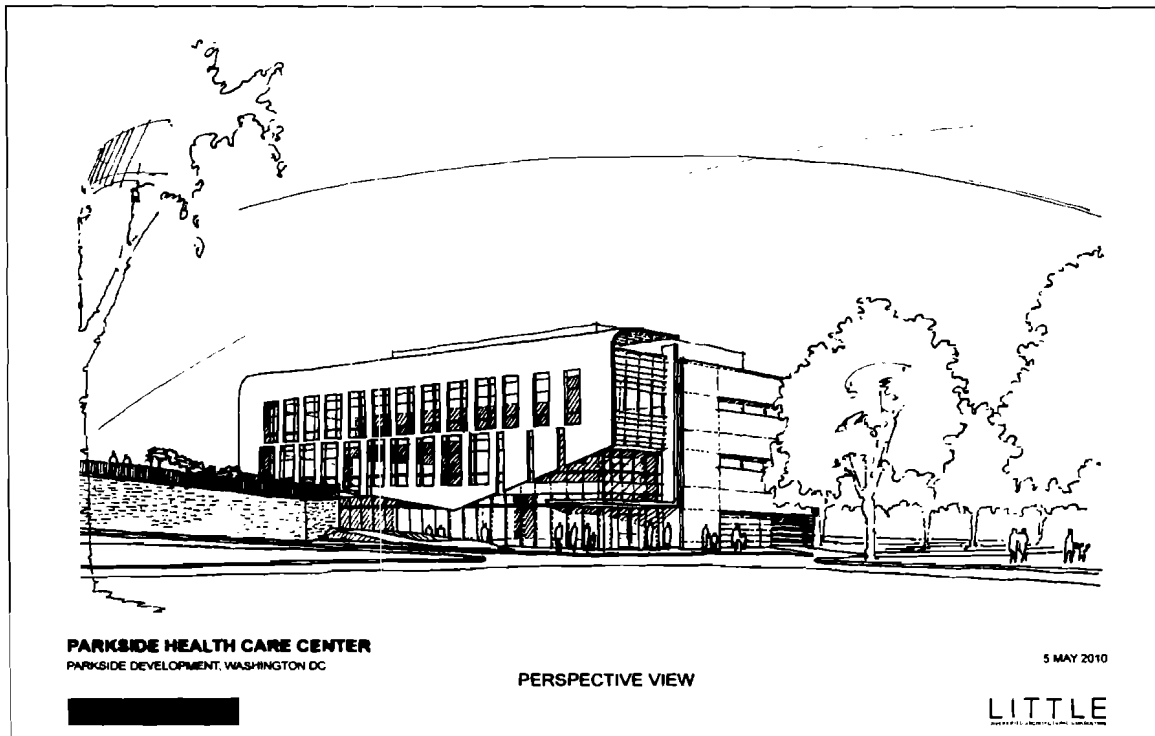


**DISTRICT OF COLUMBIA PRIMARY CARE ASSOCIATION
MAY 10, 2010**



PARKSIDE HEALTH CARE CENTER

**APPLICATION TO THE
DISTRICT OF COLUMBIA ZONING COMMISSION
FOR REVIEW AND APPROVAL OF A
SECOND STAGE PLANNED UNIT DEVELOPMENT,
ZONING MAP AMENDMENT AND
A MODIFICATION TO THE FIRST STAGE PUD (Z.C. CASE NO. 05-28)**

**ZONING COMMISSION
District of Columbia**

CASE NO. 05-2813
EXHIBIT NO. 4

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DEVELOPMENT TEAM

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PREFACE

This statement of DC Primary Care Association (“**DCPCA**”, “**Applicant**”), is in support of an application for the Second Stage review and approval of a Planned Unit Development (“**PUD**”) and corresponding map amendment to the District of Columbia Zoning Map for property located in Square 5055, Lots 25 and 801 and portions of Lots 24 and 802 (“**Project Site**”) in the Parkside neighborhood of Northeast, Ward 7. This application will also make a minor modification to the approved First Stage PUD for the Project Site and to authorize temporary use of the adjacent property as a surface parking lot (Lot 23 and part of Lots 22, 24, 802 and 803)(“**Temporary Parking Area**”). This Second Stage PUD proposes to develop the Project Site with the Parkside Health Care Center (“**Parkside Health Care Center**”).

The Project Site was the subject of Zoning Commission Case No. 05-28, for the First Stage PUD, which defined the Parkside PUD area (“**PUD Site**”) and consists of approximately 15.5 acres of land. The First Stage PUD became effective on April 13, 2007 pursuant to Zoning Commission Order No. 05-28. (Exhibit B). The Project Site, which is currently zoned C-2-B, is located in the southeast corner of the PUD Site and is bounded by Kenilworth Terrace to the north, Hayes Street to the east, Kenilworth Avenue to the south and on the west to a depth of 90 feet running west of Hayes Street. (Zoning Map, Exhibit A).

In Zoning Commission Case No. 05-28A, a Second Stage PUD and Amendment to the Zoning Map for Parkside Homes LLC and Parkside Senior Housing LLC was approved to develop a senior living facility and single-family townhomes in the northwest corner of the PUD Site pursuant to Zoning Commission Order No. 05-28A1, effective on October 3, 2008. (Exhibit C). This approved development consists of approximately 3.79 acres (165,000 sq. ft.) of the entire 15.5 acres PUD Site.

The Applicant is requesting Second Stage review and approval of the Parkside Health Care Center in the lower southeast corner of the PUD Site, confirmation of previously approved map amendment from C-2-B to C-3-A and a minor modification to the First Stage PUD. Since the First Stage PUD contemplated this southeast corner (referred to as Block I) would be developed for a residential use, the Applicant requests a minor modification to the approved First Stage PUD to allow for the Parkside Health Care Center, a non-residential use and the adjacent Temporary Parking Area. This Project Site will consist of approximately 0.46 acres (20,029 sq. ft.) of the 15.5 acres PUD Site. The adjacent Temporary Parking Area will consist of 0.56 acres (24,240 sq. ft.)

I. INTRODUCTION

A. Summary of Requested Action

1. Review and Approval of Second Stage PUD

This Second Stage PUD proposes to develop the Project Site with the Parkside Health Care Center, a three-story building with specific areas for walk-in care services, family practice, dental services, women and infant health care, wellness and associated lab, pharmacy, reception and patient waiting areas.

2. Zoning Map Amendment

The Applicant requests confirmation of a map amendment from C-2-B to C-3-A which was previously approved as part of the First Stage PUD, but requires the Applicant to submit the application for rezoning as part of the Second Stage PUD approval.

3. Modification to Approved First Stage Approval

Since the approved First Stage PUD contemplated this Project Site would be developed for a residential use, the Applicant requests a minor modification to the approved First

Stage PUD for the Property to allow for the Parkside Health Care Center, a non-residential use, and the Temporary Parking Area.

