

# Feedback Report and Next Steps - Review of the Licensing Scheme for Houses in Multiple Occupation

## **1. Purpose**

The purpose of this report is to summarise the feedback received from respondents following the Department for Communities' request for views on the operation and implementation of the Houses in Multiple Occupation Act (NI) 2016. This report will be shared with stakeholders including Belfast City Council NIHMO Unit and Licencing Committee, LANI, Queen's University Students' Union and Housing Rights to aid further discussion on the issues raised, before a final report is completed.

## **2. Background**

HMOs meet the housing needs of people who are single, who have temporary employment, students, low income households and migrant workers. These people have few other housing options, so HMOs are an important part of the housing mix.

The Houses in Multiple Occupation Act (NI) 2016<sup>1</sup> introduced a new licensing scheme operational from April 2019 which transferred responsibility for the HMO regulatory function from the Housing Executive to Councils and linked the new HMO regime with other critical local government functions, such as planning, building control and environmental health. Councils now have responsibility to properly and effectively regulate HMOs. HMO Licensing is mainly intended to improve conditions for occupiers..

HMO licensing is a new regulatory scheme for NI, a new program of work for Councils and at the point of transfer the scheme was essentially a registration scheme.

The licensing scheme is managed by the NI HMO Unit based in Belfast City Council; the Unit process applications and enforce the regulations across Northern Ireland ensuring the terms and conditions of the licences are complied with by landlords. Licenses are normally issued for a 5 year

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<sup>1</sup> [Houses in Multiple Occupation Act \(Northern Ireland\) 2016 \(legislation.gov.uk\)](https://legislation.gov.uk/ukni/2016/1/1)

duration. The decision on whether to award a licence is the responsibility of the local council in which the HMO is located.

- At the point of transfer there were 6,276 registered HMO properties.
- As the new scheme changed the definition of a HMO, some properties including smaller self-contained flats and university accommodation are no longer required to have a licence.
- Properties registered under the old scheme are only required to apply for a licence when the registration has expired.
- There are currently 3,928 licenced HMOs.
- In the last year, 1,160 properties have been inspected and 1,051 licences have been issued.
- Since the introduction of the scheme 33 Fixed Penalty Notices (FPNs) have been issued for offences such as unlicenced HMOs and overcrowding.

Quarterly oversight meetings are held between Department for Communities, NIHMO Unit and Northern Ireland Fire and Rescue Services to monitor performance and drive improvement.

### **3. Policy and Legislative basis of the HMO Act and Licencing Scheme**

The HMO licensing scheme in Northern Ireland was introduced to improve standards by ensuring that a landlord or any agent is a fit and proper person, and by checking the standards of physical accommodation as well as tenancy management standards. This provides protection to HMO tenants and their neighbours by making sure accommodation is safe, well managed and of good quality.

The licencing scheme transferred responsibility for regulating HMOs from the Northern Ireland Housing Executive to local councils, with the lead council as Belfast City Council. This was due to the links between the new regime and councils' new powers around planning and existing powers for building control, environmental health and regulation of the private rented sector.

The “fit and proper person” test was based on a similar requirement introduced in Scotland intended to improve the management of HMOS. This means the council must be satisfied that the person applying for an HMO licence is a "fit and proper person" to hold a licence. The same test applies to any person managing the premises, and any director or partner in a company or organisation which owns or manages the HMO.

The licencing scheme amended the definition of an HMO. This revised system of regulation will allow the targeting of houses in a way that is proportionate to the risk presented and will address the added risk to safety associated with living in HMOs.

The licencing scheme introduced greater and more comprehensive enforcement powers to ensure that any deviation from the licensing system is penalised in a timely and proportionate manner. Fixed penalty notices for example avoid the need to proceed directly to court action for lesser offences.

The scheme also includes new requirements for the minimum standards of accommodation, including minimum bedroom sizes, requirements regarding overcrowding and energy performance certificates.

#### **4. The Requirement to Review**

The Department for Communities made a commitment to review the implementation of the Act when it had been in operation for two years. It should be noted that the scheme is still in its early stages and teething problems are to be expected with significant change of this type.

This review relates to the operation of the licensing of houses in multiple occupation in accordance with the Houses in Multiple Occupation Act (Northern Ireland) 2016 and the Houses in Multiple Occupation (Northern Ireland) Regulations 2019, which dictate how the new licensing scheme should operate.

The review looked at the impact of the regulatory scheme on councils in terms of resources, guidance and legislation with a view to identifying any changes necessary to ensure the legislation achieves its policy intent.

It is important to note that the Covid-19 pandemic and the associated lockdowns have meant that the scheme has faced significant challenges in its two years of operation with many staff working from home and the difficulties the restrictions have caused for example when inspecting properties for licence applications.

The scope of this review and its Terms of Reference excludes the historical overprovision of HMOs in the South Belfast area. The overprovision rules relate to the granting of a new licence and not to the transfer of an existing licence. It was acknowledged that the policy intention is to prevent new areas being over-provided in the future. It does not have the scope to reduce over-provision in existing areas that already have a high number of HMOs.

## **5. Terms of Reference**

The Terms of Reference (ToR) for the Review were agreed in October 2020. An online survey for responses opened on 23 December 2020 and closed on 5 March 2021. The review was not intended to be a full public consultation as the legislation had been previously been consulted on with stakeholders invited to give their views.

The ToR set out to assess that the NEW scheme is meeting its objectives, namely:

- improved standards by ensuring that a landlord or agent is a fit and proper person;
- minimum standards of physical accommodation;
- tenancy management standards to ensure accommodation is safe, well managed and of good quality;
- targeting of houses in a way that is proportionate to the risk presented;

- the provision of exemptions where there is comparable regulation that meets or exceeds the requirements of the scheme;
- addressing the added risk to safety associated with living in HMOs;
- an assessment of the current delivery model and consider if it is meeting the needs expected of the licensing scheme and providing value for money which includes a detailed assessment of the resources necessary to deliver the scheme including any gaps in resourcing;
- an assessment of the communication, guidance and assistance in place to assist landlords, managing agents and tenants understand the requirements of the HMO licensing scheme;
- an assessment of any operational/legislative difficulties/teething issues experienced implementing the new HMO licensing scheme which may require further development to enhance and improve the workings of the scheme.

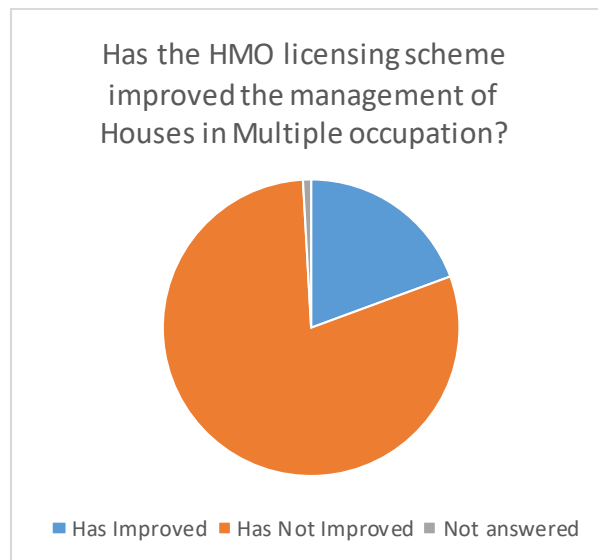
## **6. Survey Results – Summary**

The Department received 227 responses to the survey. 189 responses from landlords or managing agents of HMOs, 4 responses from councils, 4 from HMO tenants, 16 from residents or residents groups and 14 responses from others including Housing Rights, Department of Justice and Queens University Students' Union.



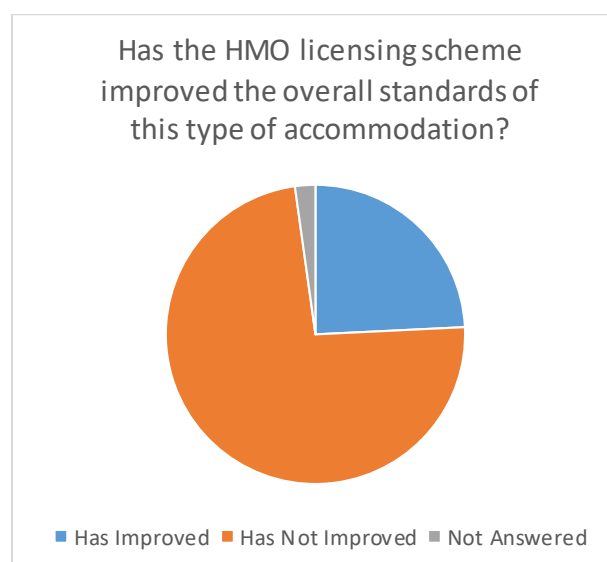
It is clear from the chart above that the vast majority of responses came from landlords/managing agents of HMOs. The survey was available to the public on the NiDirect website. The Department does not hold contact details or personal data for HMO tenants so were unable to reach this group directly. A further shorter survey for HMO tenants was later carried out on the Department's behalf by Housing Rights, the results of which will be shown later in this report.

**Question 1. Has the HMO licensing scheme improved the management of Houses in Multiple occupation?**



From the above chart it is clear that many respondents did not feel there had been a significant improvement in management of HMOs since the introduction of the licensing scheme. 32 respondents who answered that the scheme had not improved the management of HMOs commented that they could see no difference between the licensing scheme and the previous registration scheme in terms of management. Of the respondents who felt that there had been improvements, a frequent comment was that the scheme ensured a “more level playing field” with all properties having to meet the same standards.

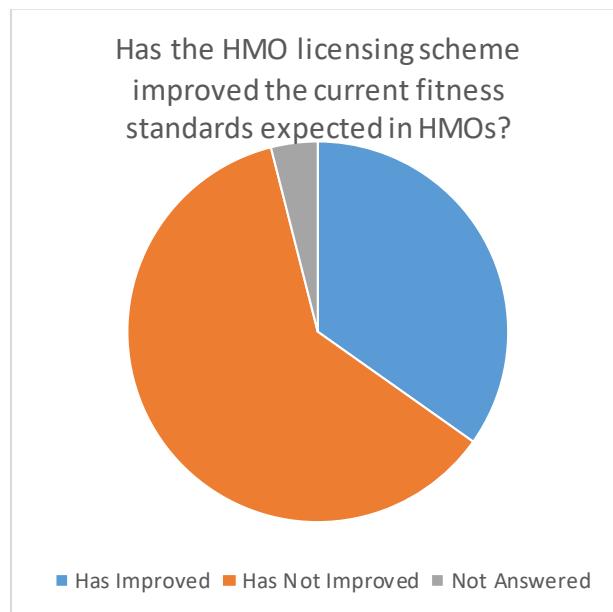
**Question 2. Has the HMO licensing scheme improved the overall standards of this type of accommodation?**





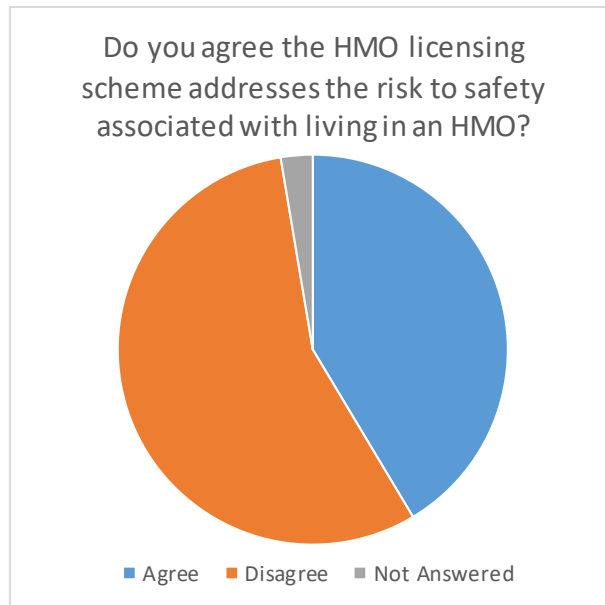
While the majority of responses to this question did not feel that the licensing scheme had improved the standards of HMO accommodation, 54 of those respondents commented that they could see no significant difference between the licensing scheme and the old scheme in terms of accommodation standards. There were also some comments regarding minimum bedroom size of 6.5m with bedrooms that had been allowed under the old scheme no longer meeting this requirement.

**Question 3. Has the HMO licensing scheme improved the current fitness standards expected in HMOs?**



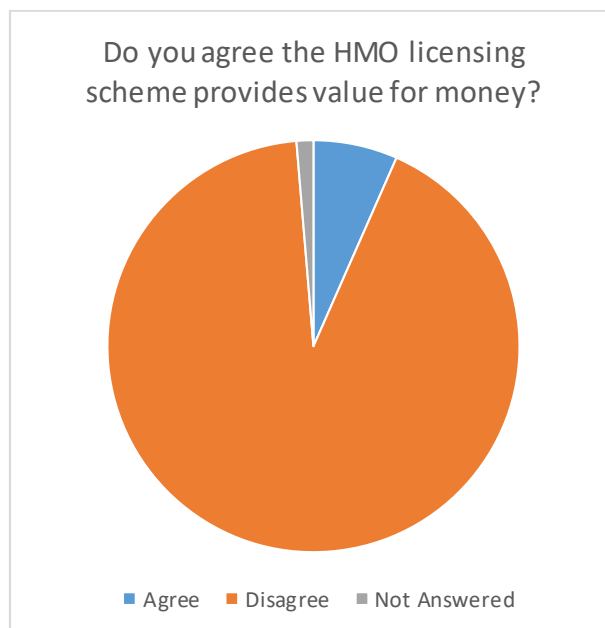
Again of the 139 respondents who did not feel that the licensing scheme had improved fitness standards 51 commented that there was little difference between the new scheme and the old scheme. Many of the fitness standards are similar to the old scheme so many HMOs registered under the old scheme would already meet the standards of the new scheme. There were some positive comments regarding the energy performance certificates (EPCs), with recognition that this helps tenants to save money on heating costs and has environmental benefits.

**Question 4. Do you agree the HMO licensing scheme addresses the risk to safety associated with living in an HMO?**



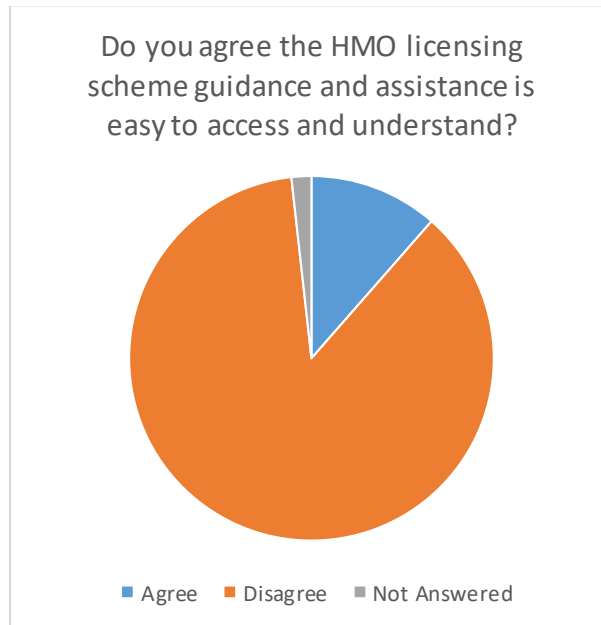
Of the 124 responses which did not agree that the licensing scheme addresses the risk to safety 33 responses stated that there was no difference to the previous scheme/safety standards were already high.

**Question 5. Do you agree the HMO licensing scheme provides value for money?**



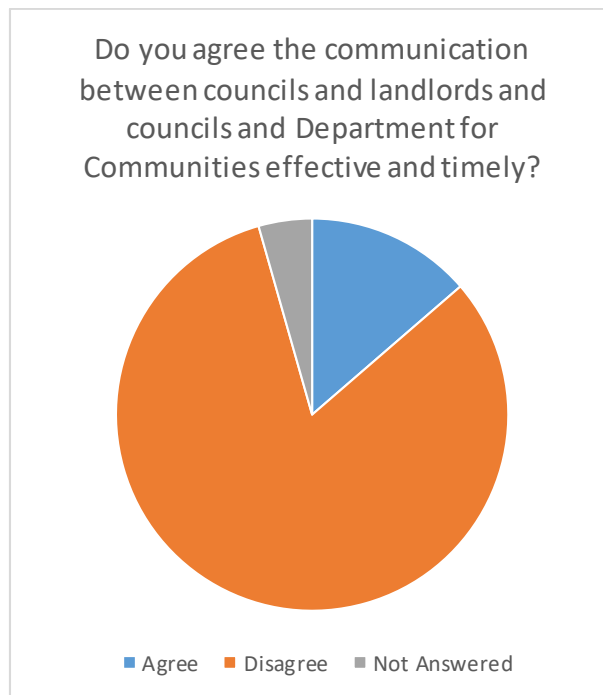
The majority of responses did not agree that the licensing scheme provides value for money. However while fees have increased, the scheme is designed to be self-funding on a revenue neutral basis.

**Question 6. Do you agree the HMO licensing scheme guidance and assistance is easy to access and understand?**



The majority of responses did not agree that the licensing scheme guidance is easy to access or understand. It is clear that the guidance needs to be streamlined to make it easier to understand. The guidance is available online and is publicly accessible on Belfast City Council website. The tenant responses to this survey and the further survey carried out on behalf of the Department by Housing Rights shows that there is little tenant awareness of the guidance and the standards that should be provided in a licenced HMO.

**Question 7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?**



The majority of respondents did not agree that communication is effective and timely. There were many comments regarding the issue of communication between councils and landlords, especially regarding the issuing of renewal reminders and the difficulty in contacting the NIHMO unit by telephone. These comment have been added to the comments regarding the administration and delivery of the scheme and will be passed to Belfast City Council for response.

**Question 8. Please provide your views on the administration and delivery of the scheme.**

There were over 500 comments from respondents on the administration and operational delivery of the scheme. Many of these comments were about the introduction of the scheme including a landlord training course, IT system difficulties, length of time taken to process a licence and other issues. As these areas are the responsibility of NIHMO unit, these comments will be passed to Belfast City Council for response.

## **7. Survey Results by Respondent Group**

As indicated above, the majority of responses came from landlords/managing agents of HMOs. The department has attempted to disaggregate the responses by broad respondent group to consider if views were broadly aligned or differed significantly. The responses are summarised in the tables below and show that the groups were broadly in agreement regarding the licensing scheme apart from council respondents who viewed the scheme in a more positive way. While landlords/managing agents, tenants and resident groups tended to answer the questions with more negative responses, the reasons for this were quite different when looking at the comments provided. Some landlords/managing agents tended to comment that the scheme was overly regulated while tenants and residents felt that there were aspects of the scheme that did not go far enough in terms of regulation and enforcement.

## Responses by Response Group

The tables below show the responses broken down by respondent group. The groups are: landlords and managing agents including Landlords' Association Northern Ireland, councils, tenants and Housing Rights, residents and residents groups and others.

### Landlords/Managing Agents including LANI

Question	Q1. Has the HMO licencing scheme improved the management of Houses in Multiple occupation?			Q2. Has the HMO licencing scheme improved the overall standards of this type of accommodation?			Q3. Has the HMO licencing scheme improved the current fitness standards expected in HMOs?			Q4. Do you agree the HMO licencing scheme addresses the risk to safety associated with living in an HMO?			Q5. Do you agree the HMO licencing scheme provides value for money?			Q6. Do you agree the HMO licencing scheme guidance and assistance is easy to access and understand?			Q7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?		
	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered
<b>Landlords/Managing Agents (including LANI)</b>	33	156	1	46	141	3	69	115	6	85	101	4	9	181	0	16	174	0	27	159	4
<b>%</b>	17%	82%	1%	24%	74%	2%	36%	61%	4%	45%	53%	2%	5%	95%	0%	8%	92%	0%	14%	84%	2%

### Councils

Question	Q1. Has the HMO licencing scheme improved the management of Houses in Multiple occupation?			Q2. Has the HMO licencing scheme improved the overall standards of this type of accommodation?			Q3. Has the HMO licencing scheme improved the current fitness standards expected in HMOs?			Q4. Do you agree the HMO licencing scheme addresses the risk to safety associated with living in an HMO?			Q5. Do you agree the HMO licencing scheme provides value for money?			Q6. Do you agree the HMO licencing scheme guidance and assistance is easy to access and understand?			Q7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?		
	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered
<b>Councils</b>	3	0	1	3	1	0	3	0	1	4	0	0	2	1	1	4	0	0	3	0	1
<b>%</b>	75%	0%	25%	75%	25%	0%	75%	0%	25%	100%	0%	0%	50%	25%	25%	100%	0%	0%	75%	0%	25%

## Tenants including Housing Rights and Queens University Students' Union

Question	Q1. Has the HMO licencing scheme improved the management of Houses in Multiple occupation?			Q2. Has the HMO licencing scheme improved the overall standards of this type of accommodation?			Q3. Has the HMO licencing scheme improved the current fitness standards expected in HMOs?			Q4. Do you agree the HMO licencing scheme addresses the risk to safety associated with living in an HMO?			Q5. Do you agree the HMO licencing scheme provides value for money?			Q6. Do you agree the HMO licencing scheme guidance and assistance is easy to access and understand?			Q7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?		
	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered
<b>Tenants (including Housing Rights and QBSU)</b>	2	4	0	2	4	0	1	5	0	0	6	0	1	5	0	0	6	0	0	6	0
<b>%</b>	33%	67%	0%	33%	67%	0%	17%	83%	0%	0%	100%	0%	17%	83%	0%	0%	100%	0%	0%	100%	0%

## Residents and Residents' Groups

Question	Q1. Has the HMO licencing scheme improved the management of Houses in Multiple occupation?			Q2. Has the HMO licencing scheme improved the overall standards of this type of accommodation?			Q3. Has the HMO licencing scheme improved the current fitness standards expected in HMOs?			Q4. Do you agree the HMO licencing scheme addresses the risk to safety associated with living in an HMO?			Q5. Do you agree the HMO licencing scheme provides value for money?			Q6. Do you agree the HMO licencing scheme guidance and assistance is easy to access and understand?			Q7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?		
	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered
<b>Residents and Residents' Groups</b>	3	13	0	3	12	1	4	11	1	2	13	1	1	14	1	3	10	3	0	12	4
<b>%</b>	19%	81%	0%	19%	75%	6%	25%	69%	6%	13%	81%	6%	6%	88%	6%	19%	62%	19%	0%	75%	25%

### Others including DOJ

Question	Q1. Has the HMO licencing scheme improved the management of Houses in Multiple occupation?			Q2. Has the HMO licencing scheme improved the overall standards of this type of accommodation?			Q3. Has the HMO licencing scheme improved the current fitness standards expected in HMOs?			Q4. Do you agree the HMO licencing scheme addresses the risk to safety associated with living in an HMO?			Q5. Do you agree the HMO licencing scheme provides value for money?			Q6. Do you agree the HMO licencing scheme guidance and assistance is easy to access and understand?			Q7. Do you agree the communication between councils and landlords and councils and Department for Communities effective and timely?		
	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Has Improved	Has Not Improved	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered	Agree	Disagree	Not answered
<b>Others</b>	3	8	0	1	9	1	3	7	1	3	7	1	3	7	1	2	8	1	3	7	1
<b>%</b>	27%	73%	0%	9%	82%	9%	27%	64%	9%	27%	64%	9%	27%	64%	9%	18%	73%	9%	27%	64%	9%



## **8. Further Survey of HMO Tenants**

A further short survey of HMO tenants carried out on the Departments' behalf by Housing Rights, 13 HMO tenants responded to the simplified survey online.

The questions asked are as below.

**A) The council can only give a landlord a licence if the landlord is a 'fit and proper person', the property is safe and meets all necessary standards, the landlord has proper management processes and the landlord has a policy for dealing with anti-social behaviour. Do you think the new licensing scheme has:**

### **1. Improved conditions in shared housing?**

Nine respondents answered this question, 56% percent thought that the new scheme had improved conditions, 22% did not think conditions had improved and 22% answered that they didn't know whether conditions had improved.

### **2. Made shared housing safer?**

Nine respondents answered this question, 22% thought that the scheme had made shared housing safer, 33% did not think it had made housing safer and 44% answered that they didn't know whether it had made it safer.

### **3. Improved how landlords manage shared housing?**

Nine respondents answered this question, 44% thought that the new scheme had improved how landlords manage shared housing, 22% thought that the new scheme had not improved management and 22% answered that they didn't know.

**B) Do you know where to find guidance and information about the HMO licensing scheme for shared housing?**

Nine respondents answered this question, with 55% stating they knew where to find advice and guidance and 44% stating they did not.

**C) If you have read the guidance about HMOs, did you find it easy to understand?**

Five respondents answered this question with 80% stating they found it easy to understand and 20% that did not.

## **9. Main Themes**

The main themes arising from the responses can be summarised as:

- Operational Delivery including IT system, guidance, fees, communication, landlord training.
- Standards, including bedroom size, confusion around conflicting advice.
- Overprovision, planning permission process being applied when renewing license or on sale or transfer of property.
- Many responses were positive about fire safety standards and Energy Performance Certificates.
- Tenants unaware of how to check if property is HMO licensed and the standards expected.
- Residents' concerns regarding refuse collection/littering and anti-social behaviour.
- Some concerns expressed around apparent lack of enforcement on unlicensed HMOs.

## **10. Breakdown of Comments Received**

The comments received were broken down into categories. A table of comments regarding the HMO legislation can be found at Annex A. A list of comments regarding the operational delivery of the scheme can be found at Annex B.

## **11. Next Steps**

This report will be shared with stakeholders including Belfast City Council NIHMO Unit and Licensing Committee, LANI, Queen's University Students'

Union and Housing Rights with meetings arranged to discuss the themes raised as part of this review.

Issues raised around the operational delivery of the scheme including the IT system, communication, landlord training and information will be passed to Belfast City Council NIHMO unit for response.

A final report will be produced with outcomes and recommendations, including any necessary legislative changes to be made to ensure the scheme is meeting its policy intent.

