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 **PLANNING BOARD REPORT**

 **PORTLAND, MAINE**

MMC Surgical Facility Addition

MMC Campus in vicinity of Emergency Department

22 Bramhall Street, Portland

Level III Site Plan, Conditional Use and Amended Site Location of Development Act (SLODA) Review

Project ID # 2013-130

Maine Health/Maine Medical Center (MMC), Applicant

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| Submitted to:Portland Planning Board:Public Hearing Date: July 9th, 2013 | Prepared by: Jean Fraser, PlannerDate: July 5th, 2013Planning Board Report # 30-13 |

1. **INTRODUCTION**

Following the PB Workshop held on June 11th, 2013, Maine Health/Maine Medical Center has submitted further information and detail in support of its request for conditional use approval, site plan approval and an amended SLODA for a 40 feet high addition on the top of an existing roof near the emergency department. This is a vertical expansion of the existing lower part of the LL Bean building (known as “Bean 2”) and would provide approximately 40,000 sq ft of space over three floors for new and enlarged operating rooms and mechanical systems. Two sides of the building abut existing MMC buildings; the other two sides face east and north. There is no parking or landscaping proposed as part of this development.

Applicant: Maine Health/Maine Medical Center (Penelope St Louis)

Agent/Engineer: Sebago Technics Inc. (Will Conway)

Architect: Perkins + Will (Susanna Baker)

A total of 939 notices of this Hearing were sent to property owners within 500 feet and to interested citizens. The applicant held a Neighborhood Meeting on June 18, 2013 at the MMC campus (Attachment Q). The Planning Division has not received any written public comments as at the time of completing this Report.

**Required reviews:**

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| **Applicant’s Proposal**  | **Applicable Standards** |
| No Waivers are requested | N/R |
| Conditional Use Review of an Institutional Expansion in an R-6 Zone  | Section 14-137 – R-6 Conditional Use Standards and Section 14-474 General Conditional Use Standards |
| Building Addition Height – 69 Feet | Conditional Rezoning Agreement adopted in 2005 (Attachment 1; C41 on the Zoning Map) – allows addition to LL Bean Wing up to 111 feet in eight. |
| Building addition of 40,000 square feet | Level III Site Plan Review (for new construction over 10,000 sq. ft.) |
| Minor revision to proposals previously in receipt of (delegated to PB 2005) Site Location of Development approval (Att 2) | MDEP have determined that the Planning Board should, as part of the Site Plan approval process, review this as a minor amendment to the 2005 SLODA (delegated) review. |
| Proposed addition more than 100 feet from the designated landmark portion of the MMC complex | No Historic Preservation Review required. |
| Vertical Addition on an existing structure with no increase in impervious surface area on the site | No stormwater permit required. |
| Trip Generation associated with the proposed Addition | Equivalent of a Traffic Movement Permit was issued in 1998 through MDEP SLOD (Traffic) review (Att. O). The proposed addition taken together with previous developments since 1998 was evaluated by the applicant and Thomas Errico, Consulting Traffic Engineer. It was concluded that a TMP was not required as part of this review. |

**II. PROJECT DATA**

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| ***DATA*** |  ***New addition*** |
| **Applicant:**  | Maine health/Maine Medical Center |
| **Consultants:**  | Sebago Technics (Engineers) and Perkins + Will (Architects) |
| **Total Site Acreage** | 12.84 acres |
| **Existing Zoning** | R-6 as modified by Conditional Zoning Agreement (C41) |
| **Existing Use** | Hospital |
| **Proposed Uses** | Hospital, additional and upgraded surgical facilities |
| **Proposed structure height** | New building is approx. 40 ft high and 69 ft above the “ground” level at the emergency room entrance  |
| **Total Disturbed Area** | None associated with this proposal |
| **Existing impervious areas**  | Approx. 9 acres |
| **Proposed impervious areas**  | Approx. 9 acres |
| **Existing building footprint** | 49,972 sq ft |
| **Proposed building footprint** | 14,000 sq ft on roof of existing LL Bean wing |
| **Proposed floorspace** | 40,000 sq ft |
| **Proposed parking and bicycle parking** | Vehicle parking to use existing; proposed TDM upgrade for bicycle parking (bike racks for 36 bicycles located at Chadwick and Bramhall Sts) & parking space for shared car |
| **Estimated Cost of Project:**  | $40 million |
| **Uses in Vicinity:** |  Associated hospital buildings |

