

Exhibit 10

**Petition for Emergency Consideration of Application for Amendment to the
Zoning Map, Case 72-1**

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Statement Supporting Requested Amendment to Zoning Map, Case 72-1

In Re:)
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)
 ROGERS MEMORIAL HOSPITAL) Zoning Commission No. 72-1

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Comes now the Applicant, Rogers Memorial Hospital (formerly Eastern Dispensary & Casualty Hospital) by and through its attorneys, Reasoner, Davis & Vinson, and respectfully requests the Zoning Commission to hear Applicant's request for an amendment to the Zoning Map at the earliest possible time for the following reasons:

ZONING COMMISSION
District of Columbia

L 58-72-1

Hospital containing new medical and surgical beds; a new surgical suite; an intensive care unit; a cardiac unit and requisite supportive services at an approximate cost of \$9,250,000.

2. The urgency of this matter is that the Hospital is operating on a fixed loan and grant budget and construction costs continue to escalate at the rate of approximately 10% per year. At this rate of escalation a years delay in construction of the proposed North wing would increase the cost of construction approximately \$1,000,000. for which funds are not available. Thus, the Hospital is in the unfortunate situation where delays in construction will require it to curtail or butback a portion of its needed expansion and renovation program because of the fixed amount of funds available for the work.

3. The urgent need of the community for a modern hospital affording first class medical services is unquestionably demonstrated and recognized by the overwhelming testimony and support of all effected community associations in the area, as evidenced by the many letters attached to the application. Also, a survey was conducted by the hospital consultant firm of Block, McGibony & Associates in 1969, and a comprehensive evaluation and master plan was developed for the Hospital. The consultants referred to the 1969-70 District of Columbia Plan for Construction and Modernization of Hospitals, Public Health Centers and Medical Facilities in which the primary service area of the Rogers Memorial Hospital has been designated as Area "C". This report confirms the findings of other surveys that Area "C" is an area of primarily non-white population of approximately 275,000 persons. By comparison with the District as a whole, it reflects:

- Highest population density
- Highest proportion of non-white population

- Highest occupancy per household with more than one person per room (21% against 12.4%)
- Lowest family income

And in addition:

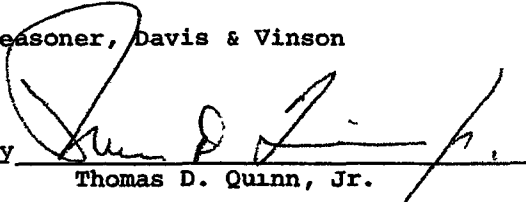
- Highest welfare case loads
- Highest crime rate
- Poorest Schools
- Poorest park and recreation resources
- Highest rate of illegitimacy
- Most dense arterial traffic flows through residential areas
- Lowest proportion of population over age 65 (5.1% as against 9.1%)
- Lowest median age (27 as against 32)
- Lowest educational attainment
- Highest unemployment rate (4.1 against 3.3%)

It is well known that there are very few physicians practicing in the inner-city area and it is necessary for people living in this area to turn to their community hospital for medical care. Thus, any delay requiring a curtailment of the Hospital's construction program will clearly have a pronounced adverse effect on the community which the Hospital serves in a far greater measure than it effects the Hospital itself.

WHEREFORE, in view of the foregoing we respectfully request the Zoning Commission to set this application down for hearing at the earliest possible date.

RESPECTFULLY SUBMITTED,

Reasoner, Davis & Vinson

By 
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STATEMENT SUPPORTING REQUESTED
AMENDMENT TO ZONING MAP

Introduction

Applicant, Rogers Memorial Hospital (formerly Eastern Dispensary & Casualty Hospital) is a District of Columbia non-profit corporation and is tax exempt under Section 501(c)(3) of the Internal Revenue Code of 1954, previously under Section 101(6) of the Revenue Act of 1936.

