

Hello. My name is Anthony Masters, and I wrote a submission into the Article 4 Direction consultation. I also wrote the HMO licensing submission on behalf of the University of Bath Students' Union. I am here representing myself today.

So the critical question is this: how do we judge when an Article 4 Direction is successful?

In terms of community harm, the original Arup report into the Article 4 Direction found very few things that were actually correlated with HMOs. In fact, strangely, the only crime associated with HMO density in a ward was the theft of bicycles, which I am unclear about how the Article 4 Direction will help that.

The argument is that high concentrations of HMOs cause problems, so let's put a threshold in, and therefore have HMO concentrations in different parts of the city. Because as the gentleman said, the demand for HMOs is not going to go away: by restricting new HMOs in certain areas, you're simply going to ensure they get created in different areas.

Now, if it's perfectly true that having all these HMOs around is a problem, then what you're doing is dispersing the problem throughout the city, thereby increasing costs for dealing with the situation itself. Of course, I don't believe actually that HMO concentrations are a problem. I think, actually, we can deal with problem tenants and problem landlords through existing powers. There are numerous remedies to bad neighbours, none of which involve planning policy.

So, in the end, there doesn't seem to be any clear metric about how, in a year or in five years, that we'll be able to say: 'Well, clearly, the Article 4 Direction has worked?'

It's going to have the effects as enumerated by the previous speakers, about decreasing house prices for owner-occupiers and increased rents, and numerous other problems.

On balance then, I don't see how we can introduce this Article 4 Direction. It's not going to do the things you claim it's going to do.

It's not going to improve housing or the behaviour of the tenants, which were the primary concerns of the residents who answered the consultation, which will be more effectively answered by the HMO licensing.

I urge you all to reject this Article 4 Direction. Thank-you.