Planning Inspectorate

Appeal Decisions

Site visit made on 24 November 2025

by Robin Buchanan BA (Hons) MRTPI

an Inspector appointed by the Secretary of State

Decision date 09 December 2025

Appeal A Ref: APP/Y5420/C/23/3333105
Appeal B Ref: APP/Y5420/C/23/3333106
210 West Green Road, Tottenham, London N15 5AN

- The appeals are made under section 174 of the Town and Country Planning Act 1990, as amended (the Act).
- Appeal A is made by Mr Dishad Ahmed and Appeal B is made by Mr Abdulla Tercanli.
- Both appeals are against an enforcement notice issued by the Council of the London Borough of Haringey.
- The notice was issued on 5 October 2023.
- The breach of planning control as alleged in the notice is material change of use of the property to a C4 House in Multiple Occupation.
- The requirements of the notice are to:
  1. Cease the use of the property as a C4 House in Multiple Occupation;
  2. Remove from the land all debris resulting from compliance with the above requirements.
- The period for compliance with the requirements is: Nine (9) months (by 16 August 2024).
- Both appeals were made on the grounds set out in section 174(2)(a) and (g) of the Act. Since an appeal has been brought on ground (a), an application for planning permission is deemed to have been made under section 177(5) of the Act.

Summary of Decisions: Appeal A and Appeal B are dismissed; the enforcement notice is upheld as corrected and in Appeal A planning permission is refused.

Preliminary Matter

1. The fee for the deemed application for planning permission was paid for Appeal A. The deemed application in Appeal B has therefore lapsed. Consequently, Appeal A proceeds on grounds (a) and (g) and Appeal B on ground (g).

Enforcement Notice

2. It is important that the notice is in order. Section 6 gives a date as part of the time for compliance and has been overtaken by the appeal process. I shall therefore correct the notice to delete this date without injustice to any party.

Appeal A ground (a)

3. Ground (a) is that planning permission ought to be granted for the breach of planning control stated in the notice. This is the material change of use of the property to a C4 house in multiple occupation (HMO).

Background and Main Issues

4. The property is an end of terrace house with front and rear gardens on a corner plot in a mainly residential suburb. It contained five rooms (including two on the ground floor and one at roof level) occupied as bedrooms, each large enough for double beds and some living space, with en-suite shower room and toilet. Additionally,

a communal shower room with toilet and a kitchen including dining table with seating, though no lounge/living room. The number of residents was not clear.

5. The main issues are:

   - whether use of the property as a C4 HMO is appropriate in this location, including in relation to small to medium sized family housing;
   - its effect on the residential character, appearance and amenity of the area.

Reasons

6. In this part of the borough, where the property is located, the Council is concerned about the loss of small to medium sized family housing in C3 use to HMOs, occupied by individuals who do not form a single household. There is evidence it has identified a shortfall of this family housing and a significant need for it, including to support a balanced, sustainable population and neighbourhood given a high prevalence of HMOs already in this area.

7. With this in mind, the Council implemented an Article 4 Direction (A4D) in 2013 to remove permitted development rights for change of use of a C3 house to a C4 HMO. It also adopted Policy DM17A of the Haringey Development Management DPD (2017) to control how the C3 housing stock in this area can be used as HMOs and designated a Family Housing Protection Zone (FHPZ) to help maintain a sufficient supply of small family homes to offer broad housing choice.

Use of the property

8. Policy DM17A permits the conversion of larger homes in this area to HMOs, including C4 HMOs. In criterion (a) a 'larger home' is where the gross original internal floor space of the existing dwelling is greater than 120m^2. Though a figure has not been given, it is common ground that the property currently exceeds 120m^2 gross internal floor space. But despite the size of the property as it exists now, there is evidence that the gross internal floor space has been less than 120m^2 in the past.

9. The Council considers 'original' to mean a dwelling as first built or as it existed on 1 July 1948 and puts the gross original internal floor space of the property at 93m^2. While this definition is, in essence, used for other planning purposes[1] it is not within Policy DM17A or the supporting text, nor has the Council given any other origin.

10. The appellant claims 'original' is a dwelling as it currently exists. However, and also with due regard and respect to the similar view of each Inspector in two appeal decisions put to me[2], this conflation is a contradiction of the plain meaning of these two discrete words. There would otherwise be little to differentiate 'original' from the contrasting 'existing' in this policy; a distinction that is not arbitrary but has purpose.