Applicant is engaged in the service of operating a 250-bed general community hospital. It has been at its present location since 1905; the present buildings were constructed in 1929, and modernized in 1958. Applicant, to meet the critical needs of its community, maintains a 24-hour a day emergency service and outpatient clinic. All types of medical and surgical procedures are offered to the community by Applicant, except maternity and psychiatric care.

Despite continuing renovation programs concerning its existing facilities, Applicant, today, is faced with an acute need to expand and modernize its present physical plant if it is to continue to provide modern first-class medical service to the community it serves.

At the present time, Rogers Hospital consists of a series of non-conforming areas as defined by the Hill-Burton Agency. This means that the physical plant lacks proper service and patient support areas, plus a number of existing bedrooms do not meet current standards. Therefore, Applicant's primary and overall objective is to replace a majority of patient bed areas and completely rebuild the supporting service areas.

COMMISSION
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ZONING DEPARTMENT

Applicant's objective is totally consistent with the statement set forth in the National Capital Planning Commission's Summary of the Proposed Comprehensive Plans for the National Capital of February 1967:

"The hospitals in the District should continue to meet the general care needs of the District's residents and the region for specialized care. New construction should consist largely of expansion or modernization of existing facilities."

REASONS FOR AMENDING ZONING MAP TO SP ZONING

Present Situation:

The regulations for R-4 zoning restricts development to three (3) story structures not exceeding forty (40) feet in height (Section 3201.1) unless removed from lot lines one (1) foot for each foot of height in excess of the maximum height permitted (Section 3201.27). Lot occupancy is limited to 40% (Section 3303.1) and a minimum "rear yard" twenty (20) feet in depth is required (Section 3304.1). There is no applicable F.A.R. requirement (Section 3302). The minimum lot size is 4000 square feet with a minimum width of forty (40) feet (Section 3301.1).

Applicant's present buildings do not conform with the above regulations as they are four (4) stories and approximately fifty (50) feet in height. Because Applicant owns all property in Square 895 with the exception of Lot 809, which is owned by St. James Episcopal Church, the present structures do conform to the rear yard, lot occupancy and lot size requirements established by regulations for R-4 zoning.

Further, Applicant is presently planning construction of two additions to its present facilities. These additions, which will be

to the building fronting on Massachusetts Avenue, are each one (1) story in height and are denoted respectively as the "Dietary Addition" and the "Emergency Addition".

It must be noted that the two additions form a vital part of Applicant's expansion and modernization program. The Dietary Addition is planned so that 90% of the existing kitchen can be retained and will allow a new employees dining room plus medical staff dining facilities. The remainder of the basement areas will be retained and then remodeled to include expanded employees lockers, house-keeping, morgue and security department areas. This addition will include a temporary receiving dock area that will be relocated upon completion of the new north wing which is described below. Delivery of supplies in and out of the present hospital is nearly impossible and this area of design is of major importance. The first floor of the Dietary Addition will contain Personnel and office areas as it will be used for temporary Administration during the construction phases.

The first floor of the Emergency Addition will be the focal point for addition and renovation of the patient services. A new ambulatory care center will be designed for out-patient services, emergency transportation facilities and X-ray support. The new addition will house Radiology and Emergency. The existing building will contain both in-patient clinics and private out-patient areas. EEG, EKG, Social Service, Doctors on Call, Employees Health and Special Neighborhood Clinics, will be located on this floor. Adjoining the new north wing, the Department of Medical Records and Doctor's Lounge will be placed so that they split the in-patient wing and out-patient services.

PLANNED CONSTRUCTION NECESSITATING ZONING CHANGE

The key element to Applicant's modernization and expansion objectives is a new north wing to be constructed on 7th Street, N.E., connecting with and tied into the existing buildings and proposed additions. Also proposed is construction of a below grade and on grade parking facility for the medical staff.

