



MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

MCPB 09/25/08
Item #4 B and 4C

MEMORANDUM

DATE: September 15, 2008

TO: Montgomery County Board of Appeals

FROM: Renée M. Miller, AICP, Senior Planner *RM*
Development Review Division (301-495-4723)

VIA: Rose Krasnow, Chief, Development Review Division *RK*
Ralph Wilson, Zoning Supervisor *RW*

SUBJECT: A. Preliminary Forest Conservation Plan
B. Special Exception Modification Request (S-274-D:
Suburban Hospital)

MASTER PLAN: Bethesda/Chevy Chase Master Plan

FILING DATE: February 7, 2008

PLANNING BOARD: September 25, 2008

PUBLIC HEARING: October 6, 7, 14 & 17, 2008

STAFF RECOMMENDATION

- A. Staff recommends **APPROVAL** of the revised Preliminary Forest Conservation Plan (PFCP) for the above referenced special exception, subject to conditions, as identified in Section XII of this report.
- B. Staff recommends **APPROVAL** of Special Exception Petition S-274-D for expansion and modernization of Suburban Hospital, subject to conditions, as identified in Section XII of this report.
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In summary, staff finds that the proposed expansion and modernization of the Hospital will be in harmony with the general character of the neighborhood given the adjustments to the initially submitted plans that, in staff's view, improve the project's design and neighborhood compatibility, while reducing environmental impacts. The adjusted project design specifically addresses the relationship between the adjacent residential dwellings and the hospital, by providing improved design elements, such as, a low brick wall along the

perimeter of the site, street trees and ground cover shrubs, multiple pathways, and improved traffic flows. Staff believes that the proposed expansion will not have any unacceptable adverse impacts on the character of the neighborhood considering the design, scale, and bulk of the proposed new structures. Previously approved variances that were necessary for the existing facility will be eliminated, and the hospital will be able to enhance the provision of important health services to the surrounding area and the County. Staff recommends that a 59-D-3 site plan be submitted by the applicant to ensure that the hospital expansion and modernization proposal achieves a maximum of compatibility, safety, efficiency, and attractiveness.

Staff would not support further assembly of parcels or the removal of houses beyond the two-block area within Grant Street, McKinley Street, Southwick Street, and Old Georgetown Road that now comprises the hospital grounds. Staff believes this two-block area should be described and restricted under this modification as the Hospital's maximum expansion limits. Any further acquisition of homes beyond the maximum expansion limits for purposes of expanding or improving hospital health service would not be supported.

I. SUMMARY

A. Applicant

Suburban Hospital, Inc.

B. Site Size and Location

Site size is approximately 15.2 acres, including that portion of the Lincoln Street right-of-way between Grant Street and Old Georgetown Road. The site is described as Lots 1A, 2-5, 6A-9A, 10-13 and 15, Block 15 and Lots 7, Pt. 20, 21, 27, and 32, Block 8, "Huntington Terrace" Subdivision. The site is located on the west side of Old Georgetown Road, between Southwick Street and McKinley Street, Bethesda. (See Attachment 1.)

C. Zone and Proposed Use

The site is classified in the R-60 Zone. The applicant is seeking to expand and modernize the hospital facilities to align with contemporary standards for surgical and clinical facilities and patient care rooms. Patient beds would increase by 66 from 228 to 294.

D. Master Plan

The hospital is located within the boundaries of the approved and adopted 1990 Bethesda/Chevy Chase Master Plan.

II. APPLICATION BACKGROUND

Suburban Hospital (Suburban) is a 228-bed hospital that provides both emergency and trauma services. Suburban serves as Montgomery County's only designated regional trauma center and has formed a partnership with the National Naval Medical Center, the National Institutes of Health Clinical Center, and the National Library of Medicine. Designated trauma centers are responsible and certified to provide advanced medical and surgical

services 24-hours a day. In addition to trauma, Suburban, with the exception of obstetrics, provides all major core services including cardiac surgery, elective angioplasty, neurosciences, oncology and orthopedics.

Suburban filed its special exception application (S-274-D) on February 7, 2008, to expand and modernize hospital facilities. According to the applicant, due to age and design constraints, Suburban's existing facilities do not provide the necessary flexibility for accommodating advances in healthcare such as robotic surgery, minimally invasive surgery, and radiologically-guided surgery. For example, existing hospital floor-to-floor heights are approximately 10.5-feet, when 14- to 16-feet is the modern-day requirement to accommodate mechanical systems and new technology.

Essential for the Hospital's expansion plans is the approval by the County Council of petition AB#715, abandonment of a portion of Lincoln Street bisecting the Hospital grounds between Old Georgetown Road and Grant Street. An abandonment petition has been filed by the Hospital with the County Executive, who after public hearing by a Hearing Officer and recommendation by the Planning Board, must make a recommendation to the County Council. Under County Chapter 49, Article 6, "Abandonment and Closing of Rights-of-Way," the County Council is the final authority for deciding abandonment petitions. A right-of-way may be abandoned if the County Council by resolution finds the following:

1. The right-of-way is no longer necessary for the present public use or anticipated public use in the foreseeable future;
2. The abandonment is necessary to protect the health, safety and welfare of the residents near the right-of-way to be abandoned. In assessing health, safety and welfare issues, the Council may consider:
 - (a) Any adopted land use plan applicable to the neighborhood;
 - (b) Safe and efficient pedestrian and vehicular traffic patterns and flows, together with alternatives, in the immediate neighborhood, for local and through traffic; and
 - (c) Changes in fact and circumstances since the original dedication of the right-of-way.

The public hearing on the abandonment petition was held by a Hearing Officer on August 26, 2008. The record of the hearing is being held open to include the abandonment report and recommendation of the Planning Board.

III. SPECIAL EXCEPTION HISTORY

Suburban Hospital has provided health care services at its current location since 1949, when the land for the hospital was purchased by Suburban Hospital, Inc. from the Federal government. The hospital has operated under a special exception only since 1955. Since the initial special exception was granted by the Board of Appeals in 1955, several modifications have been approved. Between 1955 and 1964, the hospital received special exception approval and the necessary variance approvals to construct the hospital building essentially as it now exists. Between 1968 and 1970, special exceptions modifications were granted for additional parking facilities.

The fourth wing of the hospital, a research building for laboratory and pathology purposes, and a parking garage were approved in 1971. Several administrative approvals were granted between 1976 and 1989 to accommodate changes to the parking areas, including the addition of valet service, and a change in use of the Lambert Building, from laboratory and pathology uses to administrative uses and blood collection.

In 1987, the Board of Appeals approved the hospital's request for an 84,000 square-foot ambulatory care center on the hospital's campus, which included 54,000 square feet of physician office space. This request also included a new parking structure. Ultimately, according to the hospital, pursuit of the center was withdrawn, due to delays caused by legal appeals filed in response to the approvals. In 1991, approval was granted by the Board of Appeals for additions to the south and east sides of the hospital. This approval allowed the construction of the existing helipad along Old Georgetown Road.

The last modification, approved in 2007, was to permit the construction of an air handler and related air shaft on the north side of the hospital facing Lincoln Street and the installation of noise barriers to resolve noise ordinance violations.

IV. APPLICANT'S SUBMITTAL

Suburban's core expansion objective, as stated in the application, is to improve care to residents of the surrounding community and the County. As a predominately surgical hospital, the proposed modernization would provide a centrally located surgical suite with the same number of operating rooms as currently exists, but sized, from a square footage and ceiling perspective, to accommodate the equipment, staff, and utility systems for state-of-the-art surgery. Suburban estimates that the hospital building would need to be sized at approximately 250,000 square feet more than its existing size to meet today's hospital standards and current volumes. Specific elements of the applicant's original submittal include:

1. Construction of a new building addition (235,597 gross square feet of floor area) to house surgical facilities, private patient rooms, support areas, and physician offices;
2. Construction of a 1,169 parking space, multi-level parking structure, built in two phases. The parking structure is a total of 10 stories, with 2 levels below grade, 1 level partially below grade, and 7 stories above grade;
3. Reduction of the number of surface parking spaces by 193 parking spaces. The total surface spaces proposed with this modification is 269.
4. Demolition of the existing parking structure, 23 residential structures, and the 17,000 square foot Lambert Building;
5. Development of an improved pedestrian and vehicular circulation system, including a new main entrance;
6. Increase in the number of patient beds to 294, an additional 66 beds;
7. Increase in the total number of full-time equivalent employees by 260 persons.
8. Addition of 36,126 square feet of right-of-way from the pending abandonment of Lincoln Street, between Grant Street and Old Georgetown Road (see Agenda Item 4A, AB#715); and

9. Creation of open spaces, plazas, walkways, gardens, landscaping and other green areas to create a “campus” design.

The applicant has indicated that there is no change in the proposed hours of operation, or delivery schedules. The application is not requesting additional operating room, which will remain at 15; however, the addition of 235,597 square feet of floor area will serve to centralize all surgical activities.

In addition to centralizing surgical facilities, the hospital is proposing a comprehensive hospital campus plan within the two block area of Grant Street, McKinley Street, Southwick Street, and Old Georgetown Road. The campus plan redesigns surface and structured parking facilities, addresses pedestrian and vehicle circulation conflicts, and provides significant additional community screening and buffering (See Attachment 2).

The structured parking facility as originally proposed by the applicant would accommodate 1169 parking spaces. The garage would occupy essentially the same location as the existing garage, except that it is set back 25-feet farther from Old Georgetown Road. Nevertheless, it would require a Variance from the Board of Appeals of 18.3-feet to satisfy the minimum setback requirement in the R-60 zone (one foot setback of each foot of height, 50-foot minimum). The proposal called for the parking facility to be built in two phases, with the first phase beginning along with the construction of the surgical addition. All access to the garage would be from the west side of the parking facility.

Conflicting traffic movements that now exist at the hospital’s Old Georgetown Road and Lincoln Street entrance are addressed by relocating the emergency vehicle access to McKinley Street, at a point just west of old Georgetown Road. An exit only driveway farther west on McKinley Street now used as access to the hospital by cardiac patients and physician staff would be eliminated. Overall, the applicant is proposing to reduce the number of curb-cuts and access points into the hospital grounds.

V. APPLICANT’S REVISED SUBMITTAL

The applicant has altered the initial submittal to reflect several of staff’s recommended revisions. (See Attachment 3.) In staff’s view, the revisions improve project design and neighborhood compatibility, while reducing environmental impacts. The principle revisions include: (see Attachment 3):

1. A redesigned parking garage that eliminates the need for a variance under §59-G-2.31(3) and allows the garage to be constructed in one phase;
2. Dedication of a 10-foot right-of-way along McKinley Street, which includes an additional westbound right turn access lane and an improved crosswalk on McKinley Street;
3. Retention of additional large and specimen trees above and beyond those originally proposed to be preserved;
4. Widening of the pedestrian and bike path connectors to 8-feet from the Grant and Lincoln Street intersection to the proposed north/south pedestrian/bike

- path;
5. Additional bike and pedestrian linkages and softer turning radii for the bike paths, and wider sidewalks along all perimeters and interior spaces;
 6. A wider pedestrian refuge and a re-aligned crosswalk on Old Georgetown Road (across from employee entrance of NIH); and
 7. A handicap ramp and crosswalk across Grant Street at Lincoln Street.

Staff worked closely with the applicant to achieve a garage design that is operationally more efficient and scaled to have lesser impact on the neighborhood. Construction of the garage as originally planned was in phases, so that the existing garage could remain open during construction, and the hospital addition could be constructed concurrently with the construction of the garage. Table 1 below compares the two designs:

Table 1: Parking Garage Designs

	February 2008 Design	August 2008 Design
No. of Parking Spaces (total)	1,169 spaces	1,138 spaces
Proposed Height ¹	(varies) ±38-ft to 68.3-ft ²	46.8-ft
Number of Floors	10	7
Number of Floors Below Grade	2 ½	2
Floor-to-Floor Height	10-ft	10-ft

In staff's view, if a new garage is needed at this location, the existing garage should be removed in one phase. The parking spaces in the existing garage could be accommodated on-site on an interim basis, and a new garage that satisfies the minimum setback requirement could then be built. This option has the following benefits:

1. Improves the opportunity to implement the "green corridor" concept along Old Georgetown Road, as recommended in the Master Plan;
2. Provides a more efficient garage with a more gradual slope for the ramps;
3. Reduces the height of the garage by ±20-feet (2-3 stories);
4. Provides approximately the same number of parking spaces; and
5. Eliminates the need for a variance.

As revised, the garage would be approximately 46.8 feet in height, with 5 stories above grade, 2 stories below grade, and 1,138 parking spaces. Reconstructing the garage in one phase would require all hospital parking needs to be met on an interim on-site surface facility and delay construction of the hospital addition until the garage is complete, which is estimated to take approximately 18 months. Although this is the preferred design option, the hospital has indicated that if the required interim parking permits and stormwater management plan revisions cannot be obtained from county agencies, the original parking garage design and the request for a variance will be pursued. (See Attachment 4.) Staff understands the applicant's position and could support this variance should it become necessary.

In response to staff's concern over cut-through traffic, the applicant has revised the

¹ The height of the top deck is measured from the average grade.

² Requires variance in building setback provisions under §59-G-2.31(c)

access points at the cardiac/physician along McKinley Street entrance, currently proposed for abandonment to further control traffic flows by creating a smaller curb-cut, extending the length of the proposed median and orienting the traffic flows more toward Old Georgetown Road. In addition, the applicant has revised the submittal to provide an extended westbound lane on McKinley Street from Old Georgetown Road. This dedication of right-of-way and improvements along McKinley Street result in a reduction in the number of surface parking spaces. All internal and external pedestrian and bike paths have been revised to enhance tree save efforts, as described in Section IX, of this report.

VI. NEIGHBORHOOD AND SITE CONDITIONS

The Suburban Hospital site includes multiple properties and is described as Lots 15, 1-A, 2-5, 6-A, 7-A 8-A, 9-A, 10-13, Block 15 and Lots 7, portion of 8, 12-17, 20, 21, 27, 32, Block 8 "Huntington Terrace" subdivision. The site is 15.2 acres in size, including 36,126 square feet of Lincoln Street right-of-way. An existing 228-room, acute care hospital, a helipad, associated patient and resident physician parking, a three-story, 268-space parking structure, single-family residences, and a 17,000 gross square foot office building are located on a portion of the hospital grounds. Currently, there are 6 access points into and from the Hospital site. The campus is cramped and under parked and does not provide a cohesive hospital campus that is well integrated into the surrounding area. There are on-site conflicts between vehicle and pedestrian access, and inadequate separation between arriving emergency and visitors' vehicles. (See Attachment 6.)

Staff defined the neighborhood to include all the areas within the following streets: (1) Greentree Road to the north; (2) National Institutes of Health to the east; (3) generally Hempstead Avenue to the west; and (4) Huntington Parkway to the south. (See Attachment 5.) The neighborhood is zoned R-60 (Residential, one-family), and R-60/TDR (Residential, transferable development rights), and is developed mainly with single-family detached homes. There are multiple special exceptions within the neighborhood, including several medical offices.

The properties immediately north of the hospital site include the "Auxiliary House," a small group home for seniors, and several single-family detached residences zoned R-60. The properties immediately west are single-family detached residences. Staff notes that several of the original houses have been replaced with larger homes, in recent years. (See Attachment 6.) East and across Old Georgetown Road is the National Institutes of Health campus. To the south of the site is a mixture of single-family detached residences and medical office buildings, all zoned R-60.

VII. MASTER PLAN CONFORMANCE

Suburban Hospital is within the 1990 approved and adopted Bethesda/Chevy Chase Master Plan. The Master Plan provides guidelines for the location of special exceptions. The general objective of the guidelines is to avoid an over-concentration of special exceptions along major highways and in residential neighborhoods. The plan emphasizes the importance of design in avoiding incompatible special exceptions along major corridors and

in the neighborhoods. The guidelines support special exceptions that contribute to the service and health objectives of the Master Plan and recognize the importance of meeting these needs through hospital services and hospice centers that are appropriately sized to be compatible with the surrounding neighborhoods. The plan as a general objective does not support assemblage of parcels or the removal of houses to accommodate a special exception, but recognizes that assessment of the appropriateness of a special exception is on a case-by-case basis.

Community-Based Planning Staff, in its review of the application, found that hospital expansion plan was “unacceptable and should be denied”. (See Attachment 7.) Community-Based Planning staff believes that the hospital expansion proposal is inconsistent with the recommendations of the 1990 approved and adopted Bethesda/Chevy Chase Master Plan because the master plan discourages the removal of homes for special exceptions uses and encourages the protection of the neighborhood from further encroachment of special exception uses except for local community need.

Notwithstanding the comments of Community Based Planning, the master plan recognizes that some existing special exceptions along the Old Georgetown Road corridor may need to be modified and, if such expansion is necessary, recommends that any building addition should not be larger than 50% of the existing building. The proposed hospital expansion does not exceed 50%. In context of the master plan, it is important to note that Suburban Hospital is not specifically addressed in the discussion of special exceptions, which is surprising since the hospital has been an existing special exception since the 1950’s and has needed modifications over the years. It should also be noted that important improvements consistent with recommendations of the master plan would be implemented through the expansion as proposed. The applicant is proposing to reconstruct the sidewalks along Old Georgetown Road, provide separation between the sidewalk and the back of curb, and provide proper pedestrian cross-walks and curb cuts across Old Georgetown Road. Variances would no longer be needed for the setbacks between the hospital structures and single family residences. Zoning staff believes these are important elements to be considered in determining consistency of the hospital expansion with master plan recommendations.

VIII. TRANSPORTATION ANALYSIS

A. Traffic Analysis

With certain improvements, the proposed Hospital expansion as described in the special exception application satisfies the LATR and PAMR requirements of the APF review. The intersections were examined to determine whether or not they met the applicable congestion standard of 1,600 Critical Lane Volumes (CLV) for the Bethesda/Chevy Chase Policy Area. The traffic study includes the trips related to the abandonment of Lincoln Street and the redistribution of those trips on the local network. All intersections identified are currently operating at an acceptable congestion standard and are expected to continue to meet the CLV for the total future traffic conditions, with the exception of West Cedar Lane at Old Georgetown Road during the P.M. peak-hour. In order to address the over congested condition, the applicant has proposed to construct a third westbound lane on West Cedar Lane. With this proposed improvement, the West Cedar

Lane/Old Georgetown Road intersection is anticipated to operate at an acceptable CLV; therefore, the special exception application satisfies the LATR requirements of the APF review.

With regards to the Policy Area Mobility Review (PAMR), this site is located in the Bethesda/Chevy Chase Policy Area and 30% of the new trips must be mitigated, as required under the Adopted 2007–2009 Growth Policy. The applicant is proposing several non-automobile transportation facility measures, including construction of a sidewalk and bike path. Staff finds that the proposed improvements and facilities should mitigate the required 30% of the hospital-generated new trips; therefore, the special exception application meets the PAMR requirements of the APF review. (See Attachment 8.)

B. Parking Demand

The hospital parking plan was analyzed by staff under the parking standards of 59-E-2.3:

Hospital: One parking space for each 1,000 square feet of total floor area, plus one space for each resident doctor, plus adequate reserved space for visiting staff doctors, plus one space for each 3 employees on the major shift.

Professional Office: Five parking spaces for each 1,000 square feet or gross floor area used by medical practitioners.

Bicycle and Motor Bicycle: All parking facilities containing more than 50 parking spaces shall provide one bicycle parking space or locker for each 20 automobile parking spaces in the facility. Not more than 20 bicycle parking stalls or locker shall be required in any one facility

All parking facilities containing more than 50 parking spaces shall provide motorcycle stalls equal to at least 2% of the number of auto spaces. Not more than 10 motorcycle stall shall be required on any one lot.

Table 2: Parking Standards (Provided)

Number of Parking Spaces: §59-E-3.7		
	Required	Provided
Gross Floor Area (558,697 sf @ 1sp/1,000 sf)	559 spaces	
Resident Physicians (63 Resident Phys. @ 1 sp/Resident Phys)	63 spaces	
Employees (on main shift) (763 @ 1 sp/3 employees)	255 spaces	
Visiting Physicians (178 Physicians @ adequate rate: 1 sp/3visiting physician)	60 spaces	
Parking Distribution: §59-E-2.23		
Regular	905	1,380
Handicap (total)	32	32
Handicap	25	22
Handicap (van)	7	10
Motorcycle	16	16
Total	953	1,428
Bicycle	32	52

As shown above, the hospital proposes to provide a total of 1,428 parking spaces, some 475 spaces above the minimum Code requirement. This is the number of parking spaces proposed by the applicant to meet existing and future demands, and to consolidate all parking at one location. Approximately 80% of the general parking for the Hospital will be provided in the multi-story garage structure, located near the southwest corner of Old Georgetown Road and Southwick Road. Access to this garage is from a driveway leading from the Hospital's proposed main entrance. The remainder of the proposed parking spaces would be surface parking.

The proposed surface parking area along McKinley and Grant Streets would be setback between 25-feet and 44-feet from the hospital property line, which exceeds the minimum parking facility setback requirements of the R-60 zone. The reconfiguration of a portion of the surface parking along McKinley Street would eliminate the need for a previously approved variance that allowed the existing surface parking facility to be within three-feet of the Hospital's property line along McKinley Street. The reconfiguration of surface and structured parking will allow a separation of traffic to and from the Hospital. Visitors will park in the new garage, while surface parking will be provided for employees and emergency room patients. There will also be a separate route for delivery vehicles.

The applicant has provided a supplemental parking demand analysis that includes a calculation of existing parking spaces and future parking requirements based on the zoning Code and a needs analysis based on actual observations at the Hospital. Suburban currently has 730 on-site parking spaces and 350 off-site parking spaces (in scattered locations). The applicant conducted parking occupancy counts in January 2007, to reflect the actual parking needs of the Hospital. Based on the parking occupancy counts, the applicant developed a parking ratio to be used in determining future parking demands.

Essentially, the Hospital has found that their parking need is greater than what is required by code, so it is proposing 475 more parking spaces on-site than the Code requires.

In staff's view, the proposed increase in the number of on-site parking spaces is justified considering the hospital's proposal to consolidate the 350 off-site parking spaces at one location and the fact that the Hospital is currently seriously under-parked. Consolidating all of the hospital parking at one location would mitigate the impact of additional local travel required by employees to reach the hospital from their current off-site parking locations.

