise. Policy 3 seeks to address the most common issues that arise in considering an application for planning permission for an HMO.</p>
	<p>HMOs do not create an additional burden on an area and in particular in terms of parking. Students car ownership rates are far lower than for families.</p>	<p>It is acknowledged that car ownership rates by students tend to be lower than for other groups. However, HMOs are not only occupied by students. Young professionals also occupy HMOs and can have higher car ownership rates.</p>

	The suggested blanket approach is not appropriate and a more flexible approach of considering implications of each individual HMO on a case by case basis should be pursued.	The approach proposed seeks to provide consistency to the consideration of applications and provide more certainty to applicants.
	The proposed approach will limit the type of property suitable for HMO use and exclude much of the housing stock in Dundee City Centre.	The approach will certainly prevent further HMOs of 4 or more in flats throughout the City. It does not affect houses or smaller flats. The approach will limit the type of property but it is not accepted that it will exclude much of the housing stock in the City. In particular the presumption against will not affect the defined City Centre where it is not to be applied.
	This policy will cause major problems for the supply of student housing particularly if the retrospective exemption from planning permission lapses when a property is sold. If this were to happen it would effectively rule out HMO flats in tenements.	It is not proposed to apply the guidance retrospectively therefore if a property is already licensed as an HMO planning permission will not be sought if it is only a change of owner.
	With most of the residential stock in Dundee Centre and immediate surrounding area being tenemental flats this policy would limit HMOs to only main door ground floor flats which there are very few in number.	The policy does not affect the City Centre therefore the existing situation will remain unchanged. The policy does limit the size of HMO which is acceptable in a flat outwith the Central Area but still allows for HMOs of 3 persons.
	If tenements are denied HMO status then what purpose will they serve as there are not enough young professional in Dundee seeking this type of property and families would not chose to live in them. This step would only lead tenement blocks becoming run down and badly maintained.	As outlined above this would only be in the case of larger HMOs ie 4 or more. It will still be possible to have HMOs of 3 persons in flats.

	One of the main attractions of Dundee for students is because it is affordable to them. This Policy will push rental levels up and increase the potential attraction of unlicensed accommodation. This policy will raise questions over safety and the quality of accommodation.	The proposal as indicated above will only affect larger HMOs in flats and as such it may well change the type of flats used for HMOs. HMOs require to be licensed and any operating without a license would be an enforcement issue for licensing.
	It is unfair to exclude a HMO flat with a common stair or entrance as they do not result in greater disturbance than other households. What evidence are the Council's assumptions based on? It is harder to complain against the behaviour of non-HMO flats as there are no controls.	It is only larger HMOs in flats that will be affected. It is considered that HMOs of 4 or more in a flat have the potential to increase disturbance where facilities are communal. It is accepted that the licensing of HMOs provides the opportunity to address issues of behaviour of tenants
HMO4: CONTROLLING MULTIPLE OCCUPANCY IN NEW RESIDENTIAL DEVELOPMENTS	COMMENTS	RESPONSE
In order to achieve the objectives of the Central Dundee Housing Investment Focus Area identified in the Dundee Local Plan Review 2005, the occupation of new residential developments by 3 or more unrelated people will be prevented. The Council will secure this objective through agreements under Section 75 of the Town & Country Planning (Scotland) Act 1997. This approach will also be applied to new build housing developments outwith Central Dundee but in close proximity to higher education institutions.	Control over new build properties as suggested is appropriate. Controls should apply to the City as a whole. Use of Section 75 Agreements is the most certain way of implementing this control.	Comments noted. It is considered that the approach be applied to the problem areas at first and the results monitored before applying elsewhere in the City.
	Unsure as to how effective the use of section 75 agreements will be in preventing HMO's in new build properties.	It is considered that the use of section 75 agreements is the most effective way of applying the restrictions as it applies to the property.
	Acknowledge that new developments must meet the needs of all the residents of Dundee but consider that the approach proposed is inappropriate and may make the retention of	It is considered that a balance has to be struck in providing good quality new accommodation to buy and providing the same for HMO purposes. The guidance seeks to protect new build in areas

	graduates more difficult due to the lack of suitable quality HMO accommodation.	where previous new build has been going to HMO use and not for owner occupiers.
	This Policy to prohibit HMOs in new build would seem to go against the HMO licensing legislation that seeks to ensure all HMO properties are of a good quality and safe. Not all older accommodation is suitable for adaption to use as an HMO.	The policy seeks to address the current imbalance of all new accommodation within the Central Housing Investment Focus Area going to HMO use rather than owner occupier.
	This would remove the opportunity to provide the safest standard of quality accommodation which can be offered on the market for rent. Even taking into account the purpose built accommodation being provided by the Universities there will still be the need for additional student accommodation in the private rented sector.	The private sector is already providing purpose built student accommodation to meet the demand. The guidance seeks to strike a balance and that owner occupiers are not priced out of the new build market by HMOs.
	This policy along with the other draft policies would severely restrict where students can stay. Students deserve the right to have good quality accommodation and to stay where they like. They should not be treated in a different way.	The guidance seeks to address the current imbalance that is seeing owner occupiers being restricted with where they can buy by HMOs.
	Understands that the Council are trying to develop a policy that allows young professionals to remain in the City and purchase their first property. However, this should be done with a policy that complies with the needs of the whole city population not just a proportion of it.	It is considered that the approach set out in the guidance does seek to meet the needs of the City as a whole.
	This policy is generally acceptable as a method of controlling the occupation of new build as long as there are sufficient properties for students in the demand areas, which may not be the case if HMO Policy 3 is adopted.	Noted

	Do not think that it is appropriate to prevent HMOs in new build properties. Unless there is a significant increase in purpose built HMO accommodation it is not realistic to prohibit new properties from being used as HMOs.	Noted. There are more purpose built student/HMO accommodation being approved and built.
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