B. Current Owner and Applicant

1. Lano Parcel 12 LLC

Lano Parcel 12 LLC (“**Owner**” or “**Seller**”), a Delaware limited liability company owns the property which is the subject of this application, including the Project Site and Temporary Parking Area. The Owner and DC Primary Care Association (“**DCPCA**”, “**Applicant**” or “**Purchaser**”) entered into an Agreement of Purchase and Sale, as amended, for the Project Site with a closing contingent upon a Second Stage PUD Approval. In addition, the Applicant will enter into an easement with Owner so that DCPCA will be allowed to use the Temporary Parking Area for temporary vehicular parking.

2. District of Columbia Primary Care Association

DCPCA intends to develop the Property as a new location for a community health care center for Unity Health Care, Inc. (the “**Project**”). DCPCA is a District of Columbia nonprofit health care reform organization founded in 1998 to improve the health of DC's most vulnerable residents by ensuring that they receive high quality primary health care regardless of their ability to pay. DCPCA represents 14 primary care providers at 58 sites across the District, including Unity Health Care, Inc. (“**Unity**”). Unity will be the owner/operator of the Parkside Health Care Center. Since 2005, DCPCA has received \$70 Million in capital funds from DC’s Department of Health to expand and improve access to primary health care services in Washington, DC, including in Ward 7. In conjunction with that effort, Unity was awarded \$12 Million through the American Recovery and Reinvestment Act which will pay for a portion of the costs associated with the construction of a new health care center in Ward 8 and the renovation of an existing center in Ward 1. DCPCA is developing the Ward 8 health care center

for Unity at 1500-1510 Galen Street, S.E, which received DC Board of Zoning Adjustment Approval for the project in September 2009 (BZA Order No. 179544).¹

3. Unity Health Care, Inc.

Unity is a non-profit organization that since 1985 (then under the name of Health Care for the Homeless) has been dedicated to serving Washington, DC residents in need of a range of critical health care services. Unity offers a citywide network of quality health and human services to the medically underserved regardless of race, ethnic background or ability to pay. In 1996, the organization expanded when it became the Federal government's emergency grantee for the Community Health Center Program. In 1997, it adopted the name Unity Health Care, Inc. As a Federally Qualified Health Center, Unity receives cost-based reimbursement from Medicare and other programs, drug discounts, and the ability to recruit health care providers from the National Health Service Corp., among other benefits. In June 2001, Unity joined the DC Healthcare Alliance, a collaborative of various local health care providers that provide wrap-around services to those most in need in the District of Columbia. Unity's mission is "to offer a citywide network of quality health and human services to the medically underserved, regardless of race, ethnic background, or ability to pay." Unity works to empower its clients to better their lives. They advocate for social change and resource allocation to help those in society who have become marginalized. To respond to the needs of the communities they serve, Unity offers homeless care and outreach, a network of community health centers, comprehensive health care services in District of Columbia correctional facilities, and specialized services for school-age children and their families, clients undergoing substance

¹ That matter-of-right project has a total gross floor area and cellar area of approximately 29,287 and the applicant received a special exception to reduce the amount of required off-street parking to seventy-eight (78), a reduction of twenty-one (21) spaces as well as a rear yard variance.

abuse treatment, persons with HIV/AIDS, and individuals recently released from jails and prisons.

Unity's target population is racially and ethnically diverse and largely minority and includes many recent immigrants and refugees who traditionally have difficulty communicating with health care providers. In response, Unity offers linguistically and culturally sensitive services through properly trained staff prepared to deal with problems that can impede access to health care services. While language continues to be a major factor, a translation service and clinical staff members fluent in Spanish, Vietnamese, Chinese, and Amharic help to bridge this barrier. To meet the language needs of other immigrants, all Unity providers can access the medical language line from their exam room to provide for any interpretation needs of the clients.

Unity understands that its patients have needs that may act as barriers to care if patients are not assisted in addressing these concerns. Unity social workers and case managers work with patients regarding their medical problems, immigration concerns, lack of food, clothing, shelter, transportation and financial resources, unemployment, family emergencies and substance abuse. Unity's social services staff is trained to assess and address social and mental health needs, and monitor progress. Unity is Washington, DC's largest non profit health care and social service organization serving more than 81,000 individuals and families annually. Unity operates medical homes in all eight wards of DC serving the most vulnerable residents of the District and currently operates thirteen health care centers throughout the District.²

C. Project Goals and Objectives and Benefits of Using the PUD Process

This PUD will achieve the goals of the PUD process by providing high quality development on the Project Site with significant public benefits to the neighborhood and the

² Anacostia, Brentwood Square, Congress Heights, Unity @ DC General, East of the River, Good Hope, Hunt Place, Re-Entry, Southwest, Stanton Road, Upper Cardoza, Walker-Jones and Woodridge.

District as a whole. The proposed Parkside Health Care Center will help the District's effort to ensure that high quality, affordable primary health centers are available and accessible to all District residents. The Project will infill currently vacant land which will further the District's goal of promoting transit oriented development as the site is proximately located to the Minnesota Avenue Metrorail Station. The Applicant requests a minor modification of the First Stage PUD since the approved plans for the Project Site anticipated a residential use and not a community health care center, a non-residential use, at the corner of Kenilworth and Hayes Streets. Additionally, the Applicant requests a minor modification for the Temporary Parking Area.

The PUD process is the appropriate means of making this happen in that it gives the community and District agencies the tools to ensure that the Project is well-designed and best meets the needs of the community while making sure the density is appropriate to the surrounding neighborhood.

D. Development Timetable

The Applicant intends to start construction by June 1, 2011 and expects the construction will be completed by December 31, 2012.

II. THE PROJECT SITE

A. Site Location

The Project Site is composed of approximately 0.46 acres of vacant land (approximately 20,029 square feet) and Temporary Parking Area of 0.56 acres (24,240 sq. ft.) within the larger (approximately 15.5 acres) approved First Stage PUD Site. This area is north of the intersection of Minnesota Avenue and Benning Road and across Kenilworth Avenue from the Minnesota Avenue Metrorail Station. The Property is located in the Parkside neighborhood of Ward 7, east of the Anacostia River. The Project Site, which is currently zoned C-2-B, is located in the

southeast corner of the PUD Site and is bounded by Kenilworth Terrace to the north, Hayes Street to the east, Kenilworth Avenue to the south and on the west to a depth of 90 feet running west of Hayes Street. The Temporary Parking Area is also currently zoned C-2-B.

B. Project Description

The Applicant proposes to construct a three-story health care center with specific areas for walk-in care services, family practice, dental services, women and infant health care, wellness and associated lab, pharmacy, reception and patient waiting areas. (Plans, Exhibit D). The service areas are modeled to meet federal funding requirements. The main entrance to the Parkside Health Care Center will have a Kenilworth Terrace address and is located on the corner of Kenilworth Terrace and Hayes Street, NE. There is pedestrian access to the site by means of an existing pedestrian bridge which connects the neighborhood with the Minnesota Avenue Metrorail Station located directly across interstate 295.