IX. ENVIRONMENTAL ANALYSIS

Staff finds that the application satisfies the required findings of §59-G-1.21(a)(6) of the Montgomery County Zoning Ordinance. A Preliminary Forest Conservation Plan (PFCP) is undergoing concurrent review with the special exception application. In a separate memorandum, dated September 4, 2008, Environmental staff recommends approval of the PFCP with conditions to include tree save efforts for 10 of the 39 existing on-site large and specimen trees. (See Attachment 9 and Attachment 10.)

The applicant has an approved Natural Resource Inventory/Forest Stand Delineation (NRI/FSD), #420071040. The current NRI/FSD was reviewed earlier this year based on the acquisition of the additional properties along the overall site's perimeter. There is no existing forest on-site; however, there are twenty-four specimen and 15 large trees at various locations. Additionally, there are no areas of environmental buffer, streams, 100-year floodplain, wetlands, or steep slopes associated with highly erodible soils and severe slopes, nor is this site located within a Special Protection Area.

This property is subject to Chapter 22A, Montgomery County Forest Conservation Law. A modified PFCP was submitted on August 1, 2008, and showed no existing forest on-site and an afforestation requirement of 2.28 acres. The PFCP's worksheet shows the requirement will be met with 2.28 acres of credit for on-site tree plantings. There are thirty-nine large and specimen trees on-site and a fortieth tree (#218) is off-site in the vicinity of the proposed limits of disturbance (LOD). Most of the thirty-nine trees on the NRI/FSD are identified in "good condition," including some identified as having vines and ivy. These trees, particularly those along the perimeter of the site, are part of a community character of tree-lined streets with a mature canopy. Trees found to be appropriate for save could be used to meet the site's afforestation requirement for the retention of the large and specimen trees as landscaping credit and be included in the "total package," enhancing compatibility and reducing the effects of the building massing.

Environmental Planning staff did not support the PFCP as first submitted, as it showed the removal of 38 of the 40 large and specimen trees and it did not appear that either the applicant's analysis or design effort was sufficient to show that: (1) reasonable efforts had been made to save a greater number of the large trees; or that (2) the development proposal could not be reasonably altered, as required under §22A-12(b) of the Forest Conservation Law, to save as many trees as possible. The loss of the existing tree caliper would have been

1,204-inches.

Staff met with the applicant on several occasions to discuss additional tree save efforts, beyond the two proposed to be saved. The final meeting resulted in an understanding that three categories of tree save effort could save up to a total of up to ten trees:

1. Definite trees to be saved: #212 and #213;
2. Reasonable tree save efforts to be made: #214, #230, #233, #234 and #237
3. Save subject to DOT waiver of roadway cross-sections: #204, #210 and #220.

For these reasons, staff recommends approval of the Preliminary Forest Conservation Plan, subject to conditions. (See Attachment 10.)

X. COMMUNITY COMMENTS

Extensive written correspondence has been received in support of the hospital expansion. Those in support take the position that the proposed expansion will improve access to the emergency and trauma center, improve infection control by creating private hospital rooms, modernize the surgical units, and provide adequate parking for all who use the hospital, including staff. Letters submitted in support of the application are included as a separate memorandum to the Planning Board.

On August 13, 2008, staff met with representatives of the Huntington Terrace Citizens Association (HTCA) and their attorney. In a follow-up letter addressed to Chairman Hanson, HTCA's attorney stated the association's position as follows: (1) HTCA favors hospital expansion but opposes this particular design requiring abandonment of the community's main artery and destruction of 23 homes, (2) the hospital can design an expansion achieving all of its goals without abandoning the road and demolishing 23 homes, (3) the road is needed and therefore does not satisfy the criteria for abandonment, (4) the road abandonment will have severe detrimental effects in the community and therefore the proposal does not meet the special exception requirements, and (5) demolition of 23 homes will have severe detrimental effects on the community and the proposal does not meet the special exception requirements. (See Attachment 11.) The association believes that all of the hospital's expansion goals can be achieved under a plan negotiated with the hospital several years ago that does not require the closing of Lincoln Street or the removal of 23 homes. Testimony received by the HTCA has been included under a separate memorandum to the Planning Board.

XI. ANALYSIS

A. Standard for Evaluation

The standard for evaluation under 59-G-1.21 requires consideration of the inherent and non-inherent effects of the proposed use at the proposed location. Inherent adverse effects are the physical and operational characteristics necessarily associated with the particular use, regardless of its physical size or scale of operations. Inherent adverse effects, alone, are not a sufficient basis for denial of a special exception. Non-inherent adverse effects are the physical and operational effects not necessarily associated with the

particular use, or adverse effects created by unusual characteristics of the site. Non-inherent adverse effects, alone or in conjunction with inherent effects, are a sufficient basis to deny a special exception.

The following have been established as inherent characteristics of a modern day hospital: (1) a large, high-bulk physical plant, with some visual and noise impacts on its surroundings; (2) hospital operations running around the clock, seven days per week; (3) a large staff; (4) a large number of patients and visitors; (5) physician's offices affiliated with the hospital; (6) a significant amount of traffic and parking commensurate with the size of the staff and number of patients; (7) a certain amount of operational noise from generators, air conditioning systems, emergency vehicles, and helicopters; (8) a large amount of bio-medical and other waste disposal (9) a significant amount of external lighting for surface parking and safety reasons; and (10) a optimally located landing site for emergency helicopters.

It has been established in Board of Appeals Case No. S-2721 (Adventist Healthcare) that the existence of an emergency helipad on hospital grounds is a use permitted by right, but that the placement and operational characteristics of a helipad may be non-inherent. It appears from the report issued by the Hearing Examiner in that case that the placement of a helipad on hospital grounds may be regulated to minimize adverse impacts on the neighborhood, but not to such an extent that a helipad is prohibited or conditions are imposed that would render helicopter operations ineffectual. The location of the helipad is not being changed with this proposal, and Staff finds that, in consideration of all reasonable on-site alternatives, the existing helipad is optimally located to minimize noise and other related impacts from emergency helicopter operations.

As discussed in a previous section of this report, the applicant has filed petition AB#715, for abandonment of that portion of Lincoln Street that bisects the hospital grounds between Old Georgetown Road and Grant Street. Although use of the Lincoln Street right-of way is an important element in the hospital's proposed design, in staff's view, the abandonment of a public street is not an inherent characteristic of a hospital's operation. However, staff does not find that the non-inherent impacts associated with the closing of Lincoln Street to rise to an unacceptable level. This finding is supported by the finding of Transportation staff, in consideration of the abandonment petition, that the application satisfies the LATR and PAMR requirements of the APF review. Additional information relating to the closing of Lincoln Street can be found in the staff report prepared by transportation staff in connection with the abandonment petition.

The removal of homes to accommodate a special exception can be considered a physical effect not necessarily associated with a hospital use. There are 23 homes owned by the Hospital located along Grant Street and Southwick Street within the two block "campus area." In staff's view removal of the homes is a non-inherent effect of the hospital's modernization and expansion plan. The issue for staff is whether removal of the homes in consideration of the hospital's inherent and non-inherent impacts are a sufficient basis to recommend denial of the application. In staff's view, this is not the case.

The 23 homes are all currently owned by Suburban Hospital. Leaving them in place creates numerous setback and site coverage issues that would make expansion difficult, if not impossible. Their removal allows the hospital to better buffer the expanded, special exception use from the rest of the residential neighborhood, thereby maintaining neighborhood compatibility. In addition, hospital health services will be modernized and improved, and the new “campus” design benefits both the hospital and the adjacent community. The revised expansion plan specifically addresses the relationship between the adjacent community and the hospital, as described in this report under the analysis of the general conditions for approval. Staff believes that the revised hospital expansion plan is a reasonable balance of the hospital’s health service objectives and the impacts of an expanded hospital. (See Attachment 12.)

Staff does not find the non-inherent adverse effects associated with this application, alone or in conjunction with the inherent effects, a sufficient basis for denial of this application.

B. General Conditions (§59-G-1.2.1)

(a) A special exception may be granted when the Board, the Hearing Examiner, or the District Council, as the case may be, finds from a preponderance of the evidence of record that the proposed use:

(1) Is a permissible special exception in the zone.

Staff Analysis: A hospital use is permitted by special exception under §59-C-1.31 of the Montgomery County Zoning Ordinance.

(2) Complies with the standards and requirements set forth for the use in Division 59-G-2. The fact that a proposed use complies with all specific standards and requirements to grant a special exception does not create a presumption that the use is compatible with nearby properties and, in itself, is not sufficient to require a special exception to be granted.

Staff Analysis: As described in Section XI(c) below, the proposed use would comply with the standards and requirements set forth for the use in §59-G-2.31.

(3) Will be consistent with the general plan for the physical development of the District, including any master plan adopted by the Commission. Any decision to grant or deny a special exception must be consistent with any recommendation in a master plan regarding the appropriateness of a special exception at a particular location. If the Planning Board or the Board's technical staff in its report on a special exception concludes that granting a particular special exception at a particular location would be inconsistent with the land use objectives of the applicable master plan, a decision to grant the special exception must include specific findings as to master plan consistency.

Staff Analysis: The subject site is within the 1990 approved and adopted Bethesda/Chevy Chase Master Plan. As discussed in Section VII of this report,

Community-Based Planning Staff, in its review of the application, concluded that the hospital expansion is inconsistent with the recommendations of the 1990 approved and adopted Bethesda/Chevy Chase Master Plan. Although the Master Plan provides guidelines for the location of special exceptions, in zoning staff's view, it is not unequivocal from the guidelines that the hospital expansion is inconsistent with the Master Plan's special exception objectives.

For example, the guidelines support special exceptions that contribute to the service and health objectives of the Master Plan and recognize the importance of meeting these needs through hospital services and hospice centers that are appropriately sized to be compatible with the surrounding neighborhoods. The Master Plan recognizes that some existing special exceptions along the Old Georgetown Road corridor may need to be modified and recommends that any building addition not be more than 50% of the existing building, and the proposed expansion is not. Suburban Hospital is not specifically addressed in the master plan discussion of special exceptions. Also, important improvements consistent with recommendations of the Master Plan would be implemented by the applicant under the special exception. For example, the applicant is proposing to reconstruct the sidewalks along Old Georgetown Road, providing separation between the sidewalk and the back of curb, and providing proper pedestrian cross-walks and curb cuts across Old Georgetown Road. Zoning staff believes these are important elements to be considered in determining consistency of the hospital expansion with the Master Plan recommendations.

- (4) *Will be in harmony with the general character of the neighborhood considering population density, design, scale and bulk of any proposed new structures, intensity and character of activity, traffic and parking conditions and number of similar uses. The Board or Hearing Examiner must consider whether the public facilities and services will be adequate to serve the proposed development under the Growth Policy standards in effect when the special exception application was submitted.*

Staff Analysis: On this issue, staff finds that the proposed use will be in harmony with the general character of the neighborhood given the adjustments to the initially submitted plans that, in staff's view, improve project design and neighborhood compatibility, while reducing environment impacts. The adjusted design specifically addresses the relationship between the adjacent residential dwellings and the hospital, by providing improved campus design elements such as a low brick wall along the perimeter of the site, street trees and ground cover shrubs, multiple pathways, better setbacks and other similar features. The scale of the proposed addition is designed so that the rear portion of the building is lower in height in areas closest to the residential homes and higher towards Old Georgetown Road. Additionally, the hospital related activities, with the exception of the loading area which would remain unchanged, are oriented away from the residential area, towards other health-related uses.

For these reasons, staff believes that any impacts of the proposed expansion have been minimized and will not have any unacceptable adverse impacts on the character

of the neighborhood considering population density, design, scale and bulk of the proposed new structures.

Staff also finds that the proposed development will satisfy the requirements of the Growth Policy in effect when the application was filed.

- (5) *Will not be detrimental to the use, peaceful enjoyment, economic value or development of surrounding properties or the general neighborhood at the subject site, irrespective of any adverse effects the use might have if established elsewhere in the zone.*

Staff Analysis: The hospital expansion will not be detrimental to the use, peaceful enjoyment, economic value or development of surrounding properties, for the reasons stated in response to the previous general conditions. In staff's view, the proposed campus design will improve conditions on and around the hospital site and enhance important health services to the surrounding area and the County.

Several public improvements that would improve conditions around the site include the construction of a continuous green panel, and reconstruction of the pedestrian paths, both along Old Georgetown Road and the perimeter of the special exception. The cross-walk at the Lincoln Street/Old Georgetown Road intersection will be straightened, and a refuge for pedestrians crossing the intersection will be provided. In addition, the proposed improvements are consistent with the surrounding neighborhood, given the placement of the buildings and the fact that the applicant is orienting all major operations towards Old Georgetown Road.

On the issue of economic value, the applicant submitted a real estate analysis which described the real estate market values relating to the proposed hospital expansion. At issue was whether the home values in the Huntington Terrace neighborhood appreciated at a slower rate than in comparable neighborhoods. The Huntington Terrace neighborhood was compared to similar detached dwelling sales activity in the nearby neighborhood of Sonoma and a neighborhood adjacent to Holy Cross Hospital. The findings in this real estate analysis were that the proposed hospital expansion would not have a negative impact on housing values in the surrounding area.

- (6) *Will cause no objectionable noise, vibrations, fumes, odors, dust, illumination, glare, or physical activity at the subject site, irrespective of any adverse effects the use might have if established elsewhere in the zone.*

Staff Analysis: There is no indication that the proposed expansion will result in any objectionable noise, vibrations, fumes, illumination or glare and physical activity. As a trauma center, dust, loud noise and vibrations can be expected from the landing and take-off of helicopters that serve the hospital. Sirens and illumination and glare from emergency vehicle lights can also be expected from hospital operations. However, helicopters and emergency vehicles are inherent activities to a hospital operation.

The noise and vibrations study prepared by the applicant's consultant did not find that any hospital operations would exceed Code standards.

- (7) *Will not, when evaluated in conjunction with existing and approved special exceptions in any neighboring one-family residential area, increase the number, intensity, or scope of special exception uses sufficiently to affect the area adversely or alter the predominantly residential nature of the area. Special exception uses that are consistent with the recommendations of a master or sector plan do not alter the nature of an area.*

Staff Analysis: The hospital has operated at its current location under a special exception since 1955. Staff finds that modification of the existing facility will not increase the number of special exceptions in the neighborhood, or the intensity or scope of the special exception uses to an extent that alters the residential nature of the area.

- (8) *Will not adversely affect the health, safety, security, morals or general welfare of residents, visitors or workers in the area at the subject site, irrespective of any adverse effects the use might have if established elsewhere in the zone.*

Staff Analysis: The record supports a conclusion that the proposed hospital expansion would not adversely affect the health, safety, security, morals or general welfare of the residents, visitors or workers in the area at the subject site. The proposed construction and subsequent relocation of surgical units and private patient rooms will enhance the hospital's ability to provide emergency and healthcare services to those who require the hospital's services. The planned pedestrian and traffic circulation system would improve the safety and security of residents, visitors and workers at the site by reducing the number of access points into and from the hospital; virtually eliminating through vehicle/pedestrian conflicts.

- (9) *Will be served by adequate public services and facilities including schools, police and fire protection, water, sanitary sewer, public roads, storm drainage and other public facilities.*
- (A) *If the special exception use requires approval of a preliminary plan of subdivision the adequacy of public facilities must be determined by the Planning Board at the time of subdivision review. In that case, subdivision approval must be included as a condition of the special exception.*
- (B) *If the special exception does not require approval of a preliminary plan of subdivision, the Board of Appeals must determine the adequacy of public facilities when it considers the special exception application. The Board must consider whether the available public facilities and services will be adequate to serve the proposed development under the Growth Management Policy standards in effect when the application was submitted.*

(C) With regard to public roads, the Board or the Hearing Examiner must further find that the proposed development will not reduce the safety of vehicular or pedestrian traffic.

Staff Analysis: The Hospital is required to go through preliminary plan review and the adequacy of public facilities will be determined at that time. The property consists of several recorded lots, and a portion of right-of-way, that will be consolidated into a single new lot. Under Chapter 50-20, the lots which are part of this application will be subject to preliminary plan review and subsequent recordation of a plat. The proposed Hospital expansion as described in the special exception application, with certain improvements, satisfies the LATR and PAMR requirements of the APF review.

C. General Development Standards (§59-G-1.23-- applicable subsections only)

(a) *Development Standards. Special exceptions are subject to the development standards of the applicable zone where the special exception is located, except when the standard is specified in Section G-1.21 or in Section G-2.*

Staff Analysis: The table set out below demonstrates that the use satisfies the applicable development standards for the R-60 zone and all other applicable development standards.

TABLE 3: DEVELOPMENT STANDARDS: R-60 ZONE.

Development Standards	Requirement	Provided	
<i>Minimum Tract Area (§59-C-1.321(a))</i>	Not applicable	15.2 acres (includes Lincoln St r/w)	
<i>Lot Area (§59-G-2.31(1))</i>	5 acres	15.2-acres (includes Lincoln St r/w)	
<i>Lot Width (§59-C-1.322(b)):</i> @ Front of Bldg Line @ Street	75-ft 25-ft	±214-ft ±214.6-ft	
<i>Yard (Setback) Requirements (all building structures) §59-G-2.31(3):</i> No portion of a building shall be nearer to the lot line than a distance equal to the height of that portion of the building, where the adjoining or nearest adjacent land is zoned single-family detached residential or is used solely for single-family detached residences, and in all other cases not less than 50 feet from the lot line.	Varies between 50-ft (hospital) and 87.1-ft (parking structure)	Varies between 50-ft to 287.3-ft	
<i>Building Height (maximum) (§59-G-2.31(6))</i>	145-ft	Addition	62.7-ft.
		Hospital	87.1-ft.
		Garage	46.8-ft.
<i>Coverage (maximum net lot area) (§59-C-1.328)</i>	35%	34.25 %	

Development Standards	Requirement	Provided
<i>Parking Facility Setbacks (§ 59-E-2.83)</i>		
Front Yard	25-ft	15-ft. (surface parking) ³
Corner Lot	15-ft	50-ft (garage)
Side Yard	16-ft	25-ft.
Rear Yard	20-ft	>25-ft.

(b) *Parking Requirements. Special Exceptions are subject to all relevant requirements of Article 59-E.*

Staff Analysis: The applicant's parking plan satisfies the requirements of Article 59-E. The parking plan is discussed in Section VIII (b) of this report. The Hospital proposes to provide a total of 1,428 parking spaces, some 475 spaces above the minimum Code requirement. This is the number of parking spaces proposed by the applicant to meet existing and future demands, and to consolidate all parking at one location. In staff's view, the proposed increase in the number of on-site parking spaces is justified considering the hospital's proposal to bring the 350 off-site parking spaces back to the site, and the fact that the the Hospital is seriously under-parked at this time even though it meets code.

(c) *Minimum Frontage. Not Applicable.*

(d) *Forest conservation. If a special exception is subject to Chapter 22A, the Board must consider the preliminary forest conservation plan required by that Chapter when approving the special exception application and must not approve a special exception that conflicts with the preliminary forest conservation plan.*

Staff Analysis: This property is subject to Chapter 22A Montgomery County Forest Conservation Law. A Preliminary Forest Conservation Plan (PFCP) for the entire site has been submitted. As such, Environmental Planning staff in their memorandum to the Planning Board dated, September 4, 2008, recommends approval, with conditions of the Preliminary Forest Conservation Plan. Please refer to the above Section IX for further information with regards to the applicant's tree save efforts as it relates to the proposed special exception.

(e) *Water quality plan. Not Applicable.*

(f) *Signs. The display of a sign must comply with Article 59-F.*

Staff Analysis: The applicant is proposing six types of signs: (1) Type A: monument/entrance sign, (2) Type B: internally illuminated directional sign; (3) Type C: non-illuminated direction sign; (4) Type D and G: two types of an externally illuminated sign, (5) Type E: a wall-mounted sign; and (6) Type F: non-illuminated

³ The setback to the surface parking area along Old Georgetown Road is grandfathered under §59-E-2.83, as it is an existing surface parking facility included as part of a special exception granted before May 6, 2002 and is considered conforming use. The applicant is not increase the parking facility more than 50%.

neighborhood markers. (See Attachment 13.) According to the Hospital's signage plan, eleven of the proposed thirty-five signs are existing signs which will remain throughout the project. Currently, there are 36 signs on-site. The concept sign package shows the updating of several of the directional signs, which will assist in the circulation of vehicles and pedestrians by clearly delineating the parking and loading areas. The proposed signage is typical of this type of institutional use. Prior to obtaining building permits for the installation for signs, the applicant will need to provide the submitted concept signage plan to the "Sign Review Board."

- (g) *Building compatibility in residential zones. Any structure that is constructed, reconstructed or altered under a special exception in a residential zone must be well related to the surrounding area in its siting, landscaping, scale, bulk, height, materials and textures, and must have a residential appearance where appropriate. Large building elevations must be divided into distinct planes by wall offsets or architectural articulation to achieve compatible scale and massing.*

Staff Analysis: The Hospital's existing main structure will remain intact; however, the existing main entrance (located under the helipad) will be converted to a dedicated emergency room entrance. With regards to the addition's compatibility with the surrounding neighborhood, the applicant is proposing a brick façade, a material that is similar to the existing Hospital building and that of several homes adjacent to the site. The proposed surgical and office addition fronts towards Old Georgetown Road. The addition is designed such that the lowest part of the building, which is 2 stories and approximately 28 feet high, is adjacent to single-family detached homes and the highest part of the building, which is 4 stories, is closest to Old Georgetown Road. If one were looking south from Southwick Street, the building's façade would appear to be two floors closest to the street-line and then the building would "step-up" to the third floor.

The rear side of the addition is off-set, so that the building mass is broken in two. The applicant is providing a separation between the institutional use of the hospital and the surrounding neighborhood by providing landscaping, pathways and a low decorative wall. The height of the hospital addition will also vary, with the highest sections being oriented towards Old Georgetown Road, and the lowest towards the residential neighborhood.

