

Alipour.

To whom it may concern.

Kindly confirm that my comments have been noted. I apologise for the delay in dispatch. I would like feedback on how my and others comments have been used and acted on.

As with others I am concerned about the increasing number of HMO. The impact on the existing community seems to be ignored. There are desserts of HMO appearing. I think some HMO do not comply with the spacing requirements.

My neighbours and local businesses have previously been supportive of those living in HMO. However the area is deteriorating and I overheard comment that it's beginning to look like the streets in San Francisco. Residents of HMO spend their days outside shops and empty shops or on the pavement or at bus stops. This is off putting to those wishing to use these services or are walking onward. Shouldn't their accommodation have some outside space for their enjoyment and place to dry their washing.

Recently one of them was seen to repeatedly fall over. They did not smell of alcohol and had been speaking clearly previously. I don't know why, they seemed unable to use one side of their body and had no walking aid or support person. I was grateful that a neighbour took over their care as I was not able to do so.

Shops selling fast food are having HMO residents sitting at their entrance, smoking tobacco and other substances, and drinking. Some women have received inappropriate comments. This is off putting to those wishing to go in and make a purchase. Used cans of drink and fast food packaging are left and not disposed of properly. Fast food shopkeepers are approached for free food. This is discouraging potential shop keepers. One left within a few days of commencing business. New accommodation for businesses have been left empty for a considerable period. Increasingly shop premises are becoming empty. They are not being taken up by needed services such as a GP surgery, Dentist or Pharmacy. I would suggest this is a sign of a dying community. It is devaluing properties and demoralising for the community.

Families are moving out and increasingly the housing stock is being converted to HMO. This prior to consent being given. This leaves a vulnerable population, including the elderly, disabled and those with young children.

It is realised that those living in such accommodation are needy in some way. Their mental and social needs are not being met. Those living in adjacent housing such as in a terrace are too frightened to complain, fearing the consequences. I have been

asked not to share matters that would identify them.

There's noise heard through walls dividing the properties, sounds of fighting, use of house frontages being used in a way more suitable to a rear garden, debris left inappropriately. This despite there being large bins in which to put their rubbish. One resident of a HMO said there was not enough room in their accommodation to store refuse till collection day. This is making the road look untidy, refuse blows down the road and attracts vermin. Guns and rape have been associated with this type of accommodation locally. I walked down the road to be told by a senior police official I could not continue due to a gun matter. Landlords who should be responsible live in different counties, or are part of a group and cannot be identified as an individual. There's seems no accessible individual person to approach to be responsible for issues either in terms of landlord or resident.

Some residents of HMO are there for the short term. This means they do not get a sense of community to give and receive, to support, to learn what is available. To learn the way "things are done here". They get confusing information such as what to do with their refuse. (Advice given by refuse operatives do not apply to residents but to shop keepers). When they are transferred to different accommodation they have no alternative but to leave their rubbish including large items on the pavement or road which may be on a non-collection day. Why can't those issuing moving orders also order a 'clean up' internally and externally. Language needs seem ill met. Surely information given in different languages can be shared between Councils saving money. New occupants be given information in printed form as to local services. There seems to be a reluctance to give information in different languages. Surely this is a false saving.

As you walk to the bus stop/shops you are repeatedly approached by those resident in HMO for money. It's not just for coinage/change but more. I was asked for £50 in increasing amounts of: money/£10/£50. My mobility is impaired so such encounters can be unpleasant. It makes use of the cash point machines difficult as it will then be known you are carrying money. Use of cash is on the increase and in some areas essential. Following their use people are approached for funds.

Those with learning disabilities seem left to fend for themselves. Just because they are aged over 18 or 25 doesn't mean they wouldn't benefit from some form of centre to go to during the day.

Those in HMO possibly have missed out on learning how to live and fund their life independently. Many have had a reasonable education and need help in finding purpose in their life. Help with achieving this, needs to go alongside giving accommodation.