



# Coventry City Council

## Homes in Multiple Occupation (HMO)

### Development Plan Document (DPD)

#### Regulation 18: Issues and Preferred Option

#### Consultation Document

July 2022

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# 1. Executive Summary

## **What is a HMO?**

A HMO is defined as a property rented to at least three people who are not from one 'household' (e.g. a family) but share facilities such as a bathroom and kitchen. Planning use classes distinguish between 'small' HMOs of up to six people (C4 use class), and 'large' HMOs of seven or more occupants which are Sui Generis (of their own use class). Some HMOs are purpose-built, e.g. student accommodation, but many are created through the conversion of buildings, both in residential and other uses, which often have the potential to initiate physical and social changes to an area.

## **Why now?**

With the city's growing population, there is a need to ensure that new development supports successful communities by ensuring the right mix of housing types in an area, securing appropriate design and supporting well managed properties. Homes in Multiple Occupation (HMOs) provide an important contribution to peoples housing choice, but can have significant impacts on existing residents. At present, Coventry has a population growth rate faster than the national and regional average. Migration flows into the city have driven population growth particularly within the 'young professional' demographic. Residents of Coventry aged between 16-24 make up 14.7% of the city's total population. This also reflects the growth of the city's further/higher education institutions including the two universities, Coventry University and the University of Warwick.

These demographic changes coupled with economic factors which have made it increasingly difficult for younger people and those on lower incomes to finance permanent home ownership, have consequentially underpinned the growth of the private and social rented sectors. Consequently, for communities where HMO concentration has been most noticeable, there are increasing concerns about the changing nature of their communities and neighbourhoods, and the impacts that this has.

The Councils preferred option within this Development Plan Document (DPD) aims to ensure that such development also preserves the residential amenity and character of an area, and that any potential harmful concentrations do not arise and are managed as far as reasonably possible through the local planning regime. However, while this document sets the preferred

approach, we are seeking views and any input on any alternative approaches that you may want to put forward supported by robust and strong evidence.

### **What stage are we at?**

This HMO Development Plan Document (DPD) will, once adopted, form part of the formal Development Plan for Coventry City Council. It is being produced in accordance with the Town and Country Planning (Local Planning) (England) Regulations 2012. This 'Consultation Draft' forms part of the statutory consultation required under Regulation 18 of the 2012 Regulations (as amended).

The primary purpose of this HMO DPD is to set out the detailed policy framework that will be used for the determination of HMO planning applications in Coventry. The policies contained within the DPD provide further detail to the strategic policies set out in the Council's Local Plan and City Centre Area Action Plan.

Draft policy approaches contained within this Consultation Draft DPD are intended to further the aims and objectives of both the NPPF and the Coventry Local Plan. They are aimed at guiding both decision-makers and applicants to achieve the highest possible standards of development for HMO proposals in Coventry.

Comments must be received no later than **xx** 2022 and should be submitted online via: <https://coventrycitycouncil.inconsult.uk/system/home>



## 2. Introduction

2.1 Houses of Multiple Occupation (HMOs) are properties rented to at least 3 people who are not from one household (for example, a family) but share facilities like a bathroom or kitchen. As at 2022, planning permission is only required for HMOs which will provide a home for 7 or more people.

2.2 HMOs meet a variety of needs for private rented housing, ranging from young professional 'house-shares' and students wanting to live off campus, as well as providing a vital source of housing supply for people on lower incomes. For many people, HMOs provide a practical and affordable housing option that meets their housing needs. There are, however, significant housing needs that HMOs cannot meet and indeed can impact upon, such as the provision of affordable housing stock for families



2.3 Evidence shows that there has been an increase in HMO development in Coventry over recent years to meet demand. This has resulted in concentrations of HMOs in particular parts of the city which has compounded the associated issues for the neighbouring properties and the wider community. These issues mainly relate to increased parking pressures, noise, management of waste and recycling and anti-social behaviour. This document aims to provide a policy approach to HMOs, housing diversity, residential amenity and parking standards in order to ensure that new HMO developments meet the requirements of our policies in terms of impact on the surrounding areas.