In staff's view, the proposed addition to the hospital is well-related to the surrounding neighborhood in its siting and its landscaping, scale, bulk, height, material, and texture. The proposed campus design would improve conditions on and around the hospital site, have a positive community influence beyond what exists today, and enhance important health services to the surrounding area and the County.

- (h) *Lighting in residential zones. All outdoor lighting must be located, shielded, landscaped or otherwise buffered so that no direct light intrudes into an adjacent residential property. The following lighting standards must be satisfied unless the Board requires different standards for a recreational facility or to improve*

public safety:

- (1) *Luminaries must incorporate a glare and spill light control device to minimize glare and light trespass.*
- (2) *Lighting levels along the side and rear lot lines must not exceed 0.1 foot-candles.*

Staff Analysis: The proposed photometric plan complies with §59-G-1.23(h). As proposed, the applicant is installing several types of light fixtures for each of the different areas and is utilizing each light fixture to enhance way-finding for visitors into the hospital. Several of the fixtures are equipped with reflector cut-off optics which will shield emitted light below the horizon. The result of the proposed lighting plan is that the lighting levels along the side and rear lot lines do not exceed 0.1 foot-candles.

D. Use Special Exception Standards (§59-G-2.31 Hospitals)

- (1) *Minimum area. Total area, 5 acres*

Staff Analysis: The site of the special exception consists of 15.2 acres, including the portion of Lincoln Street between Grant Street and Old Georgetown Road, thus exceeding the minimum area requirement.

- (2) *Minimum Frontage. Frontage, 200 feet.*

Staff Analysis: The special exception application satisfies the minimum frontage requirement. The site has 900 feet of frontage along Old Georgetown Road.

- (3) *Setback. No portion of a building shall be nearer to the lot line than a distance equal to the height of that portion of the building, where the adjoining or nearest adjacent land is zoned single-family detached residential or is used solely for single-family detached residence, and in all other cases not less than 50 feet from a lot line.*

Staff Analysis: The application as revised satisfies the minimum setback requirement which requires that, where the adjoining or nearest adjacent land is zoned or used for single-family detached residences, no portion of the building shall be nearer the lot line than the height of the building. Staff worked closely with the applicant to achieve a garage design that is operationally more efficient and scaled to have lesser impact on the immediately adjacent neighborhood. The initial design provided 7 ½ stories above grade, two and one-half stories below grade, 1,169 parking spaces, and required the grant of a 18.3-foot variance from the building setback standard. Construction of the garage as originally planned was in two phases and allowed the existing garage to remain open during construction and the hospital addition to be constructed concurrently with the garage construction. Please refer to Section VI (b) of this report for staff analysis of the setback issue.

- (4) *Off-Street Parking.* Off-street parking shall be located so as to achieve a maximum of coordination between the proposed development and the surrounding uses and a maximum of safety, convenience and amenity for the residents of neighboring areas. Parking shall be limited to a minimum in the front yard. Subject to prior board approval, a hospital may charge a reasonable fee for the use of off-street parking. Green area shall be located so as to maximize landscaping features, screening for the residents of neighboring areas and to achieve a general effect of openness.

Staff Analysis: The majority of parking spaces (80%) will be located in a parking garage situated on the northeast portion of the property, closest to Old Georgetown Road and Southwick Street. Parking will be conveniently located for patients and visitors, and the applicant is utilizing “way-finders” for these patrons. The location of the parking facility will maximize safety and convenience for the surrounding community by limiting access through the Huntington community. The proposed configuration of the proposed parking seeks to reduce the conflicts between emergent vehicles, visitor, patient and employee parking by separating access points and traffic flows. Further discussion of parking configuration can be found in Section VII (b) of this report.

With regards to providing green areas located to “maximize the landscaping features, screening... and achieve a general effect of openness,” the Hospital is providing ample green space, and other aesthetic devices will provide a “stepping” effect to the view to mask the bulk of the proposed structure’s façade.

- (5) *Commission recommendation.* The board or the applicant shall request a recommendation for the commission with respect to a site plan, submitted by the applicant achieving and conforming to the objectives and requirements of this subsection for off-street parking and green area.

Staff Analysis: Staff recommends that a 59-D-3 site plan be submitted by the applicant to ensure that the hospital expansion and modernization proposal achieves a maximum of compatibility, safety, efficiency, and attractiveness. The site plan should include a phasing plan for the construction of the hospital addition and any temporary parking lots and driveways.

- (6) *Building height limit.* Building height limit, 145 feet.

Staff Analysis: The proposed garage and surgical additions are in compliance with the building height limit of §59-G-2.31(6). Please refer to Section XI(b) for further information regarding building heights.

- (7) *Prerequisite.* A resolution by the health services planning board approving the establishment of the hospital shall be filed with the petition for a special exception.

Staff Analysis: According to information provided by the applicant, a resolution by

the health services planning board approving the establishment of the Hospital was filed in 1955. No additional finding of need is required for this expansion.

XII. RECOMMENDATIONS

Based on the forgoing analysis, staff recommends that Special Exception Petition S-274-D, to permit expansion and modernization of Suburban Hospital on the west side of Old Georgetown Road, between Southwick Street and McKinley Street, Bethesda, be approved, subject to the following conditions:

A. The applicant must comply with the conditions of the Preliminary Forest Conservation Plan (PFCP) and any Final Forest Conservation Plan approved by the Planning Board. The Preliminary Forest Conservation Plans conditions are :

1. The applicant must satisfy all conditions before recording of a plat, issuance of sediment and erosion control permits, or as specified below:

- a. Approval of Final Forest Conservation Plan (FFCP) consistent with the approved PFCP and all final Forest Conservation Plan regulatory requirements, before any clearing, grading or demolition on the site.
- b. At time of site plan submission, the FFCP must show tree-compatible site design, stress reduction measures, and adjusted LOC/grading, prepared signed and stamped by an ISA-certified arborist to avoid and minimize impacts and determine feasibility of saving trees #204, #210, #212, #213, #214, #220, #230, #233, #234, and #237.
- c. Further detailed tree save analysis must be conducted which addresses the specified objectives noted, as follows:
 - i. Trees #212 and #213: definite tree save;
 - ii. Trees #214, #230, #233, #234 and #237: all reasonable tree save efforts to be explored; and
 - iii. Trees #204, #210 and #220: save efforts depends on County waiver of typical roadway cross section.
- d. The applicant's arborist shall include analysis and recommendations for several existing candidate willow oak trees to be transplanted in vicinity of Grant Street. Transplanting of large trees as compensation for specimen tree loss is recommended in Forest Conservation Regulation Section 108F (3).
 - i. Any candidate willow oak tree to be transplanted shall be shown on the FFCP with the recommended transplanting techniques and details by the applicant's arborist.
 - ii. The analysis must justify why any candidate willow oak tree cannot be transplanted, if recommended as appropriate by the arborist.

2. Prior to release of sediment control permit, the tree save recommendations on the

FFCP, as prepared, signed and stamped by an ISA-certified arborist, must include detailed tree preservation measures for each tree found feasible for save and transplanting.

- a. The FFCP shall included separate pre- and post-demolition and pre-and post-construction plans prepared by the applicant's arborist in relation to the trees to be saved and transplanted along Grant Street.
- b. Final sediment control plan must be consistent with final LOD on the approved FFCP, and must reflect a LOD no closer to trees to be protected than as shown on the approved FFCP.

B. Approval by the Montgomery County Council of abandonment petition AB#715, for abandonment of that portion of Lincoln Street that bisects the hospital grounds between Old Georgetown Road and Grant Street;

C. Development of the property is limited under this special exception modification to an additional 235,597 gross square feet of floor area, which includes the new surgical floors, the private patient rooms, physician offices, and mechanical equipment serving the addition. The mechanical equipment shall be placed below grade. No more than 856 full-time equivalent employees are permitted on the maximum shift to satisfy staffing requirements. The hospital is limited under this special exception to not more than 294 patient beds.

D. The applicant must submit a 59-D-3 site plan to ensure that the hospital expansion and modernization proposal achieves a maximum of compatibility, safety, efficiency, and attractiveness. The site plan must include a phasing plan for construction of the hospital addition and any temporary parking and driveways.

E. The applicant must implement the following public improvements under this special exception:

- i. 60-feet of right-of-way and an additional 10-feet of "Public Improvement Easement (PIE)" for a total of 70-feet from the Old Georgetown Road centerline;
- ii. An additional 10-foot right-of-way dedication along the north side of McKinley Street, between Old Georgetown Road and Grant Street, in addition to constructing an additional westbound right-turn access lane;
- iii. For purposes of LATR requirements, construct a third westbound lane on West Cedar Lane at Old Georgetown Road as a condition of Preliminary Plan. The timing of the construction of this improvement will be determined at the time of Preliminary Plan;
- iv. For purposes of PAMR requirements, provide the following non-automobile facilities or other improvements, which represent an equivalent number of trip credits for these facilities as a condition Preliminary Plan. All proposed facilities and their location must be approved by MCDOT and M-NCPPC. The timing of providing each below improvement will be determined at the time of Preliminary Plan:
 1. 1,200 linear feet of five-foot wide sidewalk at off-site locations to be determined before approval of the site plan;

2. 820 linear feet of eight-foot wide bike path at off-site locations to be determined prior to approval of the site plan;
3. Three curb extension/pedestrian Refuge Island and handicapped ramps;
4. Three accessible or countdown pedestrian signals/intersections;
5. Five information kiosks'
6. Forty (five sets of eight) bike lockers;
7. One static transit information sign; and
8. One real-time transit information sign.

F. The applicant is subject to an adequate public facility finding at the time of preliminary plan.

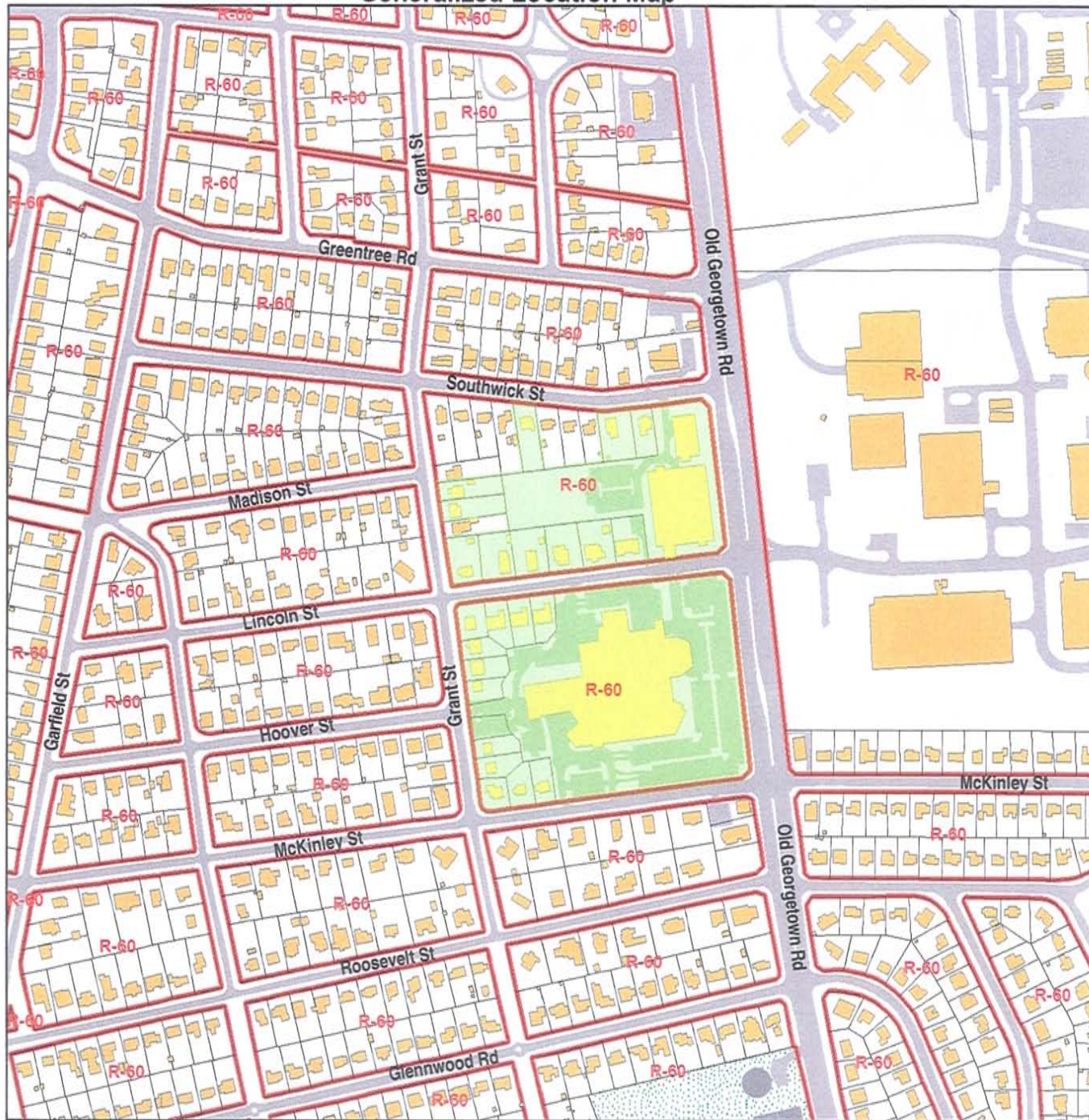
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ATTACHMENTS

- Attachment 1- General Location Map
- Attachment 2- Landscape Plan, submitted February 2008
- Attachment 3- Site and Landscape Plans, revised September 10, 2008
 - A. Special Exception Site Plan
 - B. Special Exception Landscape Plan
- Attachment 4- Alternative Parking Plan, submitted September 10, 2008
 - A. Preliminary Parking Facility Study
 - B. Preliminary Interim Parking Sketch
 - C. Preliminary Site Plan, with amended garage
- Attachment 5- Surrounding Area Map
- Attachment 6- Neighborhood Conditions
- Attachment 7- Memorandum from Piera Weiss, Community-Based Planning Division, to Renée M. Miller, AICP, Development Review Division, September 4, 2008
- Attachment 8- Memorandum from Ki Kim, Transportation Planning Division, to Renée M. Miller, AICP, Development Review Division, September 3, 2008
- Attachment 9- Memorandum from Lori Shirley, Environmental Planning Division, to Renée M. Miller, AICP, September 4, 2008
- Attachment 10-
 - A. Memorandum from Lori Shirley, Environmental Planning Division, to Montgomery County Planning Board, September 4, 2008
 - B. Revised Preliminary Forest Conservation Plan, dated July 31, 2008
- Attachment 11- Correspondence from Norman G. Knopf to Chairman Royce Hanson, Montgomery County Planning Board, dated September 5, 2008
- Attachment 12- Compatibility Packages, pages 15 and 16, revised September 10, 2008
- Attachment 13- Memorandum from John Carter, Urban Design and Preservation Division, to Renée M. Miller, AICP, received September 5, 2008
- Attachment 14- Memorandum from Neil Braunstein, Development Review Division, to Renée M. Miller, AICP, July 28, 2008
- Attachment 15- Conceptual Signage Plan
- Attachment 16- Conceptual Building Elevations

ATTACHMENT 1

Generalized Location Map



LEGEND

-  S-274-D
-  Parcel
-  Building
-  Paved Area
-  Lake and Pond
-  Stream and River

NOTICE:

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Property lines are compiled by adjusting the property lines to topography created from aerial photography and should not be interpreted as actual field surveys. Planimetric features were compiled from 1:14400 scale aerial photography using stereo photogrammetric methods.

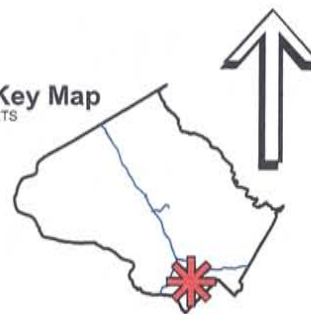
This map is created from a variety of data sources, and may not reflect the most current conditions in any one location and may not be completely accurate or up to date. All map features are approximately within five feet of their true location. This map may not be the same as a map of the same area plotted at an earlier time as the data is continuously updated. Use of this map, other than for general planning purposes is not recommended.

1 inch = 400 feet

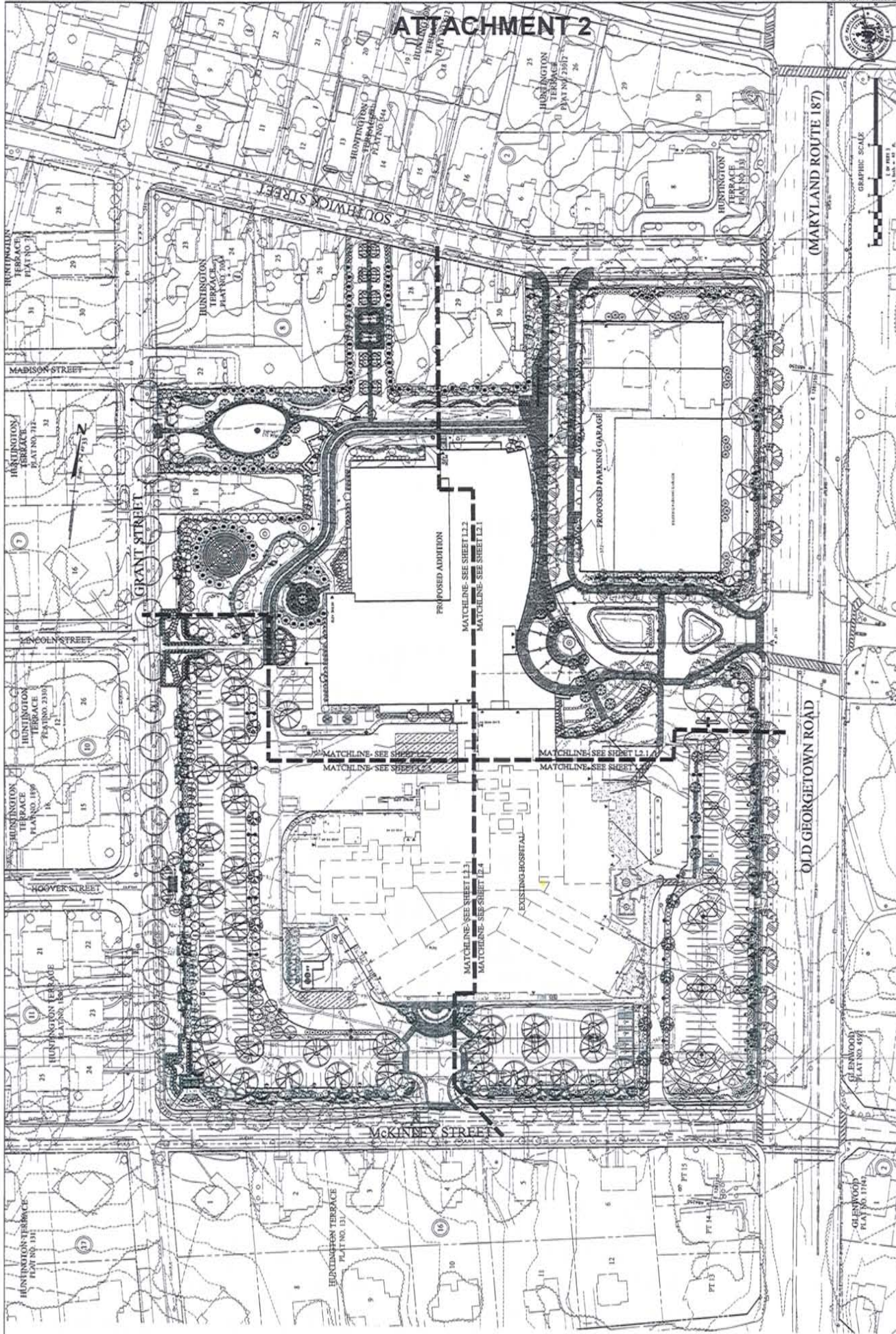
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Key Map

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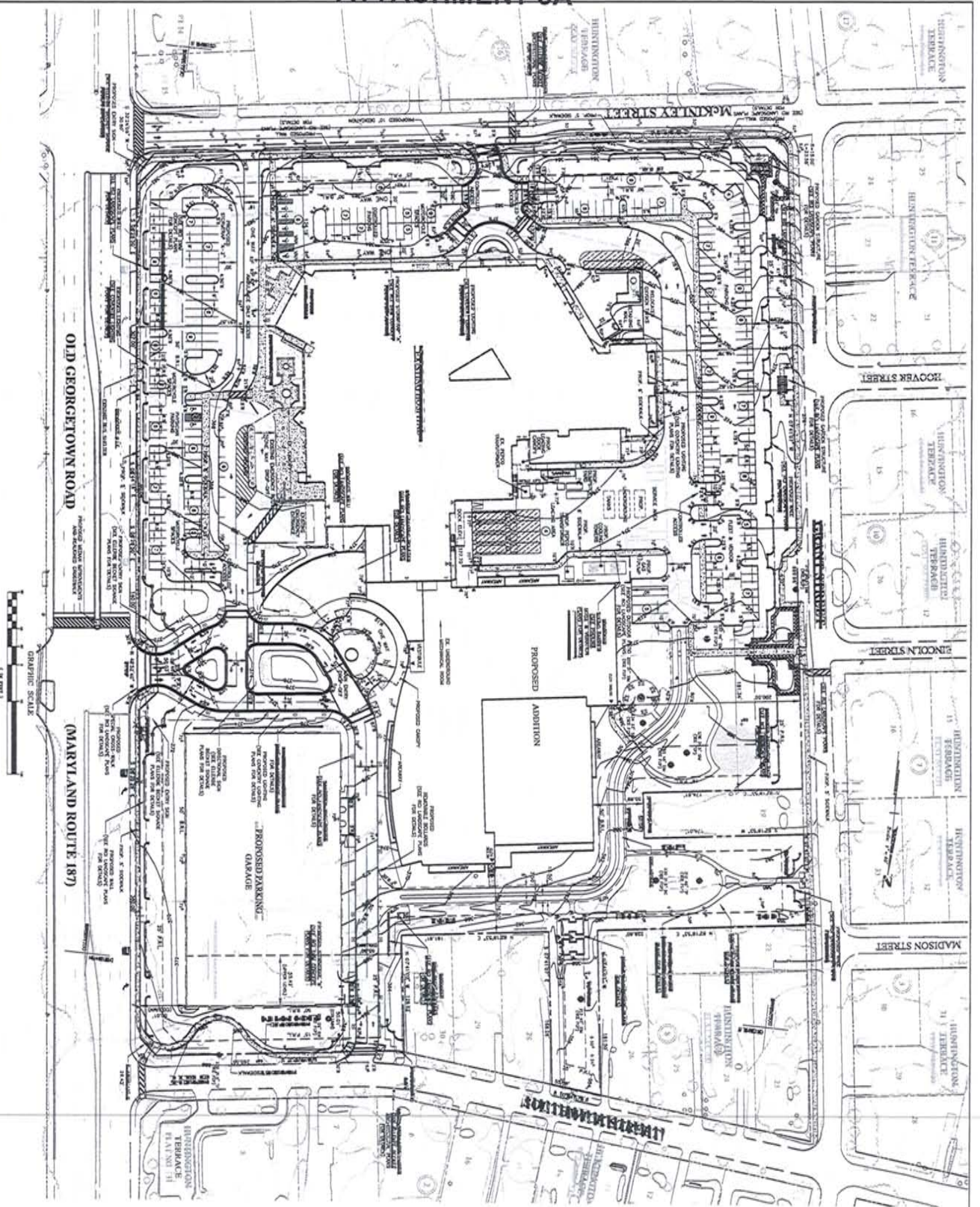