Annex A

Table of comments regarding HMO legislation

<b><u>PART 1: Meaning of “House in Multiple Occupation”</u></b>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#"><u>Section 1</u></a>	Meaning of “house in multiple occupation”	<p>1. Regulations should be laid pursuant to paragraph 9(c) to restrict the number of other persons who can share accommodation with the owner or any member of the owner’s household without it being licensed. This will ensure that loopholes allowing the owners of properties to live in the house and negate the need for the house to be subject to HMO licensing. See comments in relation to schedule 1 – (Council - BCC)</p> <p>2. This is a comment on the changes in the definition of HMOs - a large number of properties have dropped out of this classification and are now subject to the inadequate fitness standard. A number of these properties currently sit in limbo as it was decided that pre-existing registration as an HMO remained in place, even though the properties no longer meet the definition of an HMO. The fitness standard does not provide councils with sufficient powers to deal with fire safety issues in former HMOs. – (Council – unidentified)</p> <p>3. As a housing professional I know that there is now a lacking in the new legislation that is not covered in The Private Tenancies NI Order 2006. For example in self-contained flats within one converted building, there is now no provision for a fire escape from say a third floor level. The two pieces of legislation need to be married into one. – (Other –EHO)</p> <p>4. The reclassification of HMOs makes the system overly complicated. – (Other – EHO)</p> <p>5. The HMO rules applied may be appropriate for much larger, and more densely populated properties, but not two storey, 3 resident, properties – (Landlord/Managing Agent)</p> <p>6. Shambolic, truly. I believe the management of licensing does nothing to better the safety of tenants and has sent many landlords underground living in fear of reprisals. It is the most strict implementation of the legislation in all of the UK and is poorly distributed across (NI). I believe there is a simple solution - changing the definition of a HMO from 3 or more to 5 or more like the mainland. How many 2 bedroom houses and flats does the dept manage given bedrooms can be shared? I'm assuming none! – (Landlord/Managing Agent)</p> <p>7. BUT!!! WHY ONLY 3 UNRELATED PEOPLE? This is not the case in the rest of UK or ROI. It is far, far too restrictive and if the current issues aren't sorted Belfast City Council will have a lot of derelict properties above</p>

		small ground floor flats. This in itself will be detrimental to the safety of residents and to the development of the city – (Landlord/Managing Agent)
		8. Removed some flats from multiple unit building. Now have non HMO and HMO properties in same building. Decreasing fire safety. – (Landlord/Managing Agent)
		9. Not in the least, too many let properties are now exempt as they're broken down into smaller units - we have 10 tenants in one property with NO regulation just because they're divided into 5 flats and yet a few doors away we have one 3 bed flat that is subjected to a ridiculous amount of regulation and red tape – (Landlord/Managing Agent)
		10. I find it strange that when a number of 2 bed flats in a block were previously classified as an HMO they are now not - a reduction in scope. – (Landlord/Managing Agent)
		11. There is inconsistency and confusion re levels of protection offered within HMOs that contain, say, two flats. – (Landlord/Managing Agent)
		12. Only 3 bedded apartments and upwards are HMO's. Therefore what is underneath i.e. 2 and one bedded are not. Therefore potential risk. (Landlord/Managing Agent)
		13. Following the introduction of the new HMO regulations and new definition of HMO, this resulted in a significant number of HMO properties registered under the old regime, no longer within the scope of the new licencing regime. Those properties would have (under the old regime) had in place and maintained fire safety measures, such as emergency lighting, fire alarm systems, fire escape routes etc. It is concerning there is no longer any legislative provision (for Councils or NIFRS) to address fire safety concerns in these properties, ie fire safety concerns within a block of 2 bedroom flats/apartments, which often are occupied by vulnerable adults unable to access the social rented accommodation. (Landlord/Managing Agent)
		14. 1 & 2 bedroom units have been removed from HMO protection/inspection. Hence a multi-unit properties are no-longer covered by HMO standard. I have 6 flats in one building, was an HMO, now only one flat is an HMO, 3 bed on third floor, all floors below are no-longer HMO, creating a risk. (Landlord/Managing Agent)
		15. The answer is NO, it has not reduced the risks, indeed it has increased the risks as previously the HMO considered the “building” that the accommodation was located in and now it only considers the individual rateable hereditament. Previously therefore a building comprising of 3 X 2 bedroom flats was considered an HMO and all occupants benefited from the protection that the previous HMO registration scheme provided, but under the new licensing scheme this building is no longer considered to be an HMO and is not therefore regulated under the scheme. If you consider the

		<p>scenario where you have a 4 or 5 bedroom HMO on the first and second floor of a building with only a 1 or 2 bedroom flat on the ground floor, as would be fairly common in the University area, then whilst the tenants in the 4 or 5 bedroom upper floor flat benefit from the protection afforded under the licensing scheme, the ground floor tenants do not, but perhaps more importantly, as there is no regulation of the ground floor 1 or 2 bedroom flat, the protection afforded to the HMO flat situated on the upper floors is compromised. Why should tenants in an upper floor HMO in a scenario such as this be entitled to a lesser standard of protection, and indeed the tenants in the ground floor flat to no protection under the scheme? (Landlord/Managing Agent)</p> <p>16. No as previously the entire house was considered a hmo - as opposed to part of it where you may have two/three self-contained flats. (Landlord/Managing Agent)</p> <p>17. By "addresses" do you mean it has reduced the risk to safety or that one is now more aware?? Not sure I fully understand the question. May be a problem where landlords may consider dividing up HMO into 1 or 2 bedroomed apartments to avoid licensing requirements. This would surely not help? (Landlord/Managing Agent)</p> <p>18. Myself and friends agree that were we have an upper flat with 4-6 bedrooms and a two bedroom ground floor flat, the hmo do not inspect the ground floor flat therefore it could be in a poor condition and in some properties more of a fire risk as previously the whole property was inspected and any issues would be sorted etc. (Landlord/Managing Agent)</p> <p>19. In my particular case the HMO standards now only refer to the first floor flat of the building, and not to the whole building including the ground floor flat as it had done previously. A downstairs two-bed flat therefore does not have to meet standards which would inevitably keep those occupants in the first floor safer. Where is the reasoning here? (Landlord/Managing Agent)</p> <p>20. Where the whole building was previously subject to HMO standards and inspections, one and two bedroom flats within such buildings have now been taken out of HMO protection, creating a new risk for the whole building. (LANI)</p>
<a href="#">Section 2</a>	Definition of living accommodation	<p>1. The Council would welcome the insertion of provisions in Section 2(4)(c) to deal with circumstances in which meals are provided (when no other kitchen facilities are available). Under the existing definition, the Council is concerned that a number of properties that would previously have been subject to the licensing regime may fall out of the definition resulting in no regulation for such properties were communal catering arrangements are provided e.g. for temporary shelters for homelessness or displaced persons.</p>

		<p>(4) For the purposes of subsection (1)(b)(ii), the “basic amenities” are—</p> <p>(a) a toilet,</p> <p>(b) personal washing facilities, and</p> <p>(c) facilities for the preparation or provision of cooked food. – (Council – BCC)</p>
<a href="#">Section 3</a>	Cases where person is treated as occupying accommodation as only or main residence	1. The council does not believe that there is currently a need for regulations to be made pursuant to section 3(5). – (Council – BCC)
<a href="#">Section 4</a>	Persons who are members of the same household	<p>1. The council does not believe that there is currently a need for regulations to be made pursuant to section 4(1)(c). – (Council – BCC)</p> <p>2. Over regulated. Administration overload. Families can have any number of people in a house so HMO licensing is contradictory. – (Landlord/Managing Agent)</p>
<a href="#">Section 5</a>	Notice regarding evidence of household	<p>1. This section applies if the council believes, “on reasonable grounds”..., the council recognises the need for reasonable grounds, however such a threshold is very hard to achieve when the co-operation of the owner / manager / occupants isn’t forthcoming. The Council would welcome some discussion about how this can be improved with the Department, to include a general power of obstruction where a person intentionally obstructs an officer in the exercise of powers under the Act– (Council – BCC)</p> <p>2. There are no checks performed by landlords / statutory bodies as to the actual number of tenants living in an HMO. – (Resident)</p>
<a href="#">Section 6</a>	Notice regarding continuation of occupation	1. The council would request that the 4 month period referred to in Section 6(1)(b) & 6(4) is extended to 6 months, as large numbers of students leave in the first week of May and don’t in some cases return to the beginning of October. – (Council – BCC)

**[PART 2: Licensing of Houses in Multiple Occupation](#)**

[Requirement for and issue of licences](#)

Section	Description	Comments
<a href="#">Section 7</a>	Requirements of HMOs to be licensed	<p>No comments – (Council – BCC)</p> <p>1. I think the requirements under the scheme are suitable and represent a good balance of the interests between the landlord, tenants, neighbours, and council. However compliance with the requirements are poor in practice, demonstrating insufficient enforcement. In my experience of looking at rooms available in shared houses which clearly fitted the definition of an HMO, zero were properly registered as HMOs (note: I made contact with 5 - 10 landlords in summer 2020 in the BT4/BT5 area using websites such as Spareroom and Gumtree). My current landlord has told me to my face that he does not think he needs to comply with any duties as a landlord, simply because he considers the rent to be cheap. As a result we face constant problems with recycling bins not being available, lack of safe fire exits, noise from plumbing problems bothering neighbours, etc. So the scheme sounds great but does no good for me or my neighbours. (HMO Tenant)</p> <p>2. The licence scheme by its nature covers those houses in multiple occupation where the owner is prepared to seek a license. There does not seem to be any provision for multiple occupation houses which are not licenced. This appears to be a larger section of the market, effectively some landlords meeting housing needs with no scrutiny, compliance costs or license costs. In my opinion the un-licenced properties are the ones with the most significant safety and security complications with no visible enforcement. So if identical properties are available on the market - the landlord who does not have a HMO has a significant profit incentive not to apply for one. The risk of discovery and penalty is almost refreshing zero. By virtue of the fact that the landlord applies for the licence she/he is already committed morally and financially to the provision of a high standard of housing provision. I know of several properties of substantially bigger than 20 occupants that have not been required to provide the licence. In some cases I have been inside these properties and the standard of accommodation is excellent with high levels of compliance for Health &amp; Safety. But no license or any question of being required to be licenced. (Landlord/Managing Agent)</p> <p>3. An ongoing concern is the seemingly low rate of enforcement action taken in terms of issuing penalties. Statistics suggest that, despite being proactive in some ways, councils tend to have low enforcement rates against landlords who breach requirements. Landlords can use the temporary exemption notices and this may explain what appears to be low enforcement rates. A FOI request for statistics from April to July 2019</p>



		<p>indicated a lack of enforcement compared to what may be expected:</p> <table border="1"> <thead> <tr> <th>Section</th> <th>Description</th> <th>Notice type</th> <th>No. of cases</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>15(3) Temporary exemption notice</td> <td>Part 2</td> <td>1</td> </tr> <tr> <td>b.</td> <td>30(1) Unlicensed HMO - owner</td> <td>FPN</td> <td>1</td> </tr> <tr> <td>c.</td> <td>30(2) Unlicensed HMO – managing agent</td> <td>FPN</td> <td>1</td> </tr> <tr> <td>d.</td> <td>31(1) Exceeding licensed occupancy</td> <td>FPN</td> <td>2</td> </tr> <tr> <td>e.</td> <td>35(3) Rectification notice</td> <td>Part 3</td> <td>3</td> </tr> </tbody> </table> <p>(Housing Rights)</p> <p>4. While the Standard Licence Conditions set out standards for HMOs, these need much better enforcement - as stated above they are often ignored by landlords.  Because of the pandemic, student HMOs sparsely populated and so not a representative time to judge how well or not the scheme is working. Who knows whether illegal HMOs are still operating?  Limited implementation of legislation. Landlords not brought to book for numerous issues of neglect in Holyland.  As I said previously, limited enforcement and more staff needed to regularly inspect. More equality for residents impacted by over development of HMOs needed.  As there doesn't seem to be any penalty for not signing up to the scheme, many landlords don't and therefore don't change how their properties are managed.  (Resident)</p>	Section	Description	Notice type	No. of cases	a.	15(3) Temporary exemption notice	Part 2	1	b.	30(1) Unlicensed HMO - owner	FPN	1	c.	30(2) Unlicensed HMO – managing agent	FPN	1	d.	31(1) Exceeding licensed occupancy	FPN	2	e.	35(3) Rectification notice	Part 3	3
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<p><a href="#">Section 8</a></p>	<p>Applications for HMO licence</p>	<p>1. Council believes that Section 8 2(a) should be amended.</p> <p>As the Department will be aware, there are a significant number of HMO premises which have not been assessed through the planning permission process (which assesses applications against The Houses in Multiple Occupation (HMOs) Subject Plan for Belfast City Council Area 2015 and do not have the benefit of a Certificate of Lawful Use. This provision has created uncertainty and it is respectfully submitted that the only reasonable basis upon which it can be determined that the operation of the premises would not be a breach of planning control is through the determination of a formal application for a Certificate of Lawful Use by Planning Service.</p> <p>Council would therefore recommend that this provision should be amended to state that the Council must be satisfied that the property has planning permission or a Certificate of Lawful Use. It is also recommended that this amended test must apply to both new and renewal applications.</p> <p>Section 8(2)(e) – states that when considering an application for a HMO licence, the property must be fit for habitation. It has been widely acknowledged that the</p>																								

		<p>current statutory fitness standard is out of date and should be replaced by a modern standard. The current Fitness Standard (Housing (NI) Order 1992) is a pass or fail model and dwellings are either fit or unfit. It does not give an indication of whether a dwelling has just failed or if it is grossly unfit. With fitness levels currently at 1.6 % in the privately rented sector (NIHE, 2016) it doesn't provide useful data to inform Housing strategies or policy. It is no longer a comprehensive measure of the suitability of a dwelling for occupation. It fails to address the areas of thermal comfort and safety among others. An example of this is that it only requires a fixed heat source in the main living-room and a socket in any other living/bedroom in order to pass the Heating element of the standard.</p> <p>The fitness standard should be replaced by an updated fitness standard or Housing Health and Safety Rating system in due course.</p> <p>See comments in Schedule 2 regarding the procedural requirements relating to an application for an HMO licence. – (Council – BCC)</p>
<p><a href="#">Section 9</a></p>	<p>Breach of planning control</p>	<p>1. See comments re Section 8– (Council – BCC)</p> <p>2. Applicants do not have to show planning approval for the property to operate as a HMO. This in my view is wrong. All HMOs should require planning approval. This would show evidence that the property is fit to be used as a HMO. – (Landlord/Managing Agent)</p> <p>3. I think that HMO all need to have good planning permission – (Other – Single let landlord)</p> <p>4. I agree with the need for planning for HMOs but confused regarding the cludd and various versions of this. – (Landlord/Managing Agent)</p> <p>5. I have no issue with safety compliance needs. I feel the following are unnecessary additions: Expensive full planning permission &amp; drawings for change of use that require no physical changes to internal &amp; external layout. – (Landlord/Managing Agent)</p> <p>6. The Department is disregarding that Belfast Council (The NI HMO Unit) has not been applying the 'over-provision' clauses in the HMO Act and the constraints set out in the 2008 HMO Subject Plan. This is despite this non-compliance being raised with both the Council and Department. As a consequence, HMO planning permissions and licenses are being issued contrary to the provisions of the Act and the Subject Plan. Contrary to the Act, the problems with over-provision of Houses of Multiple Occupancy are not abating. - (Resident)</p> <p>7. We submit that the Department should consider regularising the existing HMO stock, by allowing an existing property, especially those which have been HMO's since before 2004 to be granted planning as</p>

		HMO properties. – (University Quarter Business Association)
		8. The council introduced guidance for completing applications, seen by landlords for the first time at the launch of the scheme. The guidance advised landlords to obtain planning permission or a CLUD prior to applying to renew a licence on an existing HMO property, stating that if they didn't have it their application might be refused. None of that was communicated to landlords prior to the launch of the scheme despite the significant amount of preparation and time needed to obtain a CLUD. The council later conceded that the policy was in breach of the HMO legislation. (LANI)
<a href="#">Section 10</a>	Fit & proper persons	1. No comments – (Council – BCC)
		2. It appears that a Licensee must be financially liquid, I can see no other requirement. I don't see how this differs from past practise, and I can't see how it would deter rogues. It's not clear how poorly performing Licensees are monitored in their tenure, or how this information would be subsequently used. – (Landlord/Managing Agent)
		3. In what world do the department think that a newspaper ad which has to be in place for a set period otherwise they are 'unfit' is right — is it a test? (Landlord/Managing Agent)
		4. Landlords already had to be deemed "suitable persons". Additionally, requesting a guarantee of sufficient finance in unprecedented times, has no weight. (Landlord/Managing Agent)
		5. A crucial element of the HMO licensing scheme is the requirement that the property be managed by a fit and proper person. We are concerned that an apparent lack of resources in council Environmental Health departments and an overreliance on informal resolution of complaints from tenants means that many rogue landlords escape the formal consequences of breaching landlord and tenant law and fly under the radar of the fit and proper person test. (Housing Rights)
<a href="#">Section 11</a>	Satisfactory management arrangements	1. No comments
<a href="#">Section 12</a>	Overprovision	1. Under this section, the Council is under a mandatory obligation to have regard to the issue of overprovision when assessing “new” applications. Moreover it must be satisfied that the grant of the licence will not result in overprovision of HMO accommodation in the locality.  The wording of this particular provision should be reviewed by DFC to provide greater clarity for those seeking to purchase existing licensed HMO properties. This would also impact on Section 29(5)(b). – (Council – BCC)

		<p>2. It is not very easy to follow. When issues like the Council's emerging proposal to not transfer the HMO licence to the new owners on change of ownership (if they judge that there is over-provision) it leads landlords to question how the legislation could be interpreted in this way and leads to widespread confusion. Also, if the N Ireland economy were to improve, Belfast city will need all the accommodation it can get. Otherwise, it would become like Dublin with rents that are completely prohibitive. The current system seems to be based on the presumption that the Belfast economy will never improve. – (Landlord/Managing Agent)</p>
		<p>3. I feel that the scheme has not helped at all. As it is, I am selling up. And this is also curtailed by this legislation. I am told now by LANI that if I have all my ducks lined up like CLUG etc., the purchaser might not obtain a new licence on the ruling of over provision. How can someone think up such a vile idea. Imagine selling a bar or an off licence and using this rule in a similar way. There would be uproar. Again the landlord is easy prey. Please change this, for everyone. – (Landlord/Managing Agent)</p>
		<p>4. The legislation is not retrospective therefore Holyland is still at least twice Over the 30% HMO limit. – (Resident)</p>
		<p>5. According to DfC, the purpose of the HMO licensing scheme is to "properly and effectively regulate HMOs to ensure the health, safety and well-being of the occupants and at the same time minimise any negative impacts on the neighbourhood and surrounding area". It is clear that these objectives are not being achieved in areas where there is over-provision of HMOs, particularly the wider University area of S Belfast. – (Resident)</p>
		<p>6. Over provision of HMO's and monitoring of such has not been effectively addressed areas that do not have a strong community voice would appear to have no level of provision monitoring taking place. There appears to be two lists of HMO in operation the old list and the new with no provision to address over provision. There are no obvious working practises between council and the department. – (Resident)</p>
		<p>7. The Department seems unaware or is disregarding that Belfast Council (the NI HMO Unit) has not been applying the 'over-provision' clauses in the HMO Act and the constraints set out in the 2008 HMO Subject Plan. This is despite this non-compliance being raised with both the Council and Department. As a consequence, HMO planning permissions and licenses are being issued contrary to the provisions of the Act and the Subject Plan. It follows that, contrary to the spirit of the Act, the perennial problems with over-provision of Houses of Multiple Occupancy are not abating. – (Resident)</p>
		<p>8. This discussion of clause 12, which governs the approach to the granting (rather than renewal) of HMO licences, recognises the distinction between new and existing HMOs. The passage is consonant with the</p>

		<p>definition of new applications identified above, in which 'new' denotes that there is, at the time of application, no existing HMO licence. (University Quarter Business Association)</p> <p>9. Over provision in areas is also in something of a grey area where there are residents capable of lobbying against over provision then some moves may be made to address issue however there appears to be no statutory obligation to address over provision. (Other)</p> <p>10. The subject of over provision is having an adverse effect on selling and prices. Lower Lisburn road and holylands and botanic area is a student area always has been will be long after I'm not here it's about time council started working with us land lords who provide a top quality service for students. (Landlord/Managing Agent)</p>
<a href="#">Section 13</a>	Suitability of living accommodation for multiple occupation	<p>1. No comments in relation to Section 13, however there is an error in the regulations made in exercise of the powers conferred by section 13(3) &amp; 13(7) See Regulation 7 of The Houses in Multiple Occupation (Living Accommodation Standard) Regulations (Northern Ireland) 2016. – (Council – BCC)</p>
<a href="#">Licence conditions</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 14</a>	Licence conditions	No comments
<a href="#">Temporary exemption from licensing requirements</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 15</a>	Temporary exemption notice	<p>1. The council should have the ability to charge for a temporary exemption notice – See Section 84.</p> <p>This is currently a free service and charging should be allowed under this provision to bring it into line with the other Notices under the scheme for which there is a charge to cover the administrative costs associated with issuing such notices.</p> <p>The decision should also be served on the managing agent (if any)</p> <p>The 3 month minimum period specified in Section 15(7)(a) should be increased to 6 months to take in account extended notice periods for tenants to vacate the accommodation as provided for under Coronavirus regulations and any future plans the department may have for increased tenant protection.</p> <p>There should be powers to compel the owner to provide contact details for the occupants of the accommodation in order that the council can comply more effectively with subsection 5. – (Council – BCC)</p>
<a href="#">Section 16</a>	Extension of temporary	<p>1. The council should have the ability to charge for an extension to a temporary exemption notice.</p>

	exemption notice	The decision should also be served on the managing agent (if any) – (Council – BCC)
<a href="#">Section 17</a>	Safety and security requirements	1. No comments – (Council – BCC) 2. The standards were already very high. Why do more costly changes need to be made and on what evidence. For example changing the door closers? Tenants often wedge doors open permanently, making safety redundant. In the event of a fire, this could cost lives. Why is the HMO unit not carrying out spot checks to ensure that tenants are complying with this safety issue and imposing a financial penalty system to stamp it out? – (Landlord/Managing Agent)
<a href="#">Section 18</a>	Revocation of temporary exemption notice	No comments
<a href="#">Duration and renewal</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 19</a>	Duration of HMO licence	1. In subsection 19.1 the date on which a renewal application has effect should be the date of expiry of the previous licence.  Currently licences are renewed on the date of issue resulting in HMO properties having licences extending beyond five years and having a potential impact on income to support the scheme. To ensure that licences are retained with the 5 year cycles, the date on which a renewal application has effect should be the date of expiry of the previous licence. There is no detriment to the owner whilst a HMO licence is being processed and determined as the HMO continues to be licensed under the existing licence arrangements – (Council – BCC)
<a href="#">Section 20</a>	Renewal of licence	1. See comments re Section 8 – (Council – BCC)
<a href="#">Section 21</a>	Application to renew: effect on existing licence	1. See comments in relation to subsection 19(1) – (Council – BCC)
<a href="#">Variation and revocation</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 22</a>	Variation of licences	1. The process as specified in the legislation in Schedule 4 is overly complex in relation to applications to vary the licence by the owner or by someone named on the licence, when the council is in agreement with the proposal. The Council would welcome a more streamlined process under this provision to reduce administrative time and to enable the Council to provide a swifter response to applicants who wish to vary their licences for straightforward matters such as a change of managing agent who is previously known and assessed to be a fit and proper person by the Council. – (Council – BCC)

<a href="#">Section 23</a>	Revocation of licences	No comments
<a href="#">Section 24</a>	Variation and revocation: procedure	See comment in relation to section 22 – (Council – BCC)
<a href="#">Other provisions about licences</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 25</a>	Restriction on applications	No comments
<a href="#">Section 26</a>	Joint licence holders	Section 26(5) should be treated as a variation of the existing licence rather than a renewal – (Council – BCC)
<a href="#">Section 27</a>	Surrender of HMO licence	No comments
<a href="#">Section 28</a>	Change of ownership: effect on licence	1. See comments in Section 12. The Department should also consider whether its guidance on this issue complies with the wording of this Section and whether for example the wording of Section 28(2) should be revised. – (Council – BCC)
		2. I am not happy with the new condition if a HMO dwelling is sold during the lifetime of the HMO licence `I think it is quite unfair that the new owner has to get a new licence surely like any other licence arrangement it should run for the term of the licence despite ownership changing. This is a devaluing condition in the sale of a property.
		3. Also on HMO sales/handover/inheritance timing is so important so that the License is not lost. I think it should only be necessary to check that the new owner is a "fit and proper" person, as the property already has all the checks carried out and so it should continue until the 5 year renewal is up. – (Landlord/Managing Agent)
		4. I also believe that Article 28 should be revoked and replaced with a mechanism which allows the existing licence to pass to the new owner, but the new owner will then have a duty to apply within a certain time frame (3 months?) for an alteration/reissue of the licence in the new name. – (Landlord/Managing Agent)
		5. Another anomaly to new regulations is that a current Landlord cannot sell his/her property to another, to continue as HMO because of the 'over 30%' rule introduced. A Landlord name change, would therefore be refused. This would also apply when the landlord passes property to family member. This rule must be changed as it's unworkable. – (Landlord/Managing Agent)
		6. This is best demonstrated by the councils change of policy in September 2020 when they decided without any prior consultation or writing out to any landlords or agents, to start treating HMO License applications where a sale had taken place, and therefore a change of estate

		<p>also as NEW applications, as opposed to renewal applications. – (Landlord/Managing Agent)</p>
		<p>7. My understanding of the legislation is, when it comes time to sell my property, my property will not be renewed as an HMO. I purchased this property in 2004 as an investment to augment my pension. I am NOT contrary to public perception a rich landlord and I'm not alone in this position. I bought my property with a mortgage and paid the going rate because the property had an HMO Licence. The property crash of 2008 wiped out the value of these properties by approximately 50% I have continued to pay the mortgage and have kept the property for the sole reason of waiting for the value to increase enough to clear the mortgage. I do not financially benefit from it but it pays its overheads. Now BCC intend by this legislation to devalue these properties again by refusing upon a sale to renew the HMO Licence. I find it difficult to comprehend why a Council is legislating laws which will adversely affect investment in their area. In the longer term you will be taking away hundreds of rooms for students with less high income financial backgrounds. – (Landlord/Managing Agent)</p>
		<p>8. Further, any review should clarify the issue of transfers of existing HMO stock, by sale, change of estate or on death. We suggest that as an existing HMO the transfer should be treated as a renewal and as such, no consideration should be given to planning or overprovision. Further, the existing HMO licence should continue on transfer for such period that allows a new purchaser to make application for transfer of licence into their name. – (University Quarter Business Association)</p>
		<p>9. Regarding change of ownership let it be sale, inheriting a property due to the death of the property owner, or a simple transfer this ought to be treated as a transfer, planning, over provision etc. ought not to be considered as this I believe to be a clear breach of one's property rights. – (University Quarter Business Association)</p>
		<p>10. More areas have been covered under the new legislation, some of which are adversely affecting landlords ability to plan future investment: i.e. the uncertainty of granting licences in certain areas, passing on of business due to death of principle landlord, selling /buying a current HMO without knowing if it will still be a hmo when purchase is thru, and various other impediments to future planning. – (Landlord/Managing Agent)</p>
		<p>11. Our understanding of section 28 of the HMO act regarding transfer of ownership of a currently licensed HMO property is that the buyer's licence application will be considered a renewal as long as the buyer submits their licence application prior to completion of sale.</p>



		<p>After completion, the council would consider their application but there would be no consideration of planning or overprovision as stipulated in section 20 of the act.</p> <p>That was how Belfast City Council treated transfer of ownership until it then decided to reinterpret the legislation in Autumn 2020. It then argued that the buyer's licence application is not a renewal so planning and overprovision must be considered as part of the buyer's application. We disagree with this interpretation. We only became aware of this change in approach after reports we received from some members, after which we sought clarification from the council. Nothing about the change was communicated to HMO landlords in advance yet it has serious implications for the ability of a buyer to continue to use a property as a HMO whether the HMO has planning or not, particularly in areas in which there is already a high concentration of HMO properties. The policy would also affect sale of a property following the death of a sole licence holder potentially resulting in a substantial reduction in the value of the estate.</p> <p>As a result of this latest action, some agents in the process of trying to sell existing HMO properties who were aware of the policy have had difficulty getting the information they needed regarding overprovision targets and have not known whether the buyer would be able to continue to operate the property as a HMO or not. The situation is currently in flux and the council's intentions on how they will deal with this haven't been made entirely clear. Whilst we believe our original interpretation is clear and correct, we think the department should revisit the specific wording of section 28 to remove all possible doubt. (LANI)</p> <p>12. The transfer process set out in the act introduces some uncertainty for the buyer of an existing HMO. It is up to the council to determine whether a licence is granted yet the buyer's application cannot be considered before they complete on the purchase as the buyer does not have an estate in the property until then. Even if a buyer is satisfied that they meet the criteria of a fit &amp; proper person, they have no certainty that they will be judged fit &amp; proper by the council as this depends on a consultation process that has not yet taken place and which involves various third parties.</p> <p>To remove this uncertainty and assist the transfer process we think it would be better if the buyer was able to apply for a fitness test prior to the transfer of ownership taking place.</p> <p>This would be valid in relation to any property and for a fixed period. It would provide assurance that if they choose to buy any hmo within that period they will already have been deemed fit &amp; proper. The question of whether the buyer is fit &amp; proper should not depend on the particular property they are applying for. The period</p>
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		<p>could be 6 months or longer to give them a chance to find a suitable property. The buyer could simply be required to notify any relevant change of circumstances within that period.</p> <p>In previous meetings with the Department for Communities we suggested that a better way to assess the fitness of an owner would be through a criminal record check. However the idea was not adopted after Belfast City Council raised objections. We still believe this would have more merit and provide a safer and less subjective result. (LANI)</p> <p>13. We have concerns about the implications of the buyer not applying for a licence prior to completion as set out in section 28 of the act. If the buyer does not apply for a licence prior to completion, the seller's licence is not transferred to the buyer. Consequently the buyer will only able to apply for a new licence after completing the purchase rather than their application being treated as a renewal. As a result, planning and overprovision will be considered as part of the application and in some areas with a high number of HMO properties the licence may be refused in which case the property will fall out of HMO use.</p> <p>The consequences for such a simple oversight are therefore severe.</p> <p>This has already happened in some cases. Whilst the conveyancing solicitors should have been familiar with the requirement to apply for a licence before completion, in those cases they were not. In the circumstances we suggest a fine would be more appropriate than treating the application as though it was for a new rather than an established HMO property. (LANI)</p>
<p><a href="#">Section 29</a></p>	<p>Death of sole licence holder: effect on licence</p>	<p>1. The 3 months period referred to in section 29 (1)(b) should be extended to 6 months (as it frequently takes longer to 3 months to put in place personal representatives and for them to put arrangements in place to manage the estate). – (Council – BCC)</p> <p>2. Also the council is using regime ambiguity to drive out HMOs that are properly licensed and meet the required standards. For example, when single license holder dies the council appears to what to refuse any new applicant who meets the required standards on over provision grounds. This is to the detriment of tenants and potential tenants as it reducing affordable housing stock. – (Landlord/Managing Agent)</p> <p>3. 3 months is not long enough for deceased representatives to dispose of property. No estate is wrapped up in 3 months. Landlord should be allowed to transfer licence upon death irrespective of over provision so long as nominee passes fit and proper person test. – (Landlord/Managing Agent)</p> <p>4. Taking over HMO with my wife, after father in Law passed away. When my father in law passed away, our family was in mourning and after a number of months</p>

		<p>since his passing, my mother in law passed to us a communication from Council to renew licence. When I approached council we were told that time had elapsed and were liable for possible fine as licence had ceased from his death. A longer grieving time or grace should be considered in this matter, given the good manner of the existing licence of the property. Overall we were treated by council as a matter of fact and had to just go through the HMO procedures if we wanted to secure the licence. Given that the property had successfully gained a licence for over 25 years, it did not matter and had to seek unnecessary statutory approvals. Because of the wishes of my father in law and family we carried out all the HMO requirements and secured a licence for the next 5 years. Whether it is down to Covid 19, we still await issue of licence from council. – (Landlord/Managing Agent)</p>
		<p>5. In particular the requirements contained within Article 29 (Death of a sole licence holder) will probably fail to be recognised by the majority of bereaved families, resulting in substantial loss of income. I believe that Article 29(1)(b) should be deleted and that will cure most of this problem. – (Landlord/Managing Agent)</p>
		<p>6. Section 29 of the act states that if a sole licence holder dies, the licence is considered to be held by the licensee's personal representatives but 29(b) states that the licence then ceases to have effect 3 months after the licence holder's death.</p> <p>This is a grossly inadequate amount of time to deal with someone's estate. The executors may not even know the deceased person owned the HMO in that timescale. Even if they did and the time period could be extended it can take a very long time to wind up an estate. The simplest and best solution seems to be to remove 29(b) from the legislation altogether.</p> <p>If an agent was managing the property, the appointment of personal representatives would have little effect on the continued smooth running of the property management, therefore it is difficult to see the need for the licence to cease to have effect so soon.</p> <p>Executors have legal liability to protect the estate to the best of their ability. If they miss the 3-month deadline there could be a substantial financial loss for which they could be held liable. (LANI)</p>

**PART 3: Enforcement of Licensing Requirements**

Offences

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 30</a>	Unlicensed HMO	No comments
<a href="#">Section 31</a>	Exceeding licensed occupancy or breach of	No comments

	licence conditions	
<a href="#">Section 32</a>	Untrue claim that HMO is licensed	No comments
<a href="#">Section 33</a>	Agents not named in licence	No comments
<a href="#">Section 34</a>	Reasonable excuse	1. It would be helpful if a more comprehensive list of reasonable excuses was provided in guidance whilst still retaining the ability of councils to exercise its own discretion in all scenarios. – (Council – BCC)
<a href="#">Rectification of breaches of conditions</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 35</a>	Power to require rectification of breach of conditions	No comments
<a href="#">Section 36</a>	Revocation of rectification notice	No comments
<a href="#">Section 37</a>	Failure to comply with rectification notice	No comments
<a href="#">Orders of the court: revocation and disqualifications</a>		
<a href="#">Section 38</a>	Revocation orders and disqualification orders	No comments
<a href="#">Section 39</a>	Revocations and disqualifications: appeals	No comments
<a href="#">Section 40</a>	Discharge of disqualification orders	No comments
<b><a href="#">PART 4: Standards of Housing</a></b>		
<a href="#">CHAPTER 1: Overcrowding</a>		
<a href="#">Definitions</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 41</a>	Definition of overcrowding	No comments – (Council – BCC)
		Criteria in applications is very specific and has to be backed up with hard certification. Control of numbers per dwelling is clearly pointed and this is checked on pre site inspection. – (Landlord/Managing Agent)