2.4 This will help us to provide much needed new housing options whilst ensuring that new development does not have a negative impact on the character of the surrounding area and nearby properties. The Development Plan Document (DPD) is primarily for use by prospective planning applicants, property developers and landowners, as well as decision makers such as planning officers and elected members. However, it also intended to help local residents understand how the Council intends to apply its planning policies. It is important to note that not all HMOs require planning permission. **This document relates to the management of planning applications for new HMOs when planning permission is required, but also explains the role of the HMO licencing regime which is a separate process that can relate to both HMOs which do, and do not, require planning permission.**

## 3. Policy Context

### National Policy Context

#### National Planning Policy Framework

3.1 The NPPF sets out that the purpose of the planning system is to contribute to the achievement of sustainable development. One of the three overarching objectives of the NPPF requires the planning system to support strong, vibrant and healthy communities by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations.

3.2 Whilst there is no specific reference to HMOs within the NPPF, housing policies do aim to support the Government's objective of significantly boosting the supply of homes. This requires the Council to reflect on provision of the size, type and tenure of housing needed for different groups in the community, including for those who require affordable housing, students, families, and people who rent their homes. The Planning Practice Guidance echoes the content of the NPPF in that it does not provide specific advice on HMOs, however, it does provide guidance on planning for the housing needs of different groups.

### Local Policy Context

#### Coventry Local Plan

3.3 The Coventry Local Plan was adopted in 2017 and policy H11 sets out the approach below (see fig 1). The HMO DPD will ultimately sit alongside the existing Local Plan complementing existing policy but adding a suite of additional policies to address detailed issues.

*Figure 1: Coventry Local Plan, Policy H11*

#### **Policy H11: Homes in Multiple Occupation (HiMO's)**

The development of purpose built HiMO's or the conversion of existing homes or non-residential properties to large HiMO's will not be permitted in areas where the proposals would materially harm:

- a. the amenities of occupiers of nearby properties (including the provision of suitable parking provisions);
- b. the appearance or character of an area;
- c. local services; and
- d. The amenity value and living standards of future occupants of the property, having specific regard to internal space and garden/amenity space.

## **Coventry, Solihull and Warwickshire Strategic Housing Market Assessment (SHMA) 2015**

3.4 The SHMA assessments have shown that the housing market in Coventry is generally focused towards smaller, lower value properties relative to the wider housing market area and national trends. For example, 71% of all Coventry homes are within Council Tax bands A and B compared to Nuneaton where the figure is 60% and the national average is 44%. Likewise, just 10% of the city's existing housing stock is classified as detached. The Council is expecting this data to be comprehensively updated through the joint 2022 Housing and Economic Development Needs Assessment (HEDNA) later in the year. However, at present, the Council are currently planning for 24,600 additional new homes between 2011 and 2031. Any new residential schemes coming forward during this period that comprise 25 homes or 1 hectare or more will be expected to provide 25% of affordable homes<sup>1</sup>

3.5 In addition to the provision of new affordable housing, the Council was advised to investigate how better use of the existing housing stock could be made to meet housing need (recognising that the Council does not own/manage stock such investigations would need to be conducted with its stock-owning, housing association partners).

3.6 There is also a clear role for policy to seek to encourage investment and improve standards within the Private Rented Sector. The Council already has an important enforcement role and should work to develop ways to improve the housing offer for households seeking private rented homes.

### **HMO and the Planning Use Classes Order**

3.7 Planning use classes are the legal framework which determines what a particular property may be used for by its lawful occupants. The current Use Classes were last updated on 1 September 2020<sup>2</sup>. Uses are grouped into classes B, C, E, F and Sui Generis (of their own use class).

3.8 The Government defines a HMO<sup>3</sup> as:

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<sup>1</sup> [www.coventry.gov.uk/downloads/file/25899/final-local-plan-december-2017](http://www.coventry.gov.uk/downloads/file/25899/final-local-plan-december-2017)

<sup>2</sup> [www.planningportal.co.uk/info/200130/common\\_projects/9/change\\_of\\_use](http://www.planningportal.co.uk/info/200130/common_projects/9/change_of_use)

<sup>3</sup> [www.gov.uk/house-in-multiple-occupation-licence](http://www.gov.uk/house-in-multiple-occupation-licence)



‘a property rented out by at least 3 people who are not from 1 ‘household’ (for example a family) but share facilities like the bathroom and kitchen. It’s sometimes called a ‘house share’.