ATTACHMENT 2



COMPOSITE LANDSCAPE PLAN	
<p>RODGERS C O N S U L T I N G</p> <p>1818 Columbia Blvd., Suite 200 Baltimore, MD 21202 Tel: 410.528.0000 Fax: 410.528.0001 www.rodgersinc.com</p> <p>Following the rules of land surveying.</p>	<p>DATE: 11/15/2006 SCALE: 1/8" = 1'-0" PROJECT: 1818 COLUMBIA BLVD., SUITE 200, BALTIMORE, MD 21202 DRAWN BY: J. H. HARRIS CHECKED BY: J. H. HARRIS RELEASE FOR: []</p>
<p>Suburban Hospital</p> <p>SUBURBAN HOSPITAL ELECTION DISTRICT (NO. 7) MONTGOMERY COUNTY, MARYLAND</p>	
<p>OTHER PROJECTS: 1818 COLUMBIA BLVD., SUITE 200, BALTIMORE, MD 21202 1818 COLUMBIA BLVD., SUITE 200, BALTIMORE, MD 21202 1818 COLUMBIA BLVD., SUITE 200, BALTIMORE, MD 21202</p>	

ATTACHMENT 3A



GENERAL NOTES:

1. THE SITE IS COMPRISED OF LOTS 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
2. THE ENTIRE SITE IS TO BE DEVELOPED AS A SINGLE UNIT.
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NO.	DESCRIPTION	AMOUNT	TOTAL
1	CONSTRUCTION	1000000	1000000
2	EQUIPMENT	500000	1500000
3	LAND	2000000	3500000
4	PERMITS	100000	3600000
5	PROFESSIONAL FEES	500000	4100000
6	OPERATING EXPENSES	1000000	5100000
7	RESERVE FUNDS	2000000	7100000
8	WORKING CAPITAL	1000000	8100000
9	DEBT SERVICE RESERVE	1000000	9100000
10	CONTINGENCY	1000000	10100000
11	TOTAL		10100000

REVISION: DATE: APPROVED: DATE: DRAWN: DATE: CHECKED: DATE: PROJECT: SUBURBAN HOSPITAL AMENDED SPECIAL EXCEPTION SITE PLAN PROJECT NO: 2008-0001

DATE: 11/14/08
SCALE: AS SHOWN
PROJECT: SUBURBAN HOSPITAL AMENDED SPECIAL EXCEPTION SITE PLAN
PROJECT NO: 2008-0001

Suburban Hospital

TELEPHONE DISTRICT 0317
MONTGOMERY COUNTY, MARYLAND

AMENDED SPECIAL EXCEPTION SITE PLAN

9/10/08

KODOLINSKI CONSULTING

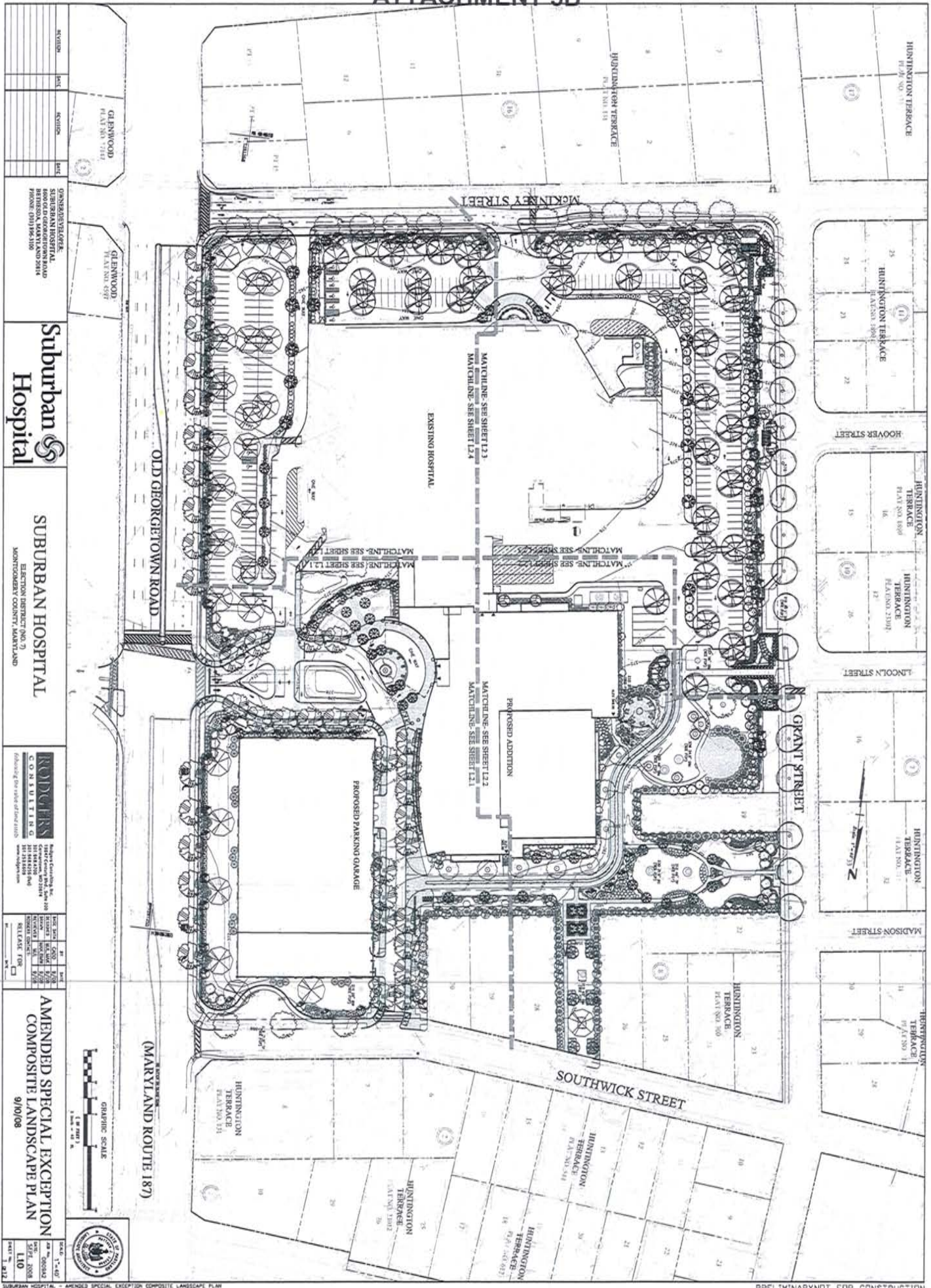
1100 North Rockledge Drive
Suite 200
Rockville, MD 20850
Phone: (301) 761-1100
Fax: (301) 761-1101
www.kodolinski.com

DATE: 11/14/08
SCALE: AS SHOWN
PROJECT: SUBURBAN HOSPITAL AMENDED SPECIAL EXCEPTION SITE PLAN
PROJECT NO: 2008-0001

DATE: 11/14/08
SCALE: AS SHOWN
PROJECT: SUBURBAN HOSPITAL AMENDED SPECIAL EXCEPTION SITE PLAN
PROJECT NO: 2008-0001

DATE: 11/14/08
SCALE: AS SHOWN
PROJECT: SUBURBAN HOSPITAL AMENDED SPECIAL EXCEPTION SITE PLAN
PROJECT NO: 2008-0001

ATTACHMENT 3B



REVISION	DATE	BY	DESCRIPTION

GLENWOOD
PLAN NO. 114

GLENWOOD
PLAN NO. 115

GLENWOOD
PLAN NO. 116

GLENWOOD
PLAN NO. 117

GLENWOOD
PLAN NO. 118

GLENWOOD
PLAN NO. 119

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PLAN NO. 120

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PLAN NO. 121

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GLENWOOD
PLAN NO. 126

GLENWOOD
PLAN NO. 127

GLENWOOD
PLAN NO. 128

GLENWOOD
PLAN NO. 129

GLENWOOD
PLAN NO. 130

OWNER/DESIGNER/LOTEE:
SUBURBAN HOSPITAL
10000 GEORGETOWN ROAD
MONTGOMERY COUNTY, MARYLAND
PHONE: (301) 996-3100

Suburban Hospital

SUBURBAN HOSPITAL

ELECTION DISTRICT NO. 7
MONTGOMERY COUNTY, MARYLAND

RODOLPHUS CONSULTING

Registered Consulting Engineers, Inc.
10000 GEORGETOWN ROAD
MONTGOMERY COUNTY, MARYLAND
PHONE: (301) 996-3100
FAX: (301) 996-3101
WWW.RODOLPHUSCONSULTING.COM

**AMENDED SPECIAL EXCEPTION
COMPOSITE LANDSCAPE PLAN**

9/10/08

SCALE: 1"=40'

DATE: 9/10/08

PROJECT: SUBURBAN HOSPITAL

PROJECT NO.: 08004

SHEET NO.: 110

TOTAL SHEETS: 110

DATE: 9/10/08

SCALE: 1"=40'

DATE: 9/10/08

ATTACHMENT 4A

Suburban Hospital
 Alternate Parking Garage Design
 Preliminary Study
 2-Sep-08

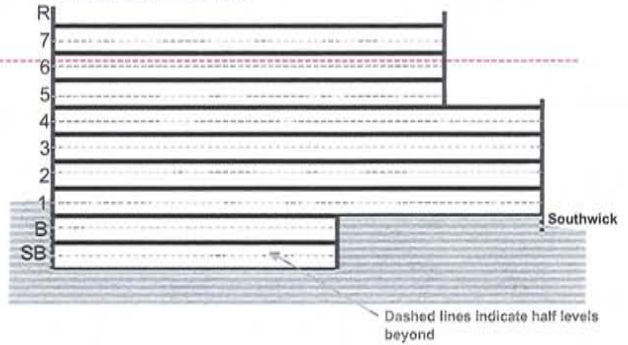
CURRENT DESIGN

			1196 Spaces
Level	Elevation	FI to FI Ht (ft)	No. Spaces Comment
R	440.83		111
7	430.83	10.00	124
6	420.83	10.00	124
5	410.83	10.00	137
4	400.83	10.00	146
3	390.83	10.00	147
2	380.83	10.00	139
1	370.17	10.66	122 Entrance at southwest corner
Basement	359.50	10.67	77 Entrance at northwest corner
Sub-Basement	349.50	10.00	69
Total Spaces			1196

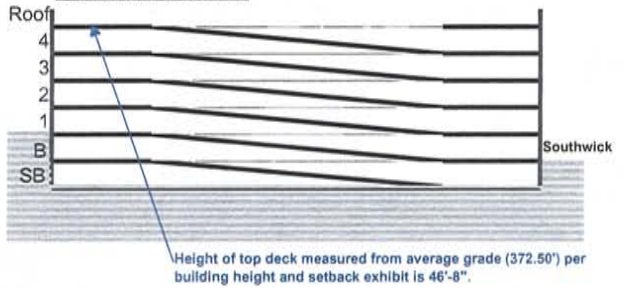
ALTERNATE DESIGN OPTION

			1138 Spaces
Level	Elevation	FI to FI Ht (ft)	No. Spaces Comment
Roof	419.16		120
4	409.16	10.00	177
3	399.16	10.00	177
2	389.16	10.00	177
1	377.83	11.33	165 Entrance at southwest corner
Basement	366.50	11.33	162 Entrance at northwest corner
Sub-Basement	356.50	10.00	160
Total Spaces			1138

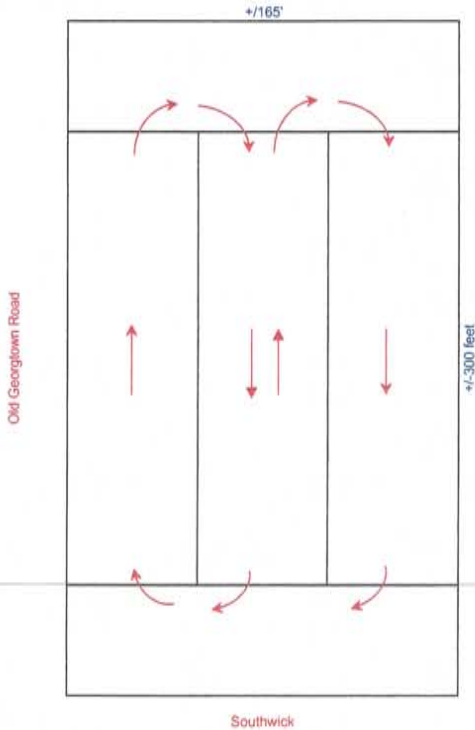
DIAGRAMMATIC SECTION



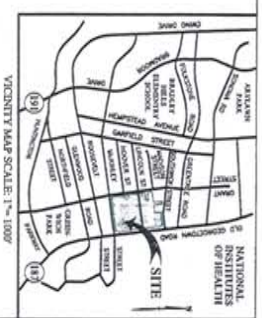
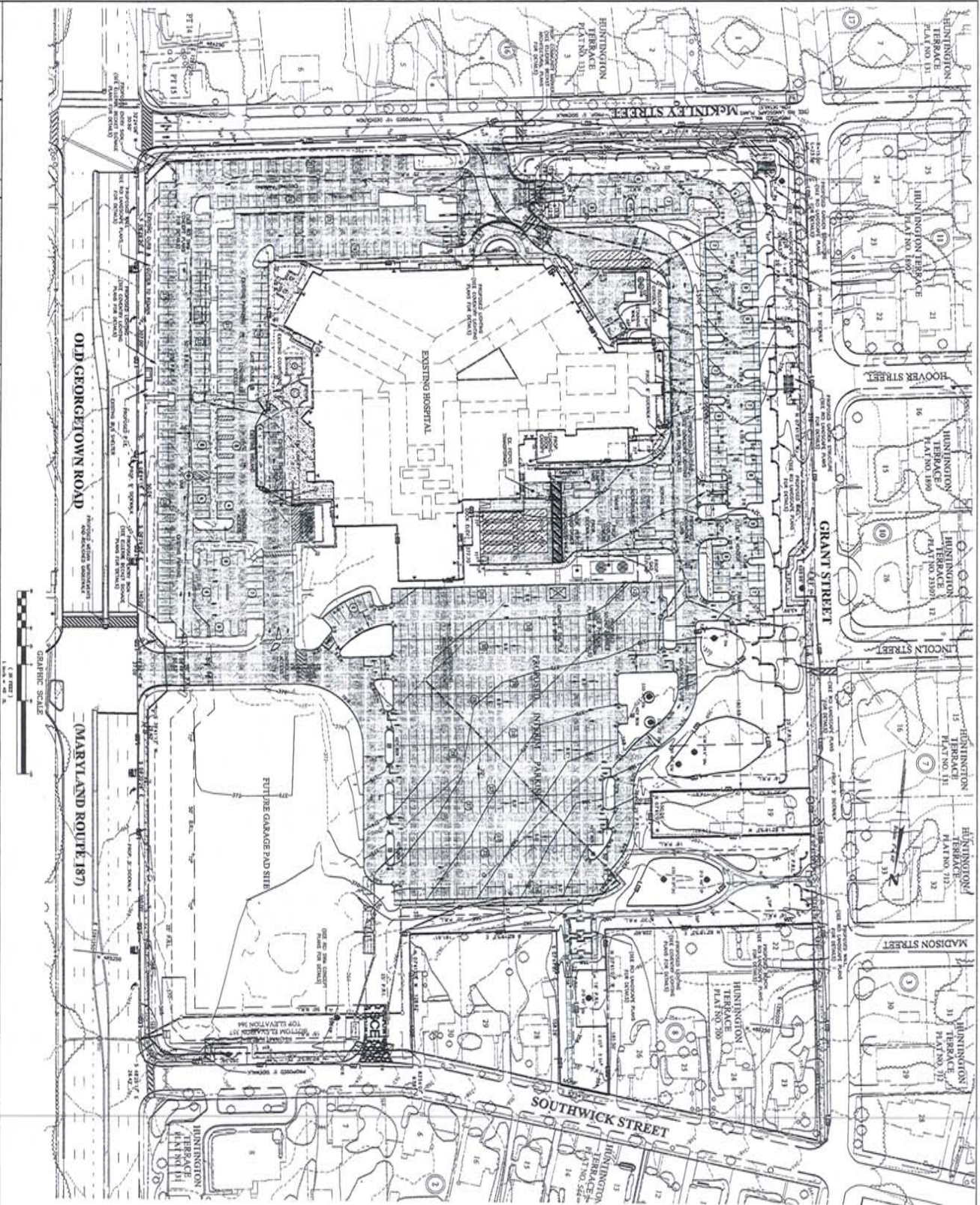
DIAGRAMMATIC SECTION



Basic Plan Configuration for Alternate Option



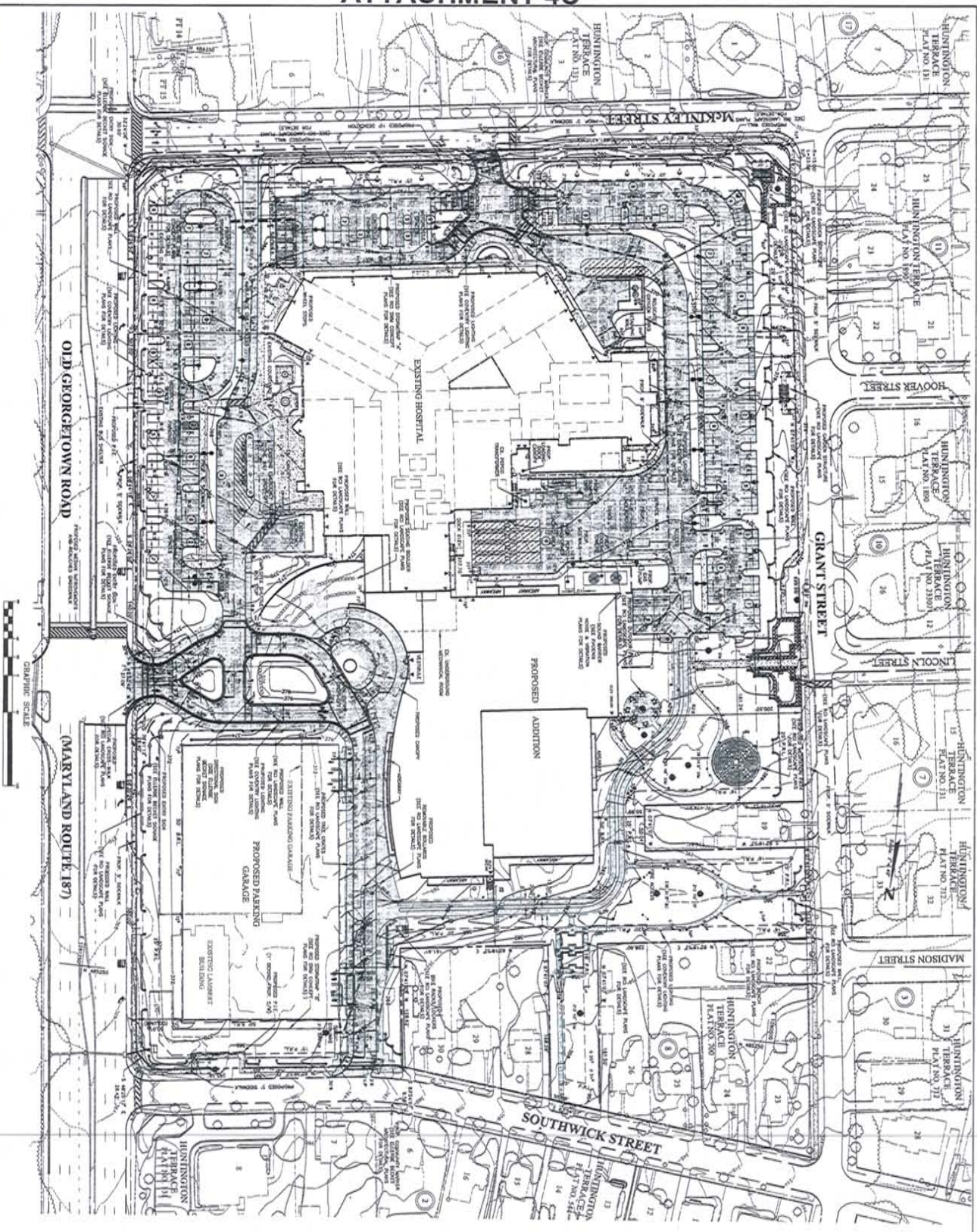
ATTACHMENT 4B



**PRELIMINARY
DRAFT**

<p>Suburban Hospital</p> <p>SUBURBAN HOSPITAL ELECTION DISTRICT NO. 7 MONTGOMERY COUNTY, MARYLAND</p>	<p>RODGERS</p> <p>18400 Rockville Pike, Suite 100 Rockville, MD 20850 Tel: 301.584.4000 Fax: 301.584.4001 www.rodgers.com</p>	<p>INTERIM PARKING SITE PLAN</p> <p>9/10/08</p>	<p>DATE: 9-10-08 DRAWN: J. J. JONES CHECKED: J. J. JONES SCALE: AS SHOWN SHEET: 1 OF 1 PROJECT: SUBURBAN HOSPITAL - INTERIM PARKING SITE PLAN</p>
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ATTACHMENT 4C



NO.	REVISION	DATE
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Suburban Hospital

SUBURBAN HOSPITAL
ELECTION DISTRICT (NO. 7)
MONTGOMERY COUNTY, MARYLAND

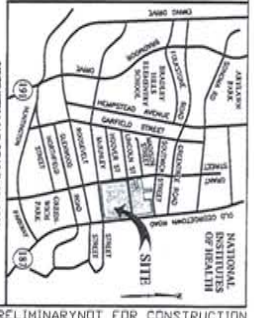
RODGERS CONSULTING
14807 Greenway Lane, Suite 300
Silver Spring, MD 20904
Tel: 301-993-1000
Fax: 301-993-1001
www.rogersconsulting.com

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ALTERNATE GARAGE SITE PLAN
9/10/08

PRELIMINARY DRAFT

Suburban Hospital, All Terrain Garage Site Plan
Date: 9/10/08
Scale: 1/8" = 1'-0"
Sheet: 40 of 40
Project: Suburban Hospital
Client: National Institutes of Health
Architect: Rodgers Consulting



GENERAL NOTES
1. THE SITE IS LOCATED AT THE INTERSECTION OF I-495 AND I-270, IN SILVER SPRING, MARYLAND.
2. THE PROJECT IS A 1.5 MILLION SQUARE FOOT GARAGE ADDITION TO THE EXISTING HOSPITAL BUILDING.
3. THE GARAGE WILL BE CONSTRUCTED IN PHASES AND WILL BE USED TO STORE AND MAINTAIN VEHICLES.
4. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ZONING ORDINANCES.
5. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY DESIGN MANUAL.
6. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ENVIRONMENTAL DESIGN ACT.
7. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY HISTORIC PRESERVATION ACT.
8. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ANTI-TAKEOVER ACT.
9. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ANTI-REDEVELOPMENT ACT.
10. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ANTI-SPREADSHEET ACT.
11. THE GARAGE WILL BE CONSTRUCTED TO MEET THE REQUIREMENTS OF THE MONTGOMERY COUNTY ANTI-SPREADSHEET ACT.
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ATTACHMENT 5

Surrounding Area Map



LEGEND

-  S-274-D
-  Parcel
-  Building
-  Paved Area
-  Lake and Pond
-  Stream and River

NOTICE:

The planimetric, property, and topographic information shown on this map is based on copyrighted Map Products from the Montgomery County Department of Park and Planning of the Maryland-National Capital Park and Planning Commission, and may not be copied or reproduced without written permission from M-NPPC.

