



Rec'd
5/23/06
1:52 PM
SAB

CHILDREN'S NATIONAL MEDICAL CENTER

Modification to a
Planned Unit Development
May 23, 2006



ZONING COMMISSION
District of Columbia

CASE NO.

88-34A

EXHIBIT NO.

ZONING COMMISSION
District of Columbia
CASE NO. 88-34A
EXHIBIT NO. 5

BEFORE THE
ZONING COMMISSION
FOR THE DISTRICT OF COLUMBIA

CHILDREN'S NATIONAL MEDICAL CENTER

STATEMENT
OF THE APPLICANT

IN SUPPORT OF
AN APPLICATION FOR A
MODIFICATION TO AN APPROVED
PLANNED UNIT DEVELOPMENT

Zoning Commission Case No. ____/88-34M/70-3

TABLE OF CONTENTS

	<u>Page</u>
DEVELOPMENT TEAM	iii
LIST OF EXHIBITS.....	iv
I. INTRODUCTION	1
II. DESCRIPTION OF CHILDREN'S NATIONAL MEDICAL CENTER.....	2
III. ZONING HISTORY	2
A. Zoning Commission Order No. 14.....	2
B. Zoning Commission Order No. 619.....	3
C. Zoning Approvals for Balance of Record Lot 2 (Washington Hospital Center)	3
IV. DESCRIPTION OF ADDITION	5
A. Site Location and Existing Conditions.....	5
B. General Description of Existing Facilities	5
C. Description of Addition	6
1. East Wing Floor 5 & 5.5.....	6
2. Operating Room Post Up.....	7
3. Parking and Loading.....	8
D. Tabulation of Development Data.....	9
V. COMPLIANCE WITH PUD STANDARDS AND CHAPTER 24 OF THE ZONING REGULATIONS	9
A. Area Requirements Under Section 2402.1(c).....	9
B. Height and FAR Requirements Under Sections 2405.1 and 2405.2.....	10
C. Impacts of Addition Under Section 2403.	10
D. Not Inconsistent with Comprehensive Plan Under Section 2403.4.....	11

E. Public Benefits and Project Amenities	11
VI. COMPLIANCE WITH COMPREHENSIVE PLAN	13
A. Purposes of the Comprehensive Plan.....	13
B. Generalized Land Use Map	14
C. Compliance with Major Themes of the Comprehensive Pl	14
D. Compliance with Major Elements of the Comprehensive Plan	15
E. Compliance with Major Elements of the Comprehensive Plan.....	17
VII. NEED FOR EXPEDITED REVIEW	17
VIII. WORK WITH COMMUNITY.....	19
IX. CONCLUSION	19

DEVELOPMENT TEAM

Property Owner: Children's National Medical Center
c/o Washington Hospital Center
Real Estate Services
106 Irving Street, NW, Suite 301
Washington, DC 20010

Architects: Karlsberger Architecture
99 East Main Street
Columbus, OH 43215

Wilmot Sanz
18310 Montgomery Village Avenue, Suite 300
Gaithersburg, MD 20879

Civil Engineer: Delon Hampton & Associates
8403 Colesville Road, Suite 600
Silver Spring, MD 20910

Traffic Consultant: O.R. George & Associates, Inc
10210 Greenbelt Road, Suite 310
Greenbelt, MD 20706

Land Use Counsel: Holland & Knight LLP
2099 Pennsylvania Avenue, N.W.
Suite 100
Washington, D.C. 20006

LIST OF EXHIBITS

<u>Description</u>	<u>Exhibit</u>
Architectural Plans and Drawings	Submitted Separately
Zoning Map	A
Location Map	B
Building Plat from DC Office of the Surveyor	C
Zoning Commission Order No. 14	D
Board of Zoning Adjustment Order No. 10369	E
Zoning Commission Order No. 619	F
Zoning Commission Order No. 784	G
Zoning Commission Order No. 969	H
Zoning Commission Order No. 02-43	I
Photograph of Existing Facilities	J
Estimated Quantity of Potable Water, Sanitary Sewage and Storm Water Run-off	K
Generalized Land Use Map	L
Certificate of Notice, Notice of Intent, and Property Owners List	M

I. **INTRODUCTION**

This statement and attached documents are submitted by the Children's National Medical Center ("Children's Hospital") in support of its application to the Zoning Commission for the District of Columbia for a modification to a Planned Unit Development ("PUD") originally approved in Zoning Commission Case No. 70-3, and modified by Zoning Commission Case No. 88-34M. The subject property is known as Assessment and Taxation Lot 801, being a portion of Record Lot 2 in Square 3129 (the "Site"). The Site is improved with facilities serving as Children's Hospital, which were originally approved in Zoning Commission Order No. 14 and modified by Zoning Commission Order No. 619. Originally zoned SP under the PUD approval in Zoning Commission Order No. 14, the Site is now zoned SP-2¹.

Children's Hospital is seeking a modification to the approved PUD to permit the construction of additional on-site facilities (the "Addition"). As is discussed in greater detail below, the height of the Addition is 127.5 feet, which is that previously approved for the PUD. With the Addition, the total FAR for the Site will increased to 3.8, which is less than the 4.5 FAR permitted for a PUD in the SP-2 District. The design of the Addition will compliment the design of the existing facilities.

¹ The Zoning Map, attached as Exhibit A, incorrectly shows the zoning for the Site as R-5-A and references two PUD approvals that are not related to the Site.

II.

DESCRIPTION OF CHILDREN'S NATIONAL MEDICAL CENTER

Children's Hospital is a nationally recognized hospital serving the unique needs of infants and children. Children's Hospital is a private, non-profit organization which has been providing pediatric care for more than 136 years. Since opening its doors, Children's Hospital has been committed solely to the health and well-being of children. It was one of the first institutions in the District to recognize that the trauma of illness and hospitalization has a direct impact on a child's recovery. The hospital is a pioneer in programs not only to normalize the hospital stay but also to prepare children for hospitalization or living with chronic illnesses. Children's Hospital is one of the top ten pediatric hospitals in the nation and is the principal provider of pediatric care in the metropolitan Washington area and beyond.

III.

ZONING HISTORY

A. Zoning Commission Order No. 14

In Zoning Commission Case No. 70-3, the Zoning Commission approved a PUD for the development of the Children's Hospital and granted a change of zoning from R-5-A to SP for a portion of the Site, which was then known as Lot 1 in Square 3129. In Zoning Commission Order No. 14, attached as Exhibit D, the Zoning Commission approved the development of Children's Hospital in two phases. Phase I approved the construction of a four story, 91.5 feet building with an FAR of 1.307. The allowable lot occupancy was 40.8%. The Phase I approval was

confirmed by the Board of Zoning Adjustment by Order No. 10369, attached as Exhibit E. Construction of Phase I was completed in 1972.

Phase II of the development was to increase the size of the structure to six stories with a height of 127.5 feet and an FAR of 2.45. The allowable lot occupancy was increased to 59.4%. The Commission also approved an underground parking facility for 1,000 vehicles; 881 parking spaces were constructed as part of Phase I.

B. Zoning Commission Order No. 619

In 1989, Children's Hospital recognized the substantial increased need for pediatric health care since it began operation on the Site in 1977. In order for Children's Hospital to effectively carry out its health care, educational and research functions, Children's Hospital decided to expand its facilities to facilitate and increase the institution's ability to serve the community.