3.9 From a planning perspective, the Use Classes Order<sup>4</sup> distinguishes between ‘small’ HMOs of up to six people (C4 use class), and ‘large’ HMOs of seven or more occupants (Sui Generis). Currently, planning permission is not needed to change the use of a house to a HMO with 3-6 residents, which is known as Permitted Development (PD). The effect of any prospective Article 4 Direction covering HMOs will be that, within any designated area, planning permission would be required for all HMO proposals (small or large).

3.10 HMOs therefore currently require planning permission once they exceed six unrelated people if that change results in a material change in use. Large HMOs, formed from seven unrelated residents or more and no PD right exists to change a HMO with 7 or more residents from any use. Consequently, for the change of use of any premises to a HMO for seven or more residents, an assessment must be made as to whether a material change of use from the prior lawful use has occurred and, if it is determined that it has, then planning permission is required.

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<sup>4</sup> [www.planninggeek.co.uk/use-class/use-class-c/](http://www.planninggeek.co.uk/use-class/use-class-c/)

## 4. HMOs in Coventry - Issues

4.1 Whilst the city's stock of HMOs is contributing to meeting local housing needs, increased numbers of multiple occupancy properties have the potential to create negative impacts. Concentrations within neighbourhoods can lead to imbalanced and unsustainable communities and can damage the residential amenity and character of surrounding areas. Harmful impacts associated with high numbers of HMOs can affect a community's health and wellbeing. Over many years across Coventry, many issues have been reported to the Council regarding the increasing numbers and concentrations of HMOs, We believe these include, but are not limited to:

- **Reduced social cohesion** resulting from the short-term nature of residencies involved with HMOs which may involve younger people overall. demographic imbalance.
- **Reduced housing choice** resulting from housing type/tenure imbalance (e.g. a shift from permanent family housing to more transient accommodation);
- **Reduced community engagement** from residents resulting from an increase in the transient population of an area;
- **Noise and disturbance** resulting from intensification of the residential use and/or the constantly changing nature of households;
- **Overlooking and loss of privacy** resulting from poorly considered internal layouts and intensification of use;
- **Detriment to visual amenity** resulting from poor waste management, poor property maintenance, accumulative external alterations to properties and use of frontage areas for off-street parking;
- **Reduced community services** resulting from a shift in the retail/business offer towards a narrower demographic such as the proliferation of Hot Food Takeaways; and
- **Highway safety concerns** resulting from congested on-street parking and poor waste management.

**Question 1: Do you believe these issues are representative of your experiences and are there other issues we need to be aware of?**

4.2 A number of wards across the city have high proportions of HMOs housing a range of different groups. Non-student HMOs are generally clustered across wards in Sherbourne, Whoberley and Upper/Lower Stoke. Some communities in these areas have expressed concern over increasing numbers of HMOs and the potential for damaging impacts should numbers continue to increase without appropriate planning interventions.

4.3 The level of student population in the city is also a factor affecting the amount and distribution of HMOs. A number of residential areas have high student populations living in this form of accommodation. These areas directly surround or are accessible to the city's two universities. The issues identified above have become intensified in these locations due to high HMO numbers. Significant concentrations in particular streets and neighbourhoods have had negative impacts on local communities.

### **Key Issues in Coventry**

4.4 From the evidence gathered to date, we consider there are three key strategic issues that have emerged in Coventry and are explained below.

#### **Key Issue 1: Concentrations**

4.5 This is where issues associated with HMOs (see points above) cumulatively result in detrimental effects on the qualities and characteristics of a residential area. These qualities and characteristics are defined as generally quieter surroundings, a reasonable level of safe, accessible and convenient vehicular parking, a well-maintained or visually attractive environment and the preservation of buildings and structures that contribute to the character of a locality. It is also where the choice of housing available no longer provides for the needs of different groups within the community.



### Key Issue 2: Sandwiching (street level)

4.5 A harmful concentration can arise at a localised level when an existing dwelling is sandwiched between two HMOs. This can intensify impacts on individual households even if few HMOs exist locally and can create an imbalance between HMOs and other housing at a street level.

4.6 Potential sandwiching situations can include:

- Up to three single residential properties in a street located between two single HMO properties;
- Single HMO properties in any two of the following locations: adjacent, opposite and to the rear of a single residential property;
- A residential flat within a sub-divided building where the majority of flats are HMOs.
- A residential flat within a sub-divided building in a street located between two other sub-divided buildings with at least one HMO flat in each building;

- A residential flat within a sub-divided building located between two HMO flats above and below;
- A residential flat within a sub-divided building located between two HMO flats on both sides.