The pedestrian bridge crosses I-295 and Kenilworth Avenue and pedestrians exit the bridge along the north side of Kenilworth Avenue. Due to the ramp switchback configuration, the ramp deposits pedestrians facing Kenilworth Avenue at the south end of the project site instead of facing the proposed entrance of the Parkside Health Care Center at the corner of Kenilworth Terrace and Hayes Streets. (Photos, Exhibit E). To create a more inviting pedestrian experience, the building footprint along the Hayes Street side will be held back from the property line to allow for a more generous sidewalk leading from the existing pedestrian ramp to the main entrance of the Health Care Center at the corner of Kenilworth Terrace and Hayes Street. (Plans – ASK 055, Exhibit D).

The primary vehicular entrance will be from Kenilworth Terrace to an at grade internal parking area (12 spaces) within the Parkside Health Care Center. This same curb cut will allow entrance to a temporary adjacent secured surface parking lot (73 spaces). The Applicant will

enter into an easement with Owner so that DCPCA will be allowed to use this adjacent property, Lot 23 and portions of Lots 22, 24, 802 and 803 in Square 5055 for temporary vehicular parking. This Temporary Parking Area will be replaced by a new building in the future which will provide interior parking to DCPCA as part of the site development. The Applicant's project will include a total of eighty-five (85) off-street parking spaces (12 spaces on-site and 73 off-site in the Temporary Parking Area). (Plans, Exhibit D).

The First Stage PUD approved rezoning the location in which the Applicant proposes to develop the Health Care Center and use the Temporary Parking Area from C-2-B to C-3-A. The C-3-A Zone permits a maximum non-residential FAR of 2.5 and a maximum building height of 65 feet and unlimited stories. A PUD in the C-3-A Zone permits a maximum non-residential FAR of 3.0 and a maximum building height of 90 feet and unlimited stories. The Project Site contains approximately 20,029 square feet of land. The C-3-A Zone allows approximately 50,073 square feet of gross floor area of non-residential development rights available for the Project Site as a matter-of-right and 60,087 gross square feet with a PUD. The maximum lot occupancy for a non-residential building would be 20,029 square feet (100% of 20,029 square feet). The Applicant's proposal meets these requirements with a 2.19 FAR (43,784 square feet), height of 42 feet/three-stories and lot occupancy of 18,164 square feet (90.69%).

In the C-3-A Zone, a rear yard of 2.5 inches per foot of vertical height, but not less than 12 ft. is required. In this case of a through lot abutting three or more streets, the required 12 foot rear yard can be measured from the rear of the building to the centerline of Kenilworth Avenue. The width of Kenilworth Ave is 26 feet measured between the curbs. The curb is 10 feet from the property line. So the measurement from the center of the street to the property line is half of the street width (13 feet) plus the distance from the curb to the property line (10 feet) which is a total of 23 feet. The Health Care Center has been set back 10 feet from the south property line.

Therefore, the total rear yard from the centerline of the street to the building is 33 feet which greatly exceeds the minimum rear yard required.

No side yard is required in the C-3-A Zone, however if one is provided it must be at least 2 inches wide for each foot in height of the building, but not less than 6 feet. The building height of approximately 42 feet would require a side yard setback of seven (7) feet. A side yard of less than seven feet is proposed (4 ft. 4 inches) along the Hayes Street façade in order to allow better circulation space between the Health Care Center and the existing pedestrian ramp. Therefore, zoning relief will be needed.

In the C-3-A Zone, the off-street parking requirement for a medical clinic use is based on twice the amount of spaces required for a general office building. Office buildings require one space per every 600 sq. ft. over 2,000 sq. ft. of gross floor area and cellar floor area. Based on the total gross floor area and cellar floor area proposed of 34,230 square feet³, a total of one hundred and eight (108) off-street parking spaces are required.

However, under Section 2104.1 of the D.C. Zoning Regulations, a matter-of-right health care center at this site would be eligible for a parking reduction due to the proposed building's location of less than eight hundred feet (800 ft.) from a Metrorail Station entrance.⁴ The number of parking spaces required would be seventy-five percent (75%) of the one hundred and eight (108) normally required, resulting in a reduction of twenty-seven (27) spaces yielding a requirement of eighty-one parking spaces (81). As part of the PUD application, the Applicant proposes eight-five (85) spaces, twelve (12) enclosed in the building on the Project Site and seventy-three (73) in an immediately adjacent temporary surface parking lot. The Applicant, with

³ This total gross floor area calculation excludes the parking gross floor area.

⁴ The distance between the Metrorail station entrance and the boundary of the Project Site along the pedestrian bridge is approximately 650 feet.

eighty-five (85) proposed parking spaces, will need to seek zoning relief since only twelve (12) of the parking spaces are located on-site.

The Applicant needs the proposed 85 spaces in order to ensure the absolute minimum level of parking, not just for patients, but for the Health Care Center's doctors and staff. The Applicant has met several times with the District's Department of Transportation and Office of Planning about this. Even with the nearby Minnesota Avenue Metrorail Station, any further reduction in parking would fall below the minimum operational needs of the facility and increase demand for on-street parking. Significantly, the First Stage PUD, which approved residential and office use in Blocks G, H, and I (Block I is the subject of this Application), expected approximately 1,400 parking spaces to be provided for these uses. (Exhibit B, Findings of Fact No. 26).

The Applicant's paramount concern, about a further reduction in parking spaces, is safety for its staff and patients. This is a transitioning neighborhood and to attract the doctors and staff needed to work at this much needed Health Care Center, a minimum of 85 parking spaces are needed. Many shifts for the employees will require arriving very early in the morning and leaving very late at night. For employee safety, the Applicant strongly believes that this minimum level is needed, regardless of its close proximity to the Minnesota Avenue Metrorail Station. Based on experience from its other health care facilities, sick and injured patients are less likely to be able or willing to use public transportation. In addition, the seventy three (73) parking spaces on the adjacent surface lot are only temporary. The Applicant will be entering into a easement agreement to use this area until such time this adjacent site is developed. During the construction of the adjacent site the Applicant will be left with only twelve (12) parking spaces on-site and will need to find additional parking nearby.

The Applicant acknowledges the importance and benefits of transit-oriented design and will offer employees incentives for taking public transportation, such as the WMATA SmartBenefits for transit, resulting in a pre-tax salary deductions for Metro rail/bus expenses as outlined in the Transportation Management Plan (“TMP”) in the attached Traffic Impact Study. (Exhibit F).

According to the Section 2119.2 of the Zoning Regulations, the number of bicycle spaces provided shall be at least equal to five percent (5%) of the number of automobile parking spaces required. Since the Applicant is required to have eighty-one (81) parking spaces then four (4) bicycle parking spaces are needed. The Applicant proposes a total of fourteen (14) bicycle parking spaces, ten (10) in the enclosed parking lot and four (4) located outside near the entrance of the Health Care Center. (See Plans, Exhibit D).