As is set forth in Order No. 619, attached as Exhibit F, the Zoning Commission approved the development of additional facilities for Children's Hospital, which included an expansion to the hospital building, a helipad and a parking facility for an additional 654 cars (providing for a total of 1,540 parking spaces on-site). The height of the building was maintained at 127.5 feet, with an overall FAR not to exceed 2.45. The maximum lot occupancy sought and approved was 59.4%.

C. Zoning Approvals for Balance of Record Lot 2 (Washington Hospital Center)

Children's Hospital is part of a large medical complex located on Record Lot 2 in Square 3129. Record Lot 2 contains approximately 46.3 acres, of which 7.3 acres

is devoted to the Children's Hospital. The remaining portion of the lot has been developed as the Washington Hospital Center ("WHC"), which constitutes the remaining thirty-nine acres.

The Zoning Commission approved development of approximately 5.48 acres for WHC in Order No. 784, including changing the zoning from R-5-A to SP-1. A copy of Order No. 784 is attached as Exhibit G. The approved development consisted of two phases. Phase 1 included the Physician's Office Building and atrium connector, with a total FAR of 1.82. Phase 2 included an addition to the Physician's Office Building (24,740 square feet). The total approved FAR was 2.47.

The final 33.53 acres used by WHC is governed by Zoning Commission Order Nos. 969 and 02-43, copies of which are attached as Exhibits H and I respectively. Order No. 969 granted first stage PUD approval for the remaining portions of Lot 2 that were zoned R-5-A (the remaining 33.53 acres). Of that lot area, 623,866 square feet were rezoned from R-5-A to SP-1 and 836,985 square feet of lot area were rezoned to SP-2. The approval provided for a cumulative FAR of 1.9 (1,185,345 square feet) for the area zoned SP-1 and a cumulative FAR of 3.4 (2,845,749 square feet) for the area zoned SP-2. The total combined FAR was 3.08. These same development parameters were approved in the second stage PUD approval in Order No. 02-43.

IV.

DESCRIPTION OF ADDITION

A. Site Location and Existing Conditions

The Site, known for assessment and taxation purposes as Lot 801, is a portion of Record Lot 2 in Square 3129, which contains approximately 46.3 acres. Record lot 2 is bounded by Michigan Avenue, Irving Street and 1st Street, NE. The Site is somewhat isolated, and Children's Hospital is visually prominent in the landscape. As discussed above, Children's Hospital is part of the larger medical complex in Square 3129.

The Site is directly across Michigan Avenue from the McMillan Reservoir. The US Soldiers' Home is located to the north of the Site. The area surrounding the Site is generally characterized by institutional uses, including the VA Hospital generally to the northeast of the Site. Further to the east and west are residential uses, but there are no abutting residential properties. Located nearby are Howard University and Catholic University.

B. General Description of Existing Facilities

Children's Hospital is licensed for 279 inpatient beds spanning a full continuum of care. Inpatient services include general medical/surgical, heart and kidney care, critical care (Neonatal Intensive Care Unit, Pediatric Intensive Care Unit, and Cardiac Intensive Care Unit), hematology-oncology, bone marrow transplant, neurosciences, respiratory care, orthopedics, and inpatient psychiatry. Other services include a full service Emergency Service with Trauma and helicopter transport capability, specialty and general inpatient and outpatient surgical

services, full service imaging (CT, MRI, nuclear medicine, ultrasound, and general x-ray) cardiac cath and interventional radiology, general and specialty clinics, and inpatient and outpatient oncology services. Full research capabilities are a hallmark of Children's Hospital.

The main hospital of Children's Hospital consists of the original facility, which opened in 1974, and a five-story Medical Office Building/Clinical Administrative Building, which was added to the west end of the original building after 1980. A photograph of the main building is attached as Exhibit J. The original building consists of five occupied floors plus interstitial spaces above each of the occupied floors which house electrical and mechanical equipment that generally service the floor immediately beneath them. The patient floor layouts on the third and fourth floors are of the inner and outer racetrack design, with patient rooms located around the perimeter of the building. The hospital is divided into four quads designated by orange, yellow, green and blue.

C. Description of Addition

The Addition includes an East Wing, comprised of Floors 5 and 5.5, and a Operating Room ("OR") Post Up unit². Each portion of the Addition is described below:

1. East Wing Floor 5 & 5.5: Children's Hospital proposes the construction of a 94,000 square feet shell and core that will be configured as two additional floors to the East Wing Addition tower. This portion of the Addition will

² At this time, Children's Hospital is only seeking approval for the Addition. Children's Hospital's long range plan includes a medical office building with approximately 150,000 square feet, as illustrated on the plans. Children's Hospital will present this proposal to the Zoning Commission for review and approval at such time as it is prepared to move forward with that plan.

provide much needed expansion space for in-patient bed capacity in the future and the more immediate need for a Neonatal Intensive Care Unit ("NICU") expansion. The two additional floors are a pre-requisite from a safety and space standpoint for the NICU expansion. The NICU expansion must occur prior to the safe expansion of the OR Post Up, as described below.

2. Operating Room Post Up: The Applicant proposes the construction of a 38,900 square feet post up expansion to add space for the 61,400 square feet renovation of the current OR suite. This portion of the Addition will allow the existing operating rooms to remain operational and unaffected by renovation until after the new eleven operating rooms are delivered.

This project will consist of the following elements:

- Nineteen operating rooms (eleven new operating rooms and eight existing operating rooms) as well as additional room for future additional operating rooms.
- Two renovated procedure rooms.
- Minor renovations to the Sterile Processing Department, including the reorganization and modernization of equipment to provide more efficient work flow and support increased capacity of the new surgical facilities.
- Minor renovations to the Post-Anesthesia Care Unit (PACU) as well as additional room for future growth of PACU facilities.

- Staff interchange, including additional physician and staff locker rooms with approximately 3,800 square feet to support the new surgical facilities.
- Additional office space (approximately 5,300 square feet) for physician support and staff training.
- Expansion of reception and waiting areas.

3. Parking and Loading. The parking and loading facilities will not change. Currently, Children's Hospital has 1,930 parking spaces on-site to service staff (approximately 1,385 spaces) and visitors (545 spaces). Children's Hospital has an additional 145 parking spaces off-site available for use by staff, who can then access the hospital via shuttle. Based on the requirements of the Zoning Regulations, parking would be required as follows:

Use	Parking Required	Total Spaces Required
Hospital Use	1 space per hospital bed	279 spaces
Medical Office Use (appx. 200,000 sf)	1 space for each 1,800 sf in excess of 2,000 sf	100 spaces
TOTAL REQUIRED		379 spaces

As approved in the original PUD, loading is provided as follows: three loading berths in excess of fifty-five feet in length and three loading platforms in excess of 200 square feet each.

D. Tabulation of Development Data

	SP PUD Guidelines (1970)	SP-2 PUD Guidelines (2006)	Order No. 619 Approval	Proposed Addition
Minimum Area/Lot Area	3 acres for R-5-A 1 acre for SP	15,000 sf	7.3 acres (317,995 square feet)	7.3 acres (317,995 square feet)
Gross Floor Area	1,907,970 sf	1,430,977.5 sf	appx 779,088 sf	1,204,291 sf
TOTAL FAR	6.0	4.5	2.45	3.8
Height	130 feet	90 feet	127.5 feet	127.5 feet
Lot Occupancy	75%	80%	59.4%	61.8%
Parking	1 per hospital bed plus 1 for each 1,800 sf in excess of 2,000 sf	1 per hospital bed plus 1 for each 1,800 sf in excess of 2,000 sf	Minimum of 1,540 spaces	1,930 spaces (existing on-site, no addition is requested)

The estimated quantity of potable water, sanitary sewage and storm water run-off is attached hereto as Exhibit K.