The new north wing will be six (6) stories and approximately seventy-eight (78) feet in height. Upon completion, the lot occupancy for the entire project will be approximately 70% and F.A.R. will be approximately 3.7. As can be readily determined, the height of the new north wing and the lot occupancy greatly exceed the maximums pursuant to R-4 zoning regulations. Accordingly, Applicant is seeking to amend the zoning map for its property in Square 895 to provide for SP zoning.

Chapter 4 of the Zoning Regulations establishes the requirements permitted under SP zoning. In general they are a maximum height of 90 feet (no limit on stories), F.A.R. not to exceed 5.5, lot occupancy not to exceed 75% and a rear yard of not less than 12 feet. Applicant's proposed utilization of the site falls well within all requirements for SP zoning. The use of the site as a hospital also conforms to SP zoning regulations. See Sections 4101.33, 3105.31 and 3104.38.

DESCRIPTION OF NEW NORTH WING

The basement level of the new wing will tie into the existing plant and contain a new Central Supply, Pharmacy, Inhalation Therapy, Laundry and General Storage areas. These are the functions that directly serve the patient units and will incorporate modern transportation systems up to the bed units above.

The first floor of the wing will contain public areas of the hospital, i.e., a new Administration Department containing Nursing, Purchasing, Business Office, Accounting and Computers; Hospital Administration Suite; Admitting and Discharge and Auditorium will adjoin the public lobby. The lobby area will also contain a new Gift Shop, Chapel and Vending area. A public entrance will be developed with this floor so that it can serve the entire hospital.

The second floor of the wing will contain a new Surgery Suite and Recovery Room. Twenty (20) Intensive and Coronary Care beds will adjoin Recovery. The existing structure will contain Nuclear Medicine, Laboratory, Surgery Administration Suite and Special Clinics. The flow will be excellent as the "lab" will be located above the ambulatory care center and the first floor and the old non-conforming beds will be renovated into a clinic stack above the new clinic on the first floor.

The third through the sixth floors of the wing will contain new patient units of 39 beds each. The patient floor design will be one of the most modern in the city, incorporating a combination double-single room layout that will allow each room to be used for the type of patient need required.

The existing building on the third and fourth floors will be maintained for bed areas. Two existing units of 37 beds each will be retained as they are directly connected to the new wing. The existing non-conforming bed areas will be remodeled to carry through the out-patient stack and include a Department of Education.

Simultaneously with the construction of the new north wing described above, a parking garage will be constructed on the "C" Street

portion of Sqaure 895 to permit 78 below-grade and 35 on-grade parking spaces.

SITE PLAN

Although the existing site contains various grade and space problems, it does represent the only available site for the main-tenance of a community hospital for this part of the city where the need is so great. Because of this, it was decided that the existing plant must be retained and the new additions planned for it. Every consideration has been given to minimal replacement and reduced traffic congestion.

The emergency entrance will have access to the back of the hospital and become a controlled traffic lane for this one function. Out-patients and ambulatory emergencies will have a new entrance on Eighth Street so that they can always relate to the proper care location. Out-patients will have access to parking off of Eighth Street.

The Service Dock entrance and Doctors entrance will be located on "C" Street adjoining the Dock and Doctors parking garage. This garage will be designed below grade so that total security and direct entrance will be available. This parking and service entrance will be controlled by a security station for day and night control.

PARKING

Article 72 requires one off street parking space for bed for hospitals in all districts other than C-4, or in the case of Applicant's proposed development, 250 spaces. Applicant meets the requirement by providing 113 such spaces on site and more than 150 such spaces on property owned by Applicant immediately across 7th Street,

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N.E., and 8th Street, N.E. See attached Exhibits indicating location of such parking spaces. All such spaces meet the requirements of Section 7205.33.

EXHIBITS

Attached hereto are a series of Exhibits indicating the location of present and proposed structures, parking, etc. They are intended to facilitate understanding of the matter under consideration.

ALLEY CLOSING

On October 19, 1971, Applicant applied to close all alleys in Square 895. This application includes the land presently dedicated as alleys in anticipation that they will be closed and conveyed to Applicant in the reasonably near future.

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