<a href="#">Section 42</a>	The room standard	No comments – (Council – BCC)
<a href="#">Section 43</a>	The space standard	<p>1. Council anticipates that representations may be received to amend the legislation so that these standards do not apply to renewals. The Council considers that this is fundamentally an issue for councils to determine having regard to the legislation, guidance issued by DfC and all other material considerations recognising the importance of space standards for tenants from a health and safety and general wellbeing perspective. – (Council – BCC)</p> <p>2. I feel the following are unnecessary additions: Minimum room sizes that do not take into account usable space under eaves in attic rooms (as with previous standards). – (Landlord/Managing agent)</p> <p>3. The belief of BCC that a room slightly under 6.5m and indeed over 6.5m in some cases ought to be disqualified despite the fact it is clearly set out by the Dept. that if a room size has been in existence prior to the transfer to BCC, is functioning well and the demand is there for that type of accommodation then discretion ought to be used. To stick rigidly to a defined room size measurement, (ignore the discretion power you are given) where it is clear there is more need for this type of accommodation now than before for a number of factors, affordability, proximity to family circle, proximity to city centre amenities, reducing travelling costs etc. then for BCC to look at this in total isolation is much too naive, BCC ought to have a much better understanding of the needs of their citizens. – (University Quarter Business Association)</p> <p>4. Room size is increased by 0.5m<sup>2</sup>, this has not improved anything. When a bedroom before fitted, it does not now. Some of the HMO inspectors, and not them all, have been disrespectful and mean in dealing with landlords at an inspection. They are anti-landlord and they do not respect the service that we provide. (Landlord/Managing Agent)</p> <p>5. The fundamental test that rooms were 6.5m<sup>2</sup> is not acceptable under the new scheme and this is totally wrong and does not make sense. Where the door closing area is taken out of the room size is so wrong, and this must be changed. (Landlord/Managing Agent)</p> <p>6. I had a bedroom, connected to another study/social room at the top of the house, which tenants loved. It was always the room most valued by the people who lived in that house. Due to arbitrary new rules about sloped ceilings, I can no longer rent out that room or the rest of the house as a HMO property (Landlord/Managing Agent)</p> <p>7. The removal of the previous discretion regarding minimum room sizes is a backward step. There are many rooms in HMOs with sloping ceilings and the floor area in the room which has a ceiling height of less than 1.5m is of significant use. In many cases these large attic rooms are more desirable than other rooms in the property which</p>

		<p>are just above the minimum 6.5m requirement but under the new licencing system they cannot be used as a bedroom. There will also be cases where a tenant may be happy to occupy a smaller room at a lower rent but the strict application of the 6.5m rule will remove this option and effectively increase tenant costs. (Landlord/Managing Agent)</p>
		<p>8. Standards have been increased beyond the ability of some landlords to meet them, forcing them out of the market. Improved standards are a great idea but they must be able to fit into the current stock of housing... For example minimum room sizes which have been acceptable for the past 15 years are now no longer acceptable in CURRENT hmo licenced premises. New Build or New conversions should meet enhanced minimum but older housing stock (That were acceptable under older regulation) where this is impossible or extremely costly to do should continue to be accepted (Landlord/Managing Agent)</p>
		<p>9. Yes the regulations under the executive to ensure the bedrooms are a minimum size etc are good to make sure houses are of a good standard. (Landlord/Managing Agent)</p>
		<p>10. The fourth bedroom was deemed too small so the house can only now be used as a three bed. (Landlord/Managing Agent)</p>
		<p>11. The standards imposed by the Houses in Multiple Occupation (Living Accommodation Standard) Regulations (Northern Ireland) 2019 largely a replication of the 1993 HMO Management Regulations regulated by the Northern Ireland Housing Executive under the former registration scheme. It is noted there has been some improvement to the standards of HMOs in terms of fire safety and bedroom sizes. Physical standards for all other room types eg living room/kitchen remained unchanged. It is understood there has also been a improved standards to a small number of HMOs in relation to energy performance and thermal comfort. (Landlord/Managing Agent)</p>
		<p>12. The reason the HMO Licensing scheme has not improved the overall standard of HMO's is that there are no major changes to the physical standards other than insuring that all bedrooms that are less than 6.5 sq meters can no longer be used as a bedroom. This is completely contrary to the Departments guidance notes to BCC where direction was given to all councils to exercise discretion around room sizes when considering properties that were previously registered, under the previous northern Ireland Housing Executive HMO Registration scheme, as it was accepted that they had operated well as bedrooms under the registration scheme. Indeed in March of 2019, just before the introduction of the scheme on the 1st April 2019, I myself attended a meeting as part of the LANI delegation with Eilish O'Neill from the Dept,</p>

		<p>and a number of her officials, and with Nora Largey from BCC with a number of her officials and indeed a representative from the Law Society was also present. As LANI had received correspondence dated 1st February 2019 confirming that discretion would be applied, I asked the question during the meeting, as to exactly what was meant by the term 'discretion would be applied'. Both Dept officials and BCC officials confirmed that this meant that if a bedroom in an existing HMO which had previously been registered under the NIHE Registration scheme was a little under sized that it would still be considered to be a bedroom, unless it was in fact drastically under sized. There were no dissenting voices at the table to this response. All inspections have proceeded applying this discretion to slightly undersized rooms, up until September of 2019, when the council started to disregard any bedrooms which were less than 6.5 sq meters. We ourselves had a number of bedrooms in previously registered HMO's that we were asked to alter by moving walls as they were fractionally under the 6.5 sq meter size requirement, and in one case the room was 6.43 sq meters. It is not unreasonable to expect that the de minimis principle should be applied in such circumstances. (Landlord/Managing Agent)</p>
		<p>13. No real change from before except obliging people to make significantly and costly alterations to meet the 6.5m2 bedroom standard. Existing HMO bedrooms that are slightly below the 6.5m2 standard should be given a waiver (say until such times as the HMO is undergoing major improvements or alterations). ((Landlord/Managing Agent)</p>
		<p>14. I don't see any changes in safety requirements. The change to minimum bedroom size seems more aimed at an underhand attempt to reduce HMO occupancy than safety concerns especially when the rule is being strictly enforced to even rooms marginally outside the requirement that have operated as HMOs for several years. Indeed the result is that partition walls are being moved in properties in ways that can hinder access / egress from individual rooms in order to meet the room size requirement this is detrimental to safety as opposed to helpful. (Landlord/Managing Agent)</p>
		<p>15. The whole issue of bedrooms less than 6.5 sq meters is quite at odds with guidance. (Landlord/Managing Agent)</p>
		<p>16. Issues over the size of rooms have not changed. The actual new licensing does nothing to support improvement of accommodation but actually it seems set up to deter landlords from applying for the licence but possibly abusing the system by not registering at all as the new licence is not as I said above "not fit for purpose" (Landlord/Managing Agent)</p>

		<p>17. The fourth bedroom was also deemed too small, coming in at 6.05m<sup>2</sup> instead of the stipulated 6.5m<sup>2</sup>. This bedroom has a double bed, wardrobe, chest of drawers and desk and has been let continuously for 14 years without any complaints, but again the new legislation gave no room for logic. It is definitely not landlord friendly and has totally discouraged me remaining in this sector (Landlord/Managing Agent)</p>
		<p>18. There is now a minimum size for bedroom for example. This seems a good idea but in reality 6.5m<sup>2</sup> would be sufficient space for a student, single bed, wardrobe and study desk so I am not sure where this size was decided on. (Landlord/Managing Agent)</p>
		<p>19. The new specifications as in 6.5 square meters is ridiculous. As myself and other landlords I know have large top floor rooms were normally the bed would have been within the 1.525m height as you do not normally stand to there beds and properties that have been passed for the past several years now need changed even if room measured 6.4. (Landlord/Managing Agent)</p>
		<p>20. The reason the HMO Licensing scheme has not improved the overall standard of HMO's is that there are no major changes to the physical standards other than insuring that all bedrooms that are less than 6.5 sq meters can no longer be used as a bedroom. (Landlord/Managing Agent)</p>
		<p>21. We understand focus on accommodation standards has focussed entirely on bedroom sizes resulting in rooms that had previously being included being ruled out due to being only minimally under the new prescribed floor area required. (Landlord/Managing Agent)</p>
		<p>22. Nothing has changed apart from bedroom size. What happened to "Grandfather rights" on these rooms. Not what I was led to believe (Landlord/Managing Agent)</p>
		<p>23. In our discussions with the Department for Communities we wanted to ensure that existing HMOs with rooms that were deemed an acceptable size under the previous registration scheme would not be penalised under the new scheme in which the room size standard is written in the primary legislation. The department told us it was not its intention to penalise existing HMOs that operated successfully under the registration scheme and provided guidance to councils stating in Annex A of the guidance document:  "Where the amendments to space standards for ceiling heights, minimum bedroom widths and for communal living room, excluding any area used as a kitchen, represent an increase in standards, this is not viewed as a safety issue and should only be applied to new applications"  Section 5.4.4 of the guidance document also states:  "In general, councils should ensure that all licence applications are treated equally and fairly, regardless of whether the application is for accommodation which has</p>



		<p>not previously been licensed, or which has had a licence for some time. However, a flexible approach should be taken; in some cases, such as where an HMO has been operating with a licence for some time, it may be considered suitable for a new licence even if it does not meet certain standards which the Council would normally wish to apply to new accommodation or accommodation which has not previously been licensed”.</p> <p>LANI had been in correspondence with the Department for Communities about various concerns prior to the implementation of the act and received the following response in a letter from the department dated 1st February 2019 after we had sought clarification on the position regarding room sizes:</p> <p>“Room Size Standards – This has been discussed with Councils and the guidance has been amended to clearly delineate between existing HMO stock and new HMO applications. The guidance directs Councils to use discretion when applying the standards and to take account of the fact that existing HMO registrations operated well and were fit for purpose under the previous regime”</p> <p>However Belfast City Council appears to have chosen to disregard the guidance and has been refusing to consider rooms that fall short of the new room size standard even for rooms in existing HMO properties that were deemed satisfactory under the previous registration scheme. The effect is to reduce the number of HMO rooms available in any house affected. In disregarding the guidance the council appears to be contravening section 85(2) of the act:</p> <p>“In exercising any function under this Act, a council must have regard to any guidance under this section which applies to it in the exercise of that function”.</p> <p>The council’s policy is having a detrimental effect on many properties as HMO inspectors are being directed not to exercise discretion for the same rooms where previously they did exercise discretion under the former registration scheme and considered those rooms suitable for use. In some cases these properties had previously received Housing Executive grants for HMO use. (LANI)</p>
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[Overcrowding notices](#)

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 44</a>	Overcrowding notices	No comments
<a href="#">Section 45</a>	Contents of overcrowding notice	No comments
<a href="#">Section 46</a>	Requirement as to overcrowding generally	No comments

<a href="#">Section 47</a>	Requirement not to permit new residents	No comments
<a href="#">Section 48</a>	Notice requiring further information	No comments
<a href="#">Section 49</a>	Information notice: supplementary provisions	No comments

#### [CHAPTER 2: Suitability for numbers in occupation](#)

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 50</a>	Suitability notice	No comments
<a href="#">Section 51</a>	Contents of suitability notice	No comments
<a href="#">Section 52</a>	Occupancy requirements	No comments
<a href="#">Section 53</a>	Statement of remedial work	1. Section 53(3) the council recognises that fire safety measurers within the meaning of the Fire and Rescue Services (northern Ireland) Order 2006 cannot be included, this can cause operational delays in correcting issues of fire safety if the licensee is not cooperative. – (Council – BCC)

#### [CHAPTER 3: Hazards](#)

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 54</a>	Definition of hazard	No comments
<a href="#">Section 55</a>	Hazard notice	1. No comments – please note the council has not served any Hazard notices to date – (Council – BCC)
<a href="#">Section 56</a>	Contents of hazard notice: prohibitions	No comments
<a href="#">Section 57</a>	Contents of hazard notices: other matters	No comments
<a href="#">Section 58</a>	Works requirements	No comments
<a href="#">Section 59</a>	Approvals as to use of premises	No comments

#### [CHAPTER 4: Further provisions about notices under this part](#)

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 60</a>	Offences	No comments – (Council – BCC)
		1. The maximum amounts permissible for fixed penalty notices for various offences are listed in section 64(4) of the act. At a meeting of Belfast City Council's licensing committee on 20th February 2019, it was decided that all fixed penalty notices would be set at the maximum level. Therefore minor misdemeanors are to be treated the

		<p>same as the most serious even though penalties can be up to £5,000.</p> <p>This seems completely unreasonable and disproportionate. We refer to section 37 of the act relating to rectification notices by way of example. Subsection (3)(a) states that regard is to be had for the seriousness of the breach and (4)(b) states that this is to be taken into account when the council determines the amount of the fixed penalty. This part of the act deals with a specific issue but demonstrates an expectation of reasonableness within the act when issuing penalties.</p> <p>Where a landlord has an agent, the council imposes a penalty on both the owner and agent. We think the penalty should only apply to the party who was at fault. (LANI)</p>
<a href="#">Section 61</a>	Further provision	See schedule 5 – (Council – BCC)

**PART 5: Supplementary**

HMO register

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<u>Section 62</u>	HMO register	<p>1. Belfast City Council is of the view that the restrictions on public access to the Register should be removed. These restrictions are at odds with the licensing regime which at its heart requires better management of HMOs and a more proactive resolution of issues or anti-social behaviour. A publically accessible register would allow for resolution of issues at a community level at an early stage before they are escalated to councils.</p> <p>These restrictions also seem at odds with the requirement to publically advertise notice of applications and the requirement for councils to properly assess the fitness of an applicant.</p> <p>Council notes that HMO Registers must be publically available in England and Wales by virtue of Section 231 of the Housing Act 2004 and also that the name of landlords is published within same (Section 11 of The Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006 and Section 11 of The Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (Wales) Regulations 2006. – (Council – BCC)</p> <p>2. From the perspective of a member of the community in the Holyland area, it is not possible to identify if a property is a licensed HMO or not. Basic access to the licensing records, are not available to the general public or, apparently, some other statutory bodies. This makes it very difficult to raise any issues, regarding those responsible for the management/ownership of properties, with The NI HMO Unit, Belfast City Council. – (Resident)</p> <p>3. We totally reject the Council's views on S62 and publication of the HMO register. Any publication of this would infringe a landlords Article 8 right to privacy and this would not be reasonable on the grounds of attempting to stop anti-social behaviour. The council are aware of who the owners are in this regard, and there is no necessity for members of the public to be aware. We would ask the department to take note that several landlords have been threatened and intimidated, both in person and online, because they are HMO landlords. The publication of the register would merely facilitate further intimidation and would serve no useful public function. (University Quarter Business Association)</p>

Code of practice

<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 63</a>	Code of practice	No comments
<a href="#">Fixed penalty as alternative to prosecution</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 64</a>	Fixed penalty: service of notice	No comments – (Council – BCC) The level of these fines does not appear to be proportionate to issue in question (e.g. if I file a tax return late I would be fined £100 but if I file an HMO application late the fine is £5000) – (Landlord/Managing Agent)
<a href="#">Section 65</a>	Fixed penalty: effect of notice	No comments
<a href="#">Section 66</a>	Fixed penalty: power to alter amounts	No comments
<a href="#">Appeals</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 67</a>	Appeals	No comments
<a href="#">Section 68</a>	Council's statement of reasons for decisions which may be appealed	As a matter of practice the council includes the statement of reasons with any decision subject to Section 67 – (Council – BCC)
<a href="#">Section 69</a>	Powers of court on appeal	No comments
<a href="#">Information</a>		
<b>Section</b>	<b>Description</b>	<b>Comments</b>
<a href="#">Section 70</a>	Powers to require information and documents: introductory	No comments
<a href="#">Section 71</a>	Power to obtain information from persons connected to premises	No comments
<a href="#">Section 72</a>	Power to require persons connected to premises to produce documents	No comments
<a href="#">Section 73</a>	Power to obtain information from other persons	No comments
<a href="#">Section 74</a>	Sharing of information	No comments

	between councils	
<a href="#">Section 75</a>	Failure to provide information or provision of false information	The level of fine should be increased from level 2 on the standard scale – (Council – BCC)
<a href="#">Section 76</a>	Unauthorised disclosure of information obtained under section 73 or 74	No comments
<a href="#">Section 77</a>	Court to inform council of convictions	No comments
<a href="#">Powers of entry</a>		
<a href="#">Section 78</a>	Powers of entry: without warrant	No comments
<a href="#">Section 79</a>	Powers of entry: with warrant	No comments
<a href="#">Section 80</a>	Powers of entry: supplementary provisions	No comments
Other supplementary provisions		
<a href="#">Section 81</a>	Applications by persons required to take action where consent withheld	No comments
<a href="#">Section 82</a>	Obstruction etc	No comments
<a href="#">Section 83</a>	Effect of moving from accommodation for works to be carried out	No comments
<a href="#">Section 84</a>	Fees	A separate fee should be considered for Section 15 Temporary Exemption Notices – (Council – BCC)
<a href="#">Section 85</a>	Guidance	The guidance needs reviewed to consider issues around room sizes and valid applications – (Council – BCC)
<a href="#">Section 86</a>	Regulations and Order	No comments – (Council – BCC)
<a href="#">Section 87</a>	General notices	No comments – (Council – BCC)
<a href="#">Section 88</a>	Interpretation	No comments – (Council – BCC)
<a href="#">Section 89</a>	Consequential amendments and repeals	No comments – (Council – BCC)
<a href="#">Section 90</a>	Commencement	No comment – (Council – BCC)
<a href="#">Section 91</a>	Short title	No comments – (Council – BCC)

<p><a href="#">Schedule 1</a></p>	<p>Buildings or parts of buildings which are not houses in multiple occupation</p>	<p><b>Paragraph 9</b> – Regulations should be laid pursuant to paragraph 9(c) to restrict the number of other persons who can share accommodation with the owner or any member of the owner’s household without it being licensed. – (Council – BCC)</p> <p>As outlined above. At one stage in 2019 hundreds of properties had no licence, and continued to operate with impunity, including sheltered accommodation, care homes for the elderly and thousands of student halls at Queen's Elms. Simultaneously I, who had an application pending approval, was told if I rented my accommodation out I could be fined thousands of pounds. This is a double standard (Landlord/Managing Agent)</p>
<p><a href="#">Schedule 2</a></p>	<p>Applications for HMO licences: requirements and procedure</p>	<p><b>Paragraph 3</b> – Notice to statutory authorities This paragraph should be amended to provide a statutory basis upon which other authorities can disclose information in relation to any information they hold in relation to the “fit and proper” person status of the proposed licensee or managing agent. This would assuage concerns on their part regarding potential breach of data protection legislation. Currently, the Council is required to notify the statutory authorities concerning all HMO applications, however there is no requirement for statutory agencies to provide any information they hold in respect of the owner or managing agent under the fit and proper definition.</p> <p><b>Paragraph 12</b> – The current time limit for processing an application for a HMO licence is 3 months from that date that it is deemed a “valid” application. The current 3 months limit is overly difficult to achieve given a number factors to be considered for example allowing the owner sufficient time to undertake remedial works and accommodating the management of Committee agendas where representations are received. It is considered that the licensing regime is complicated and cumbersome. The time limit only creates more difficulties and has no practical benefit for councils and landlords alike. Given the requirements of the licensing scheme, particularly the fact that there is a requirement to assess the fitness of an applicant, it is not appropriate to have deemed licences in any event.</p> <p>Furthermore, the Council is incurring significant expenditure in respect of applications made to the magistrates’ court for an extension of time to consider a licence application, with the court service also querying the number of applications received in this regard. It is the Council’s view that this is the result of the overly onerous 3 month time period for determining applications.</p>

		<p><b>If DfC are not prepared to remove this provision in its entirety, the Council would request that this time limit is extended to 6 months.</b></p> <ul style="list-style-type: none"> <li>• For example – Application received on day 1 with all documentations and fee, therefore a valid application</li> <li>• Notice of application received on day 8, representations from day 9 to 37.</li> <li>• Inspection to be scheduled, property assessed and if necessary works completed before the licence would be granted. (The council acknowledges that it can include work as a condition of licence, however it would be very reluctant to grant a new licence without all necessary works being completed). Also being mindful that the council could not include fire safety works as a condition of licence.</li> <li>• If representations are received these needed to be considered and if they relate to the fitness of the applicant additional enquiries may need to be made.</li> <li>• Proposed decision needs to be issued for a minimum of 14 days.</li> <li>• Representations in relation to the proposed decision needs to be considered</li> <li>• Notice of hearing needs to be issued – minimum of 7 days before the hearing (bearing in mind council committees only sit monthly and the number of items already on the committee agenda needs to be considered.</li> </ul> <p><b>Paragraph 12</b> should clearly indicate that the time limit starts from the date the application is valid (this is currently only in guidance).</p> <p><b>Paragraph 13</b> – A review of the need to serve a notice of determination on all statutory authorities should be undertaken. This is administratively burdensome and the Council would suggest that it may be more appropriate to regularly update the statutory authorities with the HMO register. – (Council – BCC)</p> <p>The regulations do improve the standard of housing, but they can make management more difficult, for example needing to advertise in the paper and if you forget to do this losing your license seems unnecessary and an extreme punishment. (Landlord/Managing Agent)</p> <p>I would like to think the HMO licensing scheme has improved the overall standards of HMO accommodation. Again the process for renewal is more expensive and involves what I think is not needed. And the process of advertising in local paper to any objections and (in my case) a letter from my accountant to verify that I can afford the upkeep of the property I think unnecessary. (Landlord/Managing Agent)</p>
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		<p>I found the entire process of renewing an extremely stressful experience with little room for manoeuvre from the wording and timing of the Newspaper advertisement to submitting all the necessary paperwork, not to mention requiring a CLEUD certificate that cost almost an astounding £8000, despite having had the house as an HMO for almost 14 years.</p>

<a href="#">Schedule 3</a>	Further provision about notices that specify works	No comments – (Council – BCC)
<a href="#">Sch 3: Part 1</a>	Provision applying to all notices that specify works	No comments – (Council – BCC)
<a href="#">Sch 3: Part 2</a>	Failure to carry out works required by rectification notice or hazard notice	No comments – (Council – BCC)
<a href="#">Schedule 4</a>	Variation and revocation of HMO licences: procedure	<p><b>Paragraph 1(2)(c)</b> – Notice to statutory authorities, this paragraph should be reviewed to ensure that statutory authorities are obliged to reply with any information they hold in relation to the fit and proper person status of the proposed licensee or managing agent.</p> <p><b>Paragraph 5 (1)(c)</b> – This should be removed as it has no practical benefit. If another agency wishes to obtain information in relation to a HMO they can do so under the provisions relating to access to the Register or through FOI legislation. – (Council – BCC)</p>
<a href="#">Schedule 5</a>	Part 4 notices: further provisions	
<a href="#">Sch 5: Part 1</a>	Service and date of effect of notices	There should be powers to compel the owner to provide contact details for the occupants of the accommodation in order that the council can comply more effectively with paragraph 1(2) – (Council – BCC)
<a href="#">Sch 5: Part 2</a>	Suspension of effect of notices	No comments – (Council – BCC)
<a href="#">Sch 5: Part 3</a>	Variation and revocation	No comments – (Council – BCC)
<a href="#">Schedule 6</a>	Definitions for the purpose of section 73	No comments – (Council – BCC)
<a href="#">Schedule 7</a>	Consequential amendments	No comments – (Council – BCC)
<a href="#">Schedule 8</a>	Repeals	No comments – (Council – BCC)



Review of the [HMO \(Living accommodation Standard\) Regulations \(Northern Ireland\) 2019](#)

<p><a href="#">Regulation 7</a></p>	<p>Personal Washing Facilities</p>	<p>Firstly within Table 1 of <b>Regulation 7</b> it states that <b>1 bathroom or shower</b> is required for 5 occupants. However within the NIHE guidance it states that it should be 1-5.</p> <p><i>Table 1</i></p> <hr/> <p><i>Household</i></p> <hr/> <table data-bbox="582 593 1244 795"> <tr> <td><b>1-5 occupants</b></td> <td><i>1 bathroom or shower room</i></td> </tr> <tr> <td><i>6-10 occupants</i></td> <td><i>2 bathrooms or shower rooms</i></td> </tr> <tr> <td><i>11-15 occupants</i></td> <td><i>3 bathrooms or shower rooms</i></td> </tr> </table> <hr/> <p>Secondly paragraph 5, in Regulation 7, refers to paragraph 4. We believe that this should refer to paragraph 1.</p> <p><b>(5) Where paragraph (4) does not apply and the bathroom or shower room is shared, each occupant shall have an accessible water closet compartment, separate from the bathroom or shower room, and containing a water closet and a wash hand basin in the following ratios as per Table 2:—</b></p> <p>Please also see NIHE guidance to compare the equivalent paragraph which is paragraph 7.4. Paragraph 7.4 refers to Paragraph 7.1.</p> <p>The consequences of these two anomalies is that the Regulation 7 can be interpreted as a single combined bathroom (Shower/bath, w.h.b. and toilet) and a W.C. ,which may not be communal, being adequate for 4no persons. – (Council – BCC)</p>	<b>1-5 occupants</b>	<i>1 bathroom or shower room</i>	<i>6-10 occupants</i>	<i>2 bathrooms or shower rooms</i>	<i>11-15 occupants</i>	<i>3 bathrooms or shower rooms</i>
<b>1-5 occupants</b>	<i>1 bathroom or shower room</i>							
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<i>11-15 occupants</i>	<i>3 bathrooms or shower rooms</i>							

## Annex B

Comments from Review on administration of the licensing scheme.

1. The scheme is unwieldy in terms of size, and opaque in terms of understanding the standard required.
2. Absolute disgrace. The grip on the legislation needs to change - pick ANY council across the water or our friends in the south and align with something that WORKS. Revise the definition of a HMO. Police matters FAIRLY. A landlord in Belfast should be on a level playing field with everywhere else. Change the departments stance - stand with us as landlords and not against us. We want the same outcomes but the implementation is NOT working. Improve processes and access to information.
3. No - the prior regime was more user friendly, efficient and effective in achieving the desired outcome for the benefit of tenants than the current bureaucratic approach taken. Also the council has made the licensing process overly complex, slow, used poor/unfriendly/slow IT systems and has at times interpreted the legislation incorrectly. For example planning permission required for existing licensed HMOs which contrary to the actual legislation and the council often did not understand what some parts of the legislation meant in practice. In short, it has made the regime less effective and efficient than prior regime and licensing itself has significantly increased costs for landlords. Seems more concerned with revenue generation than anything else.
4. The previous HMO registration scheme worked well. However, the HMO Licencing Scheme has been replaced by a cumbersome process (a 26 page application!) fraught with difficulties, ranging from software problems, misinformation given to landlords by BCC Officers , delays in issuing licences, licences issued with incorrect date and addresses and threats to landlords of special conditions being added to their licences as a result of unsubstantiated complaints and process for transfer of licences due to change of ownership or sale of a property still unresolved!
5. The changes so far appear to have had little impact on the management of properties. Rather they have made it more difficult for landlords to understand requirements and gain a license such that they may be bound by relevant requirements. Changes predominantly seem to point toward an underhand attempt to avoid renewing licenses on properties that have operated as HMO's legitimately for some time, something that was previously confirmed not to be part of the transfer.
6. I've had numerous dealings with Belfast City Council regarding the administration of the scheme and have felt continually let down. Council are not enforcing the clauses in the legislation with regard to litter, graffiti and antisocial behaviour. Emails go unanswered, complaints are not followed up on and I believe that there is a general lack of enforcement. The legislation/scheme is good but the people administering it appear to view any enforcement activities as a nuisance that they couldn't be bothered with.

Additionally, Council are awarding additional HMO licenses in the 22 policy areas where it was agreed no more HMOs would be developed, claiming that where an HMO has operated for 5 years unchallenged it is eligible for a license. I believe this to be incorrect.