4.7 Variations of these sandwiching situations may also occur. Sandwiching situations apply irrespective of limited breaks in building line, such as a vehicular or pedestrian access, apart from a separating road.

### **Key Issue 3: HMO Thresholds (ward level)**

4.8 In analysing appropriate thresholds through other Local Planning Authorities, it is clear that proposals for the introduction of new HMOs which would result in more than 10% of the total dwelling stock being occupied as HMOs within a 100 metre radius of the centre point of the application property is considered an appropriate level before HMO thresholds give rise to the issues outlined above.

4.9 Similarly, proposals for additional bed spaces within an existing HMO where 10% or more of the total dwelling stock is occupied as HMOs within a 100 metre radius of the centre point of the application property could also be considered an appropriate level. The 100 metre radius is given to represent the immediate neighbourhood and is measured from a centre point within the centre point of the application property as defined by the Local Land and Property Gazetteer (LLPG). Dwellings on the edge of the 100 metre radius can only be included if the centre point, as defined by LLPG, falls within the radius. When considering applications, the Council's Development Management service will calculate the proportion of dwellings that are occupied as HMOs within any given 100 metre radius of the centre point of the application property when validating and determining such applications – please refer to Para 6.3 for further detail.





## 5. Preferred Option

5.1 With the city's growing population (and will grow further), there is a need to ensure that new development supports successful communities by ensuring the right mix of housing types in an area, securing appropriate design and supporting well managed properties. HMOs provide an important contribution to people's housing choice. The preferred policy approach aims to ensure that such development also preserves the residential amenity and character of an area and that harmful concentrations do not arise.



5.2 Large homes in multiple occupation (HMOs) can contribute to the overall supply of cheaper accommodation, particularly for students, young people and those on low incomes. Intensive occupation of former family dwellings such as those used for student accommodation or as a HMO can have negative impacts on residential amenity within an area, through increases in



on-street and off-street parking, loss of front gardens, reductions in levels of privacy, alterations to the exterior of buildings and increased generation of refuse.

5.3 A large HMO is a property accommodating more than six unrelated persons sharing facilities and a small HMO accommodates between three and six unrelated persons. Housing legislation and the Planning Use Classes Order provides for different regulatory frameworks for managing HMOs<sup>5</sup>.

5.4 At the current time, any proposal for a small HMO is classed as permitted development. However, this DPD is being developed in parallel with a proposed Article 4 Direction which will seek to withdraw permitted development rights for small HMOs. There are significant existing concentrations of HMOs in certain wards across the city, where an Article 4 Direction will be developed (expected to be in place by 2023) removing permitted development rights for small HMO proposals (less than 6 unrelated occupants in a single dwelling).



<sup>5</sup> [www.hmohub.co.uk/planning-vs-licensing/](http://www.hmohub.co.uk/planning-vs-licensing/)

## Preferred Approach

5.5 The proposed policy approach to managing HMOs in Coventry is set out below with a suite of suggested draft policies coupled with a reasoned justification for each. Additionally, there is a proposed reasonable alternative we have suggested for each policy, but we are also keen to understand if there are other reasonable alternative options and questions for consideration. Once we have this feedback as a result of this consultation, we will undertake detailed Strategic Environmental Assessment / Sustainability Appraisal of the proposed policy options to ensure that, in line with national policy requirements, we are developing a sustainable policy approach for addressing HMOs in Coventry.

### **DRAFT POLICY HMO1 – HOMES IN MULTIPLE OCCUPATION (HMOS)**

All proposals for the provision of HMOs will be required to demonstrate that:

- a) there is good accessibility to local amenities and public transport;
- b) they accord with the emerging Accessible Homes standards<sup>6</sup> (or future equivalent) and provide satisfactory living conditions for the intended occupiers; and
- c) there will be no demonstrably adverse impact on the amenity of neighbouring properties or the character of the area by way of character, appearance, highway safety and parking. The proposal must also meet the criteria in draft policy HMO4.