**V.
COMPLIANCE WITH PUD STANDARDS AND
CHAPTER 24 OF THE ZONING REGULATIONS**

Section 2409.9 of the Zoning Regulations requires that a modification to an approved PUD be processed as a second-stage application. Accordingly, this section sets forth continued compliance of the Addition with the requirements for a PUD under Chapter 24 of the Zoning Regulations.

A. Area Requirements Under Section 2402.1(c)

The Site area is approximately 7.3 acres (or 317,995 square feet) in land area, which exceeds the minimum area requirements set forth in Section 2401.1(c) of the Zoning Regulations.

B. Height and FAR Requirements Under Sections 2405.1 and 2405.2

The Addition has been evaluated under the PUD guidelines for the SP-2 District. Under the current Zoning Regulations, a PUD in the SP-2 District is permitted to have a maximum FAR of 4.5 and a maximum height of 90 feet. Under the Zoning Regulations in effect at the time the PUD was originally approved, a PUD in the SP District was permitted to have a maximum FAR of 6.0 and a maximum height of 130 feet³. The Zoning Commission has previously approved an FAR of 2.45 and a maximum height of 127.5. The Addition will raise the total FAR for the Site to 3.8, which is well within that permitted under the former and current Zoning Regulations for a PUD in the SP/now-SP-2 district, and will have a maximum height of 127.5.

C. Impacts of Addition Under Section 2403.3

The Addition will have no adverse impacts on the area. Parking and loading will remain unchanged for the Site. Children's Hospital has engaged a traffic consultant to review and analyze the project to confirm that there will be no unacceptable impacts on traffic or changes in demand for parking as a result of the Addition. Furthermore, the parking facilities are centrally located and convenient for hospital users, which alleviates potential congestion or parking on nearby streets. Additional parking facilities are available off-site for staff, and there are a number of Metro bus routes operating along Michigan Avenue, Irving Street and North Capitol Street which serve the public.

³ Section 2410.2 of the Zoning Regulations states that a "PUD that already received preliminary approval or for which an application filed before December 8, 1995, may continued to processed to completion in accordance with the regulations in effect at the time of filing or may be processed in accordance with this revised chapter at the option of the applicant with the Commission's approval."

The Addition will have only positive impacts on the community and the District. Children's Hospital's primary goal with this application is to improve the overall delivery of critical health services to the public. The Addition will enable the hospital to provide needed facilities to enhance the health, safety and welfare of its users. The Addition is designed to be in conformance with the goals and objectives of the Comprehensive Plan. It will continue to make possible a wide range of pediatric health services. Furthermore, the proposed use, scale and design of the Addition are in keeping with the previously approved PUDs and with the immediate environs.

The Addition has been conceived as a development which will continue to improve these qualities by creating an environment that is pleasing to both patients and employees. As a result, Children's Hospital will continue to be a source of pride and benefit to the District of Columbia as a whole.

D. Not Inconsistent with Comprehensive Plan Under Section 2403.4

As discussed below in Section VI, the proposed Addition is not inconsistent with the Comprehensive Plan.

E. Public Benefits and Project Amenities

The PUD guidelines require the Zoning Commission to evaluate specific public benefits and project amenities of a proposed project. Public benefits are defined as “superior features of a proposed planned unit development that benefit the surrounding neighborhood or the public in general to a significantly greater extent than would likely result from development of the site under the matter of

right provisions of this title.” 11 DCMR §2403.6. “A project amenity is one type of public benefit, specifically a functional or aesthetic feature of the proposed development, that adds to the attractiveness, convenience or comfort of the project for occupants and immediate neighbors.” 11 DCMR §2403.7. Furthermore, in deciding a PUD application, the Zoning Commission is required to “judge, balance and reconcile the relative value of amenities and public benefits offered, the degree of development incentives requested, and any potential adverse effects according to the specific circumstances of the case.” 11 DCMR §2403.8.

Public benefits and project amenities may be exhibited in a variety of ways and may overlap with furthering the policies and goals of the Comprehensive Plan. Due to the special character of Children's Hospital, the amenities provided by this project and the Addition, are somewhat different from those normally provided within a PUD.

The project will provide the following:

- Enhanced ability to continue to deliver high quality, nationally recognized health services to the community (11 DCMR §2403.9(g))
- Provide critically needed pediatric services (11 DCMR §2403.9(i))
- Provide health services to the local population and to District residents of all income levels (11 DCMR §2403.9(i))
- High quality, superior design reflective of the architectural character of the building previously approved and providing a visually strong identity for a building in a prominent location (11 DCMR §2403.9(a))

- First Source Employment Agreement and a Memorandum of Understanding for Local, Small and Disadvantaged Business Enterprises ("MOU for LSDBE") (11 DCMR §2403.9(e))

In balancing the benefits, flexibility and impacts as required in Section 2403.8, the Zoning Commission can easily find that the public benefits and project amenities associated with this modification to the previously approved PUD satisfy the requirements of Chapter 24.

VI.

COMPLIANCE WITH COMPREHENSIVE PLAN

The Addition advances the purposes of the Comprehensive Plan, is consistent with the Generalized Land Use Map, and furthers and complies with the major themes and elements for the District and Ward in the Comprehensive Plan.

A. Purposes of the Comprehensive Plan

The purposes of the Comprehensive Plan are six-fold:

(1) Define the requirements and aspirations of District residents, and accordingly influence social, economic and physical development; (2) Guide executive and legislative decisions on matters affecting the District and its citizens; (3) Promote economic growth and jobs for District residents; (4) Guide private and public development in order to achieve District and community goals; (5) Maintain and enhance the natural and architectural assets of the District; and (6) Assist in conservation, stabilization, and improvement of each neighborhood and community in the District.

D.C. Code §1-245(b).

The Addition significantly advances these purposes by promoting the development of District residents through the provision of quality hospital care.

The Addition will continue to enhance the permanent character and stability of the neighborhood by further improving this particular site. Furthermore, construction of the Addition will promote economic growth and jobs for District residents through the First Source Employment Agreement and MOU for LSDBE.

B. Generalized Land Use Map

The Generalized Land Use Map designates the Site in the Institutional land use category, recognizing the current use of Children's Hospital. The area generally surrounding the Site includes land designated for Institutional uses (including the Washington Hospital Center, the VA Hospital and Howard University) and for Federal uses (US Soldier's Home). Further to the east and the west, the land use is designated for moderate density residential use. A copy of the relevant portion of the Generalized Land Use Map is attached as Exhibit L.

C. Compliance with Major Themes of the Comprehensive Plan

The Addition is consistent with many of the Comprehensive Plan's major themes. Children's Hospital strengthens the District's importance in the metropolitan area by being a preeminent hospital for pediatric care and research. The modification to the PUD process will ensure the development of an exceptional addition to enhance the services that are provided by Children's Hospital, which furthers the theme of respecting and improving the physical character of the District. 10 DCMR § 106. In addition, the PUD process for approval of the Addition will ensure community input. 10 DCMR § 107.