7. The process to apply was long and drawn out and included errors - for example i got a warning about having had 3 people in the house when i had only two tenants (while the application was being processed) It was explained that this was 'just an error' Council staff were helpful though.
8. More or less same standards as NIHE Registration scheme, same staff, just 3 times the cost. It achieves nothing over and above what the previous scheme achieved. The application process and costs are too high.
9. A case of bureaucracy gone mad. I have been registered for HMO for years and had to start gain from scratch - it took over 6 months - a nightmare.
10. Nothing new from previous registration scheme, except ASB, which most landlords had already addressed in tenancy documents. Due to massive increase in cost to renew, 300%, and Council's confused and unhelpful attitude , most 3 bedroom properties are now being rented as 2 bedroom, therefore rent for 2 bed has increased and tenants are being forced to live in larger households.
11. The legislation around the scheme provides clear guidance for both the Council issuing the licenses and the landlords/agents who manage the properties. However, I believe there are significant failings around the way Belfast City Council are issuing the licenses and the lack of enforcement around certain clauses in the license.
12. The conflicting and misinformation being given from the HMO department is questionable. It appears there is no set guidelines that rules apply for different people.
13. Conflicting info provided, the new requirements vary between inspectors.
14. Increased costs for same old service.
15. Very very poor customer service, if you call into the office you will be told something different by each person who answers the phone. No consistency.
16. The HMO department is nothing short of a disgrace and a farce, from losing paperwork constantly, staff telling lies, inspector's inconsistency.
17. I have found the HMO office at Belfast City Council utterly useless. Losing files. Changing the rules as they go along. The staff constantly giving out incorrect and misleading information.
18. It isn't clear what value the licensee receives. It isn't clear that non licensees are being prosecuted

19. The guidance is opaque and at the whim of the issuing council's staff. There's no obvious checklist to follow, and multiple sources of information (e.g. from NIFRS) must be used
20. This has required constant chasing. (Communication)
21. I wouldn't mind if they worked with the landlords and agents but then we pay for an overly restrictive scheme which is staffed by people who regularly give incorrect information and often contradicted themselves. This could have led to some enormously expensive errors in my own personal case.
22. Nope. Dreadful. (Guidance)
23. Lost letters. Lost emails. Lost folders and files. Very confused office.
24. Administration and delivery could not have been worse. The whole issue of HMO here is a disaster and there are very few who have benefitted either in their living conditions or their pockets.
25. No. It is excessive in nature and constantly changing. It causes increased costs for landlords to an excessive extent which will ultimately be passed onto tenants who should get a good service for a competitive price.
26. Constantly changing. Even experts who work in the area everyday are confused with the myriad of exacting standards.
27. The recent licencing issues in respect of sale, death and the proposal to require provision of the landlord's phone number for late night problems are simply a disgrace and would not be acceptable in any other area of business. People buy and manage properties in good faith and this is simply unfair. People have a right to make a living and for their property rights and privacy to be respected.
28. Very poor and seems agenda driven. No fairness. There is a correct way of ensuring acceptable standards in business and the current administration in respect of excessive standards and constant change to licencing on sale/purchase, death of sole licence holder/provision of landlord phone number is unacceptable. The potential impact on property rights and privacy will be very negative if change is not forthcoming. The areas in which these houses are located will suffer if this is not addressed.
29. Management is becoming very difficult. Dispute the popular opinion that landlords are rich fat cats. I am intend a family man with a young family trying my best to make a small profit whilst proving a good quality rental accommodation. I work hard at a two properties as well as my day job. Recent changes threaten to make my properties unsellable and un-rentable. This area in the holy lands is not suitable for families and they do not want to live here. HMO licence rules appear have been changed to remove HMO licence in an underhand way. I have worked entirely within the rules.
30. I would expect the fee to include more support and advice in a constructive way so we can provide safe standard of accommodation. After the 5 yearly HMO

inspection there is no communication. I feels like the organisation wants us to fail rather than have a collaborative success.

31. It is all there if you know where to look however requires a forensic reading. (Guidance)
32. Too expensive compared to the old Housing Executive scheme. The £185 fee for adding a new managing agent is expensive too.
33. Minefield of information. The HMO Office constantly change their interpretation of the HMO Act whether it be minimum room sizes, planning consent etc. Causes great distress to landlords / Agents. If agents or landlords make the slightest mistake then they are liable for a £5k fine.
34. It's costing more with the advertisements in the papers which seem unnecessary.
35. Confusion after confusion. Sent materials through to HMO office hard copy. They sent me a letter to say they did not get part of it. I got it back in the post and had to be sent back to them again. There were also problems emailing as this had to be done several times before they got it. Seems to be a lack of communication between departments
36. All paperwork sent in and slow communication to say it's been received. When inspections and paperwork complete it takes months to get the licence.
37. High fees with no support or advice
38. Total shambles continually changing the interpretation to suit own ends and no communication with external parties
39. Appalling communication
40. I am not sure how to answer this question....value for money normally requires for the recipient to come away having felt they are happy to pay the money for something, I didn't feel like this.
41. In the HMO paperwork, it claims that landlords and management agencies need to comply with a particular amount of training, if I am not mistaken this was to be completed by 31st Dec 2020. I have never once been offered training by the HMO office on their extremely long winded and complicated legislation, for which I am sure everyone in the HMO office has received many months of training on and are regularly updated on changes or further clauses that are or are not being used at any particular moment and time. This is simply not acceptable!
42. I have been a landlord for 25 years for a wide variety of accommodation, I take pride in my work and have concern for my tenants. I have been made to feel like crap the past 2 years with regarding any correspondence I have had with the HMO office. Especially for something that we are actually paying for! They need to rethink their whole process of dealing with landlords. We are NOT all unscrupulous landlords who are trying to rip off tenants and make them live in



squalor. But there is a very high percentage of landlords who enjoy their job and take pride in their properties but are made to feel like the worst of society!! It doesn't make sense.....

43. No, it is a further tax on landlords.
44. The information provided and the process for licensing are non-existent. Information received from various staff within the unit is incorrect and conflicting. Dreadful experience when Re-licensed. Straightforward when with NIHE. Not so with BCC
45. Communication was dreadful. Heavy loaded demanding letters Re non-compliance issued. Repeatedly updated my address yet warning letters as above still sent to old address and therefore unanswered.
46. Mediocre at best. (Administration)
47. It is overly expensive therefore effectively prohibitive. It creates a scenario where companies are making money off landlords simply to undertake certificates for every possible risk scenario. It is also a terrible system where you lose the whole HMO on selling the property etc after investing all the money into bringing the property up to meet the specifications
48. It does not set out clearly everything required and even when you think you have completed the requirements, there is more to do (Guidance).
49. I have never received any communications and they refuse to register because there is a difficulty with the numbers correlating from the old to the new system.
50. The actual people who you deal with are very pleasant and helpful but they are clearly hindered by their poor IT system. E.g. the certificate number has changed and not copied over as the same number. The scheme is bureaucratic and costly and does not serve landlords well. It should not be so complex and lengthy.
51. Very expensive
52. Complicated (Guidance)
53. Drives higher costs in areas which are not critical, these costs then need to be passed on to tenants. The fee is also very significant.
54. Lots of confusion and interpretation for councillors, HMO units and landlords. The assistance from the HMO unit is always helpful and courteous, it's the legislation, the confusion, the conflictual nature of the current setup and the different agendas which create a great deal of stress.
55. Disagree ... changing messages, lack of clarity, knee-jerk decisions ... things coming before council which should be dealt with by HMO unit ... hidden agendas, limited consultation ... The investments that landlords have made in the property supported by good working HMO unit is starting to get lost.

56. Remain positive on the HMO Unit support for landlords and tenants, very negative on the impact that councils have had on HMOs and what their agenda is for HMOs. In other parts of the UK this seems to work much better, we seem to be 'nickel and dimming' HMOs
57. The fees, advertising, planning, etc. all really expensive.
58. I found the procedure very daunting. At least my contact on the council was quite accommodating.
59. The web site is absolutely shocking and is not user friendly.
60. A lot more landlords would be happier with the fee if the funds were put to better use in terms of processes, consolidated guidance, making the dept. more approachable and taking a more pragmatic (and fair!) approach to the implementation of its legislation.
61. I've only heard of one BCC presentation as the department feeble effort to tell us what to do..?
62. Absolute disgrace. The grip on the legislation needs to change - pick ANY council across the water or our friends in the south and align with something that WORKS. Revise the definition of a HMO. Police matters FAIRLY. A landlord in Belfast should be on a level playing field with everywhere else. Change the departments stance - stand with us as landlords and not against us. We want the same outcomes but the implementation is NOT working. Improve processes and access to information.
63. The new regime is somewhat over the top administratively and of course cost more for landlords, with knock-on effects on tenants' rents.
64. I have always found the Council staff very helpful.
65. The computer system for renewing HMO licences seems unnecessarily complex. When I was renewing the HMO licence for one of my houses recently, I had to phone the Council staff to seek guidance on how to use it.
66. Too much regulation and expense
67. Find whole process stressful and extremely hard work
68. Very expensive as well as the CLUD process I had to take out large bank loans to pay the extra expense
69. Everything now a set of threats to make hard up landlords comply.
70. No the scheme as stated under answer for question 1 is overly bureaucratic, slow with use of poor IT system that is not fit for purpose and incorrectly understood parts of the legislation actual requirements. The licensing costs are very expensive compared to prior regime with little benefit if any, it seems the council uses the scheme for revenue generation particularly compared to prior regime. A more efficient and effective fit for purpose IT system and streamlined

process should be adopted to lower costs for council and in turn lower fees for applicants.

71. Somewhat agree. However, as stated the council has incorrectly understood parts of the legislation, for example, required planning permission for existing licensed HMOs which was contrary to the legislation. Also the council is using regime ambiguity to drive out HMOs that are properly licensed and meet the required standards. For example, when single license holder dies the council appears to what to refuse any new applicant who meets the required standards on over provision grounds. This is to the detriment of tenants and potential tenants as it reducing affordable housing stock.
72. The council is slow to respond during process, the IT system is cumbersome and not fit for purpose with poor status tracking capabilities. Staff don't understand the practical application of some parts of the legislation and often instead when asked a question just copy and paste the legislation rather than give proper guidance. Whole process is very slow.
73. Not good. As stated above overly bureaucratic, slow, poor applicant support and council as stated above has incorrectly interpreted some parts of the legislation e.g. requiring existing licensed HMOs to evidence planning approval contrary to the legislation. Applications were incorrectly rejected on this basis which reduced HMO affordable housing stock.
74. The registration fees, architect & planning permission fees, newspaper advertising, PAT tests (on brand new appliances), fire risk assessments all mount up. My houses undergo full refurbishment ranging from £20-60k before anyone goes into them. They are also now meant to be vacant until the licence is granted (unlike under the old NIHE system). The additional financial outlay under the new system is crazy. Change of use planning permission fee is the main factor as it costs £2k to get & submit plans of a house that isn't physically changing internally or externally. Plus all the costs in having an empty property sitting for months. I have no idea if it provides value for money for the tax payer or Council without data.
75. I find the landlord team at BCC very helpful. The process must be a bureaucratic nightmare for them. The public publication of intent of HMO is intrusive & unnecessary as it has to be published as part of planning permission anyway. I own a house with my 79 year old mother & she was upset that her name had to be published in the local paper for everyone to know about her assets (as was I). When the public hears HMO they automatically think of slum landlords, foreigners, rubbish & ASB. Giving its address & saying who is personally responsible indicates no duty of care within the realms of a small NI town for landlords
76. I have found the HMO division to be efficient within the constraints of the process (e.g. advertising notice time period). They have been quick to schedule inspections & issue certificates. My local Council has had delays with granting planning permission due to Covid (7 months). I had to apply for temporary

exemption as I couldn't afford to keep the property vacant & I mostly cater for medical staff who were needed at my local hospital.

77. Too much red tape. I could not follow it - had to get an agent to do the work.
78. I had many phone calls over months and months with Council and Department on registration of properties with HMO status. No one knew what was going on so ownership of HMO registration was not correct. System not fit for purpose. Also why does the Council not just say at the outset that a property will not become an HMO because of the quota system regardless of what standard the property is brought up to. This would save the Council time and money and also the landlord could get on with improving the fabric of their property.
79. The hand over from the Housing Executive was very clumsily. Would appear that there was no cooperation between them or with Landlord Registration Scheme.
80. Council greatly increased the costs to the Landlord to apply for an HMO license even when they knew in advance if a license wouldn't be granted - that cannot be right - indeed, is it distortion but certainly must be making "jobs for the boys/girls"? Shame on you Belfast Council. If I was involved in that sort of practice you would be down on me like a ton of bricks. I have been a Landlord in Belfast for over 35 years providing well maintained accommodation to tenants but it is getting more difficult with hap hazard.
81. The fees are a tax on the landlords of N. Ireland.
82. Can't get through to speak to anyone.
83. No. More red tape and new demands which seem to be overkill: 1. removing latchkey lock from doors, with only a turnkey lock in place. Where is the evidence that this change was necessary? 2. Insisting that landlords should be contacted over alleged anti-social behaviour by tenants. This is a law and order matter to be dealt with by police and nuisance laws.
84. The standards were already very high. Why do more costly changes need to be made and on what evidence. For example changing the door closers? Tenants often wedge doors open permanently, making safety redundant. In the event of a fire, this could cost lives. Why is the HMO unit not carrying out spot checks to ensure that tenants are complying with this safety issue and imposing a financial penalty system to stamp it out?
85. More stringent conditions are imposed on landlords without any evidence of need being provided. This creates a lack of confidence in the system and makes many landlords feel BCC is 'out to get them'. There is evidence to suggest that BCC is determined to reduce the number of independent accommodation providers because the council and other institutions such as UU and QUB have built alternative accommodation in the city centre. (Which students won't stay in because it is too far away from social areas and is too expensive).

86. You are not listening to, or addressing landlords' legitimate concerns. You are not providing evidence or explanation for increasingly stringent conditions and rising costs.
87. This is required to improve the image of HMO's (Communication)
88. Personally I found my dealing with the HMO people to have been more than helpful
89. Must be better contact with landlords. HMO should be less hostile and seek to work with landlords. Grossly unfair that landlord is penalised for ASB where landlord has acted very robustly and quickly. Law and rules on buying an HMO must be made clearer ref license. Can new owner still have license if passed fit and proper person test. 3 months is not long enough for deceased representatives to dispose of property. No estate is wrapped up in 3 months. Landlord should be allowed to transfer licence upon death irrespective of over provision so long as nominee passes fit and proper person test.
90. For the cost paid, I felt the service was incredibly slow and hard to find out what the progress was at any given time - it should be possible surely to see progress online.
91. I found the online help easy to follow.
92. While I understand the goal of Council, the new process was not fit for purpose for an approval before my old license expired.
93. I believe that such a scheme is needed and that largely the process seemed fair. The parts I found (and find) difficult: 1) Finding out progress on the application was incredibly time consuming, progress needs to be visible online. 2) The financial fitness test was not well understood by my accountant or bank - there needs to be a clearly understood way to get this and some clearer criteria - it was the most obscure part.
94. Bad website and no information on reliable tradesmen to carry out works.
95. The website is poor and the system in general is haphazard.
96. Arbitrary, inflexible, autocratic, nasty. Bullying, short sighted, uncompromising in a bad way. Tasked with raising monies for city council and moving students to new city centre purpose built student blocks as per incentives to developers.
97. Definitely not. Whatever you in the council think, most landlords and owners would agree that the new scheme is def not value for money and is really a way to squeeze more money out of landlords.
98. Some staff in the HMO unit did not really fully understand the legislation. The guidance is far too detailed. Some owners are scared of making a mistake in the application, so there is poor direction.
99. The scheme was launched without a roadshow. The IT system crashed at the start. Too expensive, why?

100. There is very little help with the application. I used an agent, more cost.
101. There is no communication that I am aware of. If anything it is a strong antagonism.
102. Poor, no help, computer system is not fit for purpose.
103. All it is extorting more money out of us.
104. It was and is very poorly managed. I know another very decent landlord who took a heart attack during his applications, and he strongly attributes this to the stress caused by the difficulty encountered in application.
105. If anything, it is awful. The HMO management do not care, as far as my experience with them, whether there is or was good communication. It was launched in May and it crashed. No guidance was given to me. Only for LANI I would not know how to do it, and here I must mention Kevin who has been a super stalwart for landlords here. He is a very intelligent and fair man, and must be listened to more.
106. As above, maybe listen to the LANI and landlords and then act with a conscience. As stated at the start, these people are decent, bone fides business people providing a service, just like a hotel provides a service for guests.
107. No as there are too many added costs like all the certs. It will put people off investing in HMO's. But we (husband and wife) think that this is the overall objective.
108. It was so confusing, added to it if you submitted wrongly it was detrimental. Although I think they has rescinded on this one.
109. We were told nothing about it.
110. Simpler, paper copy should also be acceptable.
111. Definitely not, too much cost for a scheme that is no improvement at all.
112. Far too long a process, simplify it and less of the b\*\*\*\*\*t, like bank reference
113. I have found the council staff to be very unhelpful. I suspect that they are also stressed by the scheme.
114. The application is very difficult, and I ended using an agent.
115. Not much help, one officer who came out was rather unpleasant. This is not acceptable for a civil servant.
116. Very poor, the IT system crashed in the first 3 months.
117. The cost of the scheme is very unfairly placed on the cost of the licence for applicants.
118. This is two questions in one. To the first part- the scheme guidance is easy to access. To the second part - no it is not easy to navigate. The online

application form was a shambles to complete and documents that were hand delivered were repeatedly requested again and again!

119. Communication between councils and landlords is adequate from my experience.
120. The administration of the application process needs improved. The property inspection staff are excellent but the actual application process is poor as the online form is difficult to navigate and to upload documents is difficult so much so in the end I had to hand delivered actual documents to council.
121. How much bureaucracy in the application.
122. The council staff some are antagonistic.
123. Far too much unnecessary tasks.
124. Price increase unwelcome, rents have not gone up you know in last ten years.
125. Could be made simpler for sure (Guidance)
126. We should have been given training at the beginning, more help, make it simpler.
127. The fees for the scheme are reasonable enough, but the costs associated with making fit arbitrary rules is extortionate. It is not a coincidence that so many landlords are selling HMO properties.
128. I am a professional researcher and I could not find adequate guidance online. The paperwork is spread across various areas and very hard to track down. Even with the help of 2 lawyers, I was unable to parse some of the poorly written legalise, which contradicts itself. I consulted with some other landlords and experts and they agreed that the website guidelines are at best not very helpful.
129. It depended on who I was talking to. Some staff were brilliant, helpful, friendly and understanding. Some were rude, inflexible and unhelpful.
130. I am all for standards to be kept in terms of fire safety and habitable locations. However, I had entirely different experiences based on who I was dealing with. Some staff were brilliantly helpful, other staff made me feel like I'd done something wrong and were itching to fine me. When I tried to sort issues (e.g., one of the suggestions made was architecturally impossible and when I was trying to figure out alternative ideas, I received numerous thinly veiled threats about fines. I've been managing property for over 15 years without issues and the last 18 months dealing with HMO renewals has by far been the most stressful of my life. Renewal has cost me dozens and dozens of hours, thousands upon thousands of pounds and lost me one of my 3 HMO houses.
131. I do see the need for it but it is very flawed. The fact that you have to pay for a 5 year term and if this is reduced then there is no refund or any sort. I dealt with a sale recently where the HMO license expired 10 days before the completion

of the sale, the only option open to the vendor as the sale couldn't be accelerated was to pay £740 yet 10 days later the license was void.

132. Touched on it above, interpretation changes having massive impacts on landlords. These are not being communicated and once they implemented we are expected to know.
133. Do not agree whatsoever, firstly the planning issue then the overprovision. Many people purchasing house unaware of changes to the interpretation of these conditions. No warning is given either.
134. No real issues here bar the above issues highlighted. The administration is done by team I feel doing their best. Again a lot of them are not fully educated on the changes but that is not their fault.
135. Assistance is non-existent. Members of staff are unable to give guidance as they are obviously not trained. With Council taking over scheme various councillors have their own agendas. They do not appreciate that landlords have spent large amounts of money to bring houses up to standard. They only want to discuss a small minority of rogue landlords and wish to cause difficulty for those who have made an effort to comply with legislation.
136. I am aware of calls made to the H M O unit and the caller being told different information on three occasions. It is a sad fact but as in many Government departments chaos is more often in evidence than common sense. In conclusion guidance and assistance is poor and as it is not forthcoming impossible to understand. I repeat most landlords are Irish spending Irish money and are treated disgracefully.
137. Totally disgraceful. Just check minutes of December Meeting of Belfast Council. Some Councillors would be more happy to see people living rough than offer assistance to landlords. Let us move forward with good quality accommodation and work as a group and forget about personal agendas.
138. Very poor would do credit to a third world country. I hope my information will be useful but I suspect it is not what you wish to hear and I would be surprised if any action resulted.
139. Exorbitant fees. Totally unreasonable.
140. Navigating the on line application form is not user friendly. For example you state on the form there are no chimneys and yet they send a follow up email asking about the chimneys. I add supplementary information at the end of the application. They do not seem to read it at all.
141. The communication with the Inspectors is good and cooperative.
142. The communication back from the Council is weak. I waited 10 months after an Inspection before I received a decision. This is a common occurrence. The stipulation that an advert is placed within 7 days of an application is totally over the top. Landlords have had their application refused because the advert was not submitted within the 7 days and their application fees not returned. Why?



143. The fees are very discouraging from anyone to actually apply for a license. Hence the reason why there are so many HMO in actuality which are not licensed. The costs involved are substantial in addition to the scheme compliance or form filling mean that the costs for a HMO license is sometimes in excess of £3000 with no actual improvements or alternation or non-statutory certificates for the property.
144. I find the website poorly designed, bad to navigate. The guidance is inadequate and does not have any practical advice.
145. With regard to the council and landlords, I found that the council (in this case Belfast Council) was almost 100% incapable of answering any phone enquiry between early March and late October. I kept a depressing record of the 32 instances when calls were ignored against the 3 times they were answered. So an observable benchmark less than 10% of the communications were effective and timely.
146. Excessive and non -relevant administration of the scheme makes it more expensive to run and makes it more likely to charge more for the licence which makes it a disincentive to apply.
147. Poor levels of service form the HMO team make it a disincentive to apply, most rational people would simply choose not to be licenced.
148. Things to consider for improvement: No charge for the first time applications - but more activity placed into penalising those who operate a HMO without a license. Have offenders subsidise the compliant rather than having compliant landlords subsidise the scheme. Minimise the information requests to those that have a tangible bearing on the fitness standards and safety standards on the occupants. The accountants/bank letter for instance. When the government subsidised the renewables sector they have certification for those who could provide installations, leading scrupulous applicants to certified and dependable vendors. Could the same happen for Gas, fire alarm etc. So operation of the scheme would be focused on facilitation of better standards rather than punitive costs and silence. The council could look to step in rights where the council can statutory improve substandard property and recover this via property specific rates related to the improvements performed. This will improve the housing stock, focus owners on improvements so they do it rather than the council, ensure that property can be released back to the market for occupation easing any housing shortage issues. If the house is resold the specific property targeted rates moves with the property ensuring that the council is not out of pocket in the medium term. It would seem appropriate that there would be a link between HMO licensing and the receipt of housing benefit or the provision of council services such as temporary or emergency accommodation.
149. The interface provided for registration and renewals is amateurish in the extreme. My overall sentiments are that the scheme provides little benefit and is awkward to use.

150. I can't be bothered. The Government will do what it wants. We have clients who have owned and responsibly managed their HMOs for years and who were recently told that without spending large amounts to comply with newer standards, they cannot renew their licenses. There is zero flexibility.
151. Poor IT interchange.
152. My communications particularly re enforcement are received weeks after the dated communication.
153. How can the same staff, doing the same job, now cost three times the fee. If I increased my rent by three times, I would be out of business or in court accused of profiteering. IT system must have costed all of a fiver.
154. This question, must be hear for light humour. Guidance changes by the month sometimes by the week. Solicitors, estate Agents and HMO staff don't have a clue about what is going on. This scheme is not fit for purpose and should be scrapped.
155. Why were we not notified of our renewal were due at the start of the scheme.
156. On the whole, I think so (Provides VFM)
157. It is too long winded. When asking for advice, reference is given to clauses etc. If you want to make things simple, go down the line of technical booklets as used for building control - straight forward and easy to understand.
158. From personal experience, I have had mixed responses and reaction since my involvement. Could do better
159. Documentation section long winded and you have to wade through your requirements. Inspection stage can be fickle, depending on the inspector you get, stating one thing on initial inspection, sorting it out only to come back a second time and asking for more.
160. Taking over HMO with my wife, after father in Law passed away. When my father in law passed away, our family was in mourning and after a number of months since his passing, my mother in law passed to us a communication from Council to renew licence. When I approached council we were told that time had elapsed and were liable for possible fine as licence had ceased from his death. A longer grieving time or grace should be considered in this matter, given the good manner of the existing licence of the property. Overall we were treated by council as a matter of fact and had to just go through the HMO procedures if we wanted to secure the licence. Given that the property had successfully gained a licence for over 25 years, it did not matter and had to seek unnecessary statutory approvals. Because of the wishes of my father in law and family we carried out all the HMO requirements and secured a licence for the next 5 years. Whether it is down to Covid 19, we still await issue of licence from council.
161. It's expensive.

162. I found the process fairly straightforward I have to admit but some of the paperwork seemed pointless.
163. No issue with this at all. Even the inspector who has a reputation for being tough was good to work with.
164. I think it's unfair to penalise those who don't have planning approval when they apply. Applies only to new owners of course.
165. Cost is way too high. Old scheme was good enough. This is just a burden on Landlords. Rents will have to rise.
166. The first year no one had an answer for all the questions raised by the new scheme. We were told to just talk to electricians, locksmiths, fire engineers etc, who in turn did not know what the HMO Unit were looking for. Inspectors had different ideas on issues. A bit better now, but still far too detailed. It needs a bit of common sense and practicality applied, rather than taking everything to the smallest detail as it currently feels.
167. On a number of occasions my application was not furthered because someone, in the Unit, missed a reply to a query and it all stalled. Also I received a letter saying License to be granted unless Representation had been received and, if so, it would be attached. Nothing was. Later learned License to be delayed because Representation had been submitted on grounds of oversupply. When asked why it had not been attached to letter, which made the letter totally misleading, I was told someone must have forgotten. Even though the Representation was on grounds that could not legally be taken into consideration i.e. oversupply. It still had to go before Council for them to reject the complaint. I felt this was all unnecessary.
168. I think it is overcomplicated with excessive detail e.g. having to sweep out a gas flue even though gas engineers tell me gas burns clean and leaves no deposits. What it is trying to achieve is to be commended, but there must a simpler way of delivering a scheme that regains the cooperation of the agents/landlords. Also on HMO sales/handover/inheritance timing is so important so that the License is not lost. I think it should only be necessary to check that the new owner is a "fit and proper" person, as the property already has all the checks carried out and so it should continue until the 5 year renewal is up.
169. Under the previous Housing Executive leadership there was a significantly more positive engagement with a Landlord whereas with the Council I feel it has been a much more and totally unnecessary confrontational approach. A practical example of this is when my re-registration was due I would previously have been sent a reminder e-mail by the Housing Executive HMO department (much like being advised when your car or MOT renewal was due) and proceeded to complete the necessary documentation in time for renewal. As an HMO licence is on a 5 year renewal cycle it is easy not to remember exactly when it is due. I will add more details later what transpired in my case as a result of no reminder letter being issued. No proactive communication between

the council and landlords as per my experience as outlined in Question 1 reference re-registration. No consideration given to a genuine oversight in missing the re-registration date despite my pro-active activity immediately once I was notified the registration was overdue. This ultimately lead to a very severe £5k fine being imposed despite a very detailed letter to outline mitigation circumstances and despite the facts that at no time were the tenants under a safety risk or comfort risk. I was very frustrated and disappointed with the approach taken by the HMO department under the new leadership of the council. Under Council Leadership this is now less pro-active, more aggressive and little consideration given for Landlord feedback and circumstances. Please note I would be very willing to provide more detailed information in writing, including a copy of my letter to the Council (HMO), outlining my detailed rationale for why I should not have been subjected to a fine. In addition, I would be very happy to be interviewed by the organisation managing this survey to provide further details as part of your overall survey. I would note my agent was subject to the same lack of consideration and had to pay a £5k fine also. As I have clearly outlined my experience since the leadership of HMO moved from the Housing Executive to the Council has been a very disappointing, frustrating and frankly unnecessarily expensive one which could have been avoided if the Council had adopted the same pro-active communication as was carried out previously by the Housing Executive, when properties already registered were approaching the end of their validity period. I also note it is somewhat ironic that Council (HMO) do not accept Landlord administrative errors whilst at the same time making significant administrative errors themselves, where in my case they shared in writing to me by mistake the name, home address, rental property address, contact number etc. of another landlord they were legally pursuing for an alleged breach (I suspect this may actually be a GDPR breach and I confirm I have not used or passed this information on to anyone else). I would be really interested in understanding if there is a further right of appeal process against this fine, when my letter on mitigation reasons was not accepted by the HMO department. They have claimed verbally they had no requirement to notify Landlords when HMO licences were approaching their expiry date even though this was a clear custom in practice by the previous Housing Executive HMO department. In addition I received no written explanation as to why my letter detailed the mitigation I had laid out were rejected only being advised ' the owner does not have a reasonable excuse for not having a licence '. IN SUMMARY I AM REALLY INTERESTED IN UNDERSTANDING THE PROCESS FOR ME TO FOLLOW TO GET REINBURSED FOR THE £5K FINE.

170. Guidance provided by individual officers within the Council has often been contradictory and at odds with guidance in the publications, and with advice from other agencies (e.g. NIFRS)
171. Communication between the Council and both individual landlords and our organisation (LANI), particularly in the early days of the scheme was non-existent. There is a clear impression among fellow landlords that the statutory

agencies (Council and Department for Communities) regard landlords as 'the enemy' and appear to be content to work against, rather than with, us.

172. The new licencing scheme has simply added additional layers of bureaucracy and costs to the previous scheme. Whilst a landlord's motive is without doubt to make a profit from their property investment, this can be best achieved by providing good quality accommodation which is easy to let and manage to responsible tenants. It is not in a responsible landlord's interest to provide poor quality accommodation or a poor response to tenant's concerns. There has always been insufficient focus on problems created by tenants themselves. In my own experience, the deposit guarantee scheme and in particular the independent arbitration mechanism has finally given landlords a means to hold tenants to account for damage found at the end of a lease. I am concerned at the proposal regarding overprovision and their effect of sales and prices on HMO properties. This is unfair on those of us who have worked to provide safe student accommodation over many years and complied with all legislation.
173. It is ridiculous the amount of money a landlord has to spend for a licence. It is now so complicated that you have to pay agents to look after applications.
174. The nanny and yoke state are having a field day with HMO guidance. It is a pity the Conditions are printed in legal speak and not straight forward language.
175. Aside from the fact it was a lot to take in initially the guidance is well laid out.
176. When I have contacted the council the staff have always been helpful and polite. I appreciate a lot of work was laid at the door of the council workers.
177. We were among the first landlords to undergo the new scheme. It was a very stressful time even though everything worked out in the end. Looking back I would pay an agent if I had to do it again.
178. 3 times the renewal fee, how is this justified?
179. Guidance constantly changing.
180. BCC are not acting on DfC guidance. Council are emailing only, no guarantee that emails are received, for a legal licence that failure to have could cost £20,000
181. Dreadful, and has been from the start, getting worse not better. Not speaking to the end user.
182. Certainly not! Despite council officers saying there was no objections there was. A 300% increase was outrageous. What does the property owner get for this? One example the council needed a full time Solicitor I understand however, the fees paid to an outside Solicitor in the final two years by the NIHE was 7k and 12 k. There is far too much job preservation and making a simple job difficult at our expense remember these staff members ran this scheme for twenty years plus and now some behave as if they are only new as this seems to be the instruction from above. Perhaps this should be offered to a different Dept. to run or even put out to public tender. Renewal applications have taken

9 months and longer when it should have been processed within 3 months. The trusted working relationship has evaporated and an odour of mistrust lingers.