**III. BACKGROUND**

1. 2005 Review

In 2005 MMC entered into a conditional zoning agreement (Attachment 1) that provided minimum setback and height limitation relief for a number of proposed structures, including vertical expansion of the L L Bean building. That same year conditional site plan approval including SLODA approval was given (letter in Attachment 2) for the following development (extract from the PB Report #35-05):

 **Proposal:** Charles Street Addition, 192,000 square feet, four stories; Congress Street Parking Garage, 482 spaces, six levels, with elevator tower and approximately 1,400 square feet of retail space on the ground level; Helipad, approximately 3,600 square feet on top of the existing parking garage, connected to new elevator tower and bridge to hospital; Central Utility Plant, approximately 4,000 square feet.

 **Building Heights:** Charles Street Addition: 95 ft.; Congress Street Parking Garage 70 ft.; elevator tower: approximately 140 ft.; helipad: approximately 120 ft.; Central Utility Plant: 45 ft.

 **Footprint:** Charles Street Addition: approximately 30,000 S.F.; Congress Street Parking Garage 27,300 S.F.; Central Utility Plant: 7,000 S.F.

 These proposals have been completed and comprise the East Tower (150,000 sq ft), expanded Emergency Department (27,000 sq ft) plus parking garages and Central Utility Plant.

 The review determined that the proposals did not trigger a modification to the earlier Traffic Movement Permit (1998, via MDEP- Att. O ). The 2005 approval letter included conditions to address staff and neighborhood concerns regarding traffic and parking (Attachment 2). These conditions were followed up in 2008 as part of the Transportation Demand Management (TDM) Plan review, and a further approval letter (Attachment 3) was issued (all conditions have been complied with).

1. Current Review

The Planning Board considered the current proposals at a PB Workshop on June 11th, 2013 where issues associated with the glass architecture were discussed and concerns regarding possible adverse impacts of the reflectivity of the cladding materials was raised along with a number of detailed questions regarding lighting, TDM and traffic. Additional information was requested of the applicant, and addressed by the applicant, in Attachments M-V regarding the following topics (all are discussed in detail under the review headings):

* Traffic Information including changes over the last 10 years and compliance with the 1998 Traffic Permit;
* Details of the proposed TDM enhancements;
* Integration of the new addition with existing buildings and future MMC plans;
* Lighting impacts, including hours of lighting, photometrics, night sky and reflectivity information;
* Revisions to the Construction Management Plan (signage; pedestrian routing);
* FAA submissions and information provided to the FAA.

The applicant was also requested to submit the Perkins + Will Workshop presentation slides for the benefit of staff and Planning Board members who were not at the Workshop; these are in Attachment L.

**IV. EXISTING CONDITIONS**

Plans 1-3 show the current building configuration of the hospital buildings. The Presentation to the June 11, 2013 PB Workshop (Attachment L) includes plans and sketches that show where the proposed addition would fit into the existing campus.

The proposed addition is on an internal roof near the emergency room access, and is bounded on two sides by existing hospital buildings (with windows) that rise higher than the proposed addition. Aerial photographs that show the existing and a photomontage of the proposed expansion are included in Attachment K. Sections showing the proposed integration of the new addition with the Richards Building to the south are included in Attachment V.

**V. PROPOSED DEVELOPMENT**

The proposal is illustrated in Plans 4 and 5 and described in Attachments B and I, and illustrated in Attachments K, L, S, T, U, and V. It comprises a building addition of 100 ft long by 140 ft wide by approx. 40 ft high (three stories). The addition is located on the roof of the 2-story section of the LL Bean building that is adjacent to the (lower level) emergency room entrance on the north side of the MMC complex. The total height above ground level is about 69 feet, including the existing LL Bean building.

The addition includes an eight foot cantilevered section on the east elevation, which is the nearest to the emergency room entrance and likely to be the most visible part of the new building. The new addition would house 5 new operating rooms, with accompanying prep, recovery and storage rooms to meet modern standards for surgical facilities. The net increase would be 4 operating rooms as two operating rooms will be combined to create a hybrid cardiac treatment suite.

The addition attaches directly to the LL Bean building on the west side and is understood to be 13’6” to 14’ feet from the higher Richards building adjacent on the south side, as illustrated in Attachment V.

The east and north elevations are glass curtain walls to “…provide a light and transparent feel both internally and externally” (Site Plan Application Attachment B.27). Approximately 20% of the exterior “skin” area is transparent or fritted vision glass, with the remainder opaque, insulated glass or white/gray metal panels, as shown in Attachment S (details of materials in Attachment J). This scale of vision glass ensures that the building meets codes relating to energy efficiency and would not emit the intensity of light at night that staff initially suggested could be a concern.

The top (mechanical) level angles back to minimize the building height with louvres incorporated into the wall system so that none of the mechanical equipment would be visible on the exterior of the addition.

The building addition is on the roof of the existing building and therefore does not increase the impervious surface nor impact stormwater management. Also for this reason the proposals do not include any site work (eg landscaping) and the applicant has confirmed that there will be no new utility infrastructure required (Attachment B.34).

In terms of how the proposal fits into the long term plans for the hospital, the applicant has confirmed (Attachment N.1) that the proposed addition is part of the current priority to upgrade the existing procedural suites and move inpatient rooms to private occupancy.

**VI. PUBLIC COMMENT**

a. At the time of preparing this Report the Planning office has not received any written public comments.

b. The applicant held a Neighborhood Meeting on June 18, 2013 at the MMC campus (Dana Auditorium). which was attended by six members of the public (Attachment Q). Questions centered on parking, light spillover and location of construction equipment.

**VII. RIGHT, TITLE AND INTEREST AND FINANCIAL/TECHNICAL CAPACITY**

 a. The owner of the property is Maine Medical Center. The applicant has provided a copy of 12 Warranty Deeds, all recorded at the Cumberland County Registry of Deeds, which demonstrates their right, title and interest in the property.

 b. The estimated cost of the development is $40m. The applicant has submitted its audited financial statements for 2011 and 2012 as demonstration of their financial and technical capacity to complete the proposed development.

**VIII. REVIEWS**

**A. ZONING REVIEW**

The property is located in the R-6 zone, as modified by the Conditional Zoning Agreement (Attachment 1). The Zoning Administrator has confirmed that the proposal meets the height and setback requirements of the Conditional Zoning Agreement (Attachment 5).

1. **CONDITIONAL USE REQUIREMENTS (SEC. 14-137)**

The proposal constitutes an expansion of an institutional use in the R-6 zone, which is a conditional use. The applicant has submitted a conditional use application (Attachment A) which addresses the Conditional Use Requirements including those of section 14-474. In this case the Planning Board is substituted for the board of appeals as the reviewing authority.

These requirements are quoted below, followed by staff comments:

 **14-137:**

1. *In the case of expansion onto land of existing such uses other than the lot on which the principal use is located, it shall be demonstrated that the proposed use cannot reasonably be accommodated on the existing site through more efficient utilization of land or buildings, and will not cause significant physical encroachment into established residential areas; and*

Staff comment: The proposed addition is on the existing MMC site and thus, this standard does not apply.

*b. The proposed use will not cause significant displacement or conversion of residential uses existing as of June 1, 1983, or thereafter; and*

Staff comment: The proposal does not displace any existing use.

*c. In the case of a use or use expansion which constitutes a combination of the above‑listed uses with capacity for concurrent operations, the applicable minimum lot sizes shall be cumulative; and*

Staff comment: Not applicable.

**14-474:**

* 1. *There are unique or distinctive characteristics or effects associated with the proposed conditional use;*

Staff comment: The proposed use is an expansion of the surgical facilities already part of the MMC hospital complex and therefore do not represent any unique or distinctive characteristics.

*b. There will be an adverse impact upon the health, safety, or welfare of the public or the surrounding area; and*

Staff comment: The Workshop Memo raised questions regarding the potential impacts associated with this expansion, including the way it is integrated into existing buildings on 2 sides, and how it appears when viewed from the north and east (based on the photomontages in Attachment K). Further information was requested, as follows:

* How will the rooms in the two abutting existing buildings get ventilation and light? The applicant has confirmed in Attachment V that the proposals meet code because they are patients rooms and the 13’ 6” gap on the south side meets minimum requirements for adequate light and air. The west side of the addition abuts and integrates directly with the existing LL Bean building (see Floor Plans, Attachments L.6, L.7, and L.8).
* When the building is lit inside and it is dark outside, will there be glare or light trespass or “skyglow” from the two glass walls created for the immediate area and for longer views or airplanes? The applicant has confirmed in Attachment S that an average of 20% of the glass will allow light transmission from the inside of the building. The submitted Night Lighting analysis in Attachment T confirms that the “spillover” into the emergency room area is well below City Technical Standards and the submitted rendering (Attachment T.5) shows that the glass curtain wall exterior would actually appear similar to a windowed building at night.

 Staff requested that the applicant inform the FAA of the architecture and obtain confirmation that there are no aviation issues. It is understood that all of the information in Attachments T and U have been forwarded to the FAA (Attachment P). This exchange did not specifically refer to the potential impact on the Helipad (as raised at the Neighborhood meeting (Att Q.14) but the forwarded light and reflection information is comprehensive. Staff suggest the following potential condition of approval, which the applicant has indicated they are comfortable to accept (Attachment N):

 Potential condition of approval: “*That the applicant shall submit evidence to the Planning Authority of approval by the FAA prior to the issuance of a Building Permit.”*

* Concern about adverse impacts of reflectivity (from sun) generally; would like rendering that shows reflectivity of louvres and metal panels (accurately in comparison with the glass/fritted glass) on the north elevation. The applicant has submitted an analysis of the proposal and how its glass specification, together with its orientation, reduces reflectivity impacts (Attachment U). This analysis includes a photomontage of the north elevation as viewed from the airport runway which is included in the information sent to the FAA (as per Attachment P.9). The question regarding the reflectivity of the louvres and metal panels has been addressed in the MMC letter in Attachment N.2 and samples of the materials will be available at the hearing.

c. *Such impact differs substantially from the impact which would normally occur from such a use in that zone.*

Staff comment: The impact of the proposed expansion of the surgical unit is not anticipated to differ substantially from the current impacts of the hospital use in this zone.

1. **Site Plan Submission Requirements** (Section 14-527)

The application is complete. The applicant was requested to submit further information as outlined in section *III BACKGROUND* above and the information has been received and included in this Report.

**D. Site Plan Standards** (Section 14-526)

The proposed development has been reviewed by staff for conformance with the relevant review standards of Portland’s site plan ordinance and applicable regulations. The project is also considered a minor amendment to the 2005 Site Location of Development Act approval. Staff comments are listed below.

1. **Transportation Standards**
	1. Impact on Surrounding Street Systems

 The proposed addition will be supported by 49 additional employees and a Traffic Study has been submitted in Attachment E, as updated by Attachments N and O. The Traffic Study addresses trip generation and parking, including an update of the existing MMC Transportation Demand Management Plan (Attachment F, expanded in Attachment M). It also includes a Collision Analysis with recommended mitigation strategies at Attachment E.10.

 The reviewing Traffic Engineer (Tom Errico) final comments are extracted below in bold: (Attachment 11)

* *A Traffic Movement Permit was not issued during the 2005 expansion project.  In 2005 the applicant provided traffic analyses that indicated new traffic generation did not trigger a Traffic Movement Permit.  The applicant should provide a historical summary of traffic changes over the last ten years, combined with traffic from this addition, in an effort to assess whether a Traffic Movement Permit is required.*

***Status: The applicant has provided a summary of traffic permits for the project and I concur that the site and this project is in compliance.***

* *I have reviewed the traffic study prepared by Gorrill-Palmer Consulting Engineers, Inc. and generally find the methods used to be acceptable.  I continue to review the safety analysis and the conclusions provided.*

***Status: I have reviewed the traffic study and in my professional opinion the project will not have a significant impact on traffic conditions in the vicinity of MMC. The traffic study did identify safety problems in the project area and accordingly the applicant shall be responsible for implementation of mitigation strategies recommended in the study. The applicant shall coordinate with DPS prior to proceeding on the noted recommendations.* (Note: refers to locations 3 and 5 of the Attachment E.10)**

A potential condition of approval is included in the motion for the Board to consider:

Potential condition of approval: *“That the applicant shall implement the mitigation strategies for two minor safety issues in the project area (Congress Street between Weymouth and Ellsworth Street; Intersection of Congress Street and Valley Street) as recommended in the May 29, 2013 letter from Gorrill Palmer, as supported by Tom Errico, Consultant Traffic Engineering Reviewer in e-mail dated July 3, 2013; such implementation shall be coordinated with the Department of Public Services prior to proceeding and be implemented prior to the issuance of a Certificate of Occupancy.”*

* 1. Access and Circulation

The proposals are incorporated into the overall MMC hospital complex, and the access utilizes the existing network.