D. Compliance with Major Elements of the Comprehensive Plan

The Addition furthers many of the objectives and policies of many of the Comprehensive Plan's major elements. Most specifically, the Addition will further the Human Services Element, Chapter 10 of the Comprehensive Plan. Section 1000.1 of the Comprehensive Plan declares that the availability of health and social services is critical to the District community. A wide range of services that are indispensable must be delivered not only to the most desperate and destitute but to anyone in need of human services. These services include, among other, the prevention and control of disease and the provision of medical and health care. 10 DCMR § 1000.1(a, b).

This element also establishes policies in support of its human services delivery system objective of ensuring a broad range of community-based human services for those in need as follows: maintain and improve services for all children and adults in twenty-four hour care facilities (10 DCMR § 1002.2(c)) and place clients of the health care system in settings most appropriate to their needs (10 DCMR § 1002.2(d)). Furthermore, the element stresses improving the efficiency of health services, initiating all appropriate actions to contain the cost of health care to provide quality service at the lowest possible cost, establishing an all-embracing health information system for effective health planning, and improving strong health care planning processes which further the goals of quality and cost containment in health care. 10 DCMR § 1004.2(a, d, e).

The Addition is fully consistent with and follows the goals of this element of the Comprehensive Plan because the Addition will allow Children's Hospital to

deliver additional and better health care services to the residents of the District. Furthermore, the Addition will enhance the reputation of the District of Columbia as the home of a leading research center for pediatric care. More specifically, the Addition will promote the continuing development of highly specialized services that represent the hub of pediatric health care in the Washington metropolitan area.

The Addition also furthers the environmental protection elements of the Comprehensive Plan, which include protecting the environment of the District, resisting threats to its overall quality. 10 DCMR §401.1. Construction of the Addition will limit soil erosion and sedimentation during and after construction and will include storm water management controls. Furthermore, Children's Hospital will comply with all District and Federal environmental regulations as necessary through the permit process.

The basic philosophy of the District's Transportation Element is that by providing for the efficient movement of people and goods within the District and its metropolitan area, the District's transportation network can play a key role in the District's effort to maintain and enhance its function as the economic and cultural hub of the Washington Metropolitan Area. 10 DCMR §500.2. The Site is well served by mass transit and is designed to encourage use of these services. Furthermore, Children's Hospital provides parking in excess of that required by the Zoning Regulations and provide parking to meet the needs of its users.

E. Compliance with the Ward Plan of the of the Comprehensive Plan

The Addition furthers many of the objectives and policies of the Ward plan⁴. Specifically, a Ward objective is to encourage, with high density rezoning as necessary, and with appropriate measure to mitigate potential adverse impacts on surrounding areas, the development of hospitals and related health care services in Square 3129. 10 DCMR § 1529.1(k). A recommended action related to this objective is to ensure Square 3129's continue use, with expansion as necessary, for hospital and related health care services and uses. 10 DCMR § 1530.1(h)(2)(C)(i). These specific policies for Children's Hospital clearly establish the District's intent to support expansion of these facilities and important services provided by Children's Hospital.

**VII.
NEED FOR EXPEDITED REVIEW**

Children's Hospital respectfully requests that the Zoning Commission expedite review of this modification to any extent possible. Such expedited review is critical to remedy the lack of clinical and support space necessary to maintain the short-term projected growth of Children's Hospital. The additional square footage is required to sustain current volume and projected growth per Children's Hospital's Five Year Strategic Plan.

Furthermore, the construction must be completed prior to occupancy of the space below the Addition due to the high risks associated with patient safety during construction. Specifically, the heavy steel construction directly above an occupied

⁴ The Site is currently located in Ward 5. At the time the Comprehensive Plan was adopted, the Site was located in Ward 4. Therefore, Chapter 15 (Ward 4 Plan) is used to evaluate the Addition.

in-patient unit in the East Wing has been determined to be unsafe. With no relocation options available, occupancy of the in-patient unit would have to be delayed, further exasperating the space deficiencies that Children's Hospital is experiencing. Similarly, in-place renovation of the OR project with interstitial space surrounded by occupied operating room's and the NICU has been deemed too high risk for acceptable patient safety. Relocation of the NICU would be essential for infant safety/development issues, and there is no acceptable interim or permanent location within the existing structure that could be used for such relocation.

Finally, if occupancy of the fourth floor (immediately below the Addition) is delayed, there would be an unacceptable delay in Children's Hospital's disaster preparedness facilities. Specifically, the fourth floor has been designed as a quarantine capable unit. If there is a delay in occupancy, Children's Hospital will not be able to timely deliver this critical component of the Federally funded disaster preparedness plan.

Accordingly, it is imperative that Children's Hospital obtain approval for the Addition in an effort to continue construction and to comply with the original occupancy schedule. To fail to do so could jeopardize the unique care that is required for the infants and children who are treated at Children's Hospital. Furthermore, it could place Children's Hospital out of compliance with the final element of its Federally-supported emergency preparedness plan.

VIII.
WORK WITH COMMUNITY

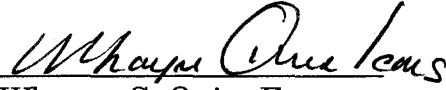
Children's Hospital maintains close contact with the community. The Addition will be presented to the Advisory Neighborhood Commission 5C in detail at its June 15th monthly meeting.

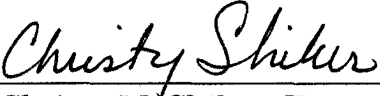
IX.
CONCLUSION

For the foregoing reasons, Children's Hospital submits that the modification to the approved PUD meets the standards of Chapter 24 of the Zoning Regulations; is consistent with the purposes and intent of the Zoning Regulations and Zoning Map; is consistent with the previous approved PUDs in Order No. 14 and Order No. 619; is consistent with the land use objectives of the District of Columbia; will enhance the health, welfare, safety and convenience of the citizens of the District of Columbia; satisfies the requirements for approval of a modification to a PUD; provides significant public benefits and project amenities; advances important goals and policies of the District of Columbia and, therefore, should be adopted by the Zoning Commission. Accordingly, Children's Hospital requests that the Zoning Commission approve the modification to the approved PUD.

Respectfully submitted,

HOLLAND & KNIGHT LLP
2099 Pennsylvania Avenue, NW, Suite 100
Washington, D.C. 20006
(202) 828-5001

By: 
Wayne S. Quin, Esq.

By: 
Christy M. Shiker, Esq.