183. This has been a real disastrous uptake by Council. Much of this is down to extremely poor interpretation and indeed in some cases could be seen to be personal, trying to put people out of business. So many changes from telling people Planning was needed to renew, don't apply without planning or we will keep your fee. Apply for a CLUED unnecessarily. There has been massive issue with the council in trying to explain the difference between a New Application, A Renewal, A late Renewal, and A Transfer etc. Not sending our reminder letters to renew their registration which led to property owners missing the date. This was an active decision, pernicious!
184. Communication between Council and Landlords has been extremely poor. Repeatedly asking for clarification not fourth coming, unanswered FOIs, several complaints regarding the operating of the scheme, having to engage Solicitors, steps taken for a JR. ALL IN ALL A VERY SERVICE.
185. This has been a very difficult experience for some landlords, negligence is a word that springs to mind, whereby landlords have lost thousands of pounds loss of rent, professional fees that weren't needed, delays in processing applications and so on. This really needs looked at.
186. Overzealous and unreasonable approach By BCC HMO staff to landlords.
187. Too bureaucratic.
188. Clearly designed to discourage landlords from offering this type of accommodation. You will pay the price.
189. Almost increasing the licence fee by almost 300% was ridiculous.
190. Lots of the experts weren't up to speed.
191. Nothing but a negative approach.
192. NO! HMO Licensing scheme does not provide value for money. It's an expensive process and ought not to be. Particularly with all the other charges. 500 per HMO License!
193. I had to get the property agent to complete the renewal application on my behalf. Because it was a new process with the Council. Before it was much less complicated.
194. I spoke on a number of occasions with the HMO inspector and they were very pleasant and helpful
195. The HMO scheme is set in place for landlords/property owners to maintain their property in good and safe order. This is a good system to have in place. But don't make the renewal process expensive and complex for no reason.
196. Bureaucratic with little respect for the difficulties faced by Landlords

197. It's a fair price for the license
198. I guess it will get easier going forward like anything new it's a little complicated.
199. I have not been involved so can't comment except when renewing a license and staff helpful.
200. Form was overly complicated
201. The license cost has significantly increased along with having to renew the EPC which was still valid!
202. The license application form is overly complicated and most of the criteria was irrelevant.
203. City council do not send current material relating to HMO.
204. Difficult to manage renewal and application of new licence.
205. Amount of paperwork is huge.
206. Seems even HMO office don't understand it well. Getting mixed advises from them
207. Complex and difficult to understand and execute.
208. Too expensive.
209. Have to employ expensive consultants to complete paperwork.
210. Yet to receive any direct communication about the change, had to do my own research.
211. Very poor, asked for advice from Housing Rights but also were not sure what standards were going to be acceptable especially around risk assessments and who can complete these. Advised me that it will take over 6 months to get a license.
212. £1,000 to renew a license is excessive. Why is it so expensive?
213. It is an extremely stressful procedure to go through.
214. I think clarity of communication rates v v low e.g. even the letter granting the renewal is unclear!
215. It is overly complicated in the minutiae of detail and causes house owners significant stress.
216. NO - it was a nightmare from start to finish and that's for properties that were previously registered. Never knew so many despairing and frustrated landlords - the system COULD NOT BE WORSE!!!!"
217. No had to go constantly from one department to another and couldn't email most of the forms as email not accepted - in 2020?

218. I do not believe a worse system could have been devised - in 30 yrs. of business it was the most difficult and stressful process I have ever encountered - and all my staff and every landlord I have spoken too has expressed similar opinions.
219. I cannot comment on this because I only have a single HMO and my renewal in 2020 was my first experience. I will say that I found the renewal process complicated and demanding. I am also aware from talking to other landlords that recent changes to the regulations have been very unwelcome and caused many of them considerable stress.
220. The application process is time consuming and the online portal is not fit for purpose. On numerous occasions I have uploaded documents only to find they have not been received by HMO department. There is no way of checking online if these have been received or review the application from properly before submission. The costs of an application have sky rocketed since this process was transferred from NIHE to Belfast City Council. I simply cannot understand this as it seems to be the same staff who transferred across from the NIHE dealing with the issues and some of the administrative burden has been pushed to the landlords. Also there appears to a very heavy handed approach to fines for non-compliance. I can, to an extent, understand fines for Landlords/Agent blatantly flouting safety regulations and/or endangering their tenants but I have also heard stories of people being fined £5000 for not making renewal applications within the correct timescale with no consideration taken of their personal circumstances. The level of these fines does not appear to be proportionate to issue in question (e.g. if I file a tax return late I would be fined £100 but if I file an HMO application late the fine is £5000). Also there are issues, such as application being declared invalid if not advertised within 7 days of application, the only purpose of which appear to be to "catch people out" and subsequently incur additional fees or fines. When all these issues are considered it would appear that the new scheme is largely designed to raise funds for Belfast City Council rather than actually deal efficiently with the living and safety standards it is supposed to.
221. The official guidance for the scheme is abysmal, in particular in relation to the renewal of HMOs & applications for licences. There is little no meaningful guidance on how the scheme is administered and how the legislation is to be interpreted.
222. When Belfast City Council took over the administration of this scheme on 1st April 2019 there was no advice issued to landlords on how best to deal with the changes. For those of us with registration/licence renewals immediately after that date this became and extremely stressful and frustrating time.
223. The application process is time consuming and the online portal is not fit for purpose. On numerous occasions I have uploaded documents only to find they have not been received by HMO department. There is no way of checking online if these have been received or review the application from properly before submission. As mentioned earlier, the costs of an application have



increased dramatically since this process was transferred from NIHE to Belfast City Council and there does not seem to be any benefit to either the landlord or the tenant for this additional cost. Also the communication from Belfast City Council is not what should be expected and the communication from DfC non-existent. The scheme itself does not appear to represent any improvement on the original registration scheme it replaced. As a landlord it feels as though the scheme has largely been designed to raise funds and to actively reduce the number of HMO's in Northern Ireland by finding ways to make it costly and unfeasible to own one rather than improve the living standards of the tenants.

224. The demands of the new scheme were very expensive and frustrating to fulfil.
225. There was no guidance on using the online system. I scanned and uploaded reports which I'd saved as pdfs, but the system rejected them as they were too big. I had to split them and re-scan them. Then when I thought I'd sent them there was no confirmation at that point that they were successful, so I sent them again. It was only when I phoned the Belfast City Council and asked, that I learned they had been sent numerous times. Apparently, the confirmation was at the very end of the form but I didn't know this. It was not very user-friendly in 2019.
226. I received a letter at the beginning of April 2019 and that was the first communication I had had about the new legislation. So I joined Landlord's Association NI (LANI) and went to their seminars to learn what I had to do. HMO staff from Belfast City Council carried out presentations on what was expected from landlords and they were there to take questions. It was there that I found out that I needed a Certificate of Lawfulness for an existing use or development (CLUD). There was little guidance on how to proceed so I spent some time talking to Planning officers in Belfast City Council. Months after the inspection was passed, I received around 36 hours' notice of a Court appearance necessary to get an extension to deal with spurious and non-related objections to my application. This was an extremely stressful experience and it was only with the assistance of LANI and the support of other landlords that I eventually succeeded in being granted my new licence.
227. My HMO date was Oct 2019 and I only became aware of the new scheme when I got a letter early April 2019, so I had a lot of researching and reading to do before I knew what was different from the former Housing Executive scheme. The HMO staff were very helpful any time I phoned with queries but it was all new to them too. So I think, some training and prior knowledge would have been most useful.
228. £185 to add the name of a managing agent to HMO cert is scandalous.
229. Terrible in terms of how Belfast City Council have treated landlords in the process. See comments above.
230. It is providing a service, does what it is intended to do....

231. The dept. is unclear and we have been given many different answers, I don't think it is very clear... and ever changing.
232. I am currently trying to sell houses, due to this confusing system it is making sales very difficult and off putting to buyers. With the CLUD / planning owners have owned these properties a long time and unsure why they are being asked for this now...
233. The fees are now significantly increased compared with the previous costs. The fact that each separate unit within a block of apartments must now be licenced separately increases the costs with no practical benefit. The other point regarding cost relates to the levels of fines which appear to have been charged. I thankfully have no direct experience but have heard that the Belfast City Council have decided to charge the maximum permitted figure in every case of a misdemeanour rather than reflecting the seriousness of the event in the amount requested as a fixed penalty.
234. I have always found the officials tasked with implementing this legislation to be helpful and knowledgeable but as an agent working with many properties I am probably more aware initially of the scheme requirements. I would expect that many small landlords will be caught out by certain unexpected requirements but am not sure how they could become better informed. I certainly believe that some of the penalties (total loss of licence!) will catch some landlords unaware and that the Act should have a lot more flexibility built into it with regard to errors made by landlords. In particular the requirements contained within Article 29 (Death of a sole licence holder) will probably fail to be recognised by the majority of bereaved families, resulting in substantial loss of income. I believe that Article 29(1)(b) should be deleted and that will cure most of this problem. I also believe that Article 28 should be revoked and replaced with a mechanism which allows the existing licence to pass to the new owner, but the new owner will then have a duty to apply within a certain time frame (3 months?) for an alteration/reissue of the licence in the new name. The penalty for missing any of these dates/ requirements should be a reasonable fine, not forfeiture of the right for all time to operate the property as an HMO. Reasonable fines, not forfeiture, should be the theme throughout any proposed amendments to the legislation. The change of ownership licence requirements will I believe cause the most problems in the future and I strongly believe that a less cumbersome and complicated system is required.
235. It appears that the Belfast City Council may not be implementing the 2016 Act in the spirit which the Department for Communities envisaged. Some of the provisions in the Act could be used to close existing HMOs which have been running successfully for years and I do not believe that this was the intention of the Act. Perhaps there has not been sufficient dialogue between the Department and the Councils.
236. The officers dealing with the scheme have been courteous and helpful. The IT system is however poor. There should be a dedicated agent's section so that agents can apply on their client's behalf. I have elderly clients who are not

computer literate (if they have a computer at all) and also overseas clients who wish me to look after the whole licencing and management process.

237. There's no value for money with this scheme.....it's just another hefty tax for the landlord to take on the chin.
238. The HMO license is hard work and requires a good skill on the computer ...so if you're in a generation that doesn't use the computer.....it can be difficult.
239. The uploading of documents and the navigation of the HMO site was difficult. Too much paperwork that probably no one looks at.
240. Payment 5 years in advance yet no refunds or partial refunds if principle sells or dies and yet the licence cannot be transferred with the property is not reasonable. Pro rata the cost per room is not burdensome but paying 5 years in advance is harsh. Split payments should be made available to those that request them. The subsidised training scheme (With CIH) to help landlords fully understand their role and responsibilities is a great benefit and incentive to small landlords.
241. The amount of new areas included in the scheme (without giving guidance en masse) was overwhelming for individual landlords and placed heavy emphasis on help needed from both HMO officers and landlord bodies. The application form itself was certainly not fit for purpose and was extremely difficult to interact with.
242. Meetings should have been set up with landlords associations etc where guidance could have been given to actually fill in one of these forms with someone from NIHMO who could have answered queries and sorted out technical problems as they arose rather than letting landlords flounder at home on their own and feeling quite inadequate at their inability to fill in what should have been a well thought out simple form.
243. Having been a landlord for over 20 years I am used to the help and guidance of HMO officers.
244. While all persons I was involved with were exceptionally helpful, I found they too were struggling with the implementation of the scheme. There is a lot of NEW areas covered by the legislation that has not been encountered by private small landlords before and it was a herculean task to integrate them all at the one time. The emphasis on warnings and threats of financial, legal, criminal and sanctionable actions that can be taken against any landlord who breaks the rules is slightly disturbing. The vast majority of landlords in Northern Ireland are "Fit and Proper" landlords and several surveys including the NIHE Survey agrees with this.
245. Small landlords who used to manage their own properties are now pulling out due to the increases confusing multi-layered bureaucratic structures. The landlords are now dumping these tasks on to an expanding management agency sector who struggle (because of large portfolios) to meet standards

outlined by a really complicated regime of checks, weekly/monthly/6monthly/yearly.

246. There seems to be a thought process in the higher level administrations, to make the scheme as complex as possible in order to justify the remuneration. The complexity of the scheme seems to have as its strategy to discourage landlords from entering the HMO renting sector and to pressurise out those in it .For a two up/two down three bedroomed house you need to-'submit an add to a paper' giving it the same status as a pub licence application- nothing to do with HMO safety but compounds the administration as another tick-box, adding to costs for both parties.
247. Would doubt if anybody in the business understands the details of such a complex scheme.
248. Guidance issues from a multi-departmental operation with wide-ranging opinions on functioning and practicalities of this over- complex scheme doesn't work.
249. The current scheme as currently applied must be one of the most bureaucratic, cumbersome and confusing anywhere in Europe. Has any consideration been given to older landlords not up to speed with computer downloads and replies.
250. This system is so complicated that landlords have to use agents at great expense.
251. No cause this forces extra and unnecessary costs on to the landlords. (VFM)
252. No I disagree because the scheme appears to change on almost constant basis without any clear reason or explanation.
253. I believe that the scheme is unnecessarily confusing and that older landlords who may not be up to date with new technology find it impossible to work with the scheme because of the need for things to be done online.
254. The previous HMO Registration system worked well. However, it has been replaced by a cumbersome process (a 26 page application!) fraught with difficulties, ranging from software problems, misinformation given to landlords by BCC HMO Officers , delays in issuing licences, licences issued with incorrect date and addresses and threats to landlords of special conditions being added to their licences as a result of unsubstantiated complaints.
255. The fees for the HMO Licencing scheme has increased significantly than those for the previous HMO registration scheme. The licencing scheme has obviously been adopted by the council as an income generator!
256. No. The current licencing scheme guidance (manual) was not easy to understand and assistance was non-existent. Landlords were offered no guidance whatsoever. Council officers appeared to be only interested in communicating with landlords when it was to inform them that they were in breach of the scheme and threaten fines if they continued to operate an 'unregulated HMO.'

257. No. HMO Council staff appear not to have made any attempt to communicate either effectively or timely. Many landlords were misinformed that they required CLUDS before their licence could be approved. This is a timely process which resulted in many landlords missing the renewal date. HMO Council officers then indicated that these late renewals would be treated as a new application and over - provision would therefore be taken into account. HMO Council are currently changing their approach to these late renewals – However in order to get to this position many landlords have had to employ legal counsel and submit legal challenges, all at considerable cost to the landlords. In addition many landlords have suffered a significant loss of rent when they were told, incorrectly that they could no longer operate a legal HMO. Furthermore, that The HMO Council staff failed to communicate in a timely manner is evident by the delay in issuing HMO Licences within the agreed timeframe.
258. I believe the administration and delivery of the HMO Licensing scheme has been very poor. The HMO Council officers are aware that there are problems with their online application software that as yet remains unaddressed. Communications in relations to licences have also been riddled with errors such as incorrect, dates and addresses. Landlords are expected to be accepting of these problems but there is no acceptance of, or consideration given, to human error by landlords in the process. Furthermore, as indicated previously. There have been significant delays in the issuing of licences. There have also been issues where BCC Officers have indicated that they intend to add special condition to licences when there are purported incidence of ASB. However, the majority of these complaints are not measured and the BCC officers have refused to reveal where the purported complaints have originated from. They also do not appear to carry out any investigations to confirm that complaints have originated from an 'affected neighbour; as stipulated in the legislation. Landlords should be able to investigate complaints made against their properties and confirm that complaints are made by an affected neighbour and not be a neighbourhood vigilante with an obvious agenda. Furthermore, nearly 2 years after the HMO Licencing scheme was introduced policy regarding transfer of ownership due to death of an owner, or sale of a HMO remains at the proposal stage. This is simply unacceptable. It was initially proposed by BCC HMO Department that HMO Licences could not be transferred. Again landlords have had to seek and pay for legal counsel to challenge the council on this issue which was an obvious violation of their human rights. As a result Council have conceded and are changing their approach as to how Transfer of Ownership will be addressed. It seems obvious that in adopting this scheme BCC aimed not only to regulate HMO properties but they also aimed to reduce, by dubious means, the number of existing HMO properties in areas which they regarded there was an overprovision. However, when challenged by legal counsel on their methods this is another area on which BCC HMO Department have had to concede and change their approach. It is unfortunate that landlords have had to spend considerable funds employing legal counsel to challenge BCC HMO Department and to ensure that the Council act lawfully and justly in their management of this HMO Licencing scheme.

259. It is all been very confusing. Rules keep changing. Do we need a CLUD do we not need a CLUD which costs the landlord a lot of money to get.
260. I feel that the council should have written to all landlords and outlined all rules especially about renewals, selling and when a landlord dies. This has caused an enormous amount of stress. Also solicitors needed to know at the beginning of this act and I don't feel that they knew the rules. I.e. The new purchaser had to apply for new licence when purchasing a house. This could put landlord's out of business and reduce the selling and buying of their properties. Landlords have mortgages as well on these properties and these mortgages have to be paid.
261. The staff are helpful but the situation is confusing.
262. I think the fees are a bit high to be honest but appreciate some cost is required.
263. No this is the biggest issue for landlords along with communication. I understand there is legislation and red tape which no one on either side enjoys at times but personally I'm happy to do what I am told and I believe most landlords are the same on this front but the problem is no one has been able to tell us what we need to do, so we're having to make our own interpretations and then we're walking on egg shells petrified that we've done something wrong and we'll lose our license, because the punishment of being refused a license is so extreme. Most landlords are working people and their HMO house is their source of income or pension and losing a license could take away their livelihood and wipe out the value of their house leaving them unable to sell it. So I believe we need clear and consistent guidance that is laid out for landlords to follow. My experience is that I agreed to purchase a licensed HMO property in 2019 and I consulted HMO a number of times to get 100% clarity on the steps I needed to take. The problem I had was that if I asked 5 different people in HMO what I needed to do I would get 5 different answers which made it very difficult and incredibly stressful experience. Eventually I got a definitive answer from BCC and proceeded with the sale. However following the purchase I then had communication from members of HMO saying that I didn't do things correctly which again was incredibly stressful but I was able to explain what I was told and they then agreed I was correct. So I believe we need very clear guidance of how to purchase HMO properties that can be understood and followed by both HMO & Landlords.
264. Along with guidance I think communication is the other big problem we are experiencing. When purchasing a house I contacted HMO a number of times to ask what I needed to do and I got a different set of instructions from each person I spoke to. In 2020 when news broke of potential changes to license transfers I called HMO 3 times and emailed 3 times about a property which I had invested all of my money that was mid transfer and was informed someone would get back to me, but I did not get a response for over a month and have still not got a response to my reply. During this time I have been extremely stressed and have not been able to sleep due to the potential damage this will cause to my life and I'm still unable to get any sort of answer or guidance.

265. My view is that landlords and the council or executive or any regulator need to work together instead of against each other which is how it feels at the moment. My fear is that the council don't understand landlords, I viewed the Zoom meeting in December and one council member said on the call something to the effect of, 10% of HMO houses on a street is too much in his opinion and he doesn't like HMOs. To hear someone now in charge of HMOs say this is a very scary thought. Personally I'm a landlord and I run a business employing 4 staff in the local community, I've worked incredibly hard barely taking any time off at all for the past 10 years, especially at the moment with COVID. My business contributes 4 salaries to the local community along with a corporation tax, income tax, national insurance, VAT and I'm very proud to be able to contribute to my local community. I have invested in a HMO house which has been refurbished to a good standard as I want to provide good quality accommodation for members of the community. Like most landlords I'm also a resident of Northern Ireland, whereas some of the larger developments that are alternatives to HMOs are foreign owned or have foreign investors which sends money out of the country so it would be great to see the council support the local landlords who are earning and spending money in Northern Ireland. I believe almost all landlords are hardworking people like myself who share the same goals as the council of providing value for our community so I hope that landlords and administrators can work together for these goals in the future.
266. Previous scheme worked better - new scheme cumbersome, delays, threats and lopsided relationship with landlords. Too many issues unclear and unresolved. Landlords treated like pariahs.
267. Far too expensive.
268. No guidance / training to landlords. No co-operation. Just threats and uninformed communications.
269. Where were the renewal reminders? Any excuse to refuse applications. No timely communication.
270. Very poor overall. No co-operation or working with landlords. A hostile environment generated.
271. The expense involved in the registration process is quite onerous.
272. The website was an absolute disaster to navigate, and this is speaking from the point of view of someone who is constantly working with IT.
273. The licensing process is burdensome, it seems to have suffered from lack of preparation, council staff do not appear to be as knowledgeable on the scheme resulting in miscommunications and misunderstandings. There are technical issues and delays.
274. The increased fees are challenging and the scheme provides minimal value from a customer perspective, it appears to a case of using this scheme to raise funds from an already overburdened partner.

275. It seems the scheme was rushed through with no tangible engagement with stakeholders, essentially there is no proper consultation or consideration on the matter from a landlord perspective on this aspect. The council has used its office to issue a take it or leave it notice, staff seem to be focussed on enforcement, would suggest the scheme might benefit if guidance and support were provided.
276. Communication is more effective when it is fully two way. Even the current one way limited communication to landlords doesn't include proper reminders, the perception is they are trying to catch people out. Contrast this approach with insurance, motor tax, MOT reminders etc. A number of one way communications appear to have been based on incorrect assumptions by council HMO staff.
277. It has been a poor start, the expense involved provides little value, the scheme is beset by technical challenges, communications could be improved, there is no tangible evidence of improvements for all stakeholders and the process appears open to abuse from disaffected parties within a local area. The reasonable views of landlords on a number of practical concerns do not appear to be properly received hence the perception that there is another agenda at play.
278. Don't know what we are getting for our money.
279. Couldn't change information I accidentally entered on website & the staff couldn't sort it ether.
280. Too dear. Something similar to old scheme would suffice.
281. I understand there are some administrative problems and this increasing my costs.
282. Very Simple: More paper work. Cost Landlord more money which I turn will cost tenants more. Silly tick box exercises. Not very efficient, still awaiting certification after 2 years. Can't never get to speak to anyone.
283. I asked once how the cost was produces and I wasn't given an answer. It just seemed to be whipped out of nowhere. Just compare the prices till 6/7 years ago and please explain to me the colossal increase. And this is on top of all the other things that need to be done to certify a property..... it's getting to a stage where you need to take out a loan on top of your mortgage to become certified HMO....
284. Communication is there, but instead of working together. There seems to be a blame game going on. This pass the buck and try and blame each other.
285. Administration and delivery is extremely poor. This is because as I said before things have got far too costly and complicated. No need for have the administrative work.
286. The additional cost incurred for the new application are excessive, especially the CLEUD and paper ad too.



287. When seeking advice from the HMO dept, it totally depended who you got to speak to. I appreciated the new legislation was new to them too, but I was told conflicting info all the time when I sought advice.
288. Not in my experience. When I initially sought advice about whether I needed planning for the HMO, the info I received was confusing.
289. Very hit and miss. The technician who carried out the house inspection was good and as I said above, the experience of those in the HMO unit was variable, sometimes good but sometimes not.
290. The current charge for the service rendered appears high.
291. Guidance and regulation appears confused however my experience of support from inspecting officers is good.
292. Good support from my inspecting officer.
293. I think it is useful but in my view it is targeting the many landlords in an effort to focus on a minority of poor landlords. I'm not sure if is effective in controlling them.
294. The cost of a HMO license appears high in relation to the amount of administration that goes into an application. A concentration of effort on HMOs and little observation of other rented housing is difficult to understand. For the increased cost of the scheme I can't see what has been gained. I feel that current scheme provides little tangible benefit to either landlords or tenants compared to the previous scheme. In the UK HMO licencing is meant to address anti-social behaviour. This point has not been mentioned in this survey and I cannot see that it has been addressed by the current HMO Scheme. Perhaps it's not important in Belfast.
295. The guidance is available on a website but is quite detailed and not always easy to follow.
296. Although there is communication between these bodies, the opportunities or landlords to submit views on matters can be restricted at times. There appears to be little genuine recognition of the views of landlords. It seems that government bodies look on landlords as a subservient rather than as a partner.
297. The HMO application form is unnecessarily long with a number of irrelevant sections. For example, asking an accountant/solicitor to verify that a landlord has sufficient funds to make improvements to a property. This is pointless when no specific improvements are required or any cost identified. The re-application process is quite demanding in terms of timing and the penalties imposed for not following the procedures successfully. It sometimes seems like a scheme to eliminate HMOs rather than improvement management.
298. The changeover has been a disaster resulting in an on line application not fit for purpose, more complicated bureaucracy and considerably more expense. The new scheme has been implemented by Belfast city council in a very heavy handed fashion.

299. As the owner of three rental properties in Belfast I have always adhered to the HMO regulations when controlled by the Housing executive. The changeover to Belfast city council has been such a nightmare that I am seriously considering selling my properties. Maybe this is the game plan. Many private landlords suspect that there is a hidden agenda to put us out of business and allow the big property firms run these rental properties.
300. There heavy handed approach has lowered morale and co-operation.
301. There has been an unjustifiable massive increase in fees after Belfast city council took control.
302. There website and on -line application process is not fit for purpose. I would love to know how much the design of this website cost. It needs a complete overhaul.
303. If it ain't broken don't fix it springs to mind!!!!The housing executive scheme was much better in terms of communication, working and supporting landlords and much better value for money.
304. It is extremely costly. Very little assistance provided. Council staff did not attempt to communicate effectively or timely.
305. I believe this to be very poor. (Communication)
306. The previous HMO Registration Scheme run by the Housing Executive was more than adequate and very well. It ensured that the HMO properties were maintained managed to a particularly high standard (well above the standard of other properties in the private rented sector). The licensing scheme run by the Belfast City Council has been a nightmare to deal with from its commencement in April 2019. The new scheme was brought in without the necessary consultation with relevant stakeholders. I can only assume that this was not completed as the scheme was rushed into force. It is clear that this has led to incorrect advice at times being provided to Landlords from Belfast City Council, which is means that in some cases Landlord's time and finances are being are being taken up with administration of the HMO license rather than being put into practical improvements in the properties.
307. For Landlords of HMO properties the fees for Renewals have increased by nearly 300%. For example 3x3 bedroom HMO Properties renewed in 2016 the fee was £562.50, and now to renew in 2021 the fee will be £1665 (£555 x3). For this huge price hike I feel like the service being provided is sub-standard compared to what had been received from the housing executive. I have been provided with incorrect advice and received incorrect correspondence. In one instance I received correspondence asking me to start the process to remove a tenant from a room that was undersized. This room was over 7msq in size. I had not by this stage made myself fully aware of the legislation, and contacted the BCC to inform them of their mistake to which they agreed. If I had not been fully aware of the legislation and followed the HMOs instruction, I would have lost the bedroom in my next HMO license.

308. There was very little guidance provided at the introduction of the scheme to inform landlords what would be expected of them. The website contains basic information but there is no comprehensive guidance documentation detailing processes that landlords and the council should follow.
309. Belfast City Council's communication with landlords has been extremely poor. At the start of the scheme there was a lack of renewal reminders, something which landlords had come to expect under the registration scheme. Some that did arrive were received late, after the renewal date. The council introduced guidance for completing applications, seen by landlords for the first time at the launch of the scheme. The guidance advised landlords to obtain planning permission or a CLUD prior to applying to renew a licence on an existing HMO property, stating that if they didn't have it their application might be refused. None of that was communicated to landlords prior to the launch of the scheme despite the significant amount of preparation and time needed to obtain a CLUD. The council later conceded that the policy was in breach of the HMO legislation. The council changes policy when it wants to with no prior consultation and sometimes no notice. Landlords do not have a stable framework to work within, for example in a recent change to the way the council treats applications on transfer of ownership. Regarding communication between councils and the Department for Communities, we are aware that there have been regular meetings throughout. However Belfast City Council disregards much of the guidance provided to it by the department, the guidance having been produced following widespread consultation.
310. The overall structure of how this has been designed to be administered has been ill advised. It appears that not only are the penalties being issued disproportionate, there is an underlying movement to try remove HMO properties that have functioned successfully as such for many years. This has been done by either trying to reduce the number of bedrooms in these properties, even though they have worked well and have been approved historically. Or in most cases, trying to mislead Landlords to ensure that properties that have functioned successfully as HMO properties for many years, are no longer able to get their HMO licenses. This has been achieved primarily by the Belfast City Council illegally advising landlords that planning permission or a CLUD are required before making their renewal application. And by the time a Landlord has followed this advice they are past their renewal date meaning a new application must be made, and the Council mis-interpret over provision to try and stop an HMO license being issued. Even though this does not increase the provision. Additional the council decided that they would try and catch other Landlords out by deciding to stop issuing renewal license reminder letters.
311. My property has been previously an HMO. Lot more Bureaucracy now for no added value.
312. Landlord's expenditure increased because of the added bureaucracy.
313. Large volume of papers to read when bullet points would do.

314. As a Landlord have not seen any of these communications.
315. Its implementation and governance has caused immense confusion and anxiety. Physically nothing really has changed other than there are more empty houses.
316. HMO properties pay rates. Significant amounts in some cases. Why are HMO landlords having to subsidise the policing and governance of the licensing. I cannot think of a reason landlords should pay this extra money considering the benefits we provide the locality.
317. Assistance? More often than not I have been given contradictory and incorrect information from the office. Staff were under trained and misinformed. This often led to tension and interpersonal relations to quickly sour. The Act itself is OK but obviously it has had biased interpretation by authorities wishing to crush the small landlord.
318. I have had multiple files and applications lost. Multiple phone calls unreturned. Misinformation was the biggest issue for me personally. Too many people in HMO office had their own interpretation of rules often contradicting their colleagues.
319. Incredibly poor. My views have been coloured by my own experiences which were frustrating and confusing beyond anything I've ever experienced. HMO office was obviously set up to frustrate and remove the small landlord from the market.
320. A very expensive licence fee when landlords already have to pay rates. In England, there is HMO licensing in place for years but tenants pay the Council Tax. Therefore, this is an added expense for landlords. I do believe landlords should incur the cost but they should not have to pay rates as well.
321. I can see no benefit or ease of applying, for landlords, from the previous scheme. I do not see any justification for the increase in fees under the new scheme.
322. I have not seen evidence of an ease of access and understanding. Perhaps the staff are experiencing difficulty in coming to grips with the new scheme themselves.
323. As in my previous answer the fault may lie in Council staff being unsure of their role but I have not experience a cooperative and helpful attitude from Council staff.
324. The previous scheme worked well. NIHE managed scheme was much better as they understood issues and worked them. The new system is very complicated and overblown - full of its own importance might be a way of putting it (the system not the people).
325. The previous scheme worked well. The approach now seems all stick and no carrot.