11. In my view, the unambiguous utility for Policy DM17A is that gross original internal floor space essentially describes something other than the gross existing internal floor space[3], at the point this policy is engaged. So, in this case, as the property was when the notice was issued and as it still remains now (ie not 120m^2 or less). The property is not, therefore, a larger home for the purpose of Policy DM17A and,

[1] Such as the Town and Country Planning (General Permitted Development) (England) Order 2015, as amended.
[2] APP/Y5420/W/18/3213394, APP/Y5420/W/20/3244356
[3] Except where these coincide in the case of an existing dwelling not previously unenlarged, so is as original.

as a result, criterion (a) does not support the material change of use of it to a C4 HMO; effectively, an outcome aligned with the decision of the Inspector in a previous 2023 dismissed appeal for essentially the same development at the property[4].

12. It is not disputed that the Council intends smaller homes, including small to medium sized family houses, to mean where the gross original internal floor space of the dwelling is 120m^2 or less. This is met in this case. There is additionally no dispute that the property was previously in use as a C3 house and suitable for small or medium sized family occupation.

13. I accept that Policy DM17A would allow the Council to resist a planning application for a material change of use of a small family home to an HMO combined with a proposed extension to make it a larger home. I also agree that if left unchecked, such development would erode the stock of small or medium sized family housing. However, it is not the only scenario anticipated by the Council or Policy DM17A.

14. It is common ground that when the property was a C3 house, before it was used as a C4 HMO, it was enlarged. This was achieved by a single-storey rear extension, two-storey side extension and loft conversion including rear roof dormer and hip to gable roof alteration. I appreciate that some of these works were carried out with planning permission granted by the Council and some was permitted development. But whether the enlarged dwelling could thereafter be used lawfully as a C4 HMO was (and still is) a separate matter – a new chapter in the planning history of the property that required an express grant of planning permission.

15. The ramifications of these enlargements for potential subsequent use of the property as a C4 HMO have significant implications for Policy DM17A. This policy otherwise helps to ensure that the Council's objectives are not circumvented or undermined by precursor planning permissions, determined at face value on their individual planning merits, or through exercise of other permitted development rights. Enlarging a smaller home, then changing the use of a resulting larger home (to a then in principle Policy DM17A compliant HMO) would also take C3 houses out of smaller family occupation and reduce the availability of such housing, at odds with a priority of the Council in this area.

16. That Policy DM17A permits some HMOs within this area by other means (change of use of larger homes to begin with) is of little consequence to this priority. It does not interfere with maintaining the stock of small to medium sized family housing. Nor does this policy prevent HMOs being provided by other means in this area or elsewhere in the borough. If the property is lawfully established as a C4 HMO, despite that it could revert back into C3 use in the future, there is no certainty it would, so the loss could be permanent. But even if it wasn't, this would not alleviate unacceptable demonstrable harm meantime for an indeterminate period.

17. The circumstances of this current appeal can be contrasted with another appeal decision put to me where there was insufficient evidence of an over-concentration of HMOs and Policy DM17A was emerging, not adopted[5]. Other than 'C4 HMO' in descriptions of development, the circumstances of some other change of use planning permissions are not before me[6]. Even if the properties were in the area

[4] APP/Y5420/W/22/3310210
[5] APP/Y5420/W/16/3159542
[6] HGY/2021/0855, HGY/2022/1488, HGY/2022/0183, HGY/2022/0192 (the appellant refers to HGY/2018/1939 as 'granted' but the relevant decision notice states this application was refused by the Council)

covered by the A4D, Policy DM17A and the FHPZ, some were flats and it is not clear if dwellings were small or medium sized family housing. As such, I cannot be certain that these decisions are directly comparable.

18. Taking account of all the above, and albeit a single dwelling either way, I find that use of the property as a C4 HMO is not appropriate in this location, contrary to Policy DM17A(a) including the resulting loss of a small to medium sized family house. I give significant weight to this consideration.

Effect on the area

19. With four double bedrooms, the previous Inspector had little evidence that C4 HMO use of the property resulted in negative impacts on the living conditions of the occupiers of neighbouring residential properties, with regard to noise, disturbance or overflowing bins. Despite now five bedrooms, there is little before me to suggest otherwise in these respects. However, in the current appeal the Council is concerned about impact on the amenities of current and future occupiers in the area from the wider effects of HMOs on the area.

20. In this regard, there is unchallenged evidence of an over-concentration and clustering of HMOs in this part of the borough, including in this ward and a smaller, more localised portion of it near the property, including 107 registered HMOs within half a mile, 53 in this same road. In addition, that a prevalence of HMOs can have negative impacts on an area, such as to the physical environment and streetscape, displacement of established residents by a more transient population and changes to local retail, commercial, and recreational or social facilities and services in response to the lifestyles of HMO residents, including viability of schools due to lower demand for school places.

21. This can be noticed or perceived by other local residents as something distinctly innately different to family occupation of dwellings, including small or medium sized homes. It can also diminish community cohesion or identity and detract from the prevailing experience of living in an area or a more enduring sense of place.