## Justification and reasonable alternatives

5.6 Whilst there is an existing and corporately agreed approach to managing HMOs through the licencing regime, there is a need to strengthen existing planning policy to address HMO concentration coupled with a proposed non-immediate Article 4 Direction to withdraw permitted development rights within specific wards (expected to be in place in 2023). The evidence has established that small HMO dwellings are associated with neighbourhoods where the predominant dwelling type is small (three bedroom) terraced dwellings, privately rented, and whilst mostly occupied by students, provide accommodation for a range of people. The cumulative effect of incremental intensification in an area caused by numerous changes of use from small HMO to large HMOs or the extension of existing HMOs can be also significant. For these reasons applications for such changes will be assessed using the criteria of draft policies HMO01 and HMO04.

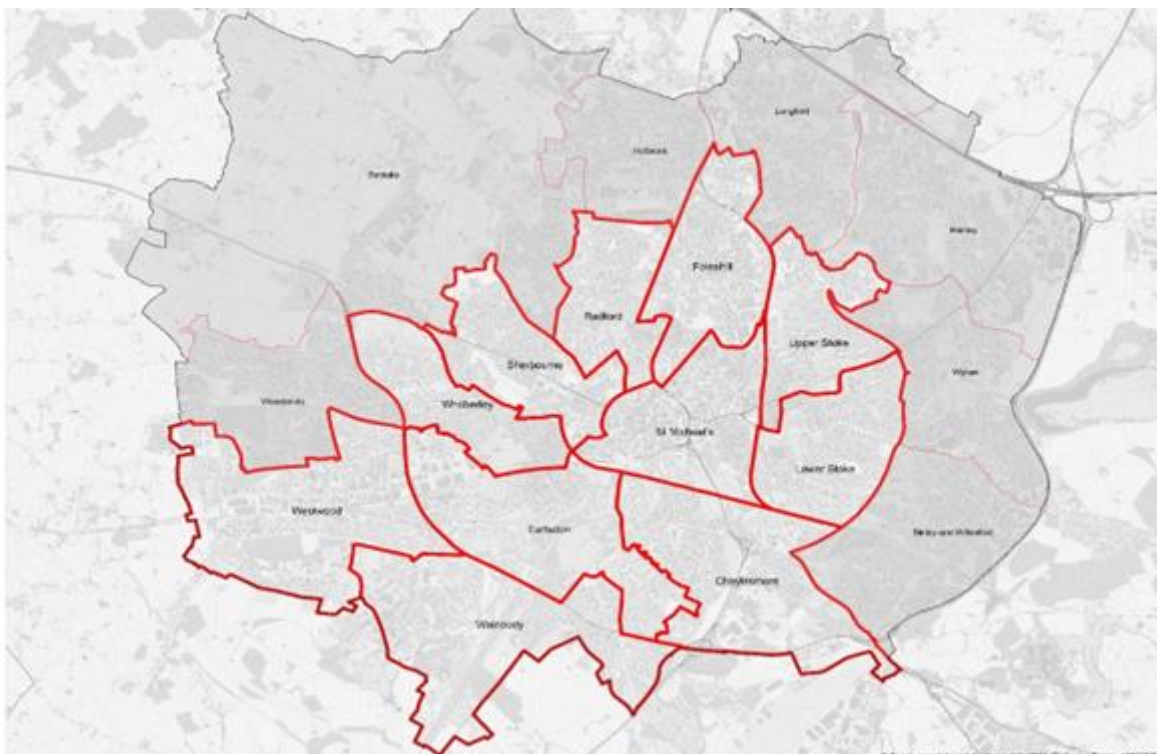
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<sup>6</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/930274/200813\\_con\\_doc\\_-\\_final\\_1.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/930274/200813_con_doc_-_final_1.pdf)

5.7 It should be noted that the Council intends to introduce an Article 4 Direction requiring planning permission for a change of use from family dwellings (C3) to small HMOs for between 3 and 6 unrelated people (C4 dwellings) within specified wards of the city. At the current time, eleven wards have been proposed to be included as part of the Article 4 Direction area, albeit they should not be considered as being the only places in the city that have a concentration of HMO dwellings. These proposed wards are:

- Cheylesmore
- Earlsdon
- Foleshill
- Lower Stoke
- Radford
- St. Michaels
- Sherbourne
- Wainbody,
- Whoberley
- Westwood
- Upper Stoke

*Please note: the Article 4 Direction is subject to a separate consultation process and is not being consulted on through this document.*





5.8 The alternative approach to the proposed draft proposed policy HM01 is to do nothing and rely on the existing Local Plan policy H11 which is considered lacking an overall strategic direction to mitigate the potential impacts of further increase in HMO proposals coming forward.