326. Much greater fees and a far more complex system. No wonder it costs more....
327. I went to training with NIHE and the whole system was helpful. The new approach comes across as confrontational and certainly unhelpful. I made a call with a query and the person went immediately in to attack mode rather than listen, understand and engage. Wrong culture in there I fear.
328. There have been delays and lack of communication throughout the process. It seems to me that the objective is more to frustrate and impede than support and engage.
329. Having been a landlord for over 20 years I am used to the help and guidance of HMO officers. While all persons I was involved with were exceptionally helpful, I found they too were struggling with the implementation of the scheme.
330. Rather expensive compared to the previous arrangements.
331. Difficult to interpret, bureaucratic.
332. Too little (Communication)
333. Preferred the previous NIHE arrangements.
334. No, Management of the HMO has not made it any easier to deal with.
335. I was not provided with timely information resulting in deadlines being missed.
336. It is my personnel opinion that this scheme has not improved the welfare of tenants but has deliberately resulted in additional costs to the landlord.
337. The cost for a HMO renewal which I went through in 2020 increased from just over £300 for the previous renewal to over £900. This is a huge burden of expense on me as a landlord. I wonder how such a large % increase is justified?
338. I found the application process for a renewal in 2020 very long and cumbersome relative to a previous renewal.
339. I find the tone of the communications to be sometimes negative. A more positive, constructive tone would be more in keeping with the aim of the HMO scheme which is to deliver safe and fit for purpose accommodation in a manner which works for all parties - tenants, landlords and regulators.
340. I have found the new scheme to be a lot more cumbersome and expensive relative to the previous registration scheme and I don't believe it adds extra value to either tenants or landlords.
341. Very difficult to understand and without the assistance of a Letting Agent it would have been a complicated process. Deadlines and timelines very tight.
342. It would appear that no attempts were made to ensure timely contact with landlords to ensure deadlines were met.

343. Very difficult for the average landlord to complete the process on their own without assistance from a professional. The penalty for missing deadlines is serious and costly.
344. I have seen no evidence that the HMO licencing scheme has improved the management of HMOs. In my view the old scheme worked very well in this respect. The new scheme has entailed an enormous increase in costs to landlords, and has made it impossible in some cases to let well managed and presented properties to tenants who wish to live in them, This cannot be in the interests of tenants or landlords.
345. I have seen no evidence that the HMO licencing scheme has improved the overall standards of HMOs. Many properties of very high standard are currently off the market and unavailable to tenants owing to the new scheme. The reduction in the number of lettable HMO properties perversely gives more power to unscrupulous landlords who may wish to provide poor standard properties, as there is now excess demand for HMO property in areas such as Stranmillis.
346. The guidance and assistance have been very confusing and inconsistent. The rules seem to have changed many times. Some landlords have been advised that they will be granted a licence if they apply for and receive a CLUD. They have spent a great deal of money on CLUD applications, and now it appears there are additional rules regarding over provision which may mean that a licence will be refused even with a CLUD. If this is so, they should never have been advised to apply for the CLUD and incur those costs.
347. Communication has been poor, ineffective and inconsistent. All landlords who had HMO registered properties should have received clear communication outlining all relevant new rules before the new scheme was implemented. If this had been done, landlords and tenants could have made informed decisions. Instead, the rules have changed and caught many unawares. Properties have become unlettable and unsellable. I note that a key aim of the new scheme is said to be minimise any negative impacts on the neighbourhood and surrounding area. However, I believe that if the proposed over provision rules are implemented there is a substantial risk of strongly negative impacts in an area such as Stranmillis. There is as far as I am aware no evidence of substantial unmet demand amongst families for large 4 and 5 bedroom Victorian houses without gardens. There is a risk that a beautiful area such as this, close to the city centre and the university, is turned into a slum, with boarded up empty buildings and all the attendant social problems. There has been no open dialogue on the justification for the over provision rules, or presentation of the evidence base to support the assertion that these rules are in the interests of the neighbourhood and surrounding area. At the very least I would have expected a detailed impact assessment setting out a strategy for the future use of these properties, based on a robust market assessment of demand for alternative uses, and an analysis of the impact of such future use on the neighbourhood as a whole.

348. The staff are helpful, but the system is ill thought out, unfit for purpose and deeply unjust.
349. In my experience, responsible landlords had a proactive and positive relationship with NIHE officers who were responsible for South Belfast area. The change to Belfast Council has not been a positive experience for landlords.
350. During the transfer of functions of regulation of houses in multiple occupation (HMO) to Councils, it was agreed that the new licensing scheme would operate on a cost neutral basis, with no cost to the ratepayer. It is understood the fee was set within the regulations at maximum amount of £45 per person per year to allow councils scope to increase the fee (currently at £37.00 per person per year) if required, ensuring full cost recovery without requiring an amendment to subordinate regulations. The current fee needs to be kept under review to ensure it continues to operate on a cost neutral basis.
351. Although DfC guidance to councils is of assistance there is scope to review, clarify and align to the legislative provisions, for example in relation to room sizes. The Belfast City Council website for HMOs provides a source of helpful information for both landlords and tenants of HMO dwellings and access to online applications.
352. It is understood communication between the Lead Council (Belfast City Council), lead cluster Councils and the Department of Communities is maintained on a regular basis through quarterly review meetings and between officers ad hoc to address immediate issues. It is understood the Lead Council communicates on a regional basis with landlord associations, landlords and agents which needs to be maintained and continually improved.
353. Belfast City Council is the lead Council for the delivery of the HMO Licensing scheme and delivers this service on behalf of all Councils operating a cluster model with two lead Councils, Causeway Coast & Glen and Derry & Strabane District Council. Lead Councils will be best placed to identify specific challenges, including any necessary improvements to the legislative provisions and guidance which have become apparent during the administration and delivery of the scheme since commencement.
354. It is common practice for landlords to just evade all licencing requirements altogether. That means poor value for money for tenants, extra costs to the council/public bodies for services such as bin collection and water use, and lack of income from licencing fees. It also reduces property values for neighbours.
355. There is very little awareness of this information. It does not appear on websites such as gumtree or spareroom. Landlords ignore it. Tenants are unaware of it. You need to actively search for it to find it and therefore it is difficult to access.
356. Landlords just go under the radar, in my experience. I have no experience of living in a licenced HMO in Northern Ireland, but have lived in unlicenced ones, including my current home since summer 2020.

357. The council fee is very expensive on top of all the safety checks and certificates required.
358. On purchasing a HMO house in March 19 and change from housing executive to council , therefore had to reapply for change of ownership I can safely say it has been the most inefficient and unhelpful incorrect advice regarding its renewal. It required retrospective planning on a property I had just purchased. Having made to jump through numerous hoops and at each stage having to provide more and more information made this practically impossible process. It appeared that the unhelpful support was trying to put people off.
359. Communication differed between different planners with certainly some being very unhelpful.
360. When information was given as requested it always came back as needing more information which was practically impossible to get from the previous owner. It seemed to question truthfulness and integrity.
361. 300% increase for same staff and same inspections.
362. HMO Unit don't understand it! Solicitors don't understand it! I don't understand it. Advice, if you can get it, can't be trusted and changes from Monday to Friday.
363. Launch of scheme was a disaster, landlord were not informed of any requirements, then asked for planning permission for existing HMO. Things haven't got better. The scheme should be removed from BCC as they have shown that they can't run it. Information is constantly requested even though it has been submitted. No confidence in uploading documents to IT system. Recently received email with new licence, an hour received email from officer asking for additional information to process same licence! Concerned about data protection, have had licences issued in wrong name, have seen incorrect details present to licensing committee meeting e.g. wrong name against property. Council are considering DfC guidance when it suits the Council's agenda and ignoring same guidance when it could favour the landlord's position.
364. Launch of scheme was a disaster, landlord were not informed of any requirements, then asked for planning permission for existing HMO. Things haven't got better. The scheme should be removed from BCC as they have shown that they can't run it.
365. Increased the amount of documentation involved and thus increased cost.
366. There is an implication that landlords are always in wrong whereas tenants are not treated in same way.
367. Expensive for lack of guidance provided.
368. Confusing due to changes from previous body.



369. Not only has the introduction of the licensing scheme not improved the management of HMO's, in many cases, the introduction of the scheme has caused many landlords to withdraw from operating properties in the HMO sector. This has been in part due to the lack of assistance and direction given by some HMO Staff especially at the commencement of the scheme in 2019. This was not a fault of the individual staff members, but rather was due to Belfast City Council (BCC) introducing the licensing scheme, without any prior run in time, and therefore before even the majority of their own staff had had an opportunity to receive appropriate training with regards to the operation of the scheme. Unfortunately this then meant that Landlords making enquiries received inconsistent advice and direction, which differed depending upon which HMO Unit staff member was attending to the enquiry. Perhaps the major issue with the licensing scheme is the BCC IT system, which is accepted by both landlord and council staff as being totally unfit for purpose. Whilst a paper application could be made at the start of the licensing scheme, this facility was then withdrawn and the only option open to landlords is to now make their HMO license applications online via a portal, which despite BCC being aware of its shortcomings is as inflexible and disjointed today as it was when first introduced, almost 2 years ago. Currently if an error is made during an application, it cannot be edited out, but rather the application has to be completed by the applicant and then submitted, and then be followed up with an email to the HMO Unit confirming that a mistake has been made in the application and requesting the HMO Unit to access the application from their back end of the system and then amend the application, even though the applicant has to confirm within the application that all the information contained within the application is correct.
370. How can a scheme where the only application available to landlords is via an online portal which is not fit for purpose, possibly be considered value for money when the cost of license renewal has increased by 300%. At the same meeting previously mentioned in March 2019 which I attended as part of the LANI delegation, along with the Dept and BCC officials, and a representative from the Law Society, I specifically asked BCC during the meeting how could BCC possibly substantiate a separate charge of £185.00 to change over a landlords management Agents name on their system in respect of each and every property, and was told by her that she would look into the matter and get back to LANI in connection with same. No response was received back from her.
371. The guidance and assistance given to individual landlords at the start of the scheme was both minimal and less than helpful. Many landlords were threatened with £5,000 fixed penalty fines, if they did not empty their houses of students, instead of BCC Officials trying to assist the landlords and find solutions. There was no grace or run in period and the original paper application form (later withdrawn was not made available in advance of the introduction of the scheme on the 1st of April 2019. Goal posts were constantly being moved by BCC Officials, different staff gave out different instructions, or

made different requests of landlord. Decisions appeared to be made on the hoof, and even as agents we could be told something by one official on a Monday, and by the end of that same week a different interpretation had been applied, however none of these changes were relayed to landlords by BCC. It was only by speaking to other landlords/agents/LANI members that any landlord became aware of the new interpretations. At the meeting in March 2019 as part of the LANI delegation, I advised both the Dept and BCC Officials as we were at that time already within just weeks of the 1st April 2019 and the guidance notes for landlords in connection with the operation of the scheme were still not available to landlords to inform them of their obligations under the scheme that BCC should set the start date back until the 1st August or until the 1st October 2019, but again this request was dismissed out of hand.

372. This is best demonstrated by the councils change of policy in September 2020 when they decided without any prior consultation or writing out to any landlords or agents, to start treating HMO License applications where a sale had taken place, and therefore a change of estate also as NEW applications, as opposed to renewal applications. Due to overprovision having to be taken into account only for new applications, this then meant that the vast majority for HMO Sales could not complete as the 30% threshold for HMO's in those locations had already been exceeded and overprovision would prevent the license being issued. An advice note could and should have been sent out to every HMO Landlord or indeed even an email to every estate agent and or solicitor advising them of this change of policy and perhaps giving 3 months or even 1 months' notice of same but absolutely no notice was given. As usual BCC just rode roughshod over the landlords. Similarly no advice has as yet been communicated to landlords/agents/solicitors to confirm that at a meeting of the full Belfast city council on the 1st February 2021, this policy has now been changed again and to make all parties aware of the new requirements regarding the change of estate for a licensed HMO. This unfortunately is typical of the disdain which the hierarchy in Belfast city council treat all HMO Landlords. It must be said however, and I would wish to go on record and state that the vast majority of the staff in the HMO Unit who landlords/agents come into contact with on a daily basis, deal with us in a professional and courteous manner, and to the very best of their ability at all times.

373. I would contest that the intention of the legislation as was explained to me as part of the LANI delegation several times both up at Stormont during the committee stage as well as by the Department when the legislation was being drafted, was that the legislation was not intended to have an enormous impact on the existing HMO properties, other than in connection with the anti-social behaviour regulations, but was being introduced to ensure a new Holyland did not spring up in North Belfast with the new University of Ulster campus in to Belfast City Centre. The introduction of this legislation along with the lack of preparation by BCC and lack of training of HMO officials at the start of the scheme coupled with the lack of information given to landlords in advance of the scheme has led to numerous HMO properties which were fully compliant

with all the physical requirements of the scheme having to be withdrawn from occupation and emptied of tenants for periods of up to 6-9 months at great inconvenience to tenants and also at enormous cost to landlords. In some cases, as will be borne out by the drop off of HMO Renewals these landlords have decided either to temporarily withdraw their properties from HMO occupation and in many cases the landlords have just withdrawn from the HMO market due to the complexities associated with the HMO licensing renewal process. A further factor in the withdrawal of many landlords from the HMO sector is the threat under the scheme regulations of a criminal prosecution if the landlord or their agent fails to comply with all of the various aspects of the scheme even if that failure is as minor as submitting an application 24 hours after the expiry date of a license, or advertising a property appropriately but failing to email a copy of the advert into the HMO unit within 7 days of the date of the application. Nowhere within the legislation does it mention as far as we are aware even once that time is of the essence, yet landlords are severely penalised time and time again where they have made a minor mistake or indiscretion during the application process through the flawed BCC online portal. On the other hand however licenses are generally issued by BCC well after the 3 month processing deadline has expired, and on occasion with the wrong landlords name in place, or in the case of joint landlords, with one or more landlord names missing or with flat numbers missing. Quite rightly BCC should not be penalised for these minor indiscretions or mistakes, however balance should be applied when landlords have due to human error made similar minor mistakes in the application process. It is plainly inequitable when landlords are penalised so severely for minor administrative errors, yet BCC can make the exact same mistakes without penalty. We are aware of a number of landlords who lost their entire HMO License application fee of many hundreds of pounds because they submitted their adverts outside of the 7 day deadline, and were then forced to make a fresh license application and pay a new HMO License application fee. Another matter of concern is the impending introduction of an out of hours contact no for all HMO Landlord's from the start of March 2021. We have several clients who were advised before Christmas that they were having an out of hours contact number applied as a condition of the granting of their Licence because of a previous noise complaint, which in most cases that was made against tenants who vacated the property several years ago, in one landlords case over 4 years ago and in all instances, where the Landlord and Management agent were totally unaware of the complaint. It was confirmed to these landlords that the reason for the out of hours contact number was solely because of this previous complaint that they were totally unaware of. We understand that the Council have completely backtracked on this decision and now decided that even where a property has no history of anti-social complaints that this out of hours contact number will now be required as a standard license condition. If it was correct in the first instance to apply the out of hours contact number to only those properties where there had been a previous complaint, then how can it now be fair to place that same obligation upon Landlord's where no previous complaint has been made. We understand

from conversations with several HMO staff that this out of hours contact number must be maintained 24 hrs a day, 7 days a week, 365 days a year and that the penalty for not responding to an out of hours contact call on more than one occasion might be a fine or even the varying of the Landlord's Licence. Is it reasonable or proportional to ask a Landlord who owns a single 3 bedroom HMO to be on call 24 hours a day, 7 days a week, 365 days a year for the rest of their life? There will be occasions where a Landlord is sleeping, when their phone is out of charge, when they have left their phone in their car or in their place of work, when they are exercising, perhaps swimming or walking in the Mourne or other areas of no mobile reception, where they are attending hospital or visiting a sick relative in hospital, where they are on a plane, or on holidays, or where they are in their place of worship where it is unreasonable to expect them to be able to take a call, yet on all of these occasions, it appears the Landlord is going to be penalised. We act for many elderly landlords who own HMO properties, and who have not to their knowledge had any noise complaints made against their tenants, yet they are going to be on permanent call due to the requirement to provide an out of hours contact number. What is it that the Council think can be achieved by the Landlord at 2am or 3am in the morning, which the PSNI and Environmental Health office cannot achieve whenever they are on site and the Landlord is not, and they have powers of entry and the Landlord does not? It is most unlikely that any tenants would answer a telephone call from their Landlord at 2am or 3am in the morning and even less likely, if there is a party going on in the property. Furthermore, it must be borne in mind that it is only recently during the last number of months that Landlords have been advised by BCC / NIHMO of any antisocial behaviour issues affecting their properties. Very many Landlord's and management agents have for the last 15 plus years been asking BCC for details of incidents of anti-social behaviour concerning their properties to be communicated through to them so that they could take appropriate action in the matter as anti-social behaviour goes hand in hand with damage to the Landlord's property, and these landlords were on every occasion refused this information due to data protection issues. Indeed we are aware of dozens of occasions where Landlords and Agents having been made aware of a visit by the BCC night time noise team, contacted BCC to get information and details of the incident so that they could contact the tenants and Guarantors to affect future behaviour and were refused all information to the extent that BCC would not confirm whether or not they had called to the property, or indeed if they had even received a complaint. All Landlords who have secured HMO Licenses since April last year have had to provide a rigorous antisocial behaviour plan which has been deemed acceptable by the NIHMO unit, and these antisocial behaviour plans taken along with the fact that BCC/HMO Unit have finally bowed to the landlords repeated requests to make them aware of such incidents, should have been given the opportunity to bear fruit, before a decision was made to insist that all HMO landlords must provide an out of hours 24/7, 365 days a year contact number. The Dept and BCC also need to bear in mind that the HMO properties in the University area provide affordable regulated

accommodation, that whilst being primarily occupied by students, are also occupied by people in low paid employment, and who otherwise would not be able to take up such employment. LANI have heard the argument time and time again “that if there are fewer HMOs in the University area that the students will just have to rent the purpose built student accommodation in Belfast City Centre”, but this is to ignore the fact that the average rent for a room in a HMO in the University area, is around £220 - £250 per month compared to the £550-£600 per month cost for a room in the purpose built accommodation in the city centre. Both QUB and UU probably have a larger student body from a lower socio economic background than the majority of other universities in the UK, and it is entirely wrong to deny local students the opportunity to have a University Education based solely on the premise that they cannot afford the £550 per month charge for purpose built accommodation, when there is no longer a cheaper alternative available through the HMO accommodation in the University Area. In conclusion whilst this response is undoubtedly critical of BCC, it should be stressed that no criticism is levelled at any staff within the HMO Unit, as the faults within the implementation/operation of the scheme flows from the officials who dictate the strategies which the staff within the HMO Unit are duty bound to implement.

374. Poor communications from council. Misinformation that has cost £000's.
375. Experience so far is about getting fees, not granting licence, not offering any advice or training.
376. Significant fees then misinformation that led to significant architecture fees and 18 m loss of rental.
377. Wrong links and advice sent out at the outset April 2019. No training on process or clear advice given.
378. Unprofessional. Unclear. Aggressive. Wrong!
379. Too much bureaucracy and very difficult for landlords to negotiate the numerous hoops put in place.
380. Loaded against landlord and focus on fines for not doing something you never knew you had to or existed.
381. No guidance given. Very difficult to understand.
382. Very slow process. Different person every time and have no idea what had happened. Poor communication between departments.
383. I believe that at £37/person the scheme provides good value for landlords/agents.
384. Yes, the material is easy to find and understand.
385. There is no significant difference between the registration and licensing schemes except, of course, the exorbitant fee.

386. It has been difficult to meet all the requirements in the middle of a pandemic. However, the administrators have been helpful and understanding.
387. The fees for the HMO Licencing scheme has increased significantly than those for the previous HMO registration scheme. The licencing scheme has obviously been adopted by the council as an income generator!
388. The current licencing scheme guidance (manual) was not easy to understand and assistance was non-existent. Landlords were offered no guidance or training whatsoever. Rather than advise landlords in the most efficient way to renew their licences, Council officers appeared to be only interested in communicating with landlords to inform them that they were in breach of the scheme and threaten fines if they continued to operate an unregulated HMO.
389. HMO Council staff appear not to have made any attempt to communicate either effectively or timely. Significantly, BCC HMO Officers made a conscious decision to no longer send landlords renewal reminders, 6 months prior to renewal date. As a result, some landlords missed their renewal date and the council then decided that they would treat these as new applications rather than 'out of date' renewals. They then decided that they would look at over-provision for these new (i.e 'out of date') renewals and on this basis refuse applications (some of these properties had been HMO for in excess of 10 years!) Many landlords were misinformed that they required CLUDS before their licence could be approved. This is a timely process which resulted in many landlords missing the renewal date. HMO Council officers then indicated that these late renewals would be treated as a new application and again, over - provision would therefore be taken into account thereby resulting in refusals! HMO Council Officers have reversed their decision on some of these 'out of date' renewals that they were recommending for refusals on the basis of over provision. They have published guidelines indicating that they propose to change their approach to several issues– However in order to get to this position, i.e to get Council to concede and change their approach many landlords have had to employ legal counsel and submit legal challenges, all at considerable cost to the landlords. In addition, many landlords have suffered a significant loss of rent when they were told, incorrectly, that they could no longer operate as they were an illegal HMO. Furthermore, that The HMO Council staff failed to communicate in a timely manner is evident by the delay in issuing HMO Licences within the agreed timeframe.
390. I believe the administration and delivery of the HMO Licensing scheme has been very poor. The HMO Council officers are aware that there are problems with their online application software that as yet remains unaddressed. Communications in relations to licences have also been riddled with errors such as incorrect, dates and addresses. Landlords are expected to be accepting of these problems but there is no acceptance of, or consideration given, to human error by landlords in the process. Furthermore, as indicated previously. There have been significant delays in the issuing of licences. There have also been issues where BCC Officers have indicated that they intend to add special

condition to licences when there are purported incidence of ASB. However, the majority of these complaints are not measured and the BCC officers have refused to reveal where the purported complaints have originated from. They also do not appear to carry out any investigations to confirm that complaints have originated from an 'affected neighbour; as stipulated in the legislation. Landlords should be able to investigate complaints made against their properties and confirm that complaints are made by an affected neighbour and not be a neighbourhood vigilante with an obvious agenda. Furthermore, nearly 2 years after the HMO Licencing scheme was introduced policy regarding transfer of ownership due to death of an owner, or sale of a HMO remains at the proposal stage. This is simply unacceptable. It was initially proposed by BCC HMO Department that HMO Licences could not be transferred. Again, landlords have had to seek and pay for legal counsel to challenge the council on this issue which was an obvious violation of their human rights. As a result, Council have conceded and are changing their approach as to how Transfer of Ownership will be addressed. It seems obvious that in adopting this scheme BCC aimed not only to regulate HMO properties, but they also aimed to reduce, by dubious means, the number of existing HMO properties in areas which they regarded there was an overprovision. However, when challenged by legal counsel on their methods this is another area on which BCC HMO Department have had to concede and change their approach. It is unfortunate that landlords have had to spend considerable funds employing legal counsel to challenge BCC HMO Department and to ensure that the Council act lawfully and justly in their management of this HMO Licencing scheme.

391. Absolutely not. It has made absolutely everything so much more difficult. I feel very strongly as a landlord of many years that there is a huge amount of unnecessary paperwork. The red tape is totally ridiculous.
392. Absolutely not. I don't see any value to participating in the scheme whatsoever.
393. Absolutely not. I have been given the wrong advice on several occasions. Staff are very nice and helpful in HMO office but at times they have been unsure of what advice to give out.
394. I have absolutely no confidence in the new scheme. I could see some value in previous scheme but the new scheme is horrendous. We are not running a factory of 100 employees that need fire plans drawn out. The burden on landlords for ridiculous and unnecessary paperwork makes me very angry. I feel the small local landlord is being deliberately driven out to accommodate all the bigger players in the student market. No longer will there be a local landlord who you have direct contact with and build relationships with. It will be an outside company who will have the management team who can research and pay for the new updates in HMO.
395. Due to complex nature of application form.
396. Lack of communication and poor interpretation of facts.

397. The scheme should work with landlords not put obstacles up - it's in everyone's interest to have safe reasonably priced accommodation.
398. Process is inflexible and it appears that the rules are there to reduce the level of HMOs in the university area of Belfast. This is instead of driving up the quality of HMOs.
399. To pay for a system that doesn't work and processes and management that are poor and inconsistent. Changes are not communicated or consulted upon.
400. I have had some contact with the HMO people. They didn't get back to me and didn't appear to understand the regulations themselves. Letters sent are generally in threatening tone.
401. Messages left are not returned.
402. Poor, inconsistent, processes and management need to be reviewed.
403. It feels as if we the landlords who have been proactive in keeping our houses up to standards for years are being made to pay more and more when we took risks years ago and receiving very little in return except having to pay more for less.
404. Sometimes they push paper and make us pay for the privilege.
405. Too costly for landlords.
406. Processes/communication/interaction remain very poor.
407. Increased costs + poorer service do not and cannot = VFM!
408. Communication is poor, decision-making inconsistent, customer care re landlords is minimal.
409. Communication to be effective has to be two-way. No effort has been made to achieve this. Messaging is just one-way ... from the centre outwards.
410. Strategic thinking and preparation have been very poor, communication likewise and the rolling out has been inconsistent. Standards being applied to landlords are not being applied within BCC.
411. Major cost had to be passed on to tenants and took focus off servicing the renters and market to keeping onside of regulation.
412. It probably is for HMO staff. But it is just one more regulatory layer of many which have to be dealt with. Providers are not regulators, although regulation encourages the market to produce providers whose skill is managing the regulation, not providing accommodation (guidance)
413. Councils and Departments should stop communicating. They can build their own accommodation if they are able, and let the private sector do its own. Any communication is a cost.



414. Creates further permanent pensionable civil service bureaucracy feeding, ultimately, off the renters.
415. It is very unclear as to how funds raised from the scheme are reinvested to make improvements in areas of high HMO density. Since the changes costs have increased 2-3 times with no noticeable improvement whilst the underhand attempts to remove HMO status properties that have legitimately operated for many years risk reducing both capital value and rentable value. Costing more and reducing return on investment for landlords in parallel whilst offering no noticeable improvements can hardly be seen as good value.
416. I will give one personal example: for almost the full duration of the scheme I have sought clarity as to how planning use as an HMO sits in line with licensing. I have spoke to several members of Belfast city council HMO team and planning service and get vague and uncertain responses. Changes in interpretation of the scheme are never communicated to landlords and instead spread through the landlord community by word of mouth.
417. In the duration of the scheme as a landlord I have received very limited direct communication and what has been received could be interpreted as unsolicited threats of enforcement rather than any constructive engagement. For example and out of the blue demand for a 24/7 contact number for reporting antisocial behaviour was received accompanied by threats of consequences for not providing the same was received. Due to concerns that my tenant had been behaving irresponsibly I contacted BCC to be told there had not been any complaints this was just a new requirement being introduced. This could have been much better explained in the letter and avoided no doubt numerous similar enquiries with BCC that detract HMO staff from constructive activities and beneficial engagement with both landlords and tenants. Another example being this questionnaire, despite being a registered landlord no direct request came to participate in the survey and attention to the opportunity came only via my employer managing agent.
418. Overall poor, inefficient, confused, adding no apparent value and most concerning attempting to avoid renewal of HMO licenses for properties that have been well managed and legitimately operated for many years as an HMO under previous arrangements. Much more constructive engagement with both landlords and tenants is needed. The density of HMOs in certain areas must be accepted as they stood at the introduction of the scheme as was portrayed to be the intention at its introduction.
419. The service has in fact deteriorated, an option notably omitted from the above choices. The reason I say this is that the HMO unit is unable to consistently administer the scheme. In the 2 years since the council has controlled HMOs there have been complete U turns on: 1. Licence renewals (planning permission requirement) 2. Transfer of ownership (policy has changed twice and is still unclear) 3. HMO owners were advised to obtain CLUD or planning permission - which is now irrelevant to the renewal or transfer of licences.

Senior HMO offices cannot or will not give clear and credible advice on how applicants should correctly apply for licences.

420. The service is entirely funded by fees paid by landlords (as stated in the economic appraisal carried out before the legislation came into force). Therefore the only party who could have value for their money are Licensees. In fact they received: - Licences renewals denied on grounds of planning contrary to the HMO Act - Unclear and incorrect advice on how to apply for a licence. - Denial of licences on procedural grounds despite best efforts to follow procedures that even the HMO unit management don't understand. - Incredible denials that the objective of BCC is to reduce the number of HMOs (however actions speak louder than words)
421. Nothing could be further from the truth. I have every sympathy for the junior staff at the HMO unit who tried to provide guidance on a new regime, new IT system, new employer and new legislation. However BCC and senior HMO officers have presided over an omnishambles. As a corporate body BCC took on the HMO unit without making adequate (or any) resource planning. - No IT system at commencement - No access to previous files held by Housing Executive HMO unit (or that is what they told me) - Files uploaded by applicants as part of the licence application process were not available to Building Control Officers in Coleraine who were administering it. These BCOs were then contacting applicants informing them that they had not provided all required info....files had to be emailed directly. One year after the commencement HMO unit managers claimed to be unaware of this problem and only accepted it was an issue when confronted with assertions from multiple landlords at LANI meeting.
422. No evidence of advance guidance or any communication to Estate Agents, Solicitors or Law Society prior to transfer of HMO Unit to BCC and change of legislation. HMO unit manager only attended LANI meeting 6 months after transfer to BCC following the volte face on planning requirement for licence renewals. Further subsequent policy or administrative changes have been implemented without transparency. Eg. Until October 2020 (approx) new licence applications with a CLUD were granted, after Oct'2020 they are being rejected. How was this decision made? Who made it? Council? Licencing Committee? HMO Unit management? Furthermore the implications of this on the sale or purchase of HMOs is unclear due to contradictions in the 2016 HMO legislation - only a brave man or woman would purchase a licenced HMO at the moment.
423. As state above - Omnishambles. - 2 years in the council is still figuring it out as they go along. - HMO managers profusely refute any suggestion that the objective is to reduce no. of HMOs but the practical effect of the scheme is exactly that. - There was lack of adequate planning and resources allocated by BCC to take on this new responsibility which they lobbied to get.
424. The scheme is forever changing and is so hard to follow for a landlord that it makes trying to manage properties impossible.