C. Tabulation of Development Data

Site Area: 20,029 gross square feet

Requirement	C-3-A Matter of Right Guidelines	C-3-A PUD Guidelines	Project Design	Variance
FAR	2.5 max (50,073 gsf) (Non-Residential)	3.0 max (60,087 gsf) (Non-Residential)	2.19 (43,784 gsf)	---
Building Height	65 feet max/unlimited stories	90 feet max/unlimited stories	3 stories (42 ft)	---
Lot Occupancy	100% (Non-Residential)	100% (Non-Residential)	90.69%	---
Gross Floor Area	2.5x20,029= 50,073 gsf	3.0x20,029= 60,087 gsf	43,784 gsf	---
Rear Yard	2.5 inches per foot of vertical distance, but not less than 12 ft. Measured from centerline of the street abutting the rear yard (Kenilworth Avenue)	2.5 inches per foot of vertical distance, but not less than 12 ft. Measured from centerline of the street abutting the rear yard (Kenilworth Avenue)	33 ft	---

Requirement	C-3-A Matter of Right Guidelines	C-3-A PUD Guidelines	Project Design	Variance
Side Yard	Not required, but if provided, shall be at least 2 inches per foot of height, but not less than 6 feet. 7 ft. required	Not required, but if provided, shall be at least 2 inches per foot of height, but not less than 6 feet. 7 ft required	4 ft 4"	1 ft 8"
Parking	<u>Office</u> In excess of 2,000 sq. ft. one for each additional 600 sq. ft. of gross floor area and cellar floor area. (excluding gfa for parking) $\frac{34,230-2,000}{600} = 53.72$ (54) <u>Medical Office, Clinic</u> Twice the number of spaces required for since space devoted to medical use is 25% or more of the gross floor area and cellar floor area $54 \times 2 = 108$ Reduction of 25% of required parking if nonresidential building is within 800 ft of a Metrorail Entrance 81 required spaces	<u>Office</u> In excess of 2,000 sq. ft. one for each additional 600 sq. ft. of gross floor area and cellar floor area (excluding gfa for parking) $\frac{34,230-2,000}{600} = 53.72$ (54) <u>Medical Office, Clinic</u> Twice the number of spaces required for since space devoted to medical use is 25% or more of the gross floor area and cellar floor area $54 \times 2 = 108$ Reduction of 25% of required parking if nonresidential building is within 800 ft of a Metrorail Entrance 81 required spaces	12 on-site (12 enclosed spaces on-site and 73 secured spaces on temporary adjacent surface parking lot)	69 spaces
Bicycle	Number of bicycle spaces shall be at least equal to 5% of the number of auto parking spaces required $5\% \text{ of } 81 = 4$	Number of bicycle spaces shall be at least equal to 5% of the number of auto parking spaces required $5\% \text{ of } 81 = 4$	14 (10 in enclosed on-site parking area and 4 outside near the main entrance)	
Loading	Min loading berth: 1 @ 30 ft. deep Min platform: 1 @ 100 ft. ² Min service/delivery space: 1 @ 20 ft. deep	Min loading berth: 1 @ 30 ft. deep Min platform: 1 @ 100 ft. ² Min service/delivery space: 1 @ 20 ft. deep	1 delivery service/delivery space @ 20 ft. deep	Min loading berth: 1 @ 30 ft. deep Min platform: 1 @ 100 ft.²

D. Conditions of First Stage PUD Approval

Approval of the First Stage PUD was conditioned on the following:

Condition No. 1: The Applicant shall submit, with the application for second-stage approval of the PUD, an application for rezoning the PUD site from R-5-A and C-2-B to C-3-A and CR that specifies the proposed rezoning by square and lot.

This Application: With this Second Stage PUD Application the Applicant is simultaneously filing a Zoning Map Amendment to change the following areas from C-2-B to C-3-A: 1) the Project Site, approximately 0.46 acres (20,029 sq. ft.) located in Square 5055, Lots 25 and 801 and portions of Lots 24 and 802, and 2) the adjacent Temporary Parking Area, approximately 0.56 acres (24,240 sq. ft.) located in Square 5055, Lot 23 and portions of Lots 22, 24, 802 and 803.

Condition No. 2: The first-stage PUD is approved in accordance with the plans and materials submitted by the Applicant marked as Exhibits 2, 21, and 52 of the record, as modified by the guidelines, conditions, and standards of this Order.

This Application: Since the approved First Stage PUD contemplated this Project Site would be developed for a residential use, the Applicant requests a minor modification to the First Stage PUD to allow for the Parkside Health Care Center, a non-residential use, and the Temporary Parking Area.

Condition No. 3: The second-stage design of the PUD shall be based on further development and refinement of the plans marked as Exhibits 2, 21, and 52 of the record, as modified by the guidelines, conditions, and standards of this Order and shall include all public benefits described in Findings of Fact 32 through 34.

This Application: The Applicant proposes its own set of public benefits and amenities as described in more detail herein.

Condition No. 4: In accordance with the plans and materials noted above, the approved PUD shall consist of approximately 1,500–2,000 dwelling units, 500,000–750,000 square feet of office space, 30,000–50,000 square feet of retail, with approximately 2,400 total parking spaces. The entire project will include approximately 3,003,000 square feet of gross floor area resulting in an overall density of approximately 4.44 FAR. The total lot occupancy of the PUD will be approximately 62.4 percent. The maximum height of the PUD will be 110 feet, which will be reserved solely for the buildings located in the center portion of Parcel 12 fronting Kenilworth Avenue. The heights for the remaining buildings shall not exceed 90 feet and must scale down to lesser heights around the existing townhomes, as depicted in the Applicant’s plans.

This Application: Not Applicable to this Application.

Condition No. 5: If the Applicant cannot secure a lead tenant for the office use, it may use that portion of the development envelope for an additional 500,000–750,000 square feet of residential space.

This Application: Not Applicable to this Application.

Condition No. 6: The PUD will reserve 20 percent of the total residential component as units affordable to households having an income not exceeding 80 percent of Area Median Income for the Washington, DC Metropolitan Statistical Area (adjusted for family size). Those reserved as affordable rental units will remain affordable for at least 30 years; the affordability restriction for the affordable for-sale housing shall be consistent with the terms required by the public subsidy the homebuyer uses to provide gap financing.

This Application: Not Applicable to this Application.

Condition No. 7: The PUD will reserve 20 percent of the total residential component for workforce housing targeted to households that have an income between 80 and 120 percent of the Area Median Income for the Washington, D.C. Metropolitan Statistical Area (adjusted for family size).

This Application: Not Applicable to this Application.

Condition No. 8: The Applicant shall submit, as part of the second-stage application, landscape plans, detailed architectural plans, and elevations indicating the design treatment of each building.

This Application: The landscape plan, detailed architectural plans and elevations are attached as Exhibit D.