A



PUD019

DALE GATE RD

GOV

US Soldiers and
Airmans Home

GOV

US Soldiers and
Airmans Home

Veterans Admin

GOV

McMillan Reservoir

R-5-B

Glenwood Cemetery

R-3

CHANNING ST

W ST

GOV

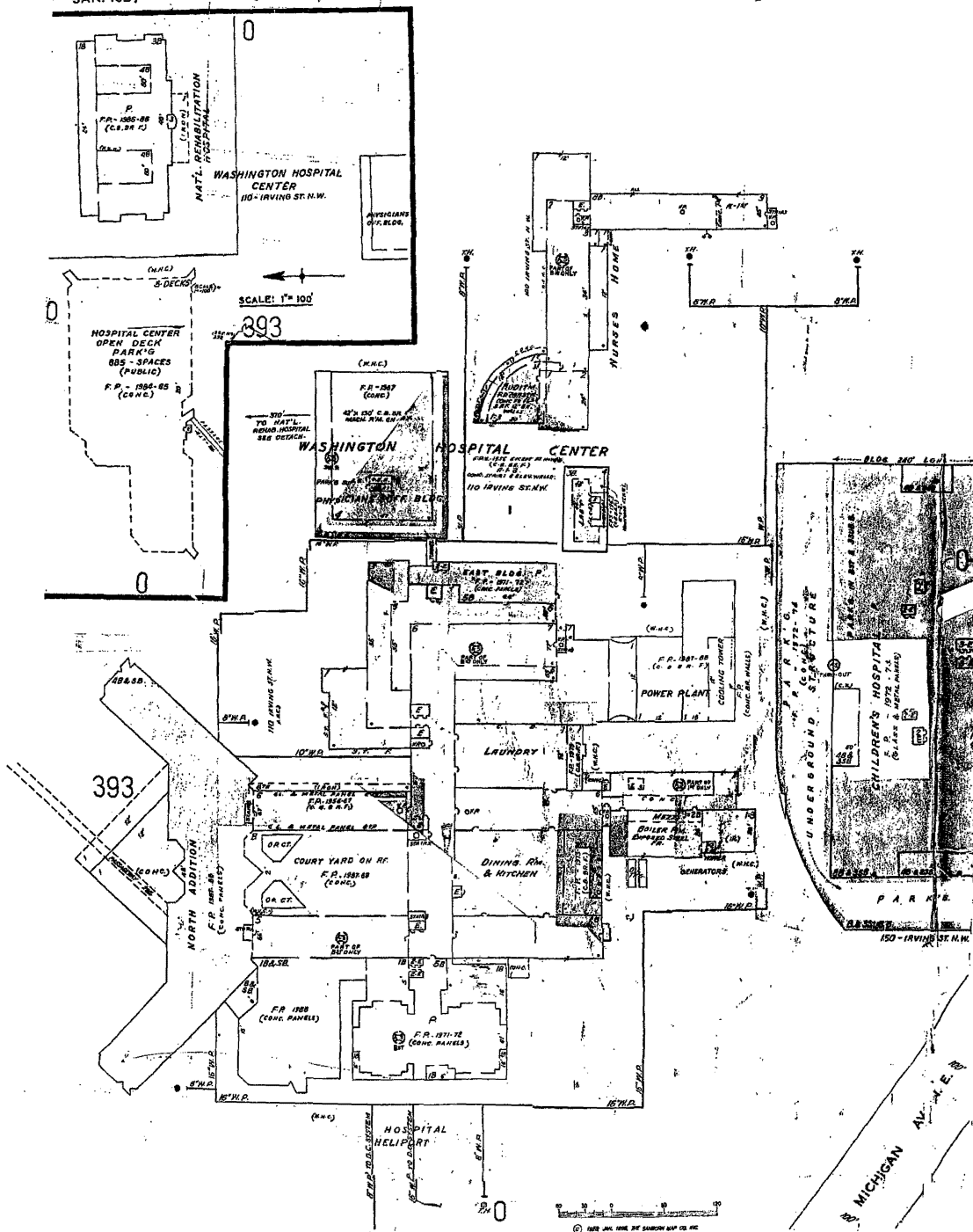
R-3

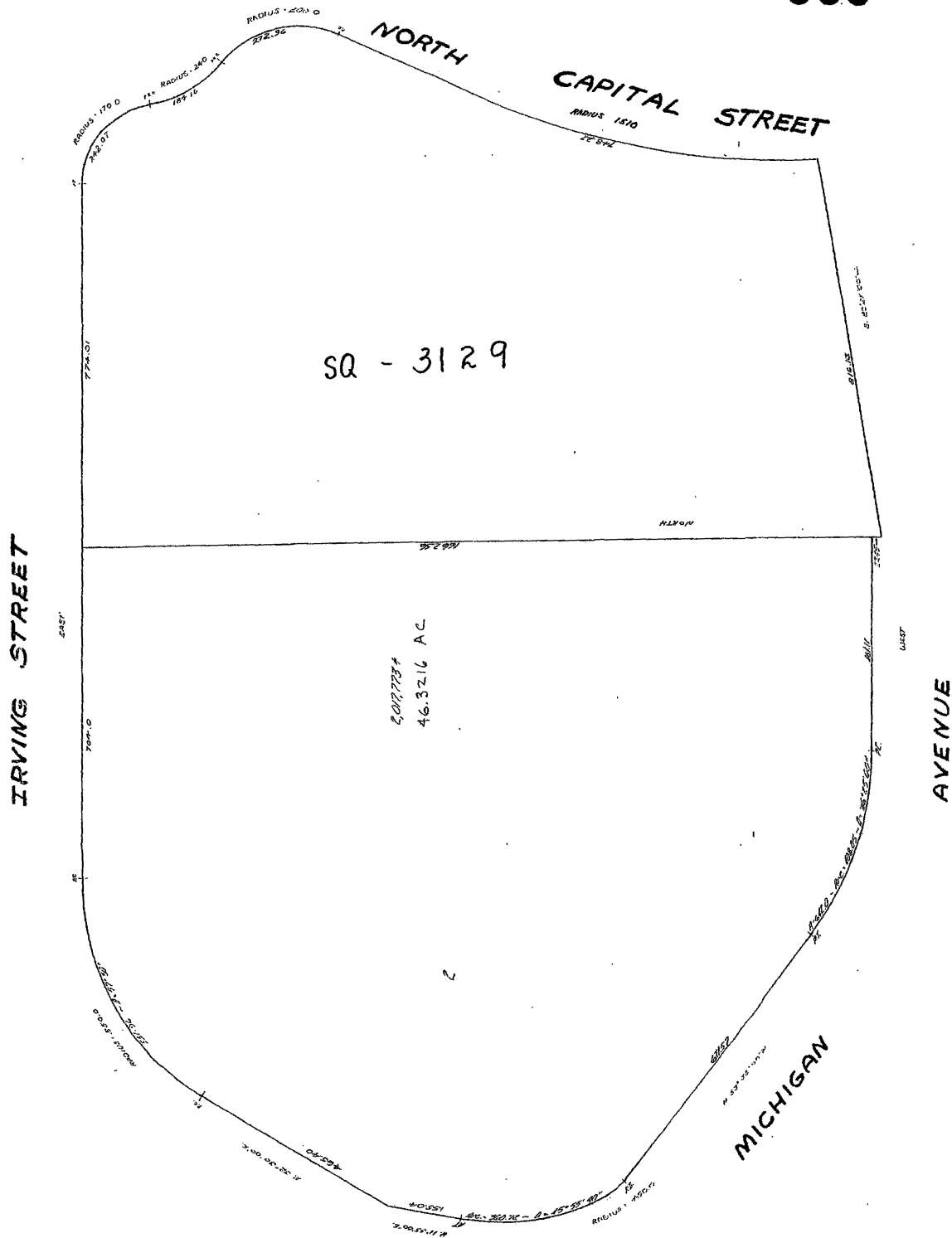
V ST

B

"A"

JAN. 1957





c

Washington, D.C., May 11, 2008

Scale: 1 inch = 200 feet Recorded in Book 157 Page 15

Furnished to: **HOLLAND & KNIGHT (FREDA HOBAR / R. REID)**

By: D.M.