425. Absolutely not, puts landlords out of business and drives up rents. (VFM)
426. Complete minefield. (Guidance)
427. Housing Rights believes an awareness raising campaign around rights and information both for HMO tenants and landlords would be helpful. This would be especially important for migrant communities/students who disproportionately live in HMOs. Indeed, the high number of migrants living in HMOs means any information provided should be extended to a requirement to provide this information or at least a synopsis of same in relevant languages/formats.
428. It is our experience that there are some communication issues/delays between councils/LLs/DfC, especially in terms of the 'fitness' of a landlord. This information needs to be shared in a more timely manner to ensure landlords who have had issues raised against them can be more easily flagged, and make sure tenants are protected. In our experience, Environmental Health Officers tend towards informal resolution of issues. This runs the risk of repeat offenders passing the Fit and Proper Person test when they would not if the council took a stricter approach to enforcement. It is our view that these incidents which are resolved by informal means should also be noted and shared to enable patterns of repeat behaviour to be identified and considered in application of the FPP test.
429. From our experience of Landlords contacting Housing Rights, they are sometimes unaware of the length of the application process and leave it too late to apply. Better communication and targeting of landlords with expiring licenses from maybe one year out to give them adequate time to get advice, gather documentation and submit the application would be helpful.
430. Very expensive.
431. Needs a professional person to work out what is required (Guidance)
432. Management has become more difficult & confusing.
433. The cost have risen significantly and is very unfair to landlords.
434. Honestly the whole scheme is very confusing for landlords and agents.
435. Communication is not good and appears very one sided -- BCC is not listening to Landlords.
436. Without the help of our agent, it would have been quite difficult.
437. A great lack of flexibility.
438. Costs have increased by a multiple of 3 with no additional help or service for landlords or tenants.
439. It appears rules have been made without proper consultation with the people who understand the full landscape. Costs have significantly increased to register an HMO without any increase in value to landlords and tenants.

Demands on landlords such as a 24hr contact number. Cannot understand why contacting an elderly retired woman in the early hours of the morning to resolve some noise issues could ever be deemed a good idea, and what possibly could she do in this sort of scenario. This seems a case of passing the buck rather than asking tenants to take responsibility in the normal ways that society provides i.e. policing and legal avenues.

440. Often contradictory (Guidance)
441. Demonstrated by the councils change of policy in September 2020 when they decided without any prior consultation or writing out to any landlords or agents, to start treating HMO License applications where a sale had taken place, and therefore a change of estate also as NEW applications, as opposed to renewal applications.
442. Too much red tape.
443. Too much information required e.g. statements re your financial state; too much paper work, too many social responsibilities implied. E.g. telephone contacts re social issues.
444. The new system puts me off having a HMO. Procedures are cumbersome and not user friendly
445. Cost has increased 300%
446. Guidance is minimal and unhelpful.
447. There was minimal communication.
448. The issue is not the administration cost of the scheme, but the wider costs associated with HMOs in areas such as the Holyland. In assessing VFM, the cost of policing the Holyland (PSNI, Council officers) and cleaning it should be considered as well.
449. There is not enough joint working between Council and DfC (as well as Dfl) on resolving the long-running problems in the Holyland. Communication with landlords needs to be more focused on making them responsible for the properties and accountable for the actions of their tenants.
450. The scheme fails to deal with the over-provision of HMOs in the Holyland and all of the problems that arise from that. The scheme should be judged against that failure. I would particularly refer to the use of CLEUDs, which seem to provide a mechanism for landlords to escape enforcement secure retrospective approval for operating an unregistered HMO. Their use allows the limits on the number of HMOs in a given area to be circumvented. Any loophole created by them need to be blocked. I also understand that standard conditions do not apply across all HMOs, and that the conditions depend on when the HMO was licensed. All HMOs should be subject to the same standard conditions.
451. The changes have been brought in without adequate preparation or notice. Belfast City Council seem to operate the scheme very inflexibly creating

additional problems for landlords, rather than concentrating on the purpose of the scheme to improve the quality and management of the HMO accommodation.

452. Particularly bearing in mind the difficulties encountered in dealing with the new scheme (VFM)
453. Lack of prior notice and preparation of the functioning of the scheme.
454. Lack of support from Belfast Council without warning and the online facility is at best "no fit for purpose".
455. It is not fit for purpose and requires knowledge of licensing laws in other areas to complete.
456. There is only the online version and is not fit for purpose. There is an issue over completion time. It seems again set up to push landlords off from applying for HMO which is totally counterproductive leading to a very grey area.
457. The new licence forward at a very short notice without prior consultation with all shareholders, badly handled. It seems also as a council lead licence Belfast City Council is the main lead within all councils.
458. Poorly designed and lack of understanding from the councils of a scheme developed by the councils. This will drive many landlords away from HMO which was set up to control and manage this type of property.
459. It seems to have increased bureaucracy and no improvement of management in our case.
460. Over complicated and very expensive for basic administration.
461. Totally confusing, very poor guidance. If it were not for our professional and efficient letting agent we would withdraw our property from the HMO stock.
462. It would appear to be very disjointed and not very well thought out as the rules seem to be changing constantly. Especially when selling or transferring a property.
463. It seems to be an over complicated scheme that does not make much sense especially selling property, antisocial behaviour contact arrangements. I would suggest that consultation between BCC and the professional letting agents who have an extensive knowledge in this market would prove to be a valuable experience for all concerned.
464. We are not due for renewal yet but we believe that the charges for renewal have tripled so if that is the case definitely not fair. Previous charges were manageable!
465. We have not had experience of this but have talked to other landlords who found difficulties and contradictions in the system when trying to get assistance with new rules that were being applied.

466. We continually worry about all new legislation as we don't seem to get enough notice of any rule changes. We find this very stressful!
467. We didn't understand the necessity for so many seemingly awkward changes to the original HMO system which has worked well for many years. The application of it seems to be confusing landlords and inspectors alike. We have always looked after our tenants extremely well and in return they look after our property. Rarely do we have to charge anyone for damage at the end of a tenancy for this reason! If the recently instigated scheme is to target badly run properties, it doesn't seem fair to penalise the landlords who take a pride in theirs. Would it be fairer to have a grading system so that people like ourselves would not be penalised for other people's neglect of duty? I understand that landlords are being asked to be on 24 hours call and give their tenants their personal mobile phone numbers. We have never ever had any tenant complain to us that they needed us so badly that they couldn't wait till the morning. Presumably if there was something really serious they would call the police, fire brigade or ambulance themselves and we couldn't help anyway? I would also like to mention that we are always complimented on the speed with which we react to phone calls reporting faults, usually within 2 hours. We actually insist as a requirement that our tenants report anything that is troubling them immediately. We are part of a system providing very reasonably priced accommodation mainly for students. Until 2 years ago and for the previous 10 years we had not applied a rent increase. Making the HMO system more complicated and expensive will only add to the burden placed on us and result in rent increases for the student population who least can afford it.
468. Poorly delivered, not thought through, lack of preparation and training of relevant staff too strict and punitive, too little discretion allowed.
469. Little notice of changes given and no room for human errors
470. Not user friendly at all
471. Time to get approval, difficulty in completing the application form
472. I believe some good and genuine landlords have been "turned off" by the difficulties in securing HMO
473. Costs have increased significantly and the application process was more burdensome.
474. The application could not have been completed without support from a professional working in this area.
475. There was a lot of uncertainty regarding the re-application and the change from NIHE, and the consequent risk of not getting HMO and the value on the property.
476. The system came into being without any trial period. Many problems with the online portal. If I had not been able to rely on the experience of the letting agents I would have been unable to complete this. Possibly withdrawing the

property from the HMO register. Maybe this is the intention but in my view the HMO stock is required to provide a cost effective solution for the likes of students and low waged.

477. As stated previously, the online portal is not fit for purpose. It was introduced without a trial period. (Hard to believe). The increase of some 300% is impossible to justify as the service has got worse. I repeat that without expert help (and expense) I would probably not have been able to complete application.
478. Absolutely not. As I have said previously without expert help I would have given up. The staff administering the scheme did not seem to know how it was supposed to work and frequently gave misleading answers to queries. A pilot scheme would have been sensible. Also the introduction of this scheme included too many references to the penalties that could be imposed if one failed. My memory is a fine of £5000!! As I said previously, I am left to wonder if there are different motives for the introduction of this scheme.
479. What communication??!!?? It is fairly usual that as a small time landlord, one finds out about decisions made some time after they have come into effect with no consultation at all. I am usually made aware of the likes of this through my letting agent. Any communications received directly are usually quite threatening in nature and usually with a short time to respond. Maybe that is ok for persons who are operating multiple HMO properties as their main source of income but hardly for single property owners who have invested in a hope to boost some failing pension options.
480. As I have said previously I am unsure as to the real reason for change in this matter. It does seem to me that it is to reduce the HMO stock and indeed this may be a good idea in some areas. However, as I have said the HMO stock is required for a low cost alternative to purpose built accommodation provided by universities. I for one would not have been able to afford to go to University if my five years of study and required the additional cost of managed accommodation. I would urge caution as in general I feel that 3rd level education, with the level of debt it brings, is putting off lower income groups and this would be a real tragedy.
481. I have had problems getting answers from HMO as when transition happened, there were answers even the inspectors could not give clear answers to. I also have issues sometimes interpreting what a letter actually means and sometimes how to answer. And due to the current applications I get very anxious as to how to answer some questions as there does not seem to be an easy way to amend an answer if I have done wrong.
482. I don't understand how the fees were allowed to jump by 300%, as with all business at present, money is tight and unfortunately quite a lot of us have hefty loans against properties. And if a landlord / agents name was changed I find it hard to understand why for a simple typing exercise we are charged £ 185.00.

483. Goal posts are continually being moved, and with threats of £ 5,000.00 fixed penalty notices this puts more stress on.
484. I have had HMO properties for the past 30 years and have always tried to keep up to date with properties around me, I usually give my tenants my mobile number that if there is a problem to ring me as well as agent, which has worked well. My properties were my pension for the future, and with you now changing and moving goal posts if I wanted to I can't actually sell as an HMO properties which significantly reduces price of properties. can I please point out it disgusts me the way certain tenants in Holylands etc. make the area not a nice place to be when they are partying, these people should be made an example and kicked out of universities. I also can't pass HMO property to my own children and changing of estate to HMO property.
485. HMO inspectors who I have worked with for years always treated me with respect and I them, as I wanted my properties to be of good condition. When I heard that I had to provide an out of hour's number for my-self. this is not a problem but if for some reason there is a party going on, am I to be called to come and sort out even though I cannot go into premise without notice, the police and ground staff at property have right to enter property to sort, I know that from experience if I try ringing tenants during the day or evening they tend not to answer. In my opinion you do not want students in affordable housing, as you want them to move to the huge amount of buildings also owned by private developers.
486. Overall, it has not improved the licencing scheme. Mainly due to bad communication with landlords and agents, lack of clarity of new regulations, and give the impression of changing rules without any consideration of the impact it would have on landlords.
487. Mixed messages from BCC since they took over. No consultation whatsoever with either agent or Landlord when decisions are made. No understanding of Impact on Landlords with new rules.
488. The only communication Landlords have from the council are threats of losing their Licence on every occasion when there is a disturbance in the area of their property. Now they have insisted on the mobile number of Landlord for contact when such a disturbance takes place. What can a landlord do to resolve a disturbance near his/her property that others cannot resolve? Another anomaly to new regulations is that a current Landlord cannot sell his/her property to another, to continue as HMO because of the 'over 30% ' rule introduced. A Landlord name change, would therefore be refused. This would also apply when the landlord passes property to family member. This rule must be changed as it's unworkable.
489. The administration and delivery of the scheme requires a lot of improvement since take over by BCC, in terms of some sort of consultation with agents and Landlords of the area in question. The impact of some of the recent decisions



made have far reaching consequences on landlords. I can only assume the thought process behind these was not given proper consideration.

490. The Department seems unaware or is disregarding that The NI HMO Unit, Belfast City Council, has not been applying the 'over-provision' clauses in the HMO Act and the constraints set out in the 2008 HMO Subject Plan. This is despite this non-compliance being raised with both the Council and Department. As a consequence, HMO planning permissions and licenses are being issued contrary to the provisions of the Act and the Subject Plan. It follows that, contrary to the spirit of the Act, the perennial problems with over-provision of Houses of Multiple Occupancy are not abating.
491. Given the above, we have no confidence in the current administration and delivery of the scheme. It is my view that Belfast City Council has a conflict of interest in relation to HMOs: and I consider that the Department should take over responsibility for addressing HMO over-provision. The Department should set up procedures to preclude ineligible Houses of Multiple Occupancy from obtaining planning permissions or licenses. Any amended Act should further include responsibility and provisions for dealing with unlicensed Houses of Multiple Occupancy. This issue is not adequately addressed at present.
492. This guidance is not common knowledge and don't know how to access it for reference.
493. I have no confidence in the current administration and delivery of the scheme. Belfast Council appears to have a conflict of interest in relation to HMOs: and recommend that the Department should take over the responsibility for addressing HMO over-provision. The Department should set up procedures to exclude ineligible Houses of Multiple Occupancy from obtaining planning permissions or licenses.
494. I believe the system is more complicated.
495. How can a scheme where the only application available to landlords is via an online portal which is not fit for purpose, possibly be considered value for money when the cost of license renewal has increased by 300%.
496. The guidance and assistance given to individual landlords at the start of the scheme was both minimal and less than helpful. Many landlords were threatened with £5,000 fixed penalty fines, if they did not empty their houses of students, instead of BCC Officials trying to assist the landlords and find solutions.
497. This is best demonstrated by the councils change of policy in September 2020 when they decided without any prior consultation or writing out to any landlords or agents, to start treating HMO License applications where a sale had taken place, and therefore a change of estate also as NEW applications, as opposed to renewal applications.
498. Over provision of HMO's and monitoring of such has not been effectively addressed areas that do not have a strong community voice would appear to

have no level of provision monitoring taking place. There appears to be two lists of HMO in operation the old list and the new with no provision to address over provision. There are no obvious working practises between council and the department.

499. I am not confident of current scheme ability to address the issues given the levels of grey areas and the flexibility applied towards landlords. Do statutory staff declare an interest if they or their family are acting a landlord.
500. The previous system worked perfectly. The new system has created paper work for the sake of it and is overpriced. Don't forget land lords are paying large rates.
501. The fees increase 300% with no increase in value from licensed authority.
502. Very complicated compared to previous system which got job done efficiently. Communication re reminders for e.g. were very poor/ didn't exist.
503. Reminders were not sent out. Communication was very poor.
504. As previously stated admin very poor. Reminders were not sent out as in previous system which resulted in disruption in renewals etc. Some staff were most unhelpful which is surprising given the fact that they are public servants.
505. The scheme run by the NIHE was good if needed access to them was easy.
506. Overpriced. Responsible landlords will adhere to health and safety.
507. It would need simplified (Guidance)
508. Agree with communication between council and landlords do not know anything about the council and communities communication. Communication with myself and NIHE never was a problem under the old scheme.
509. My agent deals with all the administration why would a landlord/agent be responsible for anti-social behaviour it is clearly a police matter that is what we pay taxes for.
510. Clear guidance on website. Experienced and knowledgeable staff. But some loopholes in legislation.
511. Inflexibility in applying. Only can be applied online. With difficulties arising if a mistake is made. Would prefer choice of being able to fill in on paper.
512. The scheme has taken away a choice of how to apply and charges 300% more. The scheme also charges an exorbitant amount to change a simple piece of information.
513. I have received no guidelines or information from BCC regarding all the changes that have taken place. I have relied on a very experienced and competent agent to advise me. When BCC make changes to the regulations it

is their responsibility to advise and inform the landlords what these changes are.

514. Once again I have not as a Landlord been informed by BCC as to the major changes being made regarding the renewal of Licences which will have a major impact both on myself in the longer term but also the provision of affordable accommodation for students in a long established student area.
515. I as a landlord would wish to be informed if any antisocial behaviour was directly associated to my property. I do not however feel it necessary to be available 24/7 for this purpose. I would ask what would you expect a Lady in her 70's to do, if informed at 3am?! My understanding of the legislation is, when it comes time to sell my property, my property will not be renewed as an HMO. I purchased this property in 2004 as an investment to augment my pension. I am NOT contrary to public perception a rich landlord and I'm not alone in this position. I bought my property with a mortgage and paid the going rate because the property had an HMO Licence. The property crash of 2008 wiped out the value of these properties by approximately 50% I have continued to pay the mortgage and have kept the property for the sole reason of waiting for the value to increase enough to clear the mortgage. I do not financially benefit from it but it pays its overheads. Now BCC intend by this legislation to devalue these properties again by refusing upon a sale to renew the HMO Licence. I find it difficult to comprehend why a Council is legislating laws which will adversely affect investment in their area. In the longer term you will be taking away hundreds of rooms for students with less high income financial backgrounds.
516. Scheme introduced prematurely. Has made life as a HMO landlord very stressful.
517. Absolute disgrace. £185 to change a name on a form. Authoritarian BCC just dismissed our protestations out of hand.
518. Little guidance. God help anyone trying to deal with this new legislation by themselves. Threats of fines constantly mentioned. £5000 and criminal record if things not done on time. I think a few lives might have been shortened by all these draconian measures.
519. Let's just introduce new rules every few weeks. Judicial review considered by many as unlawful acts introduced willy-nilly. It's as if BCC wanted to drive us all out of business so that students and other young professionals would have to occupy purpose built blocks downtown Belfast at exorbitant rents for low paid n.ireland.
520. I had been assured that this new legislation would not affect too much existing HMOs. This has proven not to be the case. The scheme has been hijacked by petty bureaucrats who would appear to have an axe to grind against landlords. I could write pages about all of the things BCC have done unfairly since scheme was introduced but haven't enough space or time. The latest cockamamie scheme is the introduction of out of hours contact telephone numbers expecting owner of a property to attend a property if some incident occurred at that

property 24/7. Rediculous and dangerous for the landlord. Police and statutory bodies have powers not given to owners and could lead to legal action against landlord by tenants. It is hard to imagine any other council in UK acting in this manner.

521. Innumerable difficulties with licensing applications - either IT-related or in relation to poor preparation/ training of staff which meant little or no meaningful support when needed and huge frustration on behalf of applicants.
522. The increase in cost is outrageous and I do not understand how it can be justified in view of the obvious endless problems with BCC's IT system to handle applications and the council's failure to train its officers to give meaningful and satisfactory support to applicants.
523. Guidance was abysmal - minimal and meaningless because it was administered in ever-changing interpretations subject to the individual contact at the council. Again obviously lack of preparedness on the part of the council itself with respect to envisaging the outworking of the guidance and a total lack of training of staff who would be responsible for its implementation.
524. Little or no direct contact with landlords has been made in respect of /in advance of major changes. Landlords were left to 'suck it up' when the council decides to introduce new and often difficult rules, and no effort was made to work with landlords to resolve issues to everyone's satisfaction. BCC staff on the ground were helpful but it is obvious that they were in no position to change decisions which appeared to have been set in stone once the council decided to adopt.
525. I have found the Council's inflexibility around the timing of deadlines for landlord responses and the penalties ensuing to be highly objectionable, unfair and totally disproportionate. I cannot stress enough my complete incredulity that the council would seek to obtain a contact number for landlords which would force them to be answerable 365 days a year 24 hrs a day in respect of anti-social behaviour of tenants. We are now elderly people, having bought our house years ago as an investment for our retirement in lieu of pension. What exactly does the council think we can do at 3 or 4am that the police cannot do if tenants are misbehaving? If there are measures that we as landlords can take against tenants it is surely not something which can be done on the spur of the moment in the middle of the night. This is a sinister development and leaves us feeling that the law makers in BCC are driving forward a plan to force as many landlords as they possibly can out of the market.
526. There has been a lack of clarity and support for landlords since the introduction of this scheme.
527. Licence renewal has increased by 300%
528. Many landlords were threatened with a £5000 fine if they did not evict students. There was no support or explanation on this matter. There has been a total lack of effective and timely communication.

529. Very poor. The intention is clear, however punishing responsible landlords for the actions of their tenants is unfair. Furthermore, the lack of communication and support on this change is completely unacceptable.
530. Too much money spent on administrative staff sitting in City Hall. I would like to see money spent on enhancing the environment rather than on paying administrative staff. I would like to see waste and cleanliness monitors supervising/managing the tons of waste spillage from large bins and rubbish which is all over the yards and streets which cause hazards from vermin and are unsightly. It does not project a positive image of Belfast and should be addressed. Certainly tenants should be made to manage their own waste responsibly but the Big Bins are over filled and no one person is responsible for that bin unlike the individual household bins which I know also had problems. Waste is the biggest problem in student areas and HMO's do not really address that issue.
531. The application forms are not user friendly and are clunky and inaccessible. A real nightmare and not fit for purpose. The myth is that they were designed for licencing dogs in England and therefore not useful for HMO purposes. Most Government HMO IT systems do not work well. The HMO Licence Application paperwork demonstrates the inadequacies.
532. Could do much better as there seems to be attitude problems on both sides. It would be good to have a truly supportive system so that all benefit. The City needs more affordable Housing not less and there is a feeling that the Council is making the system so torturous that Landlords will give up. I am sure that this falls into the Dog Licence myth but I do not feel enabled or facilitated--just the opposite. Students cannot afford QUB/UU accommodation and their loans are already too large. Private Landlords are a necessity not a luxury.
533. Administration --Cumbersome, clunky and IT not user friendly. Delivery -- Inconsistent in delivery and inspections. Landlords know that some Inspectors delight in asking for more than is in the paperwork. I am anxious that I will not get everything right and that it depends on the Inspector that you happen to have that day. I am concerned that we know that lots of Houses in the student areas are overcrowded and never inspected as they are "family" houses. I would like to see all let properties having to meet the same standards and overcrowding should be discouraged as someone in a Non HMO will die in a fire.
534. Answers to queries from landlords has been inconsistent depending on when questions were asked and who responses were received from. BCC IT system is not considered fit for purpose and has not been updated despite BCC being informed of its shortfalls.
535. No value for money has been provided. Significant additional levies have been introduced for minor administrative changes while the BCC portal does not function adequately, yet license renewal fees have increased three fold.

536. An aggressive and unhelpful approach has been employed by BCC. When advice has been given it is inconsistent in terms of instruction given on landlord requirements etc.
537. No consultation with landlords or our managing agents in respect of significant changes to the HMO scheme.
538. Our view of the admin/delivery of the scheme is to drive out small scale landlords like us and force students into new student accommodation blocks, which for many are unaffordable, at least twice the rent that is typical of HMOs in the Holyland for example. This may well provide to be a barrier to third level education for many. Apart from significant hurdles to renewing HMO licences, eg disqualifying rooms that are minimally under 6.5m<sup>2</sup> the most recent attempt to discourage small scale landlords is the requirement to provide an 24/7/365 number in respect of anti social behaviour. I would respectfully point out this is an issues for PSNI and BCC Env Health Officers. We rent a property to tenants, how they behave is not within our control!!!!
539. At least the residents of the Holylands have somewhere to report any concerns about HMOS. But no feedback or anywhere it can be viewed by residents.
540. No feedback evident poor education communication with resident on how to avail of the HMO service. Need to attend when possible local PAC group.
541. Complaints against specific HMO not acted on.
542. The legislation is byzantine and has numerous let out clauses. Biased in favour of landlords. Incomplete in that it does not send written answer to give decision re licence to those who complain. Needs to be more user friendly and people need to know they can attend licensing meetings. Also residents need to see HMO applications more widely advertised not just in press or on Council website.
543. Needs to be a lot more clarity. Landlords need to be equals along with residents, renters and authorities. At present there is in Belfast a perceived bias to Holyland landlords in particular. Enforcement of legislation is weak, as is landlord accountability.
544. The increase in rules is increasing the cost of owning HMOs and this cost is being passed onto the remnants, who are already stretched enough as it is. It is causing more harm than good.
545. This is the worst part of the scheme. It clearly increases prices for tenants and artificially so. Governments interfering with the rental market in such a heavy handed way is blatantly ensured to end badly - more homelessness and antisocial behaviour, less social and economic mobility and taking more money out of the real economy and diverting it into propping up property prices which are determined by yields which are driven up by the cost of complying with the schemes over bearing and ignorant rules. (VFM)

546. This is another terrible aspect - the rules are so convoluted and changeable that no one could reasonably be expected to keep up with them - which leads to the question are they fit for purpose when no one can understand them? Similar to the U.K. governments approach to covid in 2020 which was about as easy to understand as hieroglyphics. (Guidance)
547. The council is clearly being pressured by foreign investors to churn out students and young workers from value for money HMOs in the suburbs to overpriced garbage funded by those investors. Maybe the council should instead leave free markets to provide for what individuals are by definition voting for with their feet rather than manipulating the rental market to force remnants into town at higher rental prices and diverting local money to foreign investors.
548. No improvement on what was already in place, it now more expensive, more time consuming, and a more red tape and no benefits to landlord, students or community.
549. There is no evidence that the situation has improved.
550. The process is unclear; the onus falls on the willingness of landlords to implement the scheme and there is no evidence of monitoring or evaluation of them so doing. Many tenants are vulnerable and afraid to challenge landlords. Residents are not consulted by BCC and have no means of identifying responsible landlords when they witness or are victims of anti social behaviour.
551. Online paperwork frustrating to follow. I believe has led to some landlords leaving HMO sector.
552. It seems like a tax. Why is it so expensive when done online (and that a very good piece of software). I found the whole exercise very time consuming.
553. Great difficulty completing exercise and at times seemed to be getting contradictory advice. What is wrong with going into an office and filling form with an experienced clerical assistant.
554. I read in the paper issues are being discussed at BCC level but we are not told outcome. Where we as individual landlords not part of any Association advised of these meetings. Do councillors not count landlords as their constituents. As I assume significant ratepayers I find it strange we were not contacted. Maybe I missed that email.
555. It seems to me everything was rushed and this led to a confused delivery of scheme. On the "Ground" former NIHE staff seem to know what they are doing.
556. I believe that I was already providing a high standard of accommodation for my tenants with no complaints from them. However, expensive HMO fees have increased costs for everyone concerned.
557. I believe that I do not benefit in way from the scheme and indeed this scheme appears to be punitive towards landlords, adding administration with continual increasing costs.

558. Thankfully I have an excellent letting agent, otherwise it would be extremely difficult to access and interpret information.
559. I would love for BCC to seek and consider my feedback prior to making changes to the scheme. Personally I find this scheme to be almost entirely anti landlord.
560. I'm sure it has raised the standard of safety, however the electronic form is not easy to complete and it wasn't clear that attached documents had saved until you looked at the back page. Also, there is so much work to the form I think it will put a lot of people off having a HMO which will result in the universities having a complete monopoly on accommodation & the rental prices charged by universities is very expensive.
561. The costs associated with the licence are expensive and most of the requirements are things I would have provided anyway so I don't see how it is value for money.
562. The form was difficult to complete for a number of reasons. It didn't tell you all the information you submitted was saved at the back of the form so I kept thinking all my information had disappeared. It asked for evidence from a third party that you had the resources to fund the HMO, this is a very private thing and how does anybody know what are sufficient resources? It asked for 5 years evidence that the house had been rented out, if you only owned the house 2 or 3 years you had to get proof of previous tenants and this was difficult to get as you had to find out what estate agent leased it and this is private information.
563. Anytime I rang for assistance or went to the Council office in Belfast, the staff were very friendly and helpful. It would be great if the form was easier to complete and requirements such as ---proving you have enough money to manage the HMO ---evidencing 5 years of past rentals, clarified how you could get this information.
564. I think it will put people off managing HMOs and the universities will supply almost all accommodation to students.
565. HMO landlords pay domestic rates, incur a small charge for licensing and are under no obligation to proactively manage their properties. In areas such as the Holyland and Stranmillis, where there is chronic over-provision of HMOs, PSNI are having to invest £millions in managing disorder at key times of the year - Fresher's, Halloween and St Patricks. Belfast Council has had to invest £millions introducing commercial bin collections and in clean-ups following disorder.
566. The Department is aware of and is disregarding that Belfast Council (the NI HMO Unit) has not been applying the over-provision clauses in the HMO Act and the constraints on over-provision set out in the 2008 HMO Subject Plan for Belfast. The above statutory requirements are intended to curtail HMO over-provision in specified areas. The above non-compliance is resulting in HMO licenses and planning permissions are being issued contrary to the HMO Act



and the Subject Plan. This explains why the perennial problems associated with HMO over-provision are not abating. It is completely unacceptable that the excess costs of managing HMOs falls to the public purse and domestic ratepayers. HMO landlords should either be required to pay significantly higher licensing charges or should preferably pay business rates. Given the above non-compliance, I have no confidence in the current administration and delivery of the scheme. In my view, Belfast Council has a conflict of interest in relation to HMOs and I consider that the Department should take over responsibility for addressing HMO over-provision. Appropriate procedures should then be put in place to ensure that only eligible HMOs obtain planning permissions and licenses. Any revised Act should further include responsibility for seeking out and dealing with unlicensed HMOs. This issue is not adequately addressed in the current Act.