Property lines are compiled by adjusting the property lines to topography created from aerial photography and should not be interpreted as actual field surveys. Planimetric features were compiled from 1:14400 scale aerial photography using stereo photogrammetric methods.

This map is created from a variety of data sources, and may not reflect the most current conditions in any one location and may not be completely accurate or up to date. All map features are approximately within five feet of their true location. This map may not be the same as a map of the same area plotted at an earlier time as the data is continuously updated. Use of this map, other than for general planning purposes is not recommended.

1 inch = 600 feet

Address: 8600 Old Georgetown Rd

Key Map



ATTACHMENT 6



1 Old Georgetown Road @ Southwick Street



Figure 1a: Auxiliary House (Alzheimer)



Figure 1b: Intersection of Southwick and Old Georgetown Rd



Figure 1c: Southwick St, looking east (towards Old Georgetown Rd)



Figure 1d: Southwick St, looking west (towards Grant St)

2 Old Georgetown Road @ Lincoln Street



Figure 2a: Lincoln St @ Old Georgetown Rd (looking from NIH entrance, west)



Figure 2b: Lincoln St @ Old Georgetown Rd (looking north from midblock)



Figure 2c: Lincoln St @ Old Georgetown Rd (looking east from Suburban)



Figure 2d: Lincoln St @ Old Georgetown Rd (looking east from Suburban)

3 Old Georgetown Road @ McKinley Street



Figure 2a: McKinley St @ Old Georgetown Rd (southeast intersection)



Figure 2b: McKinley St @ Old Georgetown Rd (northeast intersection)



Figure 2c: McKinley St @ Old Georgetown Rd (northwest intersection)



Figure 2c: McKinley St @ Old Georgetown Rd (looking west along McKinley St)

4 Grant Street, between Southwick St and McKinley St



Figure 4a: Grant St near Hoover (looking South, Suburban property)



Figure 4b: Grant St near Hoover (looking South, street width)



Figure 4c: Grant St @ Hoover St (looking west)



Figure 4d: Grant St @ Hoover St (northwest intersection)

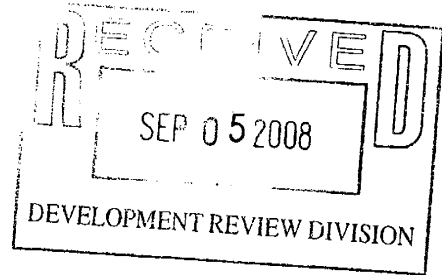
ATTACHMENT 7



MONTGOMERY COUNTY PLANNING DEPARTMENT

THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

September 4, 2008



MEMORANDUM

TO: Renee Miller, Zoning Analyst, and Development Review Division
VIA: Glenn Kreger, Acting Chief, Community-Based Planning Division
FROM: Piera Weiss, Planner Coordinator, Bethesda-North Bethesda Team
RE: Revised Memorandum Suburban Hospital, SE S-274-C

Staff Recommendation:

The plan as currently proposed is unacceptable and should be denied (Section 59-G-1.21 (a) (3)). The Master Plan discourages the removal of homes for special exception uses and encourages the protection of the neighborhood from further encroachment of special exception use except for local community need. The proposed expansion encroaches on the neighborhood by removing a number of homes and eliminating a local street. It is questionable as to whether or not the proposed expansion serves a strictly local community need.

Background:

The hospital facility was built in 1943 in anticipation of post World War II convalescent needs. Suburban Hospital purchased the facility from the government and received special exception approval in 1955. Over the years there have been a number of renovations and expansions. In 1999, faced with an ever increasing need to modernize, the Suburban Hospital embarked on a long-range plan effort to modernize and expand the facility to meet current and projected needs. Suburban Hospital held many meetings with the community. Staff from the Community - Based Planning Division attended these meetings as early as 2001.

On July 16, 2007 the Board of Appeals approved an administrative modification regarding air handling equipment. There were many community issues to resolve and the Board of Appeals placed a condition that required Suburban Hospital to conduct a series of meetings with a Community Liaison Council to discuss the noise and other effects the air handling might have on the community. The People's Counsel attends those meetings.

In October 2007, Councilmember Berliner's office attempted to form a "mediation" process to address the expansion and modernization of the hospital that did not come to fruition. It became apparent that agreement between the parties was not forthcoming and the Hospital decided to submit the request for modification to the approved special exception S-274D.

As currently proposed, the expansion of the hospital requires abandonment of Lincoln Street, the removal of a number of houses along Grant Street, and a waiver for the proposed garage height and setbacks. The community has many issues with proposal, but essentially they believe that the removal of the houses and the abandonment of Lincoln Street will destabilize the community by eliminating about one-third of the neighborhood as they define it.

Master Plan

Although the Approved *and Adopted Bethesda-Chevy Chase Master Plan* (April 1990) does not specifically discuss Suburban Hospital or possible expansion, it contains recommendations regarding Old Georgetown Road (See Master Plan Section 3.32 Old Georgetown Road Plan, pages 57-62). This section of the Plan refers to the first row of properties fronting or adjoining Old Georgetown Road as well as the communities adjacent to the corridor.

The master plan acknowledged that there were a significant number of special exceptions along Old Georgetown Road. The Plan "...discourages further special exceptions not only along the Road but also in the adjacent communities, except for community-serving uses."

The plan recommends the "preservation of the residential character of Old Georgetown Road from the Beltway south to Glenbrook Road and the protection of adjacent single family neighborhood from further encroachment by special exceptions, except those that are community serving."

The Plan is also explicit regarding assemblage and removal of houses:

....discourages the assemblage of developed properties for purposes of special exception uses. As a further means of preserving the residential scale and character of Old Georgetown Road area, this Master Plan discourages the assemblage of both improved and unimproved lots and discourages the demolition of existing residential structures for the purposes of constructing a large building **that is not in keeping with the residential character of the area** (emphasis added).

Analysis

Hospital expansion in the county is an on-going issue since land is often expensive and location is critical to service areas. Other hospitals located in residential areas in Montgomery County have faced similar situations. The Adventist Hospital in Takoma Park decided, after serving the community for 100 years, that the existing site did not satisfy their long-term needs and that the issues associated with the expansion were not easily negotiated. They found a new site in eastern county and are in the process of seeking special expectation approval. In that instance the new site does not physically affect any residential community.

The case of Holy Cross Hospital is comparable to Suburban Hospital. The issue was such that the Forest Glen Master Plan made specific recommendations regarding the expansion including a

recommendation that Holy Cross Hospital not expand their existing campus on a block of single family homes acquired for that purpose. Holy Cross Hospital recently completed the planned expansion without removing the homes.

The proposed expansion of Suburban Hospital involves a 236,000 SF, four story building that will house new surgical facilities, private patient rooms, and physician's offices. The project includes reconstruction and expansion of structured parking garage (2 levels below and 7 stories above) for 1196 spaces. The plan rearranges the existing surface parking to accommodate 269 spaces for a total of 1465 spaces on site. This expansion will modernize the facility and provide the necessary facilities to fulfill the Hospital's obligations as the trauma center for the county. The proposed circulation includes a new entrance with separate emergency and helipad entrances from other vehicles and improved pedestrian access to and through the site. The plan also proposes landscaped areas as a buffer for the houses that remain within the block formed by Grant, Southwick and McKinley Streets and Old Georgetown Road.

The Urban Design Division has suggested redesigning the garage to avoid a waiver request for height and setbacks, as well as options for not removing as many houses as currently proposed. Their memorandum is clear that the proposal, as designed, is not entirely compatible with the surrounding neighborhood.

Conclusion

The master plan contains language regarding limiting special exceptions and encroachment by special exceptions in this area, although there is no specific language regarding Suburban Hospital. The expansion, while it provides enhanced service for the local community, serves the region as a trauma center.

The proposed design and layout have been questioned by the Urban Design Division. Community-Based Planning Staff questions the compatibility of the current proposal and believes that the removal of 23 homes to expand the facility is not consistent with the language of the master plan regarding special exception uses. In our opinion, the proposal does not satisfy the general conditions of Section 59-G-1.21 (a) (3).

If Suburban Hospital were to propose alternatives to the current proposal design that better addressed the issues of the Urban Design Division, including compatibility with the immediate neighborhood and the surrounding community, as well as master plan consistency, Community-Based Staff would reconsider their conclusion.



ATTACHMENT 8

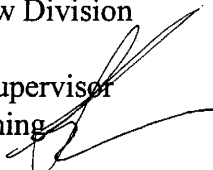
MONTGOMERY COUNTY PLANNING DEPARTMENT


THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

September 3, 2008

MEMORANDUM

TO: Renee Miller
Development Review Division

VIA: Shahriar Etemadi, Supervisor
Transportation Planning 

FROM: Ki H. Kim, Planner/Coordinator 
Transportation Planning

SUBJECT: Suburban Hospital
Special Exception Case No. S-274-D

This memorandum represents Transportation Planning staff's Adequate Public Facilities (APF) review and recommendations on the subject special exception application for the proposed expansion of the Suburban Hospital located on the west side of Old Georgetown Road, between McKinley Street and Southwick Street in Bethesda.

RECOMMENDATION

Based on our review of the Site Plan and the traffic analysis submitted by the applicant, staff recommends the following conditions as part of the APF test related to approval of the subject special exception application.

1. Expansion of the hospital is limited to 76,996 square feet and the physician office space is limited to 38,000 square feet under the subject special exception.
2. Lincoln Street must be abandoned as a public street between Old Georgetown Road and Grant Street.
3. For LATR requirements, the applicant must construct a third westbound lane on West Cedar Lane at Old Georgetown Road as a condition of Preliminary Plan. The timing of the construction of this improvement will be determined at the time of Preliminary Plan.

4. For PAMR requirements, the applicant must provide the following non-automobile facilities or other improvements which represent an equivalent number of trip credits for these facilities as a condition of Preliminary Plan. All proposed facilities and their locations must be approved by MCDOT and MNCPPC.

- 1,200 linear feet of five-foot wide sidewalk at off-site locations to be determined prior to approval of the site plan.
- 820 linear feet of eight-foot wide bike path at off-site locations to be determined prior to approval of the site plan
- Three curb extension/pedestrian refuge island/handicap ramps.
- Three accessible or countdown pedestrian signals/intersection.
- Five information Kiosks.
- Forty (five sets of eight) bike lockers.
- One static transit information sign.
- One real-time transit information sign.

The timing of providing each improvement will be determined at the time of Preliminary Plan.

5. The applicant must provide 60 feet of Right –Of-Way and an additional 10 feet of Public Improvement Easement (PIE) for a total of 70 feet from the center line of Old Georgetown Road.
6. The applicant must provide additional 10feet of right-of-way along McKinley Street between Old Georgetown Road and Grant Street and construct an additional westbound right-turn access lane.
7. The applicant must provide 5-foot sidewalks along McKinley Street, Grant Street, Southwick Street, and Old Georgetown Road as shown on the Site Plan.
8. All pedestrian sidewalks and walkways within the Hospital campus must be open to the public use.
9. The applicant must include a Transportation Management Plan (TMP) proposal in the Preliminary Plan application.

DISCUSSION

Local Area Transportation Review (LATR)

Twenty intersections were identified in the traffic study as critical intersections affected by the proposed expansion of the Hospital and were examined to determine whether they meet the applicable congestion standard of 1,600 Critical Lane Volumes (CLV) for the Bethesda/Chevy Chase Policy Area. The result of the CLV analysis is summarized in Table 1.

Table 1: Calculated Critical Lane Volume Values at Studied Intersections

Intersection	Weekday Peak Hour	Traffic Condition			
		Existing	Background	Total	Total w/Improve
Old Georgetown Road & W Cedar Lane	Morning	1,205	1,298	1,340	1,219
	Evening	1,378	1,719	1,744	1,525
Old Georgetown Road & Center Street	Morning	920	1,067	1,071	
	Evening	1,053	1,275	1,301	
Old Georgetown Road & Greentree Road	Morning	1,223	1,132	1,194	
	Evening	1,160	1,027	1,063	
Old Georgetown Road & Southwick Street	Morning	870	784	843	
	Evening	809	836	935	
Old Georgetown Road & Lincoln Street	Morning	749	791	875	
	Evening	1,042	1,093	1,193	
Old Georgetown Road & McKinley Street	Morning	1,104	1,137	1,124	
	Evening	849	932	955	
Old Georgetown Road & Roosevelt Street	Morning	1,120	1,147	1,154	
	Evening	643	696	737	
Old Georgetown Road & Huntington Parkway	Morning	1,203	1,235	1,222	
	Evening	968	1,050	1,091	
Old Georgetown Road & Battery Lane	Morning	1,448	1,472	1,475	
	Evening	1,143	1,180	1,198	
Bradley Boulevard & Huntington Parkway	Morning	900	917	922	
	Evening	1,419	1,433	1,439	

As shown in the above table, all intersections are currently operating at an acceptable congestion standard (CLVs level of 1,600 except at Old Georgetown Road and Battery Lane which is 1,800) and they are expected to continue to operate within the congestion standards for the

background (the existing traffic plus traffic from the approved/un-built developments) and the total future traffic conditions except for the intersection of Old Georgetown Road and West Cedar Lane during the evening peak hour. In order to reduce CLV at this intersection and pass the LATR test, the applicant has proposed to construct a third westbound lane on West Cedar Lane. With the proposed intersection improvement, the Old Georgetown Road/West Cedar Lane intersection is expected to operate below the CLV congestion standard of 1600. With the proposed improvement, this special exception application meets the LATR requirements of the APF review. This intersection however, is identified on the list of locations funded for improvements that are impacted by BRAC. The Maryland Department of Transportation is currently conducting a preliminary study of this and other intersections in the Bethesda area. The future preferred alternative to improve this intersection may not be the same as what the applicant has proposed. We would suggest that the applicant be required to participate in the future funding of the intersection improvements based on a pro-rata share of their traffic impact. This will be decided at the time of preliminary or site plan review process.

Policy Area Mobility Review (PAMR)

The site is located within the Bethesda/Chevy Chase Policy Area where 30% of the new trips must be mitigated as part of the 2007-09 Growth Policy PAMR requirements. In order to address the PAMR requirements, the applicant has proposed several non-automobile transportation facility measures including construction of sidewalks and bike paths at locations to be determined and approved by the MCDOT and M-NCPPC. The proposed non-automobile transportation facility measures are expected to mitigate 30% of the hospital-generated new trips. Therefore, staff finds that there is reasonable probable fruition that this special exception application will meet the PAMR requirements at the time of APF review.

Site Access and Vehicular/Pedestrian Circulation

The Hospital has currently six access points: two from McKinley Street, three from Lincoln Street, and one from Southwick Street. As a part of the Hospital expansion, Lincoln Street from Grant Street to Old Georgetown Road is proposed to be abandoned. With abandonment of Lincoln Street right-of-way, the applicant proposes to consolidate expansion of the Hospital and reducing the number of access points from six to four in the adjoining streets including two from McKinley Street, one from Old Georgetown Road, and one from Southwick Street.

Old Georgetown Road is classified as a divided major highway with six lanes on a 120-foot right-of-way (ROW) in the Bethesda/Chevy Chase Master Plan. The applicant provides for a 60-foot ROW dedication from the centerline with a five-foot sidewalk along the Hospital frontage. The applicant also provides 10-foot additional ROW dedication along McKinley Street to provide for an additional westbound right-turn lane onto the site. The applicant proposes five-foot sidewalk along McKinley Street, Grant Street frontage, and on Southwick Street between Old Georgetown Road and the Hospital driveway. McKinley Street, Grant Street, and Southwick Street are unclassified streets in the master plan but treated as secondary residential streets for the purpose of this review. The Site Plan includes lead-in sidewalks from all public streets connecting to a network of on-campus sidewalks and crosswalks. A network of on-campus sidewalks and crosswalks would be available

for public use to provide pedestrian connections from the surrounding communities to Old Georgetown Road.

The proposed reconstruction of street network in the periphery of the hospital and providing bike and pedestrian paths throughout the campus could positively impact the overall traffic safety. The proposed abandonment of Lincoln Street would eliminate the mixture of conflicting movements between through traffic destined for the residential neighborhoods and the majority of hospital traffic generated by visitors, service/delivery vehicles, pedestrians and ambulances/rescue vehicles. Extensive discussion of the Lincoln Street abandonment is discussed in the Transportation Planning staff report to the Planning Board on the impact of the proposed abandonment. Staff reviewed the proposed overall internal traffic/pedestrian circulation systems shown on the Site Plan and finds them to be adequate.

Parking Demand Analysis

The applicant has submitted a parking demand analysis which includes calculation of the existing parking spaces and future parking requirements based on: 1) the Montgomery County Zoning Ordinance; and 2) a needs analysis based on the actual observations at the Hospital. The Hospital currently has 730 total campus parking spaces located in an existing parking garage and several parking areas. The Hospital also has 350 off-site parking spaces at scattered locations. The hospital has a total of 1,080 parking spaces that include on-campus and off-site parking. The applicant conducted a parking occupancy counts on January 10, 2007 to accurately reflect the realistic parking needs of the Hospital. Based on the actual parking occupancy counts, the applicant developed the parking ratio to be used in the future parking demands.

Based on the Zoning Ordinance, the future Hospital expansion is required to provide 937 parking spaces. Using the parking ratio developed by the parking needs analysis, the Hospital proposes 1,428 spaces to be provided on the surface and in the parking garage. Basically, the Hospital proposes 475 more parking spaces on the site than required by the County Zoning Ordinance for the proposed expansion (additional 51%) or 348 spaces more parking spaces than they have on campus now and at off-site locations (additional 32%). Staff finds that the proposed increase of parking spaces on campus is appropriate since 350 off-site parking spaces at scattered locations are to be accommodated on campus, and the impact of the additional local travel can be mitigated. Staff does not object to the applicant's parking demand analysis and we support the proposed number of parking spaces.

Transportation Management Plan (TMP)

Staff recommends that the Hospital provide a TMP at the time of preliminary plan. The TMP should describe how to manage the flow of traffic at the Hospital's points of access so that vehicular movements to and from the Hospital are made in a safe and efficient manner without impacting the community after rebuilding of the campus with all improvements built. Also, the TMP should include transit management elements to ensure that the currently operating shuttle service to and from the Bethesda Metro Station continues to be operated in an organized and efficient manner in coordination with the other public transit services in the area.

The Hospital will need to identify a community coordination strategy in achieving the goals to be identified in the TMP. The strategy may include funding a program to monitor activities toward achieving the established goals and maintain a performance record which can be made available to the community.

Summary

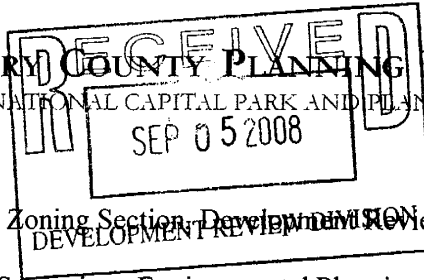
Transportation Planning staff concludes that the granting of the Special Exception for expansion of the existing Suburban Hospital facility satisfies the LATR/PAMR requirements of the APF review with recommended conditions as described in this memo.