Condition No. 9: The Applicant shall submit, as part of a second-stage application, an analysis of the potential for providing access to the PUD Site from Benning Road.

This Application: Not Applicable to this Application. This information was submitted as part of Second Stage PUD for Zoning Case No. 05-28A.

Condition No. 10: The Applicant shall submit, as part of a second-stage application, a detailed traffic study that will (a) address the adequacy of pedestrian and vehicular access to the PUD Site, including an analysis of the DDOT recommendation with respect to pedestrian access; (b) address traffic conditions pertaining to Kenilworth Avenue, particularly in light of the transportation initiatives identified by DDOT as planned or underway in the vicinity, such as the Kenilworth Avenue Corridor study; and (c) analyze the traffic impacts of the PUD in light of other new developments and uses in the vicinity, such as the Cesar Chavez Public Charter School.

This Application: The Traffic Impact Study is attached as Exhibit F.

Condition No. 11: The Applicant shall submit, as part of a second-stage application, materials addressing (a) the design and anticipated use of the pedestrian retail plaza at the center of the PUD Site, including whether it should be open to slow-speed vehicular traffic, and (b) potential cooperation with Pepco to provide adequate landscaping to buffer the Pepco site from the PUD Site.

This Application: Not Applicable to this Application.

Condition No. 12: The Applicant shall specify, in its second-stage application, the period of affordability applicable to the for-sale affordable units.

This Application: Not Applicable to this Application.

Condition No. 13: The first-stage approval is valid for a period of one year, within which time a second-stage application shall be filed. If the second-stage application is for less than the entire development described in this Order, no subsequent second-stage application may be filed after three (3) years from date of approval of the partial second-stage. It is within the Zoning Commission's discretion to extend these periods.

This Application: The First Stage PUD Zoning Order No. 05-28 became effective on April 13, 2007. Within a year from that date, on November 16, 2007, a Second Stage PUD Zoning Case, No. 05-28A was filed for less than the entire development and became effective on October 3, 2008. This subsequent Second Stage PUD Application, the instant application, is being filed within three years from the partial second stage approval. Therefore, the Applicant is in compliance with this condition.

Condition No.14: Given the size of the PUD, the Applicant may file the second-stage application in phases for one or more of the buildings.

This Application: The Applicant is developing only one building on 0.46 acres (20,029 sq. ft.) of the entire 15.5 acre (675,180 sq. ft.) approved First Stage PUD.⁵ The Temporary Parking Area includes 0.56 acres (24,240 sq. ft.).

Condition No.15: In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Official Code §§ 2-1401.01 et seq. (the “Act”), the District of Columbia does not discriminate on the basis of actual or perceived: race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, or place of residence or business. Sexual harassment is a form of sex discrimination that is prohibited by the Act. In addition, harassment based on any of the above protected categories is prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action.

This Application: The Applicant will comply fully with the provisions of the Human Rights Act of 1977, D.C. Law 2038, as amended.

E. Flexibility under the PUD Guidelines

The PUD process was created to allow greater flexibility in planning and design than is possible under conventional zoning constraints. The PUD regulations specifically allow the Zoning Commission to approve any zoning relief that would otherwise require the approval of the Board of Zoning Adjustment (“BZA”). The Applicant is requesting relief from the strict application of the Zoning Regulations for: a) the number of off-street parking spaces, b) the number and size of loading berth and loading platform, c) the side yard requirement, and d) a request to use off-site parking.

⁵ The Approved Second Stage PUD (Z.C. Case No. 05-28A) consisted of 3.79 acres (165,000 sq. ft. of land).

III. PLANNING ANALYSIS

A. Introduction

Through the PUD process, the Applicant will develop a much needed three-story Health Care Center that will service all DC residents, but will have a focus on residents living east of the River. The rezoning of the Property will allow for an increase in FAR⁶ and the creation of a well-designed Health Care Center that will be transit-oriented in design.

1. Land Use Impact

The First Stage PUD referred to the area of the proposed Health Care Center as Block I and approved a maximum height of 90 feet for the then planned residential building fronting on Kenilworth Avenue. It was anticipated that the height of the residential property would scale down to as low as 44 feet at Kenilworth Terrace. (Exhibit B, Findings of Fact No. 26). In addition, Block I and adjacent blocks G and H were to include approximately 1,400 parking spaces for both residential units and an office space component. Instead, the Applicant intends to develop a Health Care Center, 42 feet in height with 12 on-site parking spaces. It will be an important transit oriented development and an essential social services benefit to the community. From a land use perspective, there will be no negative impact caused by this Project or the minor modification of the First Stage PUD to allow a non-residential building in place of a residential one.

2. Zoning Impact

The proposed Zoning Map Amendment for this Project Site from C-2-B to C-3-A was contemplated and approved as part of the First Stage PUD approval. Although the initial proposed use was residential at the site, the non-residential use as a health care center will not

⁶ A Non-Residential PUD in the C-2-B Zone, the current zoning for the Property, is allowed only 2.0 FAR.

adversely effect the zoning and the Applicant will not utilize all of the PUD increased development rights, including height and FAR.

3. Environmental Impact

The Parkside Health Care Center has been thoughtfully designed to prevent or minimize environmental impacts, including a green roof, stormwater management, energy conservation, transportation demand management and less intense development than permitted as a matter-of-right. In addition to preventing and minimizing future environmental impacts, this Project will remediate potential historic environmental hazards that were identified in Phase I and II Environmental Reports prepared for the Applicant. (Exhibit G).

4. Facilities and Traffic Impact

The Project will not have an adverse impact on the public facilities that it will rely on for service. The Property is approximately 650 feet to the Minnesota Avenue Metrorail Station, serving the Orange Line. The area is also served by several Metrobus routes. As shown in the Traffic Impact Study, Exhibit F, the proposed Parkside Health Care Center would have minimal impact on the surrounding roadway network.

a. Water Demand

The Project will contain 34,230 gross square feet of office space. The average daily water demand for this project can be met by the existing District water system. The proposed connection for the fire and water supply will be made within the existing distribution system and will be coordinated with the DC Water and Sewer Authority.

b. Sanitary Sewer Demand

The proposed connection for the sanitary sewer line will be made with the existing distribution system and will be coordinated with the DC Water and Sewer Authority.

c. Stormwater Management

The Applicant proposes an infiltration trench along Kenilworth Terrace, a storm filter at the entrance of the parking area, and a 5,178 square foot green roof along the Kenilworth Avenue or other approved equal best management practices in accordance with current District Department of Environment regulations. The Project Site will treat all stormwater for water quality before discharging the runoff to the existing storm drainage infrastructure. The stormwater management design is schematic in nature. Stormwater management provisions will be determined during the final design process.

d. Solid Waste Services

Solid waste and recycling materials generated by the Project will be collected one-time per week by a private trash collection contractor. Medical waste will also be collected regularly and disposed of in accordance with required procedures and safeguards.

e. Electrical Services

Electricity for the Health Care Center will be provided by the Potomac Electric Power Company (“PEPCO”) in accordance with its usual terms and conditions of service. All electrical systems will be designed to comply with the DC Energy Code. Transformers will be installed on the Project Site in accordance with PEPCO’s design guidelines. The Applicant will continue to work with PEPCO regarding the location of the vaults.

f. Energy Conservation

The Project will be constructed in full compliance with Article 24 (Energy Conservation) of the DC Building Code. Conformance to code standards will minimize the amounts of energy needed for the heat, ventilation, hot water, electrical distribution, and lighting systems contained in the building. The Health Care Center will also comply with the DC Green Building Act of 2006.

g. Erosion Control

During excavation and construction, erosion on the Property will be controlled in accordance with District of Columbia law and District Department of Environment Standards and Specifications.