Date: _____

(Signature of owner or his authorized agent)

NOTE: Data shown for Assessment and Taxation Lots or Parcels are in accordance with the records of the Department of Finance and Revenue, Assessment Administration, and do not necessarily agree with deed description.



D

Government of the District of Columbia
ZONING COMMISSION



Zoning Commission Order No. 14
April 23, 1970

ORDERED:

That after public notice and hearing as prescribed by law, the following application for a planned development under the provisions of Article 75 of the Zoning Regulations is found to be in harmony with the intent and purpose of the Zoning Regulations and is approved, in final form, by the Zoning Commission as follows:

70-3 Application under Article 75 for
 Planned Unit Development of part
 of Lot 1, Square 3129 (7.528 acres)
 at 110 Irving Street, N. W.

The Zoning Commission determines that the action of September 18, 1968, in Case No. 68-49 constituted preliminary approval with guidelines for the later Article 75 application. Therefore, this is considered a final application under the provisions of Article 75 of the Zoning Regulations.

Subject to the following conditions and guidelines:

(a) The development will take place in two phases.

(b) Phase I Development

- | | | |
|------------------|---|-----------|
| 1. Height | - | 91.5 feet |
| 2. Stories | - | 4 |
| 3. F.A.R. | - | 1.307 |
| 4. Lot occupancy | - | 40.8% |

Exhibit A

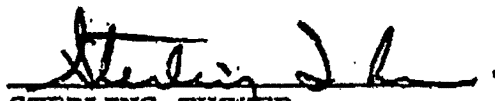
Order No. 14
April 23, 1970
PAGE 3

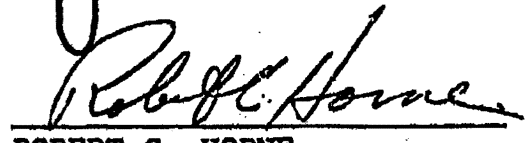
Change from R-5-A to SP part of lot 1, Square
3129.

This map change is not to take effect
until plans are filed with the Board of Zoning
Adjustment for further processing under the pro-
visions of Section 7501.4 of the Zoning Regulations.


WALTER E. WASHINGTON

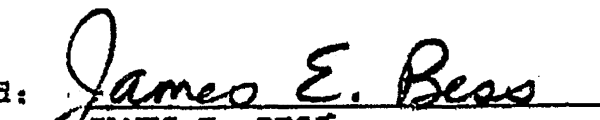

GILBERT HAHN, JR.


STERLING TUCKER


ROBERT C. HORNE

J. GEORGE STEWART

Attested:


JAMES E. BESS
Administrative Officer

E

Before the Board of Zoning Adjustment, D.C.

PUBLIC HEARING - April 15, 1970

Appeal No. 10369 Washington Hospital Center, appellant.

THE ZONING ADMINISTRATOR OF THE DISTRICT OF COLUMBIA, appellee.

On motion duly made, seconded and carried, with Samuel Scrivener, Jr. abstaining, the following Order of the Board was entered at the meeting of April 22, 1970.

EFFECTIVE DATE OF ORDER - June 25, 1970

ORDERED:

That the appeal for further processing of a large scale development under Article 75 of the Zoning Regulations for the new Children's Hospital located at Michigan Avenue and Irving Street, NW., on a portion of Lot 1, Square 3129, be granted conditionally.

FINDINGS OF FACT:

1. The Zoning Commission for the District of Columbia on April 23, 1970, in Zoning Case No. 70-3, granted a change in zoning from R-5-A to SP for a portion of Lot 1 in Square 3129 located at Michigan Avenue and Irving Street, NW., owned by the Washington Hospital Center, for the development under Article 75 as planned unit development, a new Children's Hospital.

2. The Zoning Commission specifically approved Phases 1 and 2 of construction which calls for four stories in the first phase and six stories in the second stage with respective floor area ratios of 1.307 and 2.45. Lot occupancy for the first phase will be 40.8 per cent and lot occupancy for Phase 2 will be 59.4 per cent. The height for Phase 1 will be 91.5 feet and 127.5 feet for Phase 2. The approved parking consists of underground spaces for 1,000 vehicles.

3. In addition to the incorporation by reference of the entire files of the Zoning Commission in Zoning Case No. 70-3, applicant at public hearing submitted for consideration by the Board all of the requirements under Section 7501.41.

Appeal No. 10369
June 25, 1970
PAGE 2

The applicant in this appeal has requested approval of Phase 1 of construction approved by the Zoning Commission. There are no changes in the plans since Zoning Commission approval. It is expected that construction will commence in September of 1970.

4. The Board approves Phase 1 of the planned unit development in accordance with the plans in the record of the Zoning Commission in Zoning Case No. 70-3 and the plans submitted to the Board in this appeal. Phase 2 of construction will be constructed at a later date, after approval by this Board.

5. Applicant complies with the requirements of Section 7501.41 since it has submitted and the Board has approved the following:

- [a] Typical floor plans and architectural elevations for the proposed Hospital;
- [b] Roof plans and architectural elevations of all roof structures for the building;
- [c] Final grading and drainage plan for the development area;
- [d] Planting and landscaping for the development area;
- [e] Finished site plan with lot areas and dimensions showing all buildings. These plans are identical with those presented to the Zoning Commission.
- [f] The detailed parking garage and circulation plans as required.

6. Applicant complies with Section 7501.42 in that the Zoning Commission has approved Phases 1 and 2 of construction and this Board has approved Phase 1.

Appeal No. 10369
June 25, 1970
PAGE 3

7. Applicant complies with Sections 7501.43 through 7501.45 in that the plans submitted to the Board do not deviate from the plans submitted to the Zoning Commission.

8. This appeal was filed and heard under plan by Leo A. Daly Company, Architects, drawings No. 1/9 and 3/9 approved as noted by Arthur P. Davis, member of the Board, on June 18, 1970.

9. Applicant complies with Sections 7501.47 and 7501.39 in that the area of the planned unit development contains more than one acre; the file contains a certification that all information submitted is in accordance with the elements and guidelines contained in the Zoning Commission's approval; the proposed use, location, dimension, number of stories and height of each building and structure and finished grades were submitted to the Zoning Commission in Case No. 70-3; the plans submitted to the Zoning Commission also indicate the area, dimensions of the lot proposed for the building, the lot occupancy of the building. The exhibits of record indicate the location and number of all off-street parking spaces and unloading berths; the existing topography of the area; the elevation of streets and alleys bounding the site; the existing or proposed public and private rights of way and easements bounding or traversing the project area and which rights of way or easements are to be continued, relocated or abandoned; the location, approximate number and size of uses and commercial adjuncts within the structure; and all other maps and documents required under Section 9101 for an amendment to these Regulations.

10. No objection to this appeal was registered at the public hearing.

OPINION:

This appeal complies with the Zoning Commission approval. The Board concludes that the roof structures of this proposed Children's Hospital will harmonize with the street frontage of the building in architectural character, material and color. The roof structures are in harmony with the purpose and intent of the Zoning Regulations and will not tend to affect adversely the use of nearby and adjoining property.