KK:tc

ATTACHMENT 9



MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION



MEMORANDUM

TO: Renee Miller, Planner, Zoning Section, Development and Review Division
VIA: Stephen D. Federline, Supervisor, Environmental Planning Division
FROM: Lori Shirley, Planner Coordinator, Environmental Planning Division
DATE: September 4, 2008
SUBJECT: Special Exception S-274-D; Suburban Hospital expansion
8600 Old Georgetown Road, Bethesda

Recommendation

Environmental Planning staff has reviewed the above special exception application and recommends **approval** of S-274-D in accordance with required finding 6 of Section 59-G-1.21 (a) (6) of the Montgomery County Zoning Ordinance. A preliminary Forest Conservation Plan (PFCP) is undergoing concurrent review with Special Exception S-274-D. In a separate memo to the Montgomery County Planning Board dated September 4, 2008, Environmental Planning staff recommends approval of the PFCP with conditions to include tree save efforts for 10 of 39 existing large and specimen trees on-site. In Special Exception S-274-D, the applicant should give consideration to the use of green building materials and design techniques consistent with the County Council's Green Building legislation.

Background/Proposal

The site is known as 8600 Old Georgetown Road, located on the east side of this road across from the National Institute of Health (NIH). The site's other three perimeters are along the north side of Southwick Street, the south side of McKinley Street and the west side of Grant Street. The site is in the Bethesda-Chevy Chase Master Planning Area; it contains 15.17 acres and is zoned R-60.

The S-274-D request is for an expansion to existing Suburban Hospital; the site has undergone previous review by special exception and the hospital has been operational since 1943. The expansion includes a four-story addition and a new 1,196-space parking garage. The addition will allow for a conversion of all existing in-patient rooms to private rooms and the modernization of existing surgical rooms. The addition is proposed to the north of the existing hospital. The request includes the proposed demolition of 23 existing single-family units along Grant, Lincoln and Southwick Streets and the abandonment of a portion of Lincoln Street. The latter request is the subject of a companion case in Abandonment Case No. AB-715.

A modified Preliminary Forest Conservation Plan (PFCP) was also submitted. In the September 4, 2008 memo to the Montgomery County Planning Board for PFCP No. S-274-D, Environmental Planning staff recommend conditional approval of the PFCP subject to tree save efforts for 10 of 39 existing large and specimen trees on-site.

Environmental Guidelines

The applicant has an approved Natural Resources Inventory/Forest Stand Delineation (NRI/FSD), 420071040. The current NRI/FSD was reviewed earlier this year based on the acquisition of

additional properties along the overall site's perimeter on Grant, McKinley and Southwick Streets. There is no existing forest on-site; however, there are 24 specimen and 15 large trees for a total of 39 such trees at various locations on-site. One specimen tree is off-site and is located on the north side of Southwick Street and is the 40th among the other 39 large and specimen trees identified on the NRI/FSD. The site has no areas of environmental buffer, streams, 100-year floodplain, wetlands, steep slopes associated with highly erodible soils and severe slopes. The site is in the Cabin John watershed, a Use Class 1 watershed, and, it is not located within a Special Protection Area.

Forest Conservation

This property is subject to Chapter 22A Montgomery County Forest Conservation Law. A modified Preliminary Forest Conservation Plan (PFCP) was submitted date stamped as received in the Environmental Planning Division on August 1, 2008.

The PFCP shows no existing forest on-site and an afforestation requirement of 2.28 acres. The PFCP's worksheet shows the requirement will be met with 2.28 acres of credit for on-site tree planting. The PFCP also shows proposed removal of 38 of the 39 large and specimen trees on-site. In a memo dated September 4, 2008, to the Montgomery County Planning Board for the PFCP, Environmental Planning staff recommends **approval** of the PFCP with conditions to include tree save efforts for 10 of 39 large and specimen trees on-site.

Special Exception Required Findings

Section 59-G-1.21 (a) (6) of the Montgomery County Zoning Ordinance reads as follows:

- (6) Will cause no objectionable noise, vibrations, fumes, odors, dust, illumination, glare or physical activity at the subject site, irrespective of any adverse effects the use might have if established elsewhere in the zone.*

On Wednesday, August 13, 2008, a meeting was held with the Huntington Terrace residents, their attorney, and Planning Department staff. Six residents were present. The primary concern expressed was the adverse impact the abandonment of Lincoln Street will have on the surrounding residential neighborhood. Other concerns include, but are not limited to, the loss of affordable housing in the immediate neighborhood, the hospital's future intention to expand beyond the current limits in this request and the increased traffic the expansion will have on local residential streets. The general consensus of the residents was in opposition to the proposal.

Staff has reviewed all information in support of the proposed hospital expansion as it relates to the required finding. It is anticipated that the proposed expansion will not result in increased objectionable noise, vibrations, fumes, illumination, glare and physical activity, all of which are inherent to a hospital facility. The applicant's Statement of Justification recognizes that an upgraded hospital facility is needed to provide modernized medical services to a growing population and region, and to enhance the hospital's overall operational efficiencies. Hospital building mechanical equipment operates 24-hours a day, seven days a week and creates noise and vibrations inherent to such uses (i.e., emergency generators, exhaust fans, cooling towers, garage supply and exhaust fans). Phoenix Noise and Vibration, LLC, of Frederick, Maryland prepared a Noise and Vibration Impact Analysis dated March 2008. In the analysis a model was prepared with all of the existing and proposed mechanical equipment to ensure noise levels are not exceeded by the receiving residential and non-residential areas. The S-274-D request is supported based on inherent aspects associated with the proposed hospital expansion as these relate to finding 6, and the conclusions and recommendations in the aforementioned noise and vibration analysis.

vibration analysis.

Noise

Old Georgetown Road is an existing four-lane, major highway. Traffic-generated noise impacts from the highway are anticipated because a portion of the proposed new building is exposed to the traffic noise source and not completely shielded by the new proposed parking garage along Old Georgetown Road. Concerns for these traffic noise impacts were raised at the June 2008 DRC meeting. On August 1, 2008, Environmental Planning staff received a Traffic Noise and Building Shell analysis for this site, prepared by the aforementioned Phoenix Noise and Vibration, LLC, dated July 31, 2008. Per this analysis, the highest level of traffic noise exposure to the exterior of the patient rooms is 63dBA Ldn. The report determined that the noise levels inside the patient's rooms along Old Georgetown Road will be less than the residential standards of 45 dBA Ldn established by the Environmental Planning Division for Montgomery County with the recommended use of 1-inch insulated window composed of two ¼-inch panes separated by a ½-inch air space is capable of achieving a rating of 35 STC.

Stormwater Management

Conceptual stormwater management approval was granted by DPS in a letter dated April 3, 2008. The concept includes an on-site channel protection measures via underground storage and on-site water quality control via storm filters, permeable pavers and grass channels. On-site recharge is not required.

Green Building

This proposal does not include information to address Montgomery County green building requirements. The applicant is encouraged to consider to the use of green building materials and design techniques consistent with the County Council's Green Building legislation.

If you have any questions regarding these comments, please contact me at extension 4551 or electronically at lori.shirley@mncppc-mc.org.

SDF:LS



ATTACHMENT 10A

MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

MEMORANDUM

MCPB
Item #
September 25, 2008

TO: Montgomery County Planning Board

VIA: Gwen Wright, Chief, Environmental Planning *GW*
Stephen D. Federline, Supervisor, Environmental Planning *SD*

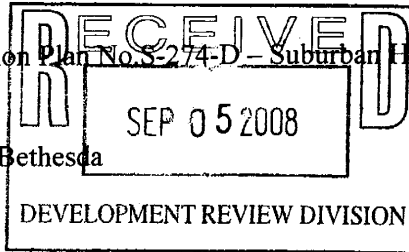
FROM: Lori Shirley, Planner Coordinator, Environmental Planning *LS*

DATE: September 4, 2008

SUBJECT: Preliminary Forest Conservation Plan No. S-274-D - Suburban Hospital Expansion

LOCATION: 8600 Old Georgetown Road, Bethesda

APPLICANT: Suburban Hospital Associates



Recommendation

Environmental Planning staff recommends **approval** of Preliminary Forest Conservation Plan (PFCP) S-274-D for Suburban Hospital subject to the following:

1. The proposed development shall comply with the conditions of the preliminary forest conservation plan. The applicant shall satisfy all conditions prior to recording of plat(s), Montgomery County Department of Permitting Services (MCDPS) issuance of sediment and erosion control permits, or as specified below:
 - a. Approval of Final Forest Conservation Plan (FFCP) consistent with the approved PFCP and all final FCP regulatory requirements, prior to any clearing, grading or demolition on the site.
 - b. At time of site plan submission, FFCP must show tree-compatible site design, stress reduction measures, and adjusted LOD/ grading, prepared, signed and stamped by an ISA-certified arborist to avoid and minimize impacts, and determine feasibility to save trees #204, #210, #212, #213, #214, #220, #230, #233, #234, and #237.
 - c. Further detailed tree save analysis must be conducted which addresses the specified objectives noted, as follows:
 - i. Trees #212 and #213: definite tree save;
 - ii. Trees #214, #230, #233, #234, and #237: all reasonable tree save efforts to be explored; and
 - iii. Trees #204, #210 and #220: save efforts depends on County waiver of typical roadway cross section.
 - d. The applicant's arborist shall include analysis and recommendations for several existing candidate willow oak trees to be transplanted in vicinity of Grant Street. Transplanting large trees as compensation for specimen tree loss is recommended in Forest Conservation Regulation Section 108F(3).

Preliminary Forest Conservation Plan No. Special Exception S-274-D;
Suburban Hospital expansion

- i. Any candidate willow oak tree to be transplanted shall be shown on the FFCP with the recommended transplanting techniques and details by the applicant's arborist.
 - ii. The analysis must justify why any candidate willow oak tree cannot be transplanted, if recommended as appropriate by the arborist.
2. Prior to release of sediment control permit, the tree save recommendations on the FFCP, as prepared, signed and stamped by an ISA-certified arborist, must include detailed tree preservation measures for each tree found feasible for save and transplanting.
 - a. The FFCP shall include separate pre and post-demolition and pre and post-construction plans prepared by the applicant's arborist in relation to the trees to be saved and transplanted along Grant Street.
 - b. Final sediment control plan must be consistent with final LOD on the approved FFCP, and must reflect a LOD no closer to trees to be protected than as shown on the approved FFCP.

Background/Proposal

The proposal is for an expansion to the existing Suburban Hospital facility known as 8600 Old Georgetown Road. The proposal includes a four-story addition and a 1,196-space parking garage and demolition of 23 existing single-family units along Grant, Lincoln, and Southwick Streets and the abandonment of a portion of Lincoln Street. The latter aspect is the subject of a companion case in Abandonment Case No. AB-715. A new parking garage will replace an existing parking garage along Old Georgetown Road. The site is located on the south side of Southwick Street, the west side of Old Georgetown Road, the north side of McKinley Street and the east side of Grant Street. The site contains 15.17 acres and is zoned R-60.

No forest exists on-site; however, there are 24 specimen trees and 15 large trees (ranging from 24-inches to 30-inches in diameter at breast height [dbh]) found at various locations on-site. One specimen tree is off-site at the north side of Southwick Street. This site is unique given the number of large and specimen trees on-site.

There are no streams, wetlands, 100-year floodplain, steep slopes associated with highly erodible soils, severe slopes and associated buffers. The site is located in the Cabin John watershed.

Regulatory Considerations

The Planning Board's action on the preliminary Forest Conservation Plan is regulatory and binding. The Planning Board must act on the Forest Conservation Plan before it finalizes its recommendation on the special exception application. Per Section 22 A-11(c) of the County Code, the Board of Appeals must consider the preliminary forest conservation plan when approving the special exception application, and not approve a special exception application that is in conflict with the preliminary forest conservation plan.

Environmental Guidelines

The applicant has an approved Natural Resources Inventory/Forest Stand Delineation (NRI/FSD), 420071040. The current NRI/FSD includes additional acquired properties within the overall

site's perimeter on Grant, McKinley and Southwick Streets.

There are no regulated environmental features on-site such as streams, wetlands, areas of 100-year floodplain and steep slopes associated with highly erodible soils and severe slopes and associated buffers. The site is in the Cabin John watershed, a Use Class 1 watershed. The site is not located within a Special Protection Area.

Forest Conservation

This property is subject to Chapter 22A Montgomery County Code. A Preliminary Forest Conservation Plan (PFCP) was received by the Environmental Planning Division on April 11, 2008. The PFCP shows no existing forest on-site, generating an afforestation requirement of 2.28 acres to be met entirely onsite with tree preservation/planting credits

Thirty-nine large and specimen trees are currently on-site and a 40th specimen tree (#218 is a 34-inch silver maple) is off-site in vicinity of the proposed limits of disturbance (LOD). Most trees of the 39 trees on the NRI/FSD are identified in "good condition, including some identified as having vines and ivy. These trees, particularly those along the perimeter of the site, are part of a community character of tree lined streets with a mature canopy. Trees found to be appropriate for save could be used to meet the site's afforestation requirement for retention of large and specimen trees as landscaping credit, and also be part of the total package which enhances compatibility and reduces the effects of building massing on the surrounding community

Environmental Planning staff's June 2008 DRC review comments did not support the PFCP because it showed the removal of 38 of 40 large and specimen trees on-site, with inadequate analysis and design effort made to show that: 1) reasonable efforts had been made to save a greater number of the large trees; and 2) the development proposal cannot be reasonably altered, as required per Section 22a-12(b) of the Forest Conservation law.

To demonstrate the significant tree caliper loss represented in the PFCP the following comparison of the existing tree caliper (to remain) and proposed tree caliper (to be removed) finds:

Existing tree caliper of large and specimen trees:	1,286-inches
Existing tree caliper of large and specimen trees to remain:	<u>82-inches</u>
Loss of existing tree caliper in modified PFCP:	1,204-inches

Illustrative of a more substantive effort to save trees include, but are not limited to, adjustments to the design in the area of the formal/informal gardens, the labyrinth, decorative brick walls along the site's proposed edges [including locations of these openings for pedestrian access] and pedestrian walkways/bikeways. For example, the PFCP shows specimen tree #212 as a 'focal point' tree within an informal garden design. Preservation and integration of other existing large and specimen trees into the overall design will lend itself to a medical-campus environment and retain more of the established tree-lined streetscape existing in the neighborhood.

On July 25, 2008, a field visit was conducted by Environmental Planning members, one a certified arborist. The purpose of the field work was for a close look at the large and specimen trees to determine whether these trees could reasonably be preserved and protected during the demolition and proposed expansion phases. Staff's emphasis for tree preservation has been primarily for edge specimen and large trees and a cluster of five specimen trees in a proposed open space area nearby the proposed labyrinth.

Based on the field observations, the following trees need further preservation consideration through redesign using current arboriculture-industry wide techniques: #204, #210, #213, #214, #220, #230, #233, #234, and #237. Current arbor culture tree save methods should include root pruning, tree protection fencing, pre and post demolition and construction plans, maintenance and other preservation measures (i. e., raised sidewalks along Grant Street). Also during the field visit, several willow oaks were identified in vicinity of the existing parking garage and the asphalt parking lots. These trees may be viable candidates to be transplanted in vicinity of Grant Street because of their existing condition.

A modified PFCP received on August 1, 2008 showed no adjustment made to the LOD over the previous plan. The modified PFCP did not address efforts to preserve more than one specimen tree (#212). The modified PFCP has a symbol in the legend for significant trees transplanted; however, no significant trees are shown with this symbol to be transplanted. This submittal included an analysis of individual tree save efforts prepared by Rogers Consultants and a Tree Inventory/Assessment by *The Care of Trees* prepared on July 31, 2008 and July 26, 2008, respectively.

The Care of Trees' assessment included eight trees along Grant and one along Southwick Streets (#213). Four trees (#204, #210, #212 and #213) are recommended for preservation because of their condition. Specimen tree #212 is the one tree currently shown on the PFCP for preservation as a 'focal point' tree in an informal garden. The assessment was thorough and provided more in-depth information not previously available regarding the condition of these nine trees; however, the assessment did not go far enough in its scope of review for nine trees in response to the DRC comments. It would have been beneficial if the assessment included trees #214, #222, #223, #233, #234 and #237. The latter three trees are nearby the labyrinth in an open space area. It appears these trees could be preserved in a redesign of proposed pathways and adjustments to the LOD. The modified PFCP conflicts with the Care of Trees' assessment because the former plan does not include tree preservation of any of these five trees.

Since the submittal of the modified PFCP, staff met with the applicant and their representatives on July 22, August 21 and August 29, 2008 to further discuss additional tree save efforts beyond specimen tree #212. The third meeting resulted an understanding that three categories of tree save efforts could save up to a total of 10 trees as follows:

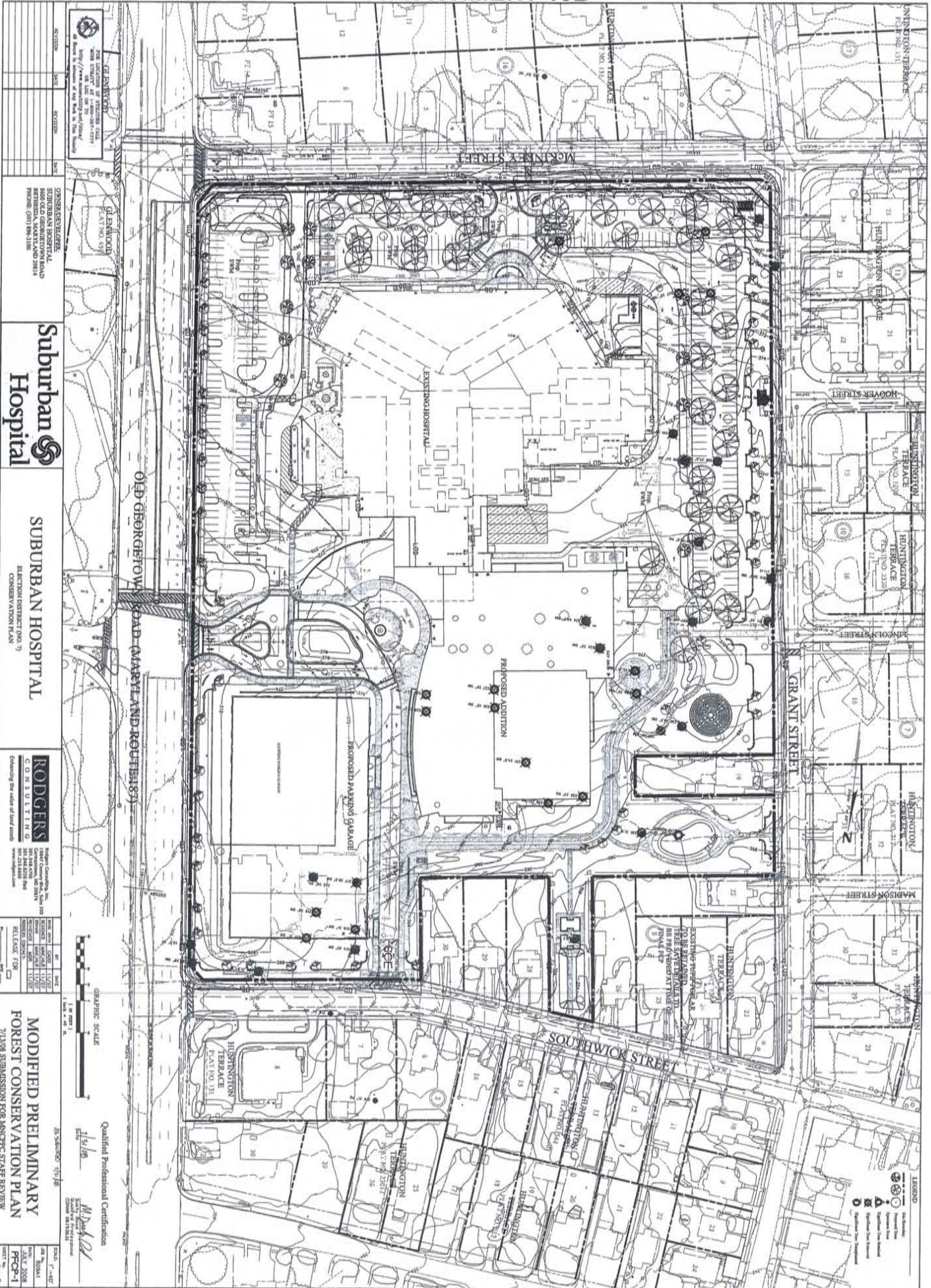
- (1) Definite trees to be saved: trees #212 and #213
- (2) Reasonable tree save efforts to be made: trees #214, #230, #233, #234, and #237
- (3) Save subject to DOT waiver of roadway cross sections: trees #204, #210 and #220.

Stormwater Management

Concept stormwater management approval was granted by County DPS on April 3, 2008. The concept plan consists of on-site channel protection measures via underground storage and on-site water quality control via stormfilters, permeable pavers and grass channels. On-site recharge is not required.

SDF:LS: G:/DEVREV/sc/zon/mr/S-274-SuburbanHospital_pfcpx_expansn_sf_final_ls_docx

ATTACHMENT 10B



NO.	DATE	DESCRIPTION

GENERAL NOTES:
 1. THE DESIGN OF THIS PROJECT WAS PREPARED BY THE ARCHITECT AND ENGINEER (A/E) FIRM OF RECORD FOR THE PROJECT.
 2. THE A/E FIRM OF RECORD IS NOT RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION SHOWN ON THIS PLAN.
 3. THE A/E FIRM OF RECORD IS NOT RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION SHOWN ON THIS PLAN.

GENERAL NOTES:
 4. THE DESIGN OF THIS PROJECT WAS PREPARED BY THE ARCHITECT AND ENGINEER (A/E) FIRM OF RECORD FOR THE PROJECT.
 5. THE A/E FIRM OF RECORD IS NOT RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION SHOWN ON THIS PLAN.
 6. THE A/E FIRM OF RECORD IS NOT RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION SHOWN ON THIS PLAN.