IV. PUD EVALUATION STANDARDS

A. Public Benefits and Project Amenities

Section 2403.9 of the Zoning Regulations states that the PUD public benefits and project amenities of the Proposed PUD may be exhibited and documented in various categories, including the following:

1. Urban Design and Architecture

The Parkside Health Care Center is designed to be a good neighbor. Both its size and height are compatible with surrounding buildings. The scale of the openings in the façade recall similar openings in the residential buildings of the neighborhood.

The new structure respects the street edge, forming a strong corner at Kenilworth Terrace and Hayes Street. The prominent building entrance will be highly visible to traffic along Kenilworth Terrace which will act as the primary pedestrian and vehicular access to the site.

The exterior materials will be environmentally friendly and durable, their color and texture creating a strong link to the existing materials in the immediate neighborhood.

2. Site Planning

The proposed density of the Project is appropriate for the Property. The FAR (2.19) and a lot occupancy of 90.69% are well within the matter-of-right standards for the C-3-A District. The Project makes efficient use of the site by incorporating the existing pedestrian bridge into transit-oriented design. The PUD serves the broader community by constructing a much needed health care center on currently vacant land in the midst of its target population.

3. Effective and Safe Vehicular and Pedestrian Access, Transportation Management measures connections to public transit services, and other measures to mitigate adverse traffic impacts

Not only will the new Health Care Center bring quality health care services to the community, it will improve neighborhood pedestrian circulation on Hayes Street as well as improve pedestrian travel and safety from the Minnesota Avenue Metrorail Station to the neighborhood.

Drop off is anticipated to be in a No Parking Zone at the corner of Kenilworth Terrace and Hayes Street. The new building will provide pedestrian level lighting and clear visibility to enhance safety.

The Health Care Center will be served by the Minnesota Avenue Metrorail Station, located approximately 650 feet from the Project Site. The station is on the Orange Line which runs from New Carrollton and Vienna/Fairfax – George Mason University. The Minnesota Avenue Metrorail Station is served by eleven bus routes, and two of those routes will also serve the Health Care Center. (See Figure 2 of the Traffic Impact Study, Exhibit F).

A designated taxi and passenger drop-off/pick up area will be at the corner of Kenilworth Terrace and Hayes Street, as indicated on the Circulation Plan (Exhibit D).

Sidewalks along the streets in the site area provide a connected network for employees and visitors to access the Health Care Center from the public transportation facilities in the area. As shown on the attached Plans, Exhibit D, the proposed enhancements include improving an existing sidewalk between the pedestrian bridge ramp and the west curb of Hayes Street. To create a more inviting pedestrian experience, the building footprint along the Hayes Street side will be held back from the property line to allow for a more generous sidewalk leading from the existing pedestrian ramp to the main entrance of the Health Care Center at the corner of Kenilworth Terrace and Hayes Street. (Plans – ASK 055, Exhibit D).

On-street parking is permitted along Kenilworth Terrace and Hayes Street. It is anticipated that these spaces would be used by visitors to the health care clinic in the event that parking is not available within the designated parking areas. The transit oriented development will enable greater transit ridership since the existing pedestrian bridge leads directly from the Metrorail Station to the Project Site.

The Applicant agrees to develop and implement a Transportation Management Plan (“TMP”) plan geared towards both employees and visitors to the Health Care Center. (Exhibit F). Strategies proposed for the plan include the following:

- (a) The site was selected to take advantage of the site’s proximity to the existing Minnesota Avenue Metrorail Station accessible across Kenilworth Avenue/I-295 via the existing pedestrian bridge.
- (b) A staff member(s) of the building management or of Parkside Health Care Center will be designated as Transportation Coordinator to be a primary point of contact responsible for coordinating the implementation of the TMP.
- (c) Employees will be provided with WMATA SmartBenefits for transit, resulting in pre-tax salary deductions for Metro rail/bus expenses.
- (d) Information regarding ridesharing opportunities will be provided via website links to CommuterPage.com.
- (e) The proposed site plan will provide 10 total bicycle parking spaces within the building and 4 bicycle parking spaces outside the building along Kenilworth Terrace.
- (f) Existing private space on Hayes Street in front of the Health Care Center will be designated as sidewalk to effectively widen the existing sidewalk on the west side of Hayes Street providing a better pedestrian experience from the pedestrian bridge to the front door of the center.

(g) Provide for taxi passenger loading and unloading at the main entrance or in the parking garage.

(h) Designate an accessible paratransit pickup, drop-off and passenger waiting area at the main entrance to the center or in the garage to be designated with appropriate signage, for use by employees and visitors. The owner should provide an accessible pathway to the area and sufficient space for loading and unloading of wheelchairs from vans.

(i) Provide effective directional signage (parking, deliveries, taxi stand, etc.) to direct visitors and service vehicles to appropriate locations at the Health Care Center.

4. First Source Employment Program

Section 2403.9(e) of the Zoning Regulations states that “employment and training opportunities” are considered public benefits and project amenities. The Applicant will enter into an agreement to participate in the Department of Employment Services (“DOES”) First Source Program to promote and encourage the hiring of District of Columbia residents during the development and construction process.

5. Environmental Benefits

As a sustainable green feature, the south part of the Project above the ground floor is covered with 5,178 square feet of green roof. This amenity will provide visual relief for the public at that level above the street entering the neighborhood via the pedestrian bridge as well Health Care Center staff and patients. At the street level, additional landscaped zones are provided on the three street frontages of the Health Care Center.

6. Uses of Special Value to the Neighborhood or the District of Columbia as a Whole

Unity Health Care, Inc. is a 501(c)3 non-profit, certified as a federally qualified health center (FQHC). As an FQHC and a current Section 330(h) and Section 330(e) grantee, Unity – with extremely limited resources - provides high quality primary medical care and social

services to homeless and medically underserved residents of the District of Columbia, regardless of their ability to pay.