#### 567. SUBMISIONS ON BEHALF OF UNIVERSITY QUARTER BUSINESS ASSOCIATION

1. We have had the benefit of reading the submissions on behalf of the Landlords Association for Northern Ireland and the submissions on behalf of Belfast City Council.
2. We would respectfully adopt the submissions lodged on behalf of LANI and would wish to amplify a few points on our own behalf.
3. Having read the position paper from BCC we are concerned by a number of issues, namely- a) The position taken by the council regarding S8 of the Act, planning, and in particular their view that the issue of planning/or certificate of lawful use, should apply to both new and renewal applications (see page 3 of Appendix 4). We will deal with this issue in our concluding submissions. b) The council's view on overprovision in Section 12. c) Their view on S 29 Change of ownership links in with their views on S8 and S12 and causes concern. We would ask the Department to note the inconsistent approach of BCC to change of ownership applications from April 2019 to date. Again, we will deal with this in our conclusion, and at this point ask the dept. to note that we believe the "new "approach of the council is an attempt to reduce the existing stock of HMO housing. d) We totally reject the Council's views on S62 and publication of the HMO register. Any publication of this would infringe a landlords Article 8 right to privacy and this would not be reasonable on the grounds of attempting to stop anti-social behaviour. The council are aware of who the owners are in this regard, and there is no necessity for members of the public to be aware. We would ask the department to take note that several landlords have been threatened and intimidated, both in person and online, because they are HMO landlords. The publication of the register would merely facilitate further intimidation and would serve no useful public function. e) Out-of-Hours Contact number. We would rely upon the submissions of LANI about this. There are also issues in this about the processing of

lawful data. f) Fixed penalty notices- Again, we rely on LANI's submissions on this issue.

## Conclusions

4. We would submit that the introduction of the 2016 Act, and more importantly, the application of the Act by officials of Belfast City Council, has been nothing short of shambolic.

5. Council officials, in correspondence, have accepted that they have given out misinformation and that they have misapplied the Act and made mistakes. They have publicly apologised for that. In particular, the council misunderstood the legislation when it came to renewal applications and caused numerous owners not to apply to renew on time, as they believed they required planning permission. The application form specifically stated that.

6. There appears to have been a concerted effort by the Council to frustrate and prevent renewal of HMO licences and to frustrate the transfer of HMO properties.

7. We will now deal with Section 8, 12, 20 and 29 submissions. These relate to the need for planning, overprovision, renewals and transfers. It is clear from the evidence given by the Department for Communities to the Committee for Communities on the introduction of the HMO Bill, that there was never any intention to reduce the existing stock of HMO properties, but that the Act was designed to improve quality and to prevent overprovision in the way of "new" HMO applications.

8. In evidence to the Committee for Communities about the Houses of Multiple Occupation Bill on 3 December 2015, Mr Martin of the Department for Communities (DfC) said:

'Clause 12 deals with the issue of overprovision, which we covered last week. Last week, we said that clause 12 is designed to help prevent the overprovision of HMOs in future. It cannot deal with areas where there is already overprovision. There would be considerable human rights issues if we tried to do that. There is some misunderstanding from the Landlords' Association around that, but clause 12 certainly cannot deal with existing overprovision. We are very clear on that, and we do not think that the landlords have quite understood the nature of the clause.

In respect of overprovision, we are saying that if there is an HMO there, and that HMO landlord applies for a renewal, it cannot be denied on the basis of the overprovision clause. However, say in the Holylands, for example, where there is already an oversaturation, somebody were to apply for a new property to become an HMO — a property that has never been an HMO — that application for licence could be refused on the grounds that there is already overprovision. So, yes, that overprovision issue is covered for new HMOs, but it is not for a renewal for existing.

The wider issues around the private rented sector could be considered as part of the role and regulation through, perhaps, licensing schemes, and so on. This Bill deals solely with HMOs'.

9. This discussion of clause 12, which governs the approach to the granting (rather than renewal) of HMO licences, recognises the distinction between new and existing HMOs. The passage is consonant with the definition of new applications identified above, in which 'new' denotes that there is, at the time of application, no existing HMO licence.

10. We therefore submit, that in any review, the department should continue to assert that a renewal application should not take into account the issues of planning or overprovision- contrary to the submissions of BCC.

11. Further, any review should clarify the issue of transfers of existing HMO stock, by sale, change of estate or on death. We suggest that as an existing HMO the transfer should be treated as a renewal and as such, no consideration should be given to planning or overprovision. Further, the existing HMO licence should continue on transfer for such period that allows a new purchaser to make application for transfer of licence into their name.

12. We submit that the Department should consider regularising the existing HMO stock, by allowing an existing property, especially those which have been HMO's since before 2004 to be granted planning as HMO properties.

568. The HMO Licencing Scheme needs to be more effective in decreasing the number of HMOs in student areas as this allows for rents to increase to continue to cash in on student tenants. There needs to be greater work done to ensure residents are not priced out of the area due to a further increase in HMOs and that students are not treated as cash cows due to their reliance on HMOs.

569. Resources available to student tenants are difficult to find, and could be much clearer to navigate to ensure tenants are aware of how the HMO Licencing Scheme operates.

570. There seems to be limited understanding within councils and the Department for Communities on the particular issues that face students living in the private rented sector, and there needs to be improved communication to deal with these issues effectively.

571. I wish to make this submission having read the Submission from Belfast City Council which I find surprising and concerned at a number of issues. The position adopted by BCC regarding Planning Permission and CLEUDs to apply to new and renewal applications is unreasonable and I believe to be unlawful and not the intention of the Department at any time. For the council to believe that renewal applications needed planning permission despite operating as a

rented property for twenty years plus was, is bizarre. Any property that has been rented prior to November 2004 whenever the used classes order came into effect ought to be granted Planning Permission Status as of right due to the time that has lapsed, furthermore these properties are beyond any enforcement action. The belief of BCC that a room slightly under 6.5m and indeed over 6.5m in some cases ought to be disqualified despite the fact it is clearly set out by the Dept. that if a room size has been in existence prior to the transfer to BCC, is functioning well and the demand is there for that type of accommodation then discretion ought to be used. To stick rigidly to a defined room size measurement, (ignore the discretion power you are given) where it is clear there is more need for this type of accommodation now than before for a number of factors, affordability, proximity to family circle, proximity to city centre amenities, reducing travelling costs etc. then for BCC to look at this in total isolation is much too naive, BCC ought to have a much better understanding of the needs of their citizens. Regarding change of ownership let it be sale, inheriting a property due to the death of the property owner, or a simple transfer this ought to be treated as a transfer, planning, over provision etc. ought not to be considered as this I believe to be a clear breach of one's property rights.

Out-of-hours phone number, I understand others have made lengthy submissions however I would like to make the point, the expectation that a property owner is going to be sitting up waiting on calls to midnight and after from BCC or the PSNI reference perhaps (someone's music being too loud, a social gathering perhaps in the evening that we all have had from time to time) is misfounded and unrealistic more so, if the property owner lives well out of town. The agencies who have the powers to deal with out of hours issues appropriately are the Council Noise team, Council Wardens, Council ASB Officer and the PSNI. This would be akin to asking the Universities to have out of hours numbers available and be on call as some of their students could be singing coming home from the pub or night club. Every sporting outfit must provide the out of hour's number of the manager as his or her team member could be behaving in an anti-social manner, therefore it must be the managers role to action this appropriately. Would it be appropriate to ask all the Head teachers of all Grammar and Secondary schools for out of hour's numbers as very often is the case A level students can be the source of ASB, then they could be contacted as necessary and they can action as necessary. It is difficult to see how the council views publication of the HMO register would be helpful. Would the DVLA publish a register of car owners so one could address the issue of possible speeders? Would the council publish the owners of all dogs, breeds etc. so we could in some way address the massive issue of dog fouling? I doubt so. The council already know the property owners information for the purpose of HMO and housing issues and can be contacted accordingly. I understand several landlords have been threatened, harassed and intimidated because they are HMO Property owners. To publish a HMO Register would only facilitate more intimidation and harassment. This seems to be a clear attempt to do away with this type of accommodation, destroy businesses that have been built up over a life time, ruin personal pension plans, remove the

only source of income for many, all of these primarily small business/ small operator in favour of the big boys, the Hedge funds, the Pension Funds, who Hoover their profits out to elsewhere. This submission from BCC seems to be a bucket list from the Mrs. Buckets of this world and not that of providing safe, affordable, comfortable accommodation as we were all lead to believe however, those concerns of affected neighbours are most certainly to be addressed.

572. There has been no significant improvement that I have seen. The HMO office is spending more time dealing with disgruntle landlords due to the lack of engagement and clear planning than trying to improve the overall standard of accommodation.
573. No, the service I have received does not represent value for money.
574. In my view it is not acceptable that there is no management system in place to ensure that every application is treated equally. The assistance from the officer has been very poor and guidance has been non-existent. There has been no training and no correspondence on how the application and renewal process would be conducted. I feel that there has been an effort by officer to justify the substandard service the HMO office is providing to public instead of trying to find the root cause of this poor service. Which is ultimately due to the lack of planning and a clear system being in place. The HMO department is hiding behind the Legislation instead of engaging with the public which includes the landlord and sorting things out. Without transparency and clear procedures, the legislation will never run how it is intended.
575. HMO management decided not to send landlords renewal letters months in advance as had always been the case. My renewal letter was sent one week before my license had expired. I was subsequently fined £5000 for missing my renewal. We followed the advice of the HMO department and applied for CLUED. Which was granted as the property had been used as a HMO for 15 years previous. Following the officer's guidance, we then made the HMO application only for the licence to then be refused on the grounds of overprovision. Something that was never mention to me until the refusal letter was received. We then spent four months appearing at the licensee committee meetings and making representation on the case. The council has now granted my license and referred to the mistaken as misconnection. It was not a misconception the council was providing misleading information. If the council is committed to fairness how can I be given one week to renew my license and another applicant be given 4months which has happening in numerous cases. The communication between the HMO department and myself has been pathetic to say the least. No communication is answered without continuous reminders and there is no transparency.
576. The online application system is substandard and not fit for purpose. Almost all communication from the department has errors in it. When this is raised to the sender you do not get relay in a timely manner. I feel that there has been a complete change in how the officer undertaken their duties in offering helpful

assistance and guidance. There seem to be a hidden agenda in trying to remove HMO's by ambiguous means.

577. SUBMISSIONS FROM LANI - The implementation of the new licensing scheme led by Belfast City Council has been characterised by inconsistent advice, lack of clear information and policies that are subject to change without notice or consultation and are sometimes contrary to legislation or guidance from the Department for Communities. This has created a difficult and unstable environment to work within and has led to confusion and frustration.

There has been a 300% increase in the cost of a licence renewal compared to the cost of renewal of registration under the previous scheme. Belfast City Council will also charge £185 if a landlord wants to change managing agent and has failed to provide justification for what seems to be an excessive amount. For fixed penalty notices the council has decided to set the maximum financial penalty allowed in the legislation for all breaches, even the most minor. There is no consideration of appropriateness.

Belfast City Council's communication with landlords has been extremely poor. At the start of the scheme there was a lack of renewal reminders, something which landlords had come to expect under the registration scheme. Some that did arrive were received late, after the renewal date. The council introduced guidance for completing applications, seen by landlords for the first time at the launch of the scheme. The guidance advised landlords to obtain planning permission or a CLUD prior to applying to renew a licence on an existing HMO property, stating that if they didn't have it their application might be refused. None of that was communicated to landlords prior to the launch of the scheme despite the significant amount of preparation and time needed to obtain a CLUD. The council later conceded that the policy was in breach of the HMO legislation. See section 2.03 for further details. The council changes policy when it wants to with no prior consultation and sometimes no notice. Landlords do not have a stable framework to work within, for example in a recent change to the way the council treats applications on transfer of ownership. See section 2.09 regarding licence renewals on transfer of ownership. Regarding communication between councils and the Department for Communities, we are aware that there have been regular meetings throughout. However Belfast City Council disregards much of the guidance provided to it by the department, the guidance having been produced following widespread consultation.

**2.01 Problems with Licence Application Processing** The council's IT system for applications is not fit for purpose. There needs to be an effective way to report issues which should then be properly logged, investigated and tracked. Many experienced people moved over to Belfast City Council's HMO unit from the Housing Executive but the council's internal processes could be much better and there have been various reports of problems from our members.

These go beyond the “teething problems” one would expect and suggest a lack of proper testing in advance of implementation and a lack of urgency in addressing the problems. The problems include an online application system with on-screen functions that are supposed to do something but don’t work and a disjointed process in which tasks may not be passed from one stage to the next without intervention from the applicant to chase things up, causing unnecessary delay. Files that have been uploaded using the online system are frequently lost and have to be provided again. They can’t be re-uploaded using the online system once the application has been submitted as the website doesn’t enable any actions to be taken on an application after submission. It appears that it was supposed to be possible but the functionality is not there. It isn’t even possible for the applicant to view or download the content of an application online once it has been submitted. Even when files have been passed between personnel the applicant is sometimes asked to resend them because they weren’t successfully received by the next person in the chain who needs them.

The system does not cope well if an owner owns multiple properties which are co-owned and/or managed via various different agents. When using the online system to create an application for a new property, the system copies details over from the applicant’s profile that were used in previous applications. This copying could be useful, however it isn’t possible to edit those values once copied over. There seems to have been an incorrect assumption that these details would always be the same for every application by the same applicant. Also, in some cases numbers of flats have disappeared in addresses provided previously by the applicant but it isn’t possible to correct these or other errors caused by the system due to inability to edit. The council needs to ensure all fields are editable as the problem persists and is causing difficulties. It can be left up to the applicant to decide what the correct values should be in their particular situation. The council will be checking the applications after submission anyway.

The online applications portal contains no section for managing agents to apply on behalf of their clients even though agents hold the information necessary for the application. This means that agents must create separate login credentials for each client application and act as if they are the client when completing the application. The system should have a dedicated area for agents to be able to login using their own credentials and apply on behalf of their clients. When the licensing scheme was launched it was possible to submit a paper application but this facility has since been withdrawn. In view of the ongoing problems with the online system and to help landlords who have difficulties with technology we think paper based applications should be reinstated for those that want to use them.

**2.02 Application Timing** When the licensing scheme was first introduced, Belfast City Council’s policy was that an application to renew a licence had to

be submitted and confirmed by them as valid at least 3 months before the expiry of the existing licence. The legislation states in schedule 2, paragraph 12 that a council must make a decision whether to grant or refuse a licence within three months of the application being received. It seems the purpose of their policy was to ensure they had three months to process the application before the expiry of the current licence. The council took the view at the time that there could be no gap between the expiry date of the current licence and the grant of a renewal licence. If the landlord had tenants in occupation after the expiry of the existing licence and a renewal hadn't yet been granted, the owner would face a fine for operating an unlicensed HMO. As a consequence of this policy some landlords evicted their tenants early to ensure the property was not being used as a HMO during that time to avoid the fine. This policy came into effect as soon as the new licensing scheme was launched but a number of licences were due to expire in the first few months of the scheme. Various landlords and agents in this position were unsure how to proceed with their licence applications. One member reports emailing the Housing Executive in January 2019 to ask how to renew a licence for a property that was up for renewal on 1st April and was told that the Housing Executive was awaiting confirmation from the Department for Communities as to whether or not they could process anything due for renewal from 1st April. However confirmation wasn't received. There was confusion and a lack of adequate transition planning between the council and the Housing Executive around that time including general uncertainty about whether the new scheme would even launch in April or not. Despite this the council provided no grace period at the start of the new regime nor any proper help or guidance before proceeding to tell owners they would be fined if the renewal application was not received at least three months prior to expiry of the current licence and if the landlord had tenants in occupation when it expired. This was compounded by the council advising landlords to provide evidence of planning or their licence renewal might be refused. The planning issue is covered in section 2.03. Belfast City Council's policy on when a renewal application must be submitted has since changed for the better. The council will now consider the current licence to be valid until the application is determined as long as the application is submitted before the current licence expires. Had the council adopted the current policy from the start or provided well-publicised notice and guidance in advance it could have avoided unnecessary stress and disruption for landlords and tenants.

**2.03 Planning Permission** When the licensing scheme was launched, Belfast City Council's guidance on the application form and on its website stated the following in relation to applications to renew a licence: "In relation to renewal applications, failure to have planning permission for use of the property as a HMO will be considered when assessing whether the applicant is a fit and proper person. While this does not mean that an application will automatically be refused, applicants are advised to ensure they have the necessary permission or certificate of lawful use in place before applying for renewal of a licence". We were not expecting this and it appeared to contradict section



20(4)(a) of the act stating that consideration of breach of planning control does not apply to applications to renew a licence. The effect of the above statement was to warn that if you don't have planning, your licence may not be renewed. Landlords didn't know and were not told what criteria would be used to judge whether they were fit & proper if their property didn't have planning. When landlords phoned Belfast City Council's HMO unit around that time they were often told they would need to have planning prior to making an application to renew. To obtain a CLUD (certificate of lawful use or development) requires quality evidence of 5 years of continuous use of the property as a HMO which many landlords did not have and would not be able to get in the time available. The criteria for obtaining a CLUD are strict and gaps unaccounted for between tenancies could result in a refusal. The policy was having an impact on a large number of landlords who were concerned about losing the ability to keep their properties as HMOs, in many cases after having been compliant under the previous HMO registration scheme over several years and having paid the Housing Executive on each registration renewal. During all that time, planning had never been a condition of HMO registration renewal and there was no prior notice that it would be any different this time. Despite a face-to-face meeting between LANI and the council, letters of correspondence and a formal complaint, the council refused to change its policy. We sent a letter of opinion from our solicitor to the council but the council remained resolute. Subsequently we instructed our solicitor to issue a pre action notice for judicial review in August 2019 (see appendix B1) which covered the same points as the letter of opinion. Upon receiving the notice the council conceded the first and second grounds relating to illegality on the basis that we covered our own costs, despite its obvious fault (see appendix B2). The council has since amended the instructions on its website accordingly. The council could have taken this action much earlier as soon as we pointed out its error or could have acted in the spirit of the legislation from the start but chose only to back down on threat of legal action. The council is not contrite about it either and currently refers to a "misconception" on the part of licence applicants. For example we recently obtained a licensing committee report to councillors dated 16/12/2020 stating: "...there appears to have been a generally held misconception that planning permission must be obtained before an application for renewal of a licence was submitted" Given that landlords were being advised to obtain a CLUD before submitting their application to renew, some applied for a CLUD first then submitted their licence application late, unaware it would lead to some of the problems highlighted in section 2.02 on application timing. Any misconception attributed to applicants is a problem entirely of the council's making.

**2.04 Room Size Standards** In our discussions with the Department for Communities we wanted to ensure that existing HMOs with rooms that were deemed an acceptable size under the previous registration scheme would not be penalised under the new scheme in which the room size standard is written in the primary legislation. The department told us it was not its intention to penalise existing HMOs that operated successfully under the registration

scheme and provided guidance to councils stating in Annex A of the guidance document: “Where the amendments to space standards for ceiling heights, minimum bedroom widths and for communal living room, excluding any area used as a kitchen, represent an increase in standards, this is not viewed as a safety issue and should only be applied to new applications” Section 5.4.4 of the guidance document also states: “In general, councils should ensure that all licence applications are treated equally and fairly, regardless of whether the application is for accommodation which has not previously been licensed, or which has had a licence for some time. However, a flexible approach should be taken; in some cases, such as where an HMO has been operating with a licence for some time, it may be considered suitable for a new licence even if it does not meet certain standards which the Council would normally wish to apply to new accommodation or accommodation which has not previously been licensed”. LANI had been in correspondence with the Department for Communities about various concerns prior to the implementation of the act and received the following response in a letter from the department dated 1st February 2019 after we had sought clarification on the position regarding room sizes: “Room Size Standards – This has been discussed with Councils and the guidance has been amended to clearly delineate between existing HMO stock and new HMO applications. The guidance directs Councils to use discretion when applying the standards and to take account of the fact that existing HMO registrations operated well and were fit for purpose under the previous regime” However Belfast City Council appears to have chosen to disregard the guidance and has been refusing to consider rooms that fall short of the new room size standard even for rooms in existing HMO properties that were deemed satisfactory under the previous registration scheme. The effect is to reduce the number of HMO rooms available in any house affected. In disregarding the guidance the council appears to be contravening section 85(2) of the act: “In exercising any function under this Act, a council must have regard to any guidance under this section which applies to it in the exercise of that function”. The council’s policy is having a detrimental effect on many properties as HMO inspectors are being directed not to exercise discretion for the same rooms where previously they did exercise discretion under the former registration scheme and considered those rooms suitable for use. In some cases these properties had previously received Housing Executive grants for HMO use.

**2.05 Information Sharing about Complaints** Belfast City Council has written to landlords to state that officials are now able to advise the landlord and agent of any nuisance notices against their HMOs. LANI had previously advised the Department for Communities that officials have felt unable or unwilling to pass this information to landlords/agents in the past, citing data protection law. This was information that property managers would need to know about in order to be able to take action in the management of the property. We welcome the fact that the council has now found a way to share this information and has stated its intention to do so. However despite years of not informing landlords or their

agents about problems associated with their properties, Belfast City Council is taking previous complaints into account and penalising landlords when assessing licence applications regardless of whether the landlord or agent had known about the complaint at the time.

**2.06 Out-of-Hours Contact Number** Belfast City Council has been developing a policy to impose an out-of-hours telephone number on landlords or their agents. The intention is that council officials would be able to call this number during unsociable hours in the event of a problem at the property and they would expect the call to be answered and for the person answering to assist. It is not clear to us exactly what kind of requests would be made and why these requests could not be made during normal working hours. Such a number would be requested as an additional condition to be imposed on a landlord and a number of landlords have already been told to provide such a number as a condition of their licence. After LANI first requested clarification on 17/08/2020 (see appendix C1), Belfast City Council responded by letter two months later on 14/10/2020 (see appendix C2) citing section 14 of the act, subsections (1)(a), (2)(b) and 4(a) and stating that the council must strike an appropriate balance between the human rights of those who own HMOs and those who live beside them. We are aware of an out-of hours number being required of landlords in consideration of their licence renewal application when they appear to have done nothing wrong and in some cases there has been no previously recorded management failure at their property. In some of the cases we know of, some residents had complained about the licence application because they had objections about HMOs in general, but the complaints were not specifically related to that property or landlord. In another case a noise complaint had been made in the past but no further action had been deemed necessary by the authorities. Note also from section 2.05 on information sharing that we don't know if landlords or agents had even known about complaints at the time or if they had failed to take action if they did. Although special conditions were imposed on only some HMO landlords initially, the council now intends that all HMO landlords or their agents will have to provide such a number. At a council meeting on 16/12/2020 councillors were asked to vote on whether such a number should be imposed on all HMO landlords in future through a variation of the standard licence conditions. The councillors voted in favour. Despite Belfast City Council's assurances about striking the right balance, the evidence so far is unconvincing. The council has not offered any detail on the parameters of its policy, for example will the landlord be called from a specific phone number (so they can identify the incoming call on their phone). The council expects such a call to be answered but we don't know what would happen if the call cannot be answered if for example the landlord is in an area with poor reception, is taking part in some activity or is sleeping. We would expect a policy with as much impact as this on landlords to have been fully consulted on and are concerned that a council can introduce something like this outside of specific legislation. We refer to the Guidance for Local Government, April 2019, section 4.1.4: "It is important that regulation of HMOs is effective but also proportionate and cost

effective. Regulation that is disproportionate and unduly onerous could impact costs, increase rents, and ultimately deter some HMO owners from applying for HMO licences, putting occupiers at risk”

**2.07 Fixed Penalty Notices** The maximum amounts permissible for fixed penalty notices for various offences are listed in section 64(4) of the act. At a meeting of Belfast City Council’s licensing committee on 20th February 2019, it was decided that all fixed penalty notices would be set at the maximum level. Therefore minor misdemeanors are to be treated the same as the most serious even though penalties can be up to £5,000. This seems completely unreasonable and disproportionate. We refer to section 37 of the act relating to rectification notices by way of example. Subsection (3)(a) states that regard is to be had for the seriousness of the breach and (4)(b) states that this is to be taken into account when the council determines the amount of the fixed penalty. This part of the act deals with a specific issue but demonstrates an expectation of reasonableness within the act when issuing penalties. Where a landlord has an agent, the council imposes a penalty on both the owner and agent. We think the penalty should only apply to the party who was at fault.

**2.08 Objections to Licence Applications** Objections are not filtered in advance to verify that they are reasonable or relevant and every objection currently goes before the licensing committee. This could be a daunting prospect for the landlord concerned and is a waste of council resources. The objection should be verifiable, come from an affected neighbour and should not be deemed relevant unless it relates specifically to the property in question. We understand that Belfast City Council is currently looking into this with a view to improving the situation.

**2.09 HMO Sales – Licence Renewals on Transfer of Ownership** Our understanding of section 28 of the HMO act regarding transfer of ownership of a currently licensed HMO property is that the buyer’s licence application will be considered a renewal as long as the buyer submits their licence application prior to completion of sale. After completion, the council would consider their application but there would be no consideration of planning or overprovision as stipulated in section 20 of the act. That was how Belfast City Council treated transfer of ownership until it then decided to reinterpret the legislation in Autumn 2020. It then argued that the buyer’s licence application is not a renewal so planning and overprovision must be considered as part of the buyer’s application. We disagree with this interpretation. We only became aware of this change in approach after reports we received from some members, after which we sought clarification from the council. Nothing about the change was communicated to HMO landlords in advance yet it has serious implications for the ability of a buyer to continue to use a property as a HMO whether the HMO has planning or not, particularly in areas in which there is already a high concentration of HMO properties. The policy would also affect sale of a property following the death of a sole licence holder potentially

resulting in a substantial reduction in the value of the estate. As a result of this latest action, some agents in the process of trying to sell existing HMO properties who were aware of the policy have had difficulty getting the information they needed regarding overprovision targets and have not known whether the buyer would be able to continue to operate the property as a HMO or not. The situation is currently in flux and the council's intentions on how they will deal with this haven't been made entirely clear. Whilst we believe our original interpretation is clear and correct, we think the department should revisit the specific wording of section 28 to remove all possible doubt.

**2.10 HMO Sales – Risk of Buyer Failing Fitness Test** The transfer process set out in the act introduces some uncertainty for the buyer of an existing HMO. It is up to the council to determine whether a licence is granted yet the buyer's application cannot be considered before they complete on the purchase as the buyer does not have an estate in the property until then. Even if a buyer is satisfied that they meet the criteria of a fit & proper person, they have no certainty that they will be judged fit & proper by the council as this depends on a consultation process that has not yet taken place and which involves various third parties. To remove this uncertainty and assist the transfer process we think it would be better if the buyer was able to apply for a fitness test prior to the transfer of ownership taking place. This would be valid in relation to any property and for a fixed period. It would provide assurance that if they choose to buy any hmo within that period they will already have been deemed fit & proper. The question of whether the buyer is fit & proper should not depend on the particular property they are applying for. The period could be 6 months or longer to give them a chance to find a suitable property. The buyer could simply be required to notify any relevant change of circumstances within that period. In previous meetings with the Department for Communities we suggested that a better way to assess the fitness of an owner would be through a criminal record check. However the idea was not adopted after Belfast City Council raised objections. We still believe this would have more merit and provide a safer and less subjective result.

**2.11 HMO Sales – Failure to Apply for Licence Before Completion** We have concerns about the implications of the buyer not applying for a licence prior to completion as set out in section 28 of the act. If the buyer does not apply for a licence prior to completion, the seller's licence is not transferred to the buyer. Consequently the buyer will only be able to apply for a new licence after completing the purchase rather than their application being treated as a renewal. As a result, planning and overprovision will be considered as part of the application and in some areas with a high number of HMO properties the licence may be refused in which case the property will fall out of HMO use. The consequences for such a simple oversight are therefore severe. This has already happened in some cases. Whilst the conveyancing solicitors should have been familiar with the requirement to apply for a licence before completion, in those cases they were not. In the circumstances we suggest a

fine would be more appropriate than treating the application as though it was for a new rather than an established HMO property.

**2.12 Death of Sole Licence Holder** Section 29 of the act states that if a sole licence holder dies, the licence is considered to be held by the licensee's personal representatives but 29(b) states that the licence then ceases to have effect 3 months after the licence holder's death. This is a grossly inadequate amount of time to deal with someone's estate. The executors may not even know the deceased person owned the HMO in that timescale. Even if they did and the time period could be extended it can take a very long time to wind up an estate. The simplest and best solution seems to be to remove 29(b) from the legislation altogether. If an agent was managing the property, the appointment of personal representatives would have little effect on the continued smooth running of the property management, therefore it is difficult to see the need for the licence to cease to have effect so soon. Executors have legal liability to protect the estate to the best of their ability. If they miss the 3-month deadline there could be a substantial financial loss for which they could be held liable.

**2.13 Provision of a Landlord Forum** Section 4.1.6 of "Guidance for Local Government April 2019" states: "Setting up a forum including local HMO owners can be a useful way to discuss general issues of concern and agree on steps to address them". We think this would be a good idea and it would be good to see something in the licensing scheme that benefits landlords. Belfast City Council should implement something like this.

**Section 3 Conclusion** The extent of a council's powers must be clear and unambiguous in the legislation. They must also be proportionate and we refer again to section 4.1.4 of "Guidance for Local Government April 2019". Unfortunately the legislation contains various sections which appear to allow a council to develop any policy it likes even if that policy is far-reaching, has human rights implications and may not be in line with the spirit or intent of the existing legislation. For example in the case of Belfast City Council's initial policy on planning permission described earlier it sought to use the catch-all section 10(3)(b) that states "any other matter which the council considers to be relevant" to introduce consideration of planning into the process of licence renewals even though this is expressly forbidden by section 20(4)(a) of the same act. In that particular case the council eventually conceded it was illegal to do so (see appendix B2) but there is plenty of scope for a council to introduce more policies in future that may not be illegal but still unfair and unreasonable. Belfast City Council is not just implementing the policy given to it by the Department for Communities but formulates its own policy to impose additional burdens on landlords as it sees fit, without any proper consultation process to properly consider the views of all stakeholders. We are not informed about policy ideas in writing or invited to contribute. If we request information it is invariably a long time coming and the reasons for the policy not properly explained. For example the council's eventual response to us in which it

outlines its plans to require an out-of-hours telephone number from landlords does not even explain why such a number is needed in addition to a daytime number, which would seem to be a basic starting point. Nor does it set out the criteria for judging in which circumstances the number will be used or details of checks and balances. It seems likely that councils will continue to develop such policies in the same manner if nothing changes. We request that the department revisits all sections of the act which provide discretion to councils such as 10(3)(b) and 14(1) to ensure that the direction is more specific and that additional measures can only be introduced by the department through regulation after consultation with stakeholders rather than being left to councils. Some other sections of the act may benefit from greater clarity to assist councils in following policy exactly as intended. There also needs to be a system of checks and balances and enforcement to ensure councils adhere to the rules and act responsibly.