Suburban Hospital

SUBURBAN HOSPITAL
 ELECTION DISTRICT (NO. 7)
 CONSERVATION PLAN

RODGERS CONSULTING
 100 N. STATE ST. SUITE 200
 CHICAGO, IL 60610
 TEL: 312.467.1100
 WWW.RODGERSCONSULTING.COM

MODIFIED PRELIMINARY FOREST CONSERVATION PLAN
 2019A SUBMISSION FOR NONCFIC STAFF REVIEW



Qualified Professional Certification
 1/14/19
 M. J. [Signature]

SCALE: 1" = 10'
 SHEET NO. 10B
 PROJECT NO. 1919A
 DATE: 1/14/19

LEGEND

[Symbol]	Proposed Building
[Symbol]	Proposed Parking
[Symbol]	Proposed Driveway
[Symbol]	Proposed Walkway
[Symbol]	Proposed Landscaping
[Symbol]	Proposed Stormwater Management

ATTACHMENT 11

LAW OFFICES OF

KNOPF & BROWN

401 EAST JEFFERSON STREET

SUITE 206

ROCKVILLE, MARYLAND 20850

(301) 545-6100

FAX: (301) 545-6103

E-MAIL KNOPF@KNOPF-BROWN.COM

WRITER'S DIRECT DIAL

(301) 545-6104

NORMAN G. KNOPF

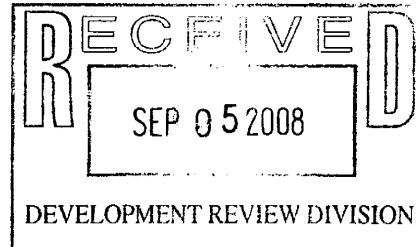
September 5, 2008

Via Email

royce.hanson@mncppc.org

chairman@mncppc-mc.org

Chairman Royce Hanson
Montgomery County Planning Board
8787 Georgia Avenue
Silver Spring, Maryland 20910



Re: **Huntington Terrace Citizens Association's
Opposition to Suburban Hospital's Proposed
Special Exception and Road Abandonment**

Dear Chairman Hanson:

Introduction

On behalf of the Huntington Terrace Citizens's Association ("HTCA"), below is an outline of the arguments to be presented by representatives of HTCA in a coordinated presentation at the public hearing before the Board in opposition to Suburban Hospital's proposed special exception and road abandonment (for a more complete outline, see testimony of Norman Knopf presented at the DOT hearing, as well as testimony of Ann Dorough, Bob Deans, Amy Shiman, also presented at the DOT hearing. Copies of which have been submitted to this Board. Also submitted to the Board are copies of over 200 letters from HTCA residents opposing the road closing. Fifty-eight residents appeared at the DOT hearing in opposition. At the DOT hearing, Suburban Hospital submitted letters from persons residing throughout Montgomery County favoring the expansion).

HTCA's position may be summarized as follows:

- I. *HTCA favors hospital expansion but opposes this particular design requiring abandonment of the community's main artery and destruction of 23 houses.*
- II. *The hospital can design an expansion achieving all of its goals without abandoning the road and demolishing 23 houses.*
- III. *The road is needed and therefore does not satisfy the criteria for abandonment.*

- IV. *The road abandonment will have severe detrimental effects on the community and therefore the proposal does not meet the special exception requirements.*
 - V. *Demolition of 23 homes will have severe detrimental effects on the community and therefore the proposal does not meet the special exception requirements.*
-

I. HTCA FAVORS HOSPITAL EXPANSION BUT OPPOSES THIS PARTICULAR DESIGN REQUIRING CLOSING OF THE COMMUNITY'S MAIN ARTERY AND DESTRUCTION OF 23 HOUSES.

The HTCA recognizes the valuable role of the hospital and therefore, supports its modernization and expansion. The present design, requiring abandonment of Lincoln Street and demolition of 23 houses destabilizes the community, at best, and will destroy it, at worst. The hospital has sufficient acreage to achieve all of its building goals without road closure and demolition of 23 houses. It should be required to so achieve its goals and permit the continuing existence of the Huntington Terrace community as a desirable and viable one. The special exception and road closure applications should be recommended for **DENIAL**.

II. THE HOSPITAL CAN DESIGN AN EXPANSION ACHIEVING ALL OF ITS GOALS WITHOUT CLOSING THE ROAD AND DEMOLISHING 23 HOUSES.

1. In 2001, after several years of negotiating with the HTCA, and with the assistance of John Carter and other members of your staff, the hospital proposed an expansion plan which achieved all of its goals *which did not require the closing of Lincoln Street and resulted in the demolition of only 2 houses*. A copy of this plan has been submitted as part of your record. (That plan did involve use of a portion of an area under Lincoln Street and did count Lincoln Street for lot coverage purposes.) The current hospital administration has abandoned this plan and is claiming it has no other alternative than to proceed with the current design. We submit the 2001 plan, and other plans, can readily be created on its over 12 acres to achieve the hospital's goals without road closure/destruction of 23 houses.

2. It is important to note what the current plan does not do:
- i. Does **not** expand number of hospital beds (merely converts double rooms to single).
 - ii. Does **not** expand any services offered or add any new services.
 - iii. Does **not** add any more operating rooms (just larger).
 - iv. Does **not** remove surface parking now extensively lining Old Georgetown and McKinley Street, to place it underground and/or to use the surface to construct new buildings.

3. It is important to note what the current plan will include, in addition to the 64,000 square feet of surgical operation and related space (some of which is underground):

i. Provides 38,000 sq. ft. of office space to be rented to physicians (rather than to be located in the nearby Bethesda CBD).

ii. Doubles the current number of on-site parking spaces from 724 to 1,465; and more than 500 additional spaces than the 937 the Zoning Code requires.

iii. Approximately 90,000 square feet in front of the hospital along Old Georgetown remains used only for surface parking. HTCA has urged this area be used for a multi-story structure. The Zoning Code permits up to 145 feet in height – roughly ten stories for a hospital floor. §59-G-2.31(6). To the extent this height may be limited by setback requirements, the community has agreed to support a request for a Zoning Text Amendment to allow this since height would be closest to and would impact mostly NIH non-residential buildings across the multi-lane Old Georgetown Road.

The hospital argues it is not convenient to construct in this area because connections to existing hospital wings would be difficult due to older construction. Even if this were true, three of the hospital wings are in excess of 40-50 years and one wing is 30 years old. The hospital has advised at Board of Appeals' hearings that it does plan in the future on renovating or replacing some of the wings. *It has chosen not to do so now but to first expand by a design requiring demolition of houses and road closure. In effect, the hospital has decided to adhere to an arbitrary renovation/replacement schedule, even though it jeopardizes the existence of Huntington Terrace community as a viable and desirable one.*

4. The hospital insists it needs the acreage from the abandonment of Lincoln Street in order to have the room to expand. However, while Lincoln Street is about 4/5's of an acre, the hospital proposes to build on this land only a three or four story building and this building will occupy only about 1/3 of the closed street acreage!

Further, its proposed project devotes 3 acres to gardens:

"Interior to the site, numerous gardens of different character are created for meditation, relaxation, socialization and physical rehabilitation. These gardens are connected by a Wellness Walk, as depicted on the Landscape Plan and in the Compatibility Package. These formal and informal gardens comprise over three acres of the property." [Land Planning Report of hospital, p.9 (emphasis added)]

In addition to these gardens, much of the Lincoln Street area is used to provide a grand landscaped drive approach to the hospital.

Is a grand landscaped entrance drive, Meditation Garden and Wellness Walk to be the "necessity" to close Lincoln Street and destroy 23 houses to the great detriment to the community?

It should also be noted that one of the purposes of closing Lincoln Street, presumably, was to get ambulances and other hospital traffic off of the community's residential street; however, ambulances and all deliveries are now to be diverted to another residential street - McKinley.

III. THE ROAD IS NEEDED AND THEREFORE DOES NOT SATISFY THE CRITERIA FOR ABANDONMENT.

1. A road is to be abandoned only if it is not needed, or closure is necessary to protect the safety of residents near the road to be closed. §49-63(c)(1)&(2). These criteria are not met.

2. Lincoln Street is the main artery into and out of the community. The community has substandard street widths; not all streets have sidewalks; children walk in the street, including to elementary school - which has no bus service, as well as numerous adult walkers including commuters to nearby Bethesda Metro. Closing Lincoln sends this traffic onto substandard neighboring residential streets.

3. The hospital's traffic engineers argue the other streets have capacity. Capacity alone is not the standard, otherwise, there would only be one road that meets standards into and out of a subdivision and the rest could be substandard or non-existent. Safety, volume, noise, etc. are considerations.

4. Convenience is also a consideration; only two streets - McKinley and Lincoln - are readily available to allow turns in both directions on Old Georgetown, since the other streets have a median at Old Georgetown.

5. Lincoln Street, according to the hospital's traffic report, already has 5% of its traffic using it to access to NIH - whose entrance is located directly across Old Georgetown. Given BRAC, and the anticipated traffic congestion on Rockville Pike, it is likely in the future that the Old Georgetown NIH entrance may become a more major access point.

IV. ROAD CLOSURE WILL DESTABILIZE THE COMMUNITY AND HAVE OTHER ADVERSE EFFECTS AND THEREFORE THE PROPOSAL DOES NOT MEET THE SPECIAL EXCEPTION REQUIREMENTS.

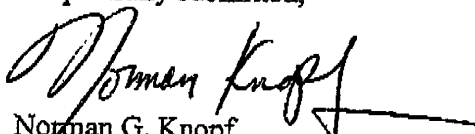
The closure of the street, by sending that traffic over other narrow residential streets, not only will create additional traffic on those roads, but unsafe conditions. Thus, the requirements of a special exception that there be no adverse effects due to traffic, or that the safety of the residents not be adversely affected, are not met. §59-G-1.21(a)(4)&(8).

V. DEMOLITION OF 23 HOMES WILL HAVE SEVERE DETRIMENTAL EFFECTS ON THE COMMUNITY AND THEREFORE THE PROPOSAL DOES NOT MEET THE SPECIAL EXCEPTION REQUIREMENTS.

1. The destruction of 23 houses is 8% of the entire community (and the hospital owns a total of 10%) will obviously have a major adverse impact on the stability of the community as well as its character and quality of life. In addition, houses that now face other houses, which serve as a buffer from the hospital, will face new hospital buildings, which have been moved further into the community, or will face new surface parking lots instead of the houses. It should be noted the 23 houses to be destroyed are relatively modest, providing a source of housing for hospital workers and others of moderate means. The proposed expansion of the hospital, and its continuing to buy houses, has currently destabilizes the community and approval will create even greater destabilization.

2. To obtain a special exception, the applicant must prove the proposal "will be in harmony with the general character of the neighborhood" and "will not be detrimental to the use, peaceful enjoyment, economic value or development of surrounding properties". §59-G-1.21(a)(4)&(5). Clearly these requirements are not and cannot be met. The Board should recommend that the special exception and road abandonment be DENIED.

Respectfully submitted,

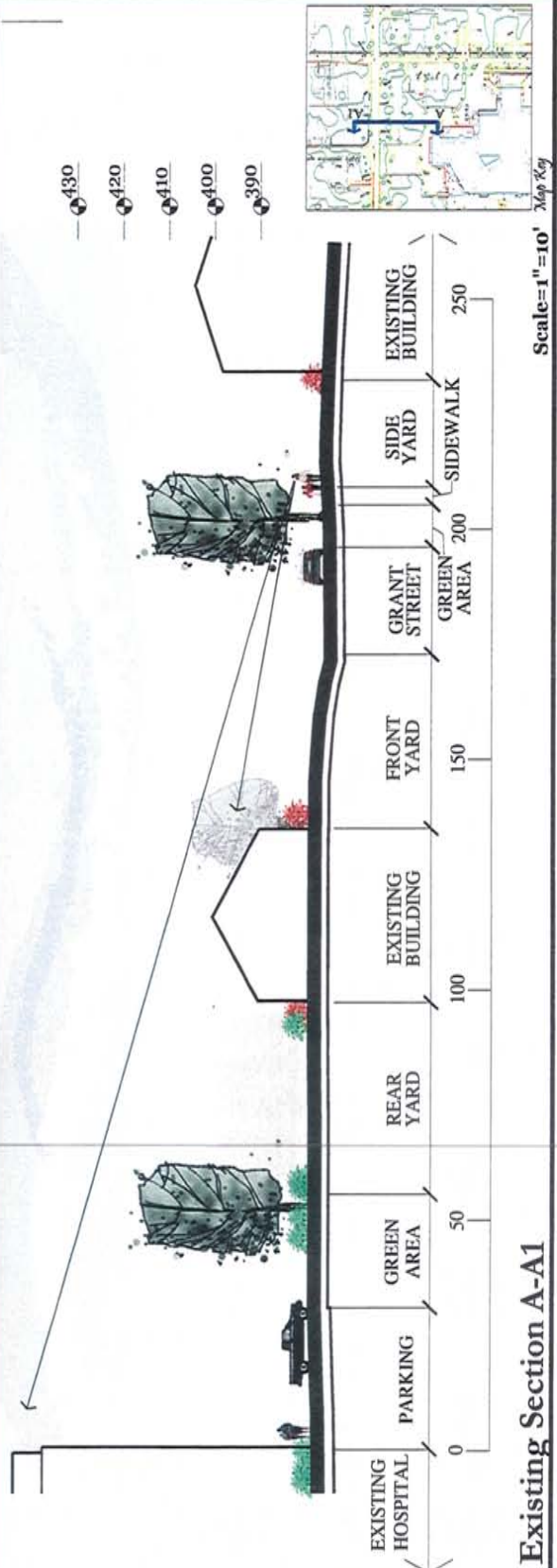

Norman G. Knopf
For Huntington Terrace Citizens Association

cc: Rose Krasnow - Email: rose.krasnow@mncppc-mc.org
Ralph Wilson - Email: ralph.wilson@mncppc-mc.org
John Carter - Email: john.carter@mncppc-mc.org
Renee Miller - Fax: 301-495-13061; Email: renee.miller@mncppc-mc.org
Ki Kim - Email: ki.kim@mncppc-mc.org

PRINCIPLE #4. Edges of the campus are well defined, with welcoming entries for the community.

The hospital master plan establishes a landscaped edge, with decorative walls, sidewalks, trees and shrubs, which help frame the neighborhood streets, as well as provide a distinct edge between campus and residential neighborhood. The view along Grant Street looking toward the hospital is enhanced by virtue of landscaped areas providing shade, texture and color, heat reduction, and screening.

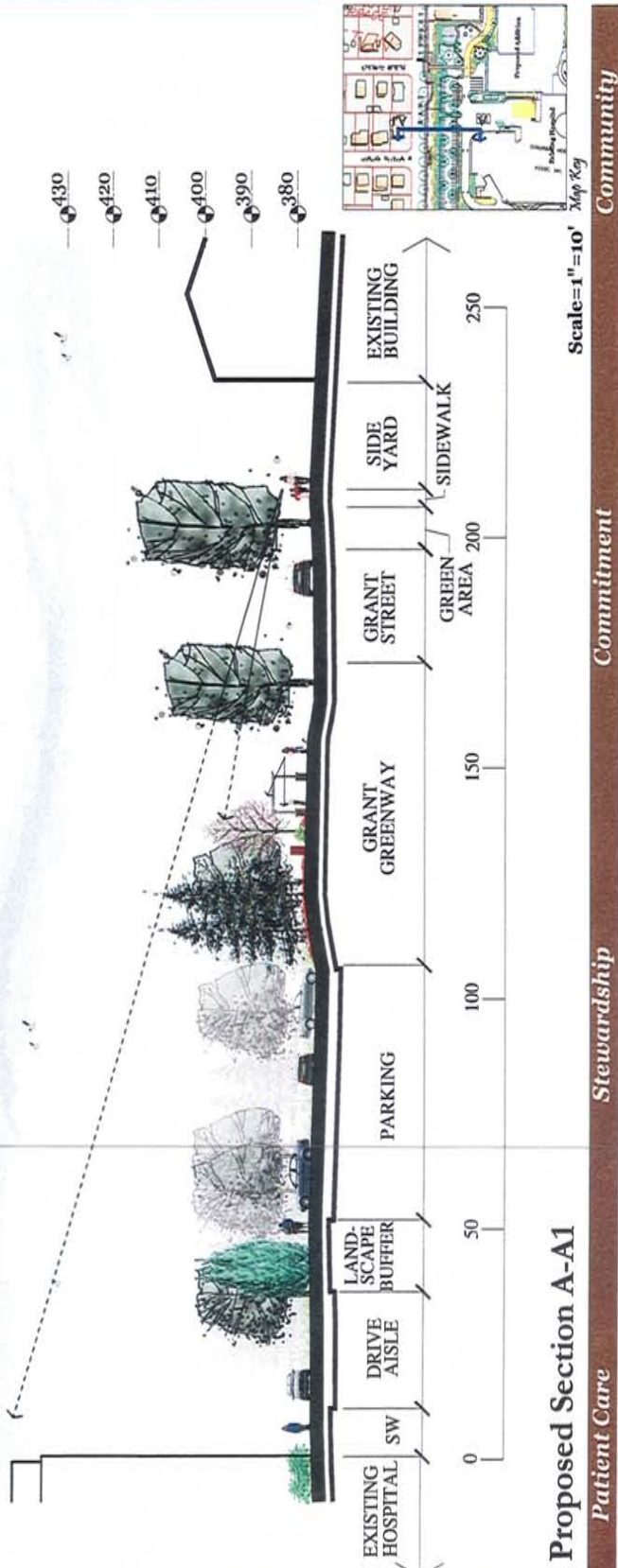
CAMPUS PRINCIPLE: COMPATIBLE EDGES



Existing Section A-A1

Scale=1"=10'

Map Key



Proposed Section A-A1

Scale=1"=10'

Map Key

Patient Care

Stewardship

Commitment

Community



PRINCIPLE #4: Edges of the campus are well defined, with welcoming entries for the community.

The design for the campus enhances the edges of the campus with landscaping, decorative walls and walkways and also creates safe and pleasing entryways into the campus for the community. Pedestrian and vehicular pathways are clearly separated and demarcated. Plantings provide shade, color and texture and orientation to entries and points of interest.

CAMPUS PRINCIPLE: COMPATIBLE EDGES



<p>BEFORE</p>	<p>BEFORE</p>	<p>BEFORE</p>	<p>BEFORE</p>	<p>BEFORE</p>	<p>BEFORE</p>
<p>AFTER</p>	<p>AFTER</p>	<p>AFTER</p>	<p>AFTER</p>	<p>AFTER</p>	<p>AFTER</p>
<p>ENHANCING THE LANDSCAPE</p>	<p>LANDSCAPE DOMINATES VIEW</p>	<p>ENHANCED BY OPENSOURCE</p>	<p>WELCOMING ACCESS TO ALL</p>	<p>WELL DEFINED EDGES</p>	<p>Old Georgetown Road Looking South</p>
<p>McKinley Street Looking at Hospital Entry</p>	<p>Grant Street Looking North</p>	<p>Southwick Street Entrance</p>	<p>Old Georgetown Road Looking North</p>	<p>Community</p>	<p>Commitment</p>
<p>Community</p>	<p>Stewardship</p>	<p>Patient Care</p>	<p>Stewardship</p>	<p>Commitment</p>	<p>Patient Care</p>




ATTACHMENT 13

MONTGOMERY COUNTY PLANNING DEPARTMENT THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

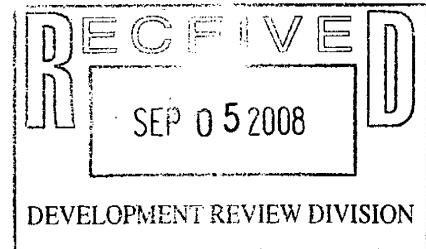
September 8, 2008

TO: Renee Miller, Zoning Analyst

FROM: John Carter, Chief 
Urban Design and Preservation Division

COPIES: Piera Weiss, Acting Team Leader
Bethesda- Chevy Chase/North Bethesda

SUBJECT: Urban Design Comments
Special Exception for Suburban Hospital
Bethesda Chevy-Chase Master Plan



RECOMMENDATION

The following items should be incorporated into the proposed development:

- Retain at least three of the existing houses located along Grant Street and Southwick Street
- Reduce the height and increase the setback of the proposed garage from Old Georgetown Road to enhance the "green corridor" along Old Georgetown Road as recommended in the Bethesda-Chevy Chase Master Plan
- Locate any future temporary parking spaces and driveways outside the proposed green space

DISCUSSION

Compatibility with the Adjacent Neighborhood

At least three of the existing houses located along Grant Street and Southwick Street should be retained. The retention of these existing houses will assist in preserving the character of the adjacent residential neighborhood. The retention of at least three houses along Grant Street and Southwick Street instead of the elimination of all 23 houses provides the stability of the neighborhood that is recommended in the Master Plan for special exceptions.

Design Guidelines in the Bethesda - Chevy Chase Master Plan

The proposed special exception is not consistent with the design recommendations in the Bethesda-Chevy Chase Master Plan.

Green Corridors Policy - The special exception does not enhance the Green Corridor of Old Georgetown Road as recommended in the Master Plan.

The Master Plan endorses a policy of maintenance and enhancement of Green Corridors along major highways such as Old Georgetown Road (p. 30). Specifically, the plan recommends the preservation of the residential character of Old Georgetown Road from the Beltway to Glenbrook Road. The guidelines include the following:

- Maintain residential character
- Preserve existing neighborhood stability
- Discourage special exceptions except those that serve the community
- Implement design and landscape guidelines (including green corridors)

The proposed setback, the height of the structure and the green space for the proposed parking garage does not enhance the green corridor of Old Georgetown Road. The proposed garage should be redesigned to reduce the height and increase the setback from Old Georgetown Road. In addition, the special exception should include a substantial amount of landscaping along Old Georgetown Road (e.g. closely spaced street trees and a continuous hedge) to screen the proposed surface parking lot. The increase in setback, the reduction in height and additional landscaping will assist in enhancing the green corridor along Old Georgetown Road as required in the Bethesda Chevy-Chase Master Plan.

Development Standards for the Proposed Parking Garage

The proposed parking garage does not meet the development standards, and it requires a variance from the required setback from Old Georgetown Road because of the height of the structure. The proposed variance from the development standards for the setback and building height of the proposed parking garage is not needed. The site is rectangular with a limited amount of slope. The exceptional narrowness, shape, topographic conditions, or other extraordinary situations or conditions peculiar to this site do not result in peculiar or unusual practical difficulties for the hospital.

The phasing plan for the garage proposes to keep the existing garage open during construction. This phasing plan requires the construction of an addition to the garage that exceeds the setback requirements and the allowed building height for the special exception.