The following programs, listed below, reflect the extent of Unity's outreach to the communities in which its health centers are located. These programs will benefit not just the residents, students and workers of the immediate Parkside neighborhood, but all of Ward 7. Unity has a network of 12 health centers located throughout the District. The proposed Parkside Health Care Center will replace Unity's Hunt Place Health Center as its main facility in Ward 7. Unity strives to meet the social and health needs of all members of its target population by offering a complete continuum of care which will be offered at the Parkside Health Care Center. This care includes: prenatal, pediatric, adolescent, obstetrics/gynecology, family planning, adult, and elder care. In addition, they offer health insurance enrollment assistance, mental health care, dental care, and social services.

(a) Mobile Medical Unit – Taking health care to homeless people, rather than waiting for them to seek care on their own, continues to be a successful strategy for Unity. Unity's Medical Mobile unit provides primary medical care and referrals to homeless patients on the street. Setting up near parks, soup kitchens, and other areas where the street homeless live, staff members are able to engage and build relationships and establish continuity of care with homeless individuals who otherwise might not seek or accept care. This service will be available to homeless patients in the Parkside neighborhood and throughout Ward 7.

(b) Outreach Services – Unity's Outreach Program and Education Department provide health education, health screening, and related activities at health fairs and other partner locations. As an important service to the communities it serves and as a method to increase awareness of the importance of primary care and preventive health care, Unity provides these

services on an ongoing basis at various locations throughout the District and this service will continue to be offered in Ward 7.

(c) Medical House Call Program – To provide care to the homebound, Unity began a medical house call program in 2003. Unity employs practitioners who visit elderly and homebound patients in their homes in Wards 7 and 8, some of the most impoverished areas of the District. Through this program, elderly and otherwise homebound patients receive the care they need despite their inability to travel to a health center. This program will continue.

(d) Immunizations – Unity provides immunizations to both children and adults if they are medically indicated. For children, Unity has worked with the District's Department of Health (“DOH”) and other neighborhood community health centers to develop standard forms when conducting a well-child visit. These forms include clinical information, immunization history and records, and anticipatory guidance consistent with Early and Periodic Screening, Diagnostic, and Treatment. One copy of the form remains in the child's medical chart and a second copy is batched and sent to a centralized point of contact at DOH. The information from the forms is entered into a database accessible to providers throughout the city. The purposes of this program are two-fold – (1) Providers will have access to important immunization and clinical information to ensure that children are receiving all appropriate care, and (2) data will be available to monitor child immunizations and medical screenings from which city-wide quality improvement initiatives may be developed. Unity is proud to be a part of this effort and expects this city-wide collaboration to become a model for other jurisdictions and agencies.

(e) Well-Child Services – Well-baby and well-child care for children from birth to age twelve focuses on Early and Periodic Screening, Diagnosis and Treatment and emphasizes preventive care, including standard immunizations and monitoring for height,

weight, blood pressure, lead poisoning, anemia, development, and tuberculosis. Unity pediatricians and family practitioners follow children who are hospitalized. To address the issue of accidents, the leading cause of death in children, health care providers offer anticipatory guidance on prevention topics, including the use of child safety seats and seat belts, smoke detectors, and bicycle helmets. Parents and guardians are counseled on proper oral health care, nutrition, well-baby care, developmental issues, and when necessary, neglect and abuse.

(f) Assisting Patients in Securing Health Insurance and Financial Entitlements

– Unity provides care to all individuals regardless of their ability to pay. Unity ensures that its patients are aware of Unity’s policies related to ability to pay and the use of a sliding fee scale to adjust patient bills according to income level. As a component of comprehensive care, Unity offers a variety of social services to address the unmet needs of its patients. Social services are available on-site at almost all of its health centers, including the proposed Parkside Health Care Center with its smaller sites providing referrals. At every health center, staff assists patients with exploring and applying for possible health insurance options such as Medicaid and the DC Healthcare Alliance.

(g) Special Supplemental Nutrition Program for Women, Infants and Children

(WIC) – is a federally funded nutrition program that provides nutrition education and supplemental food to pregnant women, new mothers, infants and children up to age five. WIC operates at eight Unity Health Centers – and will be part of the proposed Parkside Health Care Center – where WIC will provide nutrition screening, nutrition counseling, and peer-led breastfeeding classes.

(h) Working with Students, Children and Adolescents – Unity operates

several youth health initiatives and will reach out to neighboring schools to implement these programs at the new Parkside Health Care Center:

a. In-School Health Center – Unity’s Eastern High School Health Center, located within the largest high school in the District, offers health care services during the entire year, including summers and school vacations. This health center offers convenient access for students to receive health care services with a pediatrician and nurse practitioner on staff. Preventive care, including STD testing and pregnancy prevention are main focuses for the health care and education provided. Once renovations to the school are completed, Unity will also provide dental care at Eastern High School.

b. Choosing Healthy and Rewarding Meals (CHARM) School – At Eastern, Unity operates a successful school-based obesity intervention and prevention program called CHARM School. The objectives of CHARM School are to engage students in the issue of obesity by addressing social skills that are relevant to their everyday life, increasing knowledge of healthy lifestyles, and improving behavior toward healthy lifestyles by engaging students in hands-on exercise activities and life skills training. Methods for achieving program goals include recruiting teens through health center visits, school-based marketing, and personal invitations; having students complete a survey to assess their eating and exercise habits and nutritional knowledge at the beginning and end of the program; and analyzing data for students who participated in at least five sessions. Unity’s objectives and activities are based on medical data and programs that have been successful with similarly situated teens. Over 100 students at Eastern participated in at least one session. Those attending at least five sessions reported an increase in exercise and a reduction in the consumption of TV and Internet, soda, and fast food, with increased consumption of vegetables and fruits.

c. Wise Guys – Unity initiated a Wise Guys program at Eastern in January 2010. The program, strictly for male students, involves lunch time group sessions at which students have an opportunity to discuss important health issues related to their needs. The

focus of the group will be to educate male teens on the importance of sexual health and preventing unintended pregnancy.

(i) Young Families Initiative – Following a productive partnership with Washington Hospital Center’s Teen Alliance for Prepared Parenting (“TAPP”), Unity initiated the Young Families Initiative (“Y-FI”) to provide for the special needs of teen parents with the ultimate goal of preventing a secondary pregnancy within two years of the initial child’s birth. Focused on young adults between the ages of 13 and 21, Y-FI services include intensive one-on-one case management, family planning counseling and no-cost birth control methods through Unity’s Title X program, outreach to fathers, regular support group meetings, health education, establishing a medical home (health center) relationship and providing primary medical care for participants and their children, and transitioning the participant to an adult medical home model when they are ready.

Y-FI participants are enrolled into the program immediately upon a positive pregnancy test or based on a referral or evidence of need from teens that have already given birth. Moving forward, participants are referred to a Unity health center outside of Eastern High School for comprehensive pre-natal care and services. At Unity’s Congress Heights Health Center, Y-FI participants have access to obstetricians and midwives who can provide pre- and post-natal medical care and educational classes. Unity obstetricians are on staff at Washington Hospital Center for deliveries and to take calls, ensuring seamless continuity of care. Having obstetricians on staff at Washington Hospital Center is important for District teens as 25% of inpatient discharges for youth ages 14-17 occur at this hospital and 82% of those visits are pregnancy related. Following birth, Y-FI participants receive primary care and case management assistance to ensure proper follow-up for the mother and the baby. Throughout pregnancy, the teen is counseled on the importance of birth control. Following birth, the teen is encouraged to

consider a long term family planning method. Unity's social services team facilitates support groups based on the needs of program participants and outreach is conducted to encourage fathers to actively participate in the program.