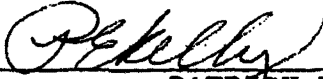
Appeal No. 10369
June 25, 1970
PAGE 4

This Order shall be subject to the following conditions:

- a. The Board shall retain jurisdiction over this application for further processing in accordance with the provisions of subparagraph 7501.49.
- b. Applicant shall record an appropriate covenant covering the development of the entire project as approved by the Zoning Commission Case No. 70-3 and this appeal.

BY ORDER OF THE D.C. BOARD OF ZONING ADJUSTMENT

ATTESTED:

By: 
PATRICK E. KELLY
Secretary of the Board

THAT THE ORDER OF THE BOARD IS VALID FOR A PERIOD OF SIX MONTHS ONLY UNLESS APPLICATION FOR A BUILDING AND/OR OCCUPANCY PERMIT IS FILED WITH THE DIRECTOR OF INSPECTIONS WITHIN A PERIOD OF SIX MONTHS AFTER THE EFFECTIVE DATE OF THIS ORDER.

F

Government of the District of Columbia
ZONING COMMISSION



ZONING COMMISSION ORDER NO. 619
Case No. 88-34M/70-3
(PUD Modification - Childrens Hospital)
July 10, 1989

Pursuant to notice, the Zoning Commission for the District of Columbia held a public hearing on April 13, 1989 to consider the application from the Children's Hospital National Medical Center for review and approval of a modification of a Planned Unit Development ("PUD") pursuant to Chapter 24 of the Zoning Regulations of the District of Columbia, DCMR, Title 11, Zoning. The public hearing was conducted in accordance with the provisions of Chapter 30 of that title.

FINDINGS OF FACT

1. The application which was filed by the Children's Hospital National Medical Center was filed on December 20, 1988, and requested review and approval of a modification to a previously approved PUD for Lot 12, Square 3129. The Commission approved this two-Phase PUD on April 23, 1970, in Case No. 70-3, Z.C. Order No. 14. In this Order, the Commission re-zoned the site from R-5-A to SP-2. The site is currently zoned SP-2 today.
2. The Commission, in Order No. 14, approved the development of a new hospital to be constructed in two phases. Phase I allowed the construction of a 4-story building, 91.5 feet in height, with a floor area ratio ("FAR") of 1.307. The allowable lot occupancy was 40.8%. The Commission also approved an underground parking facility for 1,000 vehicles. Phase I of the construction was approved by the Board of Zoning Adjustment in BZA Order No. 10369, and construction of that phase was completed in 1972. Phase I contained 881 parking spaces.
3. The PUD site is located in the western portion of Square 3129 and is bounded by Irving Street, N.W. to the north, Michigan Avenue, N.W., to the south and North Capitol Street to the east. Square 3129 contains 46.32 acres.

Exhibit B

Z.C. ORDER NO. 1-9
CASE NO. 88-34M/70-3
PAGE 2

4. ✓ Children's Hospital now proposes to construct Phase II of the PUD with three components. First, Children's Hospital proposes to construct a 7-story structure at the western end of the existing building. The new structure will be located in a triangular area bounded by the existing building, Michigan Avenue, and the rear service drive. This structure is to be constructed over an exterior plaza located immediately to the west of the existing hospital. Because the structure will provide administrative space, it will not require interstitial space between floors. Therefore, its height will be equal to the 4-story structure of the existing hospital. This new structure will contain approximately 100,000 square feet and be constructed of glass, concrete and steel with appropriate entrances for the components of the hospital facility. The structure will contain faculty offices, conference and educational facilities, storage space, and administrative and support services.
5. Second, Children's Hospital also proposes to relocate the existing helipad from its location on the ground just to the east of the existing building to the roof top of the existing roof structure. The relocation will provide a more efficient facility for receiving critically injured patients. The roof top location will provide the most direct access to the critical care facilities of the hospital. The helicopter pad will be served by an elevator which will go directly to the treatment facilities below. A new penthouse will be built to house the elevator structure to reach the level of the helicopter landing pad. The relocated pad has been approved by the Federal Aviation Administration and is directly accessible to the appropriate flight path.
6. Third, Children's Hospital proposes to construct additional underground parking. This will be provided by a new facility located underneath the site of the existing helipad. The new facility will provide an additional 652 parking spaces. The addition of these spaces will provide adequate parking to meet the contemporary needs of the hospital. This parking facility will not only serve the medical office building but will provide convenient access to the rest of the medical center. Section 2101 of the Zoning Regulations would require the provision of 337 parking spaces. The original Commission Order for the PUD approved 1,000 spaces and 882 were actually built. With the additional spaces, a total of 1,535 spaces will be provided on the site and will meet the parking needs of the hospital for the immediate future.
7. The Commission originally approved an increase in the

Z.C. ORDER NO. 1 /
CASE NO. 88-34M/70-3
PAGE 3

height of the structure to a total of 127.5 feet. The original Phase II was to use the additional height to construct two additional floors on top of the existing building, which measures 91.5 feet in height. Children's Hospital proposes to modify the Phase II approval by constructing the new west addition instead of the additional stories as previously approved. With the addition of the helicopter landing pad, the proposed project is 126 feet in height, well within the guidelines originally set for Phase II. Also, the Commission approved a total FAR of 2.45 for Phase II of the project. The total FAR of the newly configured building will be 1.65, well within the original Phase II guidelines and the SP-2 PUD guideline of 4.5.

8. Square 3129 contains numerous medical facilities including the Washington Hospital Center, the National Rehabilitation Hospital, the Veterans Administration Hospital, the Physicians Office Building, the Nurses Home and the Hyman Building. Directly to the north and south of Square 3129 are federal facilities, which are un-zoned, including the United States' Soldier's Home to the north, and the McMillan Reservoir to the south. Adjacent to the McMillan Reservoir is the District of Columbia Filtration Station.
9. The SP-2 District permits matter-of-right medium/high density development including all kinds of residential uses, with limited offices for non-profit organizations, trade associations and professionals permitted as a special exception requiring approval of the BZA, to a maximum height of ninety feet, a maximum floor area ratio (FAR) of 6.0 for residential and 3.5 for other permitted uses, and a maximum lot occupancy of eighty percent for residential uses.
10. The subject site is located in Ward 4. The Generalized Land Use Map of the Comprehensive Plan designates the site as "institutional". This designation appears to recognize the traditional use of the site and its surroundings as hospital facilities. Therefore, Children's Hospital will be seeking to further develop the site as an institutional use in accordance with the Comprehensive Plan. The area surrounding the site is characterized by a mixture of uses which are institutional on a north-south axis and residential on an east-west axis. Located nearby are Glenwood Cemetery, Howard University and Catholic University. There is no abutting residential property.
11. Under the PUD process of the Zoning Regulations, the Commission has the authority to impose development conditions, guidelines and standards which exceed or are less than matter-of-right standards. The PUD

Z.C. ORDER NO. 6 J
CASE NO. 88-34M/70-3
PAGE 4

guidelines for development in the SP-2 District permit a building height of 90 feet and 4.5 FAR.