* 1. Public Transit Access

There is a bus pull off and bus shelter adjacent to the main entrance to the MMC campus and the ordinance requirements do not apply.

* 1. Parking

The applicant has confirmed that the additional parking demand related to the additional 49 employees can be accommodated in the parking areas at 887 and 995 Congress Street (Attachment E.5) and the Traffic Engineering Reviewer has confirmed that parking conditions are acceptable (Attachment 7).

* 1. Transportation Demand Management (TDM)

 Staff and the Planning Board requested further details of the bike parking and U-Car proposals mentioned in the initial submissions (Attachment 7). In addition, the PB Memo suggested that a contribution to the city’s developing bikeshare program was a possible enhancement of the TDM.

 The Planning Board sought a better understanding of the scale of use made of alternative modes of commuting and requested the total number of employees at the Bramhall street campus in order to better interpret the table in Attachment F.4. The applicant has confirmed that MMC has achieved a 20% utilization rate (for alternative transportation) to and from the Bramhall Campus (Attachment M) and that the total number of employees at the Bramhall campus is 4,755 (Attachment N.2).

 The applicant has confirmed (Attachment M), that the proposals include two bicycle racks (capacity 36 bicycles) at the corner of Chadwick and Bramhall Streets and the provision of a parking space for a U- Carshare vehicle. The applicant suggests that these would be more successful in reducing traffic and parking demand than a contribution to a bike share program.

 The Director of Planning and Urban Development (Jeff Levine) has raised a question over the effectiveness of adding more of the traditional bike racks and explained his concerns in a Memorandum (Attachment 10) which states:

1. *The offer of 36 new bicycle parking spaces is appreciated. Maine Med is clearly at a point where it is maturing as a bicycle destination, especially for employees, and that should be encouraged. As such maturation occurs; however, there can be a diminishing return from providing additional traditional bicycle racks. Some bicyclists simply do not like to park at bike racks, either for personal safety reasons or for fear that their bicycle might be vandalized. At a location like Maine Med, such as in high-bicycle locations in other cities, there may be a need for higher-security bicycle parking such as bike lockers rather than additional racks. I would suggest that the applicant be asked to provide a contribution to bicycle parking equivalent to the offer of two additional racks, with the specific use of those funds to be determined through further study of the needs and the final determination of the Planning Authority. Possible uses include providing fewer, higher quality, bike lockers; a contribution towards the City’s development of a business plan for a bike sharing system; or the provision of racks as currently proposed.*
2. *I recommend that any car-sharing spaces required as part of a review be identified for the use of any car sharing company that the City chooses. While the current agreement is with U-Car, it is possible that, in the future, the provider of this service might change to a different vendor. I'd like to keep all regulatory approvals flexible in case such a change is made.*

Tom Errico, Consulting Traffic Engineering Reviewer, concurs with Jeff Levine’s comments (Att. 11):

*Status: The applicant has provided supporting information on enhancing their site TDM Plan. I concur with Jeff Levine's Memorandum dated July 3, 2013 that suggests the applicant consider the noted suggestions as alternative measures.*

If the Board supports Jeff Levine’s suggestion, as endorsed by Tom Errico, a potential condition of approval is suggested to be:

Potential condition of approval: *“That the applicant shall implement the proposed TDM Plan enhancements of a car share parking space and additional bicycle facilities in accordance with the Memorandum from Jeff Levine, Director of Planning and Urban Development dated July 3, 2013, prior to the issuance of a Certificate of Occupancy.”*

 f. Construction Management Plan

The applicant has submitted a comprehensive Construction Management Plan (Attachment G) and submitted additional information on signage as requested by DPS (Attachment 6). DPS has confirmed that the additional information is satisfactory (Attachment 9).

1. **Environmental Quality Standards**
	1. Preservation of Significant Natural Features and Landscaping and Landscape Preservation

The proposals are located on top of an existing building and do not impact any existing vegetation and there are no landscape proposals.

* 1. Water Quality, Storm Water Management and Erosion Control

 The proposals are located on an existing builidng with no outside space and no increase in the impervious surface. Therefore the standards under this heading are not relevant.