(j) Health Education and Nutrition Programs – Recognizing the need for health promotion activities, Unity has an active health education department. Unity's health educators are based at each of its health centers and cover a wide range of topics in their individual counseling and group sessions. These topics include controlling chronic diseases, smoking cessation, preventing the spread of infectious diseases, and other items focused on general health maintenance. At Unity's Upper Cardozo Health Center, Unity has implemented the national *We Can!*TM program to support families in adopting healthier lifestyles. Unity uses the *We Can!*TM program as a tool to address the need for early intervention and prevention in the fight against childhood obesity. The program targets children ages 5-15 and their parents. The children and parents participate in a four-week multi-disciplinary program designed to help children stay at a healthy weight. Unity was recently recognized for its accomplishments with this program by receiving the 2009 National Association of Community Health Centers' Innovative Research in Primary Care Award.

(k) The Diabetes Collaborative – To address the high diabetes mortality rates in the District, Unity participates in the Health Disparities Diabetes Collaborative. The Diabetes Collaborative offers a systematic and comprehensive approach for patients who suffer from the long-term effects of diabetes. The Diabetes Collaborative at Unity is part of a national effort to reduce health disparities and improve treatment outcomes for various minority and low-income populations who suffer from chronic diseases. The Diabetes Collaborative focuses on educating patients and promoting healthy behaviors with the ultimate goal of better managing their condition.

7. Public Art

The Applicant will also commit to explore the viability of a public art project in conjunction with the development. The Project could be located around the existing pedestrian ramp in a designated area on Hayes Street. Ideally, such a project will involve the community schools, local artists, and residents. The applicant has already reached out to the W7 Arts Collaborative to begin discussions. The Collaborative is a nonprofit whose mission is to foster participation in the arts among community residents and visitors, and to preserve and enhance the local community's cultural heritage.

V. **COMPLIANCE WITH COMPREHENSIVE PLAN**

The Parkside Health Care Center achieves the objective of the Comprehensive Plan (“**Comp Plan**” or “**Plan**”). The proposed Health Care Center directly supports both the Citywide and Ward 7 Community Services and Facilities objectives of the Comprehensive Plan for the expansion of community-based health centers.

A. **Compliance with Citywide Elements**

1. Community Services and Facilities Element

The goal for community services and facilities is to: “Provide high-quality, accessible, efficiently managed, and properly funded community facilities to support the efficient delivery of municipal services, protect public health and safety, and enhance the well-being of current and future District residents.” (Comp Plan 1101.1). The Plan notes that community health care centers are sometimes referred to as the city’s “social infrastructure” and they are “just as important to the quality of life as water, sewer, and transportation facilities, and have spatial needs that must be addressed over the coming years.” (Comp Plan 1105.1) Significantly, the Plan singles out the Applicant’s leadership role through the “Medical Homes DC” program to

enlarge, enhance and replace the current network of community health centers and ensure more equitable geographic distribution of these facilities (Comp Plan 1106.8).

2. Land Use Element

The Plan cites the importance of transit-oriented development by creating a policy which directs development around those Metrorail Stations which offer the greatest opportunities for infill development and growth. (Comp Plan 306.11). The Project will be located within 800 feet from the Minnesota Avenue Metrorail Station entrance. As such, it fulfills the Plan's desire for infill development. Furthermore, the Project will be compliment the surrounding neighborhood.

3. Transportation Element

The Plan states that "although the District has already developed walkable, transit-oriented neighborhoods, future opportunities will arise to strengthen the linkage between land use and transportation as new development takes place." (Comp Plan 403.2). The development of the Health Care Center so close to the Minnesota Avenue Metrorail Station will encourage staff and patients to take public transportation resulting in a decrease in automobile traffic. The Plan promotes smart growth as a regional solution, "a regional strategy of promoting infill, mixed-use and transit-oriented development in urbanized areas is needed to ensure transportation efficiency in the District and the region." (Comp Plan 405.3)

4. Environmental Protection Element

The Plan seeks to encourage the planting of street trees and the "use of landscaping to beautify he city, enhance streets and public spaces, reduce stormwater runoff, and create a stronger sense of character and identity." (Comp Plan 603.6, 603.7)

5. Urban Design Element

The design for the Parkside Health Care Center takes advantage of the benefits of its urban environment to provide a medical facility in a growing residential neighborhood. The location adjacent to the Minnesota Avenue Metrorail Station, with direct access across the pedestrian bridge, whose termination is near the corner of Kenilworth Avenue and Hayes Street, will provide excellent access for patients and staff. In addition, major Metro bus routes serve the site and many patients will find themselves within walking distance of the facility. This easy access will only be enhanced as the new Parkside development matures providing many new housing units in close proximity to the new Parkside Health Care Center.

B. Compliance with Area Element

The Comprehensive Plan targets “Health Care Facilities” as a specific policy focus within Far Northeast/Southeast Area (Ward 7). The Policy encourages providing additional facilities to meet the mental and physical health needs of Far Northeast and Southeast residents, including primary care facilities, youth development centers, family counseling, drug abuse and alcohol treatment facilities. The comprehensive plan goes on to state that, “such facilities are vital to reduce crime and promote positive youth development. Specific plans for new social service and health facilities should be developed through needs assessments, agency master plans, strategic plans, and the city’s public facility planning process. All plans should be prepared in collaboration with the community, with input from local ANCs and civic associations, residents and businesses, and local community development corporations and non-profit service providers.” (Comp Plan 1709.7).

VI. CONCLUSION

For the foregoing reasons, the Applicant submits that the Second Stage PUD, Zoning Map Amendment and Modification to the First Stage PUD meet the standards of Chapter 24 of the Zoning Regulations; are consistent with the purposes and intent of the Zoning Regulations and Map; will enhance the health, welfare, and safety and convenience of the citizens of the District of Columbia; satisfy the requirements for approval of the Second Stage PUD, Zoning Map Amendment and Modification to the First Stage PUD; provide significant public benefits; and advance important goals and policies of the District of Columbia. Therefore, the Second Stage PUD, Zoning Map Amendment and Modification to the First Stage PUD should be approved and adopted by the Zoning Commission.

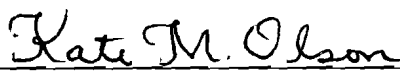
Accordingly, the Applicant respectfully requests the Zoning Commission set down the Second Stage PUD, Zoning Map Amendment and Modification to the First Stage PUD applications for a public hearing at the earliest possible date.

Respectfully submitted,

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