**Question 2: Do you believe this policy approach is reasonable and relevant to addressing the issues associated with HMOs in Coventry? If not, what alternative approach would be appropriate supported by robust evidence?**

#### **DRAFT POLICY HMO2 – CONCENTRATIONS AND THRESHOLDS**

Where there is an existing HMO concentration of 10% or more of all dwellings within 100 metres radius of the centre point of the application property, HMO applications will not be supported. Where there is an existing HMO concentration of less than 10% within 100 metres radius of the centre point of the application property, HMO applications will be considered against the other Policies in this DPD and all other relevant policies.

#### **Justification and reasonable alternatives**

5.9 It is not the aim of the policy to reduce overall HMO numbers or to stop further HMO proposals coming forward, but to ensure that potentially harmful concentrations do not arise and that a high standard of accommodation and amenity is created, given the important role HMOs play as part of the city's housing offer. Clearly, patterns of supply and demand will change over time but there is a link between student shared-houses and the increasing provision of purpose-built student accommodation located in the city centre. Restricting HMO supply in one neighbourhood, may prompt landlords to examine adjoining areas, displacing the concentration. Consequently, boundaries may change, and new areas may be identified. Such areas would be subject to the preferred option policy. The evidence shows that high concentrations of HMOs in the city are already having an adverse impact on the character and amenity of local areas and this issue is spreading to further areas. The NPPF encourages

local planning authorities to help maintain mixed and balanced communities. Over-concentration of HMOs can cause imbalance, leading to the problems identified in section 4.

5.10 The proposed eleven wards to be included within the Article 4 Direction area have varying levels of existing HMO dwelling concentrations. However, the preferred option would apply to the city as a whole rather than at individual street level. A single threshold is proposed to be set at 10% which is considered to be a modest level based on the size and scale of the challenge this DPD is aiming to address. Moreover, research based on similar size cities across the country which have already implemented a policy intervention to address HMO challenges, also suggests that the threshold would be appropriate and reasonable. For neighbourhoods which exceed the threshold, no further applications to a C4 HMO dwelling, generated by the withdrawal of change of use permitted development rights would be permitted.

5.11 The alternative approach is to do nothing and rely on the existing Local Plan policy H11 which is unable to address the issues of concentration and thresholds to mitigate the potential impacts of further increase in HMO proposals coming forward. Alternative thresholds were considered but we are not proposing to pursue these as the figure is based on tried and tested good practice elsewhere.

**Question 3: Do you believe this policy approach is reasonable and relevant to addressing the issues associated with HMO concentration and thresholds in Coventry? If not, what alternative approach would be appropriate and could be justified by robust evidence?**

**DRAFT POLICY HMO3 – SANDWICHING**

Proposals for the provision of HMOs must not result in a non-HMO dwelling being sandwiched between two HMOs and must not lead to a continuous frontage of three or more HMOs.

Sandwiching includes:

- Up to three single residential properties in a street located between two single HMO properties;
- Single HMO properties in any two of the following locations: adjacent, opposite and to the rear of a single residential property;
- A residential flat within a sub-divided building where the majority of flats are HMOs.

- A residential flat within a sub-divided building in a street located between two other sub-divided buildings with at least one HMO flat in each building;
- A residential flat within a sub-divided building located between two HMO flats above and below; and
- A residential flat within a sub-divided building located between two HMO flats on both sides.

### **Justification and reasonable alternatives**

5.12 Preventing the “sandwiching” of a non-HMO between two HMOs or a continuous frontage of three or more HMOs is an approach that aims to prevent unacceptable adverse impacts on amenity (as set out in paragraph 4.1) and to control the location of new HMOs and student accommodation in order to prevent these uses from either exacerbating existing or creating new concentrations. It is not the intention of the policy to restrict further growth in HMOs. The Council recognises the importance of HMOs and the private rented sector generally in the housing stock but seeks to ensure that the amenity of neighbouring residents is not compromised.

5.13 The alternative approach is to do nothing and rely on the existing Local Plan policy H11 which does not address the issue of sandwiching. This could lead to further issues of sandwiching and the potential impacts associated with continued increases in HMOs.

**Question 4: Do you believe this policy approach is reasonable and relevant in the issues associated with HMO sandwiching in Coventry? If not, what alternative approach would be appropriate and could be justified by robust evidence?**

### **DRAFT POLICY HMO4 – AMENITY AND DESIGN**

All proposals for the provision of HMOs will be assessed against the following criteria:

- a) The premises are suitable for a full or part conversion in terms of location and size for the number of households to be accommodated;
- b) There would be no demonstrably adverse impact on the amenity of neighbouring properties and the character of the surrounding area in particular through increased activity, noise or disturbance;

- c) The configuration of internal sleeping accommodation space satisfactorily takes into account minimum room size requirements\* and light and ventilation;
- d) The use of acoustic insulation to protect neighbouring and adjacent properties through appropriate party wall insulation;
- e) The design of external space is safe and secure, and includes provision for refuse storage, washing facilities and adequate vehicular and cycle parking<sup>7</sup>, and ensures access to outdoor amenity space; and
- f) Refuse bin storage is provided externally within the curtilage of the property, within a suitably designed structure and the refuse bin not visible from the public realm.

*\* 6.51 m<sup>2</sup> for one person over ten years of age, 10.22 m<sup>2</sup> for two persons over ten years of age and 4.64 m<sup>2</sup> for one child under the age of ten years. Any room of less than 4.64m<sup>2</sup> must not be used as sleeping accommodation.<sup>8</sup>*

### **Justification and reasonable alternatives**

5.14 The areas around the city centre and the campuses of both Coventry University and University of Warwick have the greatest concentrations of HMOs. These areas are popular with students and young people because they provide a good range of facilities for young people and a thriving evening economy. In addition, the housing stock lends itself well to the provision of shared houses and flats. However, one of the main problems for more settled residents living in these areas is the anti-social behaviour in the streets in the early hours of the morning. Other issues include noise from neighbouring properties, poor attendance to waste storage, increased burglaries, increased street parking, and poor property maintenance. The University and the Council work together to resolve these issues wherever possible, but the Council is firmly of the view that restricting further concentrations of HMOs will help prevent a worsening of the situation.

5.15 The policy also aims to ensure that there is satisfactory provision for the storage of waste, since a house occupied as an HMO can usually generate more waste than a family or couple. It is considered that all habitable rooms should have an adequate level of natural lighting provided via a clear glazed window or windows. Where practicable, all staircases, landings,

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<sup>7</sup> [www.coventry.gov.uk/planning-policy/coventry-local-plan-2011-2031](http://www.coventry.gov.uk/planning-policy/coventry-local-plan-2011-2031)

<sup>8</sup> Figures based on Coventry City Council's HMO licensing standards:

[www.coventry.gov.uk/downloads/file/27566/room-size-and-amenity-provision-standards](http://www.coventry.gov.uk/downloads/file/27566/room-size-and-amenity-provision-standards)

passages, kitchens, bathrooms and toilets should be provided, with a window. Windows to bathrooms and toilets should be glazed with obscured glass.

5.16 The alternative approach is to do nothing and rely on the existing Local Plan policy H11 which does not comprehensively address the issue of amenity and design issues associated with HMO proposals.

**Question 5: Do you believe this policy approach is reasonable and relevant to addressing the issues associated with HMO amenity and design issues in Coventry? If not, what alternative approach would be appropriate and could be justified by robust evidence?**



## 6. Proposed Assessment Process

6.1 It is proposed that when determining planning applications for new HMOs or additional bed spaces within existing HMOs the following information should be submitted:

- Completed application form;
- Block plan of the site (at a scale of 1:100 or 1:200) showing site boundaries and any on-site car parking;
- Maximum number of occupants;
- Existing and proposed floor plans showing all room sizes (square metres), room uses and number of persons occupying each bedroom/bedsit;
- Cycle parking facilities;
- Appropriate use of acoustic and party wall insulation;
- Details of the location, layout, design, volume, management and collection arrangements for all recyclable and waste materials; and
- Details of any associated building works.

6.2 In some cases, additional information may be required to help determine the planning application. Further information on submitting a planning application is available on the Council's website<sup>9</sup>.

### Calculations

6.3 It is proposed that the following approach sets out the residential properties identified for the purposes of calculating the percentage concentration of HMOs and the data sources for the purposes of identifying HMOs.

#### Stage 1: Identifying residential properties

The residential properties identified are those located within 100m of the centre point of the application site. For the purposes of assessing applications for HMO development, dwelling houses and HMOS that are located within blocks of flats or subdivided properties are counted as one property. This will ensure that calculations of HMO concentration are not skewed.

#### Stage 2: Count HMOs

HMOs are identified from the following sources:

- Properties licensed as a HMO;

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<sup>9</sup> [www.coventry.gov.uk/planning-2/planning-application-checklist-supporting-information](http://www.coventry.gov.uk/planning-2/planning-application-checklist-supporting-information)

- Properties with C4 or Sui Generis HMO use or issued with a Certificate of Lawful Development;
- Declared C4 HMOs recorded in the 12 month notice period for proposed Article 4 Direction, (expected to be approved in 2023); and
- Council tax records – student exemptions for council tax excluding purpose built student accommodation and private flats.

### Stage 3: Calculate concentration

The concentration of HMOs surrounding the application site is calculated as a percentage of the total estimated number of existing HMO units against the total number of residential properties. It is accepted that although the HMO sources listed above provide the most robust approach to identifying the numbers and locations of HMOs in an area, it will not identify all HMOs. Additional HMOs can also impact on residential amenity where they lead to concentrations in the immediate vicinity of an application site, as well as creating other impacts where they proliferate at a broader neighbourhood level.

Planning permission would not be granted where the introduction of a new HMO would result in an existing C3 dwelling being ‘sandwiched’ by any adjoining HMOs or non-family residential uses on both sides. Planning permission would not be granted where it would result in a continuous frontage of 3 or more HMOs or non-family residential uses. In situations where properties are not traditional houses situated along a street frontage, the policy can be applied flexibly depending on the individual circumstances of the proposal.

### **Exceptional circumstances**

6.4 The concentration of HMOs in an area may be at such a point where the introduction of any new HMO would not change the character of the area. This is because the vast majority of properties are already in HMO use. In these circumstances the retention of the property as a family dwelling will have little effect on the balance and mix of households in a community which is already over dominated by the proportion of existing HMO households. Therefore, the conversion of the remaining buildings to a HMO would not further harm the character of the area.

**Question 6: Do you believe this proposed assessment process is reasonable and relevant to addressing to addressing the issues associated with HMO applications in Coventry? If not, what alternative approach would be appropriate and could be justified by robust evidence?**



## Appendix 2: Glossary of Terms

**Article 4:** A power available under the 1995 General Development Order allowing the Council, in certain instances, to restrict permitted development rights.

**Certificate of Lawful Development:** A legal document confirming the lawfulness of past, present or future building use.

**City Centre Action Plan:** sets out a blueprint for the development of the City Centre

**Coventry Local Plan:** adopted by the Council in December 2017, it sets out the Council's vision for the city for the period 2017 -2031.

**Development Plan Document (DPDs):** A Statutory Planning Policy Document which forms part of the Local Plan, setting out Strategic Policies and Development Management Policies.

**Houses in Multiple Occupancy (HMO):** a property rented by at least 3 people who are not from 1 'household' (for example a family) but share facilities like the bathroom and kitchen. It's sometimes called a 'house share'.

**Housing and Economic Development Needs Assessment (HEDNA):** provides an assessment of the development need in order to accommodate identified housing and employment requirements.

**National Planning Policy Framework (NPPF):** outlines the Government's planning policies and expectations which directly inform local policy.

**Permitted Development Rights:** certain types of building work and changes of use that can be undertaken without the need to apply for planning permission.

**Sui Generis** – A term used to categorise buildings that do not fall into other defined use classifications, in this context it means 'in a class of its own'.

**Strategic Environmental Assessment (SEA):** a process which evaluates the environmental impacts of proposed policies.

**Strategic Housing Market Assessment (SHMA):** provides an assessment of both housing need and demand.

**Sustainability Appraisal (SA):** an assessment of the effects (social, environmental and economic) of strategies and policies contained within DPD documents.

**Use Classes Order:** puts uses of land and buildings into various categories identifiable with B, C, E, F or SG.

If you need this information in another format or language  
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