1. **Public Infrastructure and Community Safety Standards**
	1. Consistency with Master Plans

 The applicant has submitted a narrative in Attachment C.1 outlining how the development is consistent with existing master plans, and applied for a wastewater capacity letter (Attachment B.25) which is expected to be available at the hearing.

* 1. Public Safety and Fire Prevention

 The applicant has submitted a Fire Code Report (Attachment B.16) and the Fire Department has confirmed that there are sufficient hydrants and existing/approved access, and provided detailed comments to be addressed at the Building Permit stage (Attachment 8). A potential condition has been included to ensure that these technical requirements are addressed as early in the process as possible.

* 1. Availability and Adequate Capacity of Public Utilities

 The applicant has confirmed that there will be no new utility infrastructure required (Attachment B.34).

The applicant has submitted a summary of the solid waste and hazardous waste management for the proposal in Attachment H which addresses the standard.

1. **Site Design Standards**

 a. Massing, Ventilation and Wind Impact

The standard is extracted below (14-526 (d)):

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a. *The bulk, location or height of proposed buildings and structures shall not result in health or safety problems from a reduction in ventilation to abutting structures or changes to the existing wind climate that would result in unsafe wind conditions for users of the site and/or adjacent public spaces.*

*b. The bulk, location or height of proposed buildings and structure shall minimize, to the extent feasible, any substantial diminution in the value or utility to neighboring structures under different ownership and not subject to a legal servitude in favor of the site being developed.*

*c. Development shall locate all HVAC venting mechanisms to direct exhaust away from public spaces and residential properties directly adjacent to the site.*

 The overall design and materials of the building, with the mechanicals enclosed within the exterior walls and roof, does not raise issues related to bulk and massing (see photomontages in Attachment K, elevations in Attachment S, and Plan 5). The building is integrated into the existing MMC brick building complex. Staff

 requested further information regarding how the proposal addresses the first part of the standard, and the applicant has provided additional information in Attachment V.

* 1. Shadows; Snow and Ice Loading; View Corridors

The proposed addition is enclosed by the existing MMC buildings and does not impact public spaces/areas or view corridors.

* 1. Historic Resources

 The Historic Preservation Program Manager has confirmed that a Historic Preservation review is not required in relation to this proposal.

* 1. Exterior lighting

 The proposals do not include any exterior site lighting, but the PB Memo raised the question of whether the interior lighting may be on during the night and potentially spillover into the emergency room entrance area or create an intense area of bright light. Staff had requested a post-development photometric plan of the emergency room area and confirmation that the design of the glass curtain wall and internal lighting seeks to minimize the spillover from the internal lighting as far as possible. The Planning Board requested confirmation as to what times the corridor lighting would be on and the operational hours of the operating rooms.

 The details of the curtain wall design (Attachment S) show that the extent of glass that would allow light emissions is relatively small (average of 20% glass; average of 12% transparent glass). The applicant has submitted three photometric plans of the emergency room area (Attachments T.2, T.3 and T.4) with the existing lighting, the addition lights (perimeter interior lights) on only, and together. These illustrate that the lighting levels would fall within the City’s Technical Standards.

 The peripheral corridor lighting on the northwest side of the building has been confirmed as proposed to be on until about 5pm when the operating rooms close down, and on the northeast perimeter wall would normally be turned off by 10pm (Attachment N.1). A rendering of the building as seen at night (Attachment T.5) suggests that there would not be any adverse impacts related to potential spillover from internal lighting.

* 1. Noise and Vibration

The HVAC and mechanical equipment will be enclosed within the envelope of the proposed building. The venting louvres face towards the parking garages and would need to meet zoning noise limits.

* 1. Signage and Wayfinding

The proposals do not include any proposed signage and a suggested condition of site plan approval requires that any signage be subject to separate review and permits.

* 1. Zoning Related Design Standards

 There are no design standards that apply to this proposal.

* + 1. **STAFF RECOMMENDATION**

Subject to the proposed motions and conditions of approval listed below, Planning Division staff recommends that the Planning Board approve the proposed development.

* + 1. **PROPOSED MOTIONS**
1. **Conditional Use**

On the basis of the application, plans, reports and other information submitted by the applicant, findings and recommendations contained in Planning Board Report #30-13 for application #2013-130, relevant to the conditional use application and other regulations, and the testimony presented at the Planning Board hearing, the Planning Board finds the conditional use for Maine Medical Center Surgical Facilities Roof Addition at 22 Bramhall Street (**is/is not)** in conformance with the conditional use standards of the Land Use Code subject to the following conditions:

Potential conditions:

* 1. That the applicant shall submit evidence to the Planning Authority of approval by the FAA, prior to the issuance of a Building Permit.
1. **Development Review**

On the basis of the application, plans, reports and other information submitted by the applicant, findings and recommendations contained in Planning Board Report #30-13 for application #2013-130, Maine Medical Center Surgical Facilities Roof Addition at 22 Bramhall Street, relevant to the Site Plan, Amended Site Location of Development Act under delegated review by Portland, and other regulations, and the testimony presented at the Planning Board hearing, the Planning Board finds the following:

**Site Plan Review including an Amended Site Location of Development Act**

The Planning Board finds that the plan (**is/is not**) in conformance with the site plan standards of the Land Use Code, subject to the following conditions of approval:

Potential conditions:

* + 1. That the applicant shall implement the mitigation strategies for two minor safety issues in the project area (Congress Street between Weymouth and Ellsworth Street; Intersection of Congress Street and Valley Street) as recommended in the May 29, 2013 letter from Gorrill Palmer, as supported by Tom Errico, Consultant Traffic Engineering Reviewer in e-mail dated July 3, 2013; such implementation shall be coordinated with the Department of Public Services prior to proceeding and be implemented prior to the issuance of a Certificate of Occupancy; and
		2. That the applicant shall implement the proposed TDM Plan enhancements of a car share parking space and additional bicycle facilities in accordance with the Memorandum from Jeff Levine, Director of Planning and Urban Development dated July 3, 2013, prior to the issuance of a Certificate of Occupancy; and
		3. That the applicant shall address the particular technical Fire Prevention standards, as outlined in the e-mail from Captain Chris Pirone of the Fire Department dated June 6, 2013, to the satisfaction of the Fire Department prior to the issuance of a building permit; and
		4. That any signage shall be subject to separate review and approvals/permits.

**ATTACHMENTS**

**Attachments as in PB Memo June 11, 2013**

1. Conditional Zone Agreement 2005
2. Approval letter (Site Plan etc) 2005
3. Approval letter (TDM) 2008
4. Glass architecture- light trespass
5. Marge Schmuckal, City Zoning Administrator dated 6.6.2013
6. David Margolis-Pineo, Department of Public Services dated 5.30.2013
7. Tom Errico, Traffic Engineering Reviewer 6.5.2013
8. Captain Chris Pirone, Fire Prevention 6.6.2013

**Updated Attachments for Hearing Report July 9, 2013**

1. Mike Farmer, Department of Public Services 7.1.2013
2. Jeff Levine, Director, Planning and Urban Development Memorandum 7.3.2013
3. Tom Errico, Traffic Engineering Reviewer 7.3.2013

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| **Applicants Submittal as in PB Memo June 11, 2013** (Tab numbers refer to applicants ring binder tabs)1. Conditional Use Application
2. Site Plan Application
3. Compliance with Zoning Requirements and Consistency with the Comprehensive Plan
4. Neighborhood meeting materials - see updated set in Att. Q
5. Traffic Study May 2013 (additional info in Att. N.2 and Att. O)
6. Update on Transportation Management Plan May 2013 (Add’l info in Att M)
7. Construction Management Plan
8. Solid Waste, Hazardous Materials, Air Emissions
9. Conformity with Design Standards
10. Material Specifications (extract re glazing and curtain walls)
11. Renderings
 |  |
| **Applicants Submittal - for PB Hearing July 9, 2013** (Tab numbers refer to applicants ring binder tabs)1. PB Workshop Presentation Graphics (as shown Board on June 11, 2013)
2. MMC cover letter 6.19.2013 re PB Workshop requests for information
3. MMC cover letter 6.28.2013 with additional information
4. Traffic Permitting History
5. FAA Submissions (crane; building; night lighting)
6. Final Neighborhood Meeting materials
7. Revisions to Construction Management Plan
8. Building Envelope Materials
9. Night Lighting analysis
10. Reflectivity analysis
11. Proximity to existing buildings

**Submitted Plans**Plan 1 Survey 1Plan 2 Survey 2Plan 3 Survey 3Plan 4 Site PlanPlan 5 Elevations |  |