If a new garage is needed at this location, the existing garage could be removed, a temporary replacement of the existing parking spaces could be constructed, and a new garage that meets the setback requirements could be provided. This recommendation has the benefit of the following:

- Improves the opportunity to enhance the “green corridor” along Old Georgetown Road as required in the Master Plan
- Provides a more efficient garage with a more gradual slope for the interior ramps
- Reduces the height of the garage by a minimum of 2-3 stories
- Provides approximately the same amount of parking spaces
- Eliminates the need for a variance

Site Plan Review

Because of the disparity in the bulk and scale, Site Plan Review is recommended for this project as permitted Section 59-G-1.22 of the Zoning Ordinance. The Site Plan should include a phasing plan that includes any temporary parking and driveways.

CONCLUSION

The proposed special exception is not consistent with the design guidelines in the Master Plan, the setback should be increased and the building height should be reduced by 2-3 levels, and at least three of the houses located along Grant Street and Southwick Street should be retained.

g: carter/Suburban Hospital



ATTACHMENT 14

MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

MEMORANDUM

Date: July 28, 2008

To: Renée Miller,
Development Review Division

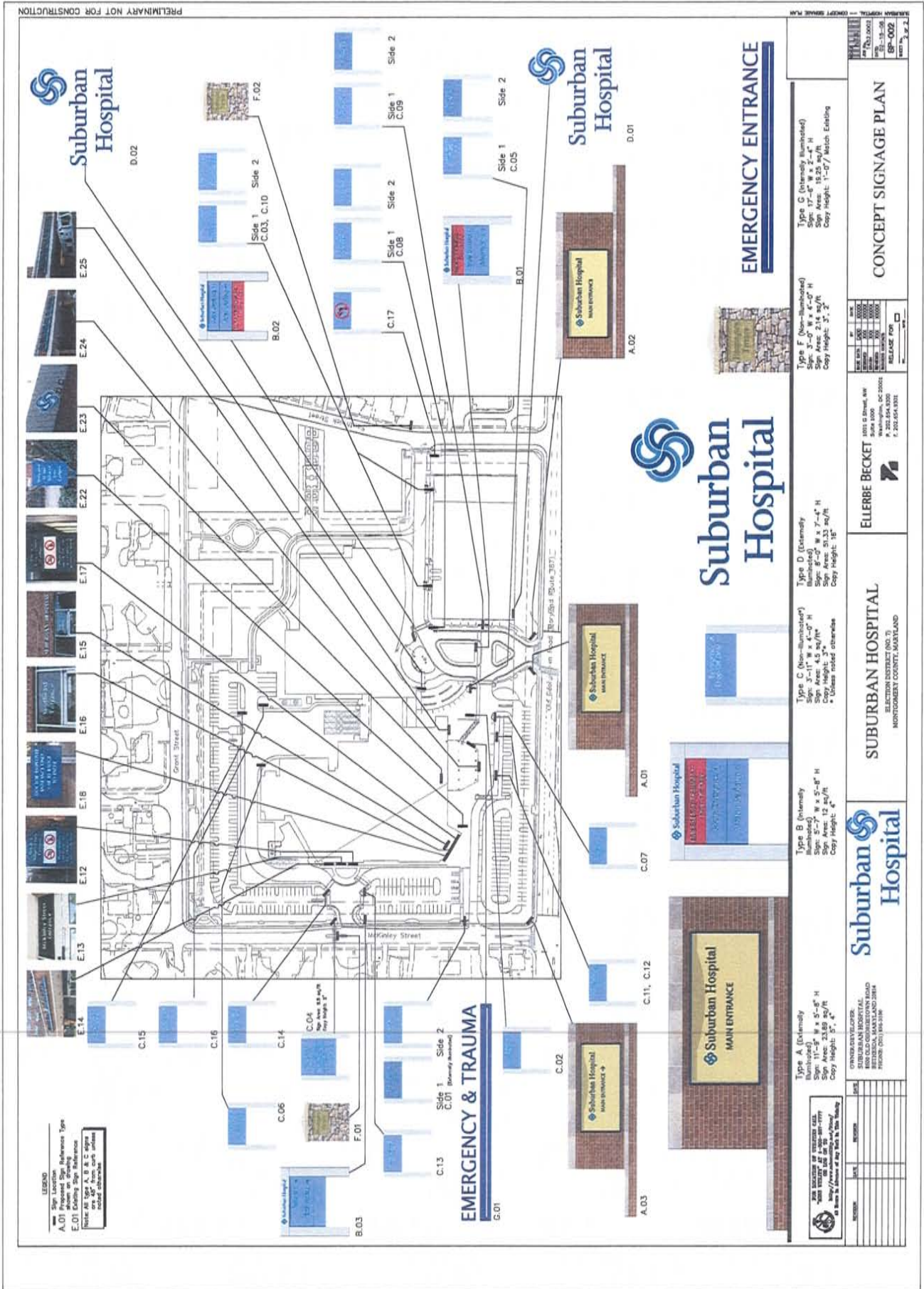
From: Neil Braunstein, ^{MB}Planner Coordinator
Development Review Division

Subject: Board of Appeals Petition No. S-274D

The subject property consists of several recorded lots and parts of lots in the R-60 zone. The lots and parts of lots are proposed to be consolidated into a single new lot, and portion of a public street right-of-way is proposed to be abandoned. Pursuant to Chapter 50-20, the property as identified in Board of Appeals Petition No. S-274D will be subject to preliminary plan review and subsequent recording of a plat in the Montgomery County Land Records Office in compliance with Chapter 50 of the Montgomery County Code.

Preliminary plan review and plat recordation are required prior to issuance of a building permit.

ATTACHMENT 15



LEGEND
 Sign Location
 A.01 Proposed Sign Reference Type
 E.01 Existing Sign Reference
 Note: All Type A, B & C signs are 10' from curb unless noted otherwise.

OWNER REVIEW COPY
 SUBURBAN HOSPITAL
 800 OLD QUINCY DRIVE
 FORT BELLEVILLE, IL 62239
 PHONE: (314) 346-3300

DATE: _____
REVISION: _____

TYPE A (Externally Illuminated)
 Sign: 11'-0" W x 5'-0" H
 Sign Area: 23.89 sq/ft
 Copy Height: 5', 4"

TYPE B (Internally Illuminated)
 Sign: 5'-0" W x 5'-0" H
 Sign Area: 12 sq/ft
 Copy Height: 4'

TYPE C (Non-Illuminated)
 Sign: 3'-11" W x 4'-0" H
 Sign Area: 3.76 sq/ft
 Copy Height: 3'
 • Unless noted otherwise

TYPE D (Externally Illuminated)
 Sign: 8'-0" W x 7'-4" H
 Sign Area: 51.33 sq/ft
 Copy Height: 15'

TYPE E (Non-Illuminated)
 Sign: 3'-0" W x 4'-0" H
 Sign Area: 12 sq/ft
 Copy Height: 3'

TYPE F (Internally Illuminated)
 Sign: 17'-0" W x 5'-0" H
 Sign Area: 51.33 sq/ft
 Copy Height: 11'-0" / Match Existing

CONCEPT SIGNAGE PLAN

ELLERBE BECKETT
 1015 G Street, NW
 Suite 1000
 Washington, DC 20002
 P: 202.654.1001

Suburban Hospital
 MONTGOMERY COUNTY, MARYLAND

Suburban Hospital
 1015 G Street, NW
 Suite 1000
 Washington, DC 20002
 P: 202.654.1001

Suburban Hospital
 1015 G Street, NW
 Suite 1000
 Washington, DC 20002
 P: 202.654.1001

PRELIMINARY NOT FOR CONSTRUCTION

ATTACHMENT 16

REVISION	DATE	REVISION	DATE

OWNER/DEVELOPER:
 SUBURBAN HOSPITAL
 8800 OLD GREENBERRY ROAD
 BERTHLETON, MARYLAND 20814
 PHONE: (301) 996-3100



SUBURBAN HOSPITAL
 DISTRICT DISTRICT NO. 7
 MONTGOMERY COUNTY, MARYLAND

ELERBE BECKETT 1001 G Street, NW
 Suite 1000
 Washington, DC 20001
 F: 202-634-9300

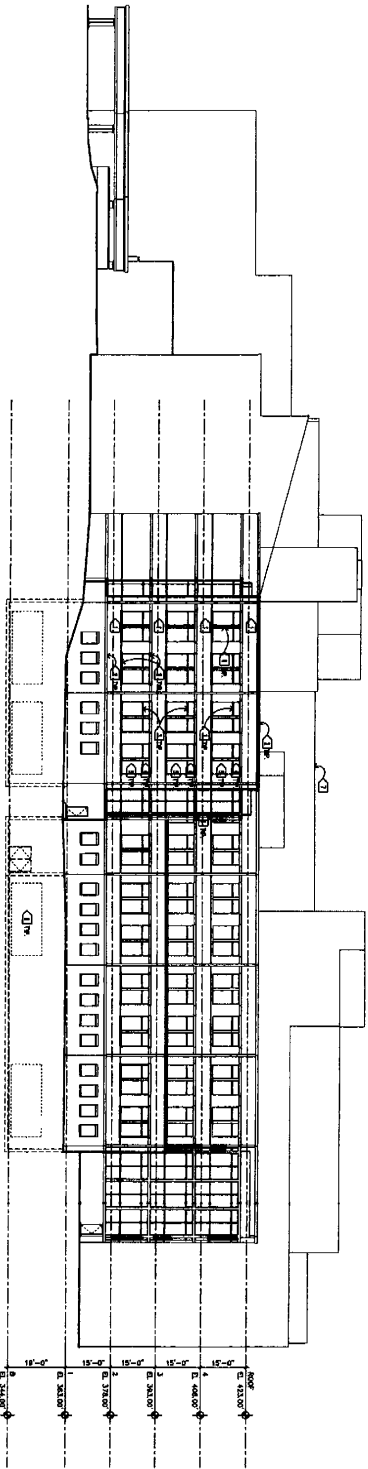
DATE	BY	CHK	DATE

RELEASE FOR

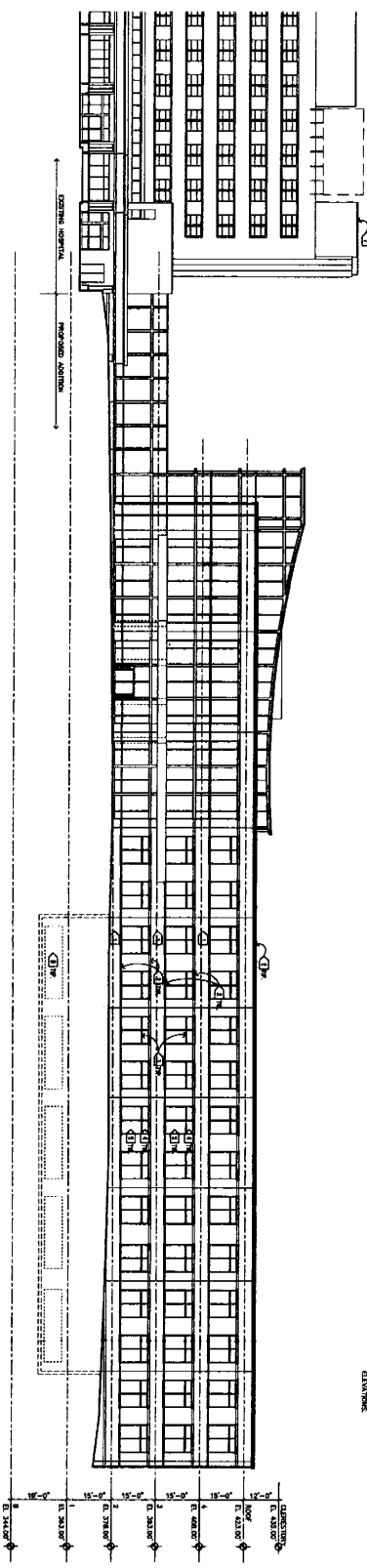
EXTERIOR ELEVATIONS
HOSPITAL

DATE: 03-21-08
 DRAWN BY: A-301

NORTH ELEVATION

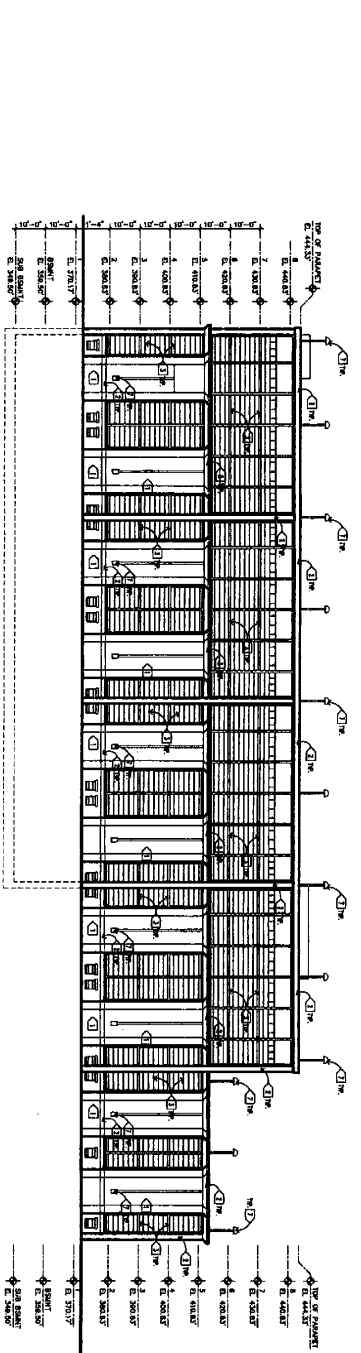


EAST ELEVATION

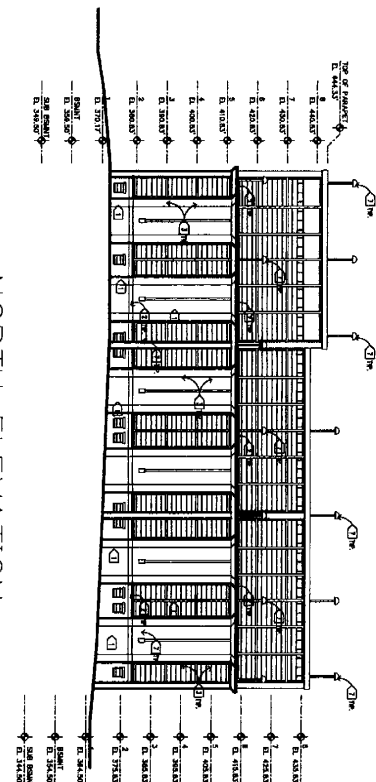


- LEGEND
- ROOF
 - ARCHITECTURAL FINISH
 - ALUMINUM FRAME
 - WINDOW GLASS
 - SHOWN GLASS
 - METAL PANEL
 - CERAMIC TILE
 - ALUMINUM LOUVER

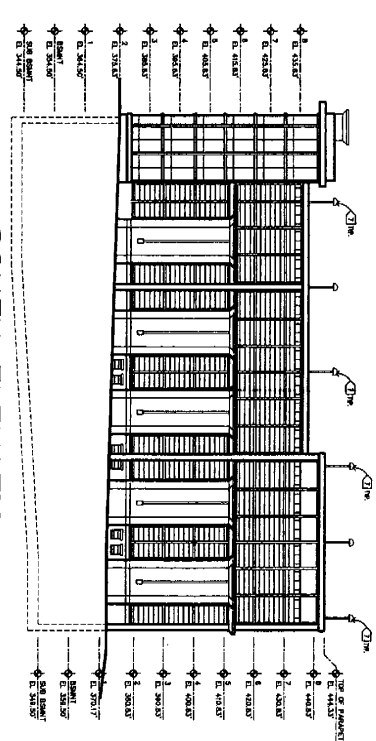
NOTE: SEE CIVIL DWG FOR SHADE ELEVATIONS



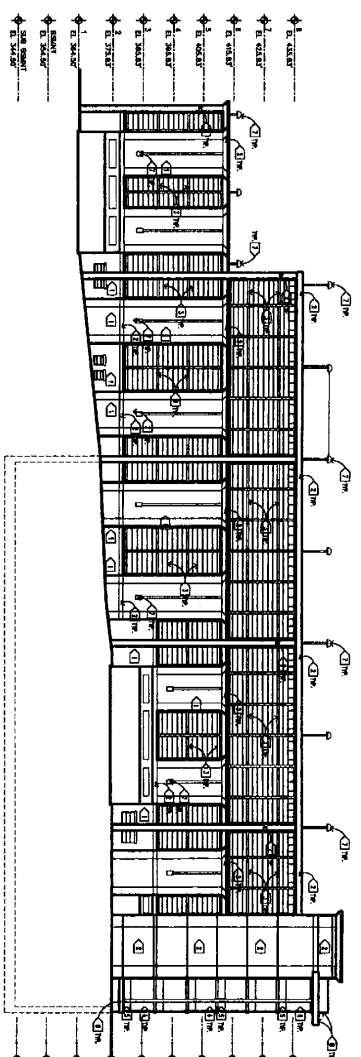
EAST ELEVATION



NORTH ELEVATION

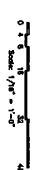


SOUTH ELEVATION



WEST ELEVATION

- KEYNOTE LEGEND
- ① BRICK
 - ② ALUMINUM PANEL/POSSIBLE
 - ③ GLASS
 - ④ SPANNELED GLASS
 - ⑤ METAL PANEL
 - ⑥ LIGHT FIXTURE (SEE DETAILS)
 - ⑦ LIGHT FIXTURE (SEE DETAILS)
- NOTE: SEE OTHER SHEETS FOR DETAILS



NO.	DATE	REVISION

OWNER/DESIGNER:
 AL
 8600 OLD GERRYSTOWN ROAD
 BETHESDA, MARYLAND 20814
 PHONE: (301) 755-9100

Suburban Hospital

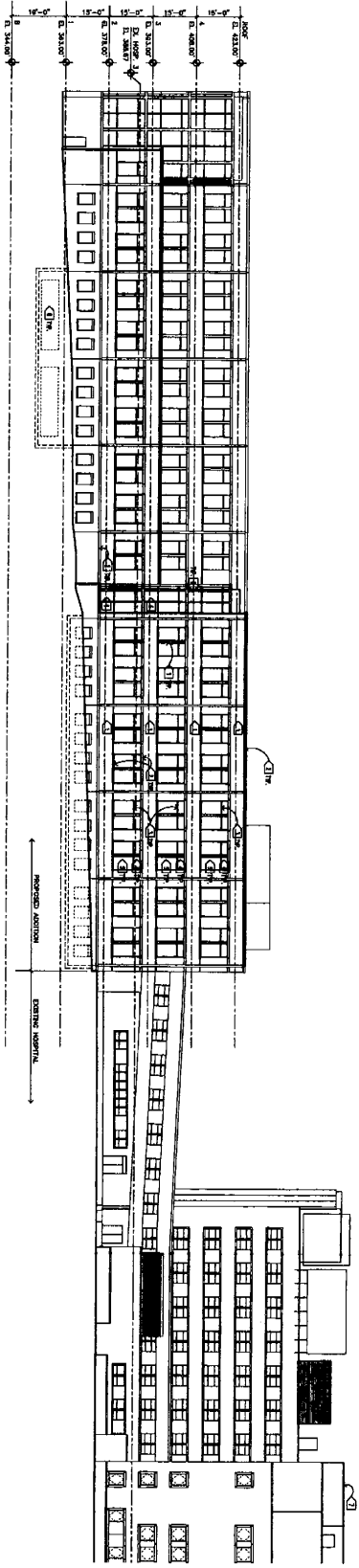
SUBURBAN HOSPITAL
 ELECTION DISTRICT NO. 7
 MONTGOMERY COUNTY, MARYLAND

ELLENBE BECKET
 1001 G Street, NW
 Suite 6000, DC 20001
 P: 202.654.3800
 F: 202.654.3881

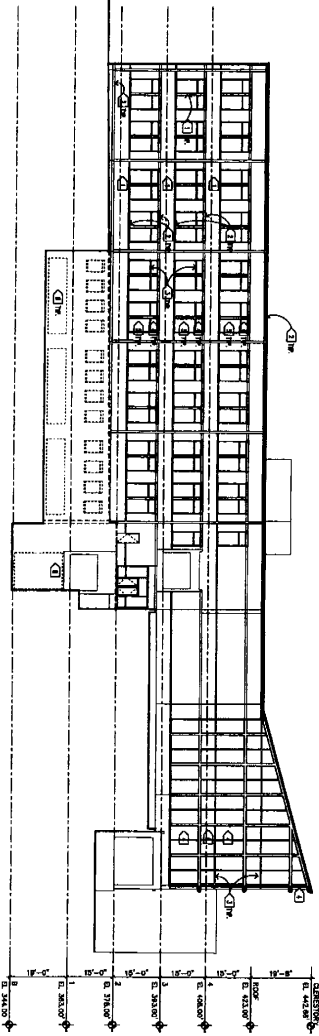
NO.	DATE	REVISION

EXTERIOR ELEVATIONS
 PARKING GARAGE

DATE: 1/15/11
 NO: 10320001
 NO: 10-11-08
 A-303



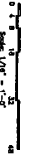
WEST ELEVATION



SOUTH ELEVATION

- KEYNOTE LEGEND
- SHIM
 - ARCHITECTURAL FINISH
 - ALUMINUM FRAME
 - VISION GLASS
 - SPANDREL GLASS
 - METAL PANEL
 - EXISTING HOSPITAL
 - ALUMINUM LOUVER

NOTE: SEE CIVIL DWGS FOR SLIDE ELEVATION



NO.	DATE	REVISION

OWNER/DEVELOPER:
Suburban Hospital
 SUBURBAN HOSPITAL
 3001 G STREET, NW
 WASHINGTON, DC 20001
 PHONE: (202) 854-5300

Suburban Hospital

SUBURBAN HOSPITAL
 ELECTION DISTRICT NO. 7
 MONTGOMERY COUNTY, MARYLAND

ELLERBE BECKETT 1001 G STREET, NW
 WASHINGTON, DC 20001
 P: 202 634 3300
 F: 202 634 3301

NO.	DATE	REVISION

EXTERIOR ELEVATIONS
 HOSPITAL

DATE: 05-21-98
 DRAWN BY: A-502

SUBURBAN HOSPITAL - EXTERIOR ELEVATIONS - HOSPITAL