12. Because of the special character of Children's Hospital, the amenities provided by this project are somewhat different than those provided within the usual PUD. This PUD will provide the following amenities:
 - a. enhanced delivery of Children's Hospital's high quality, nationally recognized health services to the community.
 - b. improved Children's Hospital's educational, research, and administrative services.
 - c. the provision of high quality superior design reflecting of the architectural character of the building previously approved which provides a strong visual identity for a building in a prominent location.
 - d. a commitment to let a certain percentage of construction contracts to certified minority businesses.
 - e. a commitment for a first-source employment agreement with the Department of Employment Services.
 - f. improvement of emergency care treatment because of the helipad's proximity to the emergency services, thus saving crucial seconds during the treatment of an emergency care patient.
13. Under Section 2403.10 of the Zoning Regulations, to exceed the FAR guidelines, Children's Hospital must justify the public benefits resulting from the additional relief. In this case, the granting of the requested relief will result in the continuation of high quality pediatric services. Both height and FAR of the modified Phase II are within the guidelines established for the original Phase II by the Commission.
14. The Zoning Regulations require that off-street parking be provided, pursuant to Section 2100. The total parking requirement for Children's Hospital is 337 spaces. The hospital proposes to provide 1,540 spaces. The additional spaces will be meet the parking needs of the hospital for the immediate future.
15. The District of Columbia Office of Planning ("OP"), by a report dated March 30, 1989, recommended approval of this application. OP stated that the applicant's

proposal was not inconsistent with the objectives of the Comprehensive Plan and fell within the SP-2 PUD development guidelines. OP was further of the opinion that the applicant's proposal is in keeping with the type of institutional development and activity that is appropriate for this area of the city.

16. Advisory Neighborhood Commission ("ANC") 4D voted to support this application at its regular meeting held on March 14, 1989.
17. No opposition to this application was presented at the hearing.
18. Children's Hospital has requested flexibility in the final design of the building addition, helipad, and parking facility.
19. There were no statements in support or opposition to the Project.
20. The Commission finds that Children's Hospital meets the intent and purpose of the Zoning Regulations and the Planned Unit Development process.
21. The Commission finds that the proposed development is not inconsistent with the Comprehensive Plan for the National Capital.
22. The Commission finds that there are sufficient public benefits and amenities in the application beyond that which would be obtained under matter-of-right development of the site.
- ✓ 23. The Commission finds that the height and density of the proposed new structure is suitable for the site. Its scale and design are compatible with the existing building and the buildings in the vicinity.
24. As to the request for design flexibility by Children's Hospital, the Commission finds that the requests would further aid the development of Children's Hospital.
25. The proposed action of the Commission was referred to the National Capital Planning Commission ("NCPC"), under the terms of the District of Columbia self-government and Government Reorganization Act. The NCPC, by report dated July 3, 1989, indicated that the proposed action of the Commission would not affect adversely the federal establishment or other federal interests in the National Capital nor be inconsistent with the Comprehensive Plan for the National Capital.

Z.C. ORDER NO. 13
CASE NO. 88-34M/70-3
PAGE 6

CONCLUSIONS OF LAW

1. The Planned Unit Development process is an appropriate means of controlling development of the subject site because control of the use and site plan is essential to ensure compatibility with the neighborhood.
2. The development of this PUD carries out the purpose of Section 2400, which is to encourage the development of well-planned residential, institutional and mixed-use developments which will offer a variety of building types with more attractive and efficient overall planning and design not achievable under matter-of-right development.
3. The development of this PUD is compatible with city-wide goals, plans and programs, and is sensitive to environmental protection and energy conservation.
4. Approval of this PUD application is not inconsistent with the Comprehensive Plan for the National Capital.
5. Approval of this PUD application is consistent with the purposes of the Zoning Act.
6. The proposed PUD application can be approved with conditions which ensure that the development will not have an adverse affect on the surrounding community, but will enhance the neighborhood and ensure neighborhood stability.
7. Approval of this PUD application will promote orderly development in conformity with the entirety of the District of Columbia Zone Plan as embodied in the Zoning Regulations and Map of the District of Columbia.
8. The Zoning Commission has accorded to the Advisory Neighborhood Commission ("ANC") 4D the "great weight" to which it is entitled.
9. This application is subject to compliance with D.C. Law 2-38, the Human Rights Act of 1977.

DECISION

In consideration of the Findings of Fact and Conclusions of Law, the District of Columbia Zoning Commission orders APPROVAL of the application for consolidated review and modification of a previously approved PUD for Lot 2, Square 3129 in the southern portion of the square located near Michigan Avenue, N.W., and Irving Streets, N.W. The approval of this PUD is subject to the following guidelines, conditions and standards:

Z.C. ORDER NO. 6-9
CASE NO. 88-34M/70-3
PAGE 7

1. The PUD shall be developed in accordance with the plans submitted by Ellerbe Becket Architects, marked as Exhibit No. 20B, as modified by the guidelines, conditions and standards of this order.
2. Lot 2 shall be additionally developed with an addition to the existing hospital building, which will contain institutional uses, a helipad, and a parking facility for an additional 654 cars.
3. The height of the building shall not exceed 127.5 feet and shall have six (6) stories.
4. The percentage of lot occupancy for the building shall not exceed 59.4%.
5. The overall floor area ratio (FAR) for the entire PUD site shall not exceed 2.45.
6. The overall project shall contain no less than 1540 parking spaces as shown on the plan marked as Exhibit No. 20B.
7. The building materials for the project and the theme of design shall match the materials and design theme of the existing main building.
8. The applicant is granted flexibility in the final detailing of the building with respect to the following matters:
 - a. Varying the location and design of all interior components, including partitions, structural slabs, doors, hallways, columns, stairways, rooms, so long as the variation do not change the exterior configuration of the building, including the penthouse;
 - b. Varying the design and arrangement of components within the enclosure of the penthouse;
 - c. Varying the arrangement of the parking spaces and modification to the below grade space to provide the opportunity for storage and other space to serve the proposed users of the building, provided that the total number of parking spaces is not less than 1540; and
 - d. Allowing the flexibility permitted, pursuant to the provisions of 11 DCMR 2407.6.
9. The material covering any new penthouse shall be

Z.C. ORDER NO. 6
CASE NO. 88-34M/70-3
PAGE 8

compatible with the material covering the existing penthouses. The penthouse shall not be greater than 14 feet in height.

10. The applicant shall build the east addition to the existing structure in accordance with the guidelines, conditions and standards of Phase II of Zoning Commission Order No. 14, and provided that the integrity and theme of design of the main building be maintained and extended to the east addition.
11. Prior to the issuance of a building permit, the applicant shall implement a program with the Department of Employment Services to provide first-source jobs. hiring for District residents.
12. No building permit shall be issued for the sites until the applicant has recorded a covenant in the land records of the District of Columbia, between the owner and the District of Columbia, and satisfactory to the Office of the Corporation Counsel and the Zoning Regulations Division of the Department of Consumer and Regulatory Affairs (DCRA), which covenant shall bind the applicant and its successors in title to construct on and use this property in accordance with Z.C. Order No. 14 or amendments thereto, including this order of the Zoning Commission.
13. The Zoning Secretariat shall not release the records of this case to the Zoning Regulations Divisions of DCRA, until the applicant has filed a certified copy of said PUD covenant with the records of the Zoning Commission.
14. This modification to the PUD approved by the Commission shall be valid for a period of two years from the effective date of this order. Within that time, application must be filed for the building permit, as specified in 11 DCMR 2407.2 and 2407.3. Construction shall start within one year of the effective date of this order.
15. Pursuant to D.C. