



Appeal Decision

Site visit made on 9 December 2024

by P Terceiro BSc MSc MRTPI

an Inspector appointed by the Secretary of State

Decision date: 16TH January 2025

Appeal Ref: APP/Y5420/W/24/3344515

4 Mafeking Road, Tottenham, London, Haringey N17 9BG

- The appeal is made under section 78 of the Town and Country Planning Act 1990 (as amended) against a refusal to grant planning permission.
 - The appeal is made by Ms Tinting Xu against the decision of the Council of the London Borough of Haringey.
 - The application Ref is HGY/2024/0448.
 - The development proposed is described as class C3 to a Class C4 HMO for a 5 bedroom, 6 tenant dwelling.
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Decision

1. The appeal is dismissed.

Preliminary Matter

2. The property was in use as a House in Multiple Occupation (HMO) at the time of my visit. I have therefore determined the appeal on this basis.

Main Issues

3. The main issues are:
 - the effect of the development on the supply of family housing;
 - whether the development leads to an unacceptable concentration of dwelling house conversions in the area; and
 - whether the property provides suitable living conditions for its occupants, with regard to shared facilities.

Reasons

Family housing

4. The appeal site is a mid-terrace two storey dwelling with roof accommodation, small frontage and outdoor private space to the rear, located in a predominantly residential area. The property includes bedrooms on the ground floor, first floor and loft space, with communal kitchen and living room on the ground floor.
5. The property is located within an area covered by an Article 4 Direction, removing permitted development rights for changes of use of C3 (Dwellings) to C4 (HMO). It lies within the designated Family Housing Protection Zone, where retaining sufficient supply of small family homes is a priority in order to maintain broad housing choice for the local population.

6. Policy DM17 of the Development Management DPD 2017 (DPD) supports the conversion of larger homes to HMOs, including small HMOs (3-6 unrelated people) within the area covered by the Article 4 Direction, provided that certain criteria are met. Criterion a requires that dwellings proposed for conversion to an HMO must have an original internal floor space of more than 120m², as the Council is seeking to preserve smaller homes for family accommodation.
7. The original floor space of the appeal property is given by the Council as approximately 85.2m² which is well below the threshold of DPD Policy DM17, as recognised by the appellant in their final comments. As such, the development is contrary to Policy DM17 in this respect.
8. The appeal property, due to its size and configuration, is suitable for family accommodation. As such, while HMOs play an important role in meeting particular housing needs, especially for low-income residents, young people and those needing temporary accommodation, the DPD indicates that there is significant need for family housing within the Borough. Further, there is no substantive evidence before me to suggest HMO accommodation is specifically needed in this location. Therefore, the loss of a family home resulting from the development further exacerbates this need, by reducing the availability of family housing within the Borough and harming the makeup of accommodation.
9. For the reasons stated above the development has a harmful effect on the supply of family housing. It therefore does not accord with DPD Policy DM17 which requires that small family homes are not converted to HMOs, and Policy SP2 of Haringey's Local Plan Strategic Policies 2017 (LP) which seeks to provide a variety of housing types to meet the needs of the community.

Concentration of dwelling house conversions

10. DPD Policy DM17, at criterion b, sets out that HMOs should not give rise to any significant adverse amenity impacts on the surrounding neighbourhood, including cumulative impacts arising from an over-concentration of HMOs within an area. I have not been directed to any development plan policy or local guidance that sets out the concentration of HMOs that would be acceptable in the vicinity of the appeal site. Therefore, whether there is an over-concentration of HMOs in the area is a matter of planning judgement.
11. The Council indicates that approximately 23% of the properties within Mafeking Road are in HMO use, which is not disputed by the appellant. The development increases this figure to about 25%, which is a significant proportion. This in turn leads to a large number of individuals living independently within the road, likely with different living patterns and increased presence of a transient population. While these effects may not be directly attributable to the occupants of the appeal site, another HMO in a road that already has several HMOs skews the mix and balance of the community towards non-family uses. Based on this, and while I have no reason to dispute that the HMO is well managed, the development nonetheless contributes to the over-concentration of HMOs within the road, thereby harming the surrounding neighbourhood.
12. The appellant asserts that there is a greater proportion of single-family accommodation than shared accommodation across the ward of Tottenham

Hale. Whilst this may be the case, it does not negate the over-concentration of HMOs in the area near the appeal site, which is harmful for the reasons set out above.

13. Therefore, the development leads to an unacceptable concentration of dwelling house conversions in the area. It conflicts with Policy DM17 of the DPD insofar as it seeks to ensure that HMOs do not give rise to any significant adverse amenity impacts on the surrounding neighbourhood, including cumulative impacts arising from an over-concentration of HMOs within an area.

Living conditions

14. DPD Policy DM17, at criterion d, requires HMOs to provide high quality accommodation. While not reflected in the reasons for refusal, the Council raises concerns with the proposal in this regard.
15. Even with bedrooms of an acceptable size, it is reasonable to expect that occupants have suitable space in which to prepare food, dine and mix with fellow residents as social interaction is important for mental health and well-being.
16. Occupants of the HMO have access to a shared kitchen. However, this has limited work surface space and was furnished with only a small table and chairs. The room that is indicated on the plan as being a living room was being used for storage at the time of my site visit. I observed that this room is served by a high-level window into the kitchen, so it receives limited natural light. As such, the kitchen and living room fail to provide adequate space to enable residents to cook, dine and relax together in comfort.
17. The property has a private outdoor space to the rear. However, a substantial part of this space is occupied by an outbuilding, rear extension and canopy, which limit the amount of available space. Overall, the outdoor space feels cramped and enclosed, thereby failing to provide an acceptable outdoor space for its occupants.
18. Whilst HMO licensing is a separate entity to planning, the licencing seeks to ensure that an HMO is safe and has basic facilities. Planning policies on the other hand seek to deliver functional accommodation with a high-quality living environment for the intended occupiers. As such, I am not persuaded that a licence successfully addresses the poor quality of accommodation.
19. Having regard to all of the above, the property fails to provide suitable living conditions for its occupants, with regard to shared facilities. There is therefore conflict with the requirements of DPD Policy DM17 in relation to the quality of accommodation.

Other Matters

20. Reference is made to a planning permission granted by the Council at 55 Westbury Avenue. However, the evidence indicates that the original floor area for this property, without its extensions, exceeds 120m². In addition, the area was not considered to be over-concentrated with HMOs, given the limited number of properties in HMO use within Westbury Avenue. As such, this example does not form a direct comparison to the appeal proposal.

21. In relation to the appeal decision for an HMO at 134 Longbridge Road, in another Borough, the Inspector's findings regarding the effect of that proposal in the supply of larger family houses are matters of judgement based upon the evidence that was presented, including percentage of properties in HMO in that area, which is considerably less than in the case before me. While I have considered this example carefully, the differing conclusions demonstrate the need to make a decision that is informed by the facts of each case.
22. The development meets the needs of groups with a specific housing requirement. It provides low-cost accommodation, within an area with easy access to public transport links and close to local services, facilities and employment. These matters, however, do not outweigh the harm arising from the loss of family housing, over-concentration of HMOs within the local area and unsuitable living conditions for the occupants of the HMO, as I have identified above.

Conclusion

23. The proposal conflicts with the development plan and the material considerations do not indicate that the appeal should be decided other than in accordance with it. For the reasons given above the appeal should be dismissed.

P Terceiro

INSPECTOR