22. There is little to counter that factors such as these also informed the Council's decision to implement the A4D, adopt Policy DM17A and designate the FHPZ given an already unacceptable level and intensity of HMOs in this area. Moreover, that further uncontrolled influx of HMOs, including C4 HMOs, could manifest or exacerbate any or all of these negative impacts, which once established can be difficult to ameliorate.

23. Consequently, although a single C4 HMO, I find that this increase undermines the Council's objectives to maintain the residential character, appearance and amenity of the area. In these circumstances use of the property as a C4 HMO is contrary to Policy DM17A(b) which requires that HMOs do not give rise to any significant adverse amenity impacts on the surrounding neighbourhood, including cumulative impacts arising from an overconcentration of HMOs within an area. It is also contrary to Policy DM1 of the Haringey Development Management DPD (2017) and Policy SP11 of the Haringey Local Plan (2017). These policies include that changes of use must relate positively to the distinctive character and amenity of the locality, make a positive contribution to sense of identity, improve the character and quality of an area and create sustainable places. I give significant weight to this consideration.

Other Matters

24. While the property has now been in C4 HMO use for several years, with an HMO licence issued by the Council in 2020, this has been without the necessary planning permission. It is a separate regulatory matter for the Council, as is the number of such licences it has issued in this area or across the borough.

25. I accept there is little evidence of conflict with the other criteria of Policy DM17A. In particular, I acknowledge that C4 HMO use of the property provides a place to live for several people and that the high quality accommodation I saw is likely to be appreciated by them, as well as indicative of a reputable landlord. I have no reason to doubt that the property is in an accessible location and I also accept that this HMO helps to meet the borough's diverse housing needs, having regard to affordability and some single person (or couples) living preferences or only accommodation options.

26. But HMOs are one aspect of the Council's housing strategy and not a priority in this area. Consequently, although these considerations are important, I give moderate weight to them. Nor do they overcome or offset friction with what I consider in this case are the two most fundamental criteria (a) and (b) of Policy DM17A, so do not render the breach of planning control in overall accordance with this policy.

27. The appellant's concerns about the Council's housing strategy, and how it might be preferred Policy DM17A criterion (a) or (b) ought to have effect, are then largely a matter for the plan making process.

Planning Balance and Conclusion

28. The limited benefits of C4 HMO use of the property do not outweigh the significant harm due to the loss of a small to medium sized family house and consolidation of discordant effect on the area in conflict with the development plan. Other material considerations do not, therefore, indicate that ground (a) should be determined other than in accordance with the development plan taken as a whole. Consequently, for the reasons given above, planning permission should not be granted so ground (a) fails.

Appeals A and B on ground (g)

29. Alleged 'remedial works' to the property, said to be needed to comply with the requirements of the notice, have not been explained, let alone why these would need a contractor. There is little else to suggest that ceasing the use of the property as a C4 HMO and reverting to a C3 house would require extensive or complicated building or other works before or after tenants vacated. The removal of personal possessions would be little different to moving into or out of the property in the normal course of events, even if a removals firm was required. The last Covid-19 national lockdown was a few years ago, so there is no apparent reason for a legacy effect now that would make it more difficult to find contractors or removals firms and complete necessary arrangements by the 9 months set out in the notice.

30. I accept that tenants would need to find alternative living arrangements in earnest after the outcome of the appeals. There would also likely be significant upheaval or uncertainty, including the prospect of losing their home in circumstances not of their own doing. However, there is little before me to suggest that finding alternative accommodation would be unusually difficult or overly time consuming. I have not

been informed about any relevant contractual obligations, such as the duration of tenancy agreements or break clauses. Nor has it been suggested that any tenant would be made permanently homeless. I am also mindful that the Council has powers under section 173A(1)(b) of the Act which give it discretion to extend the period for compliance, such as in light of the information outlined above. That would, though, be a matter for the main parties whereas the period set out in the notice must be sufficient to begin with.

31. There is, therefore, little to substantiate or justify the appellants' request for the equivalent of roughly an additional 3 months, so to around 12 months in total. In these circumstances, I consider that this would be a disproportionate extension of time and unduly perpetuate the harm caused by the breach of planning control. Consequently, on the evidence before me, the 9 month period in the notice to take the steps required by it does not fall short of what should reasonably be allowed and ground (g) therefore fails.

Formal Decisions

32. It is directed that the enforcement notice is corrected as follows:

    - Section 6 time for compliance – delete *'(by 16 August 2024)'.*

33. Subject to this correction, Appeal A and Appeal B are dismissed and the enforcement notice is upheld. In Appeal A, planning permission is also refused on the application deemed to have been made under section 177(5) of the Act.

Robin Buchanan
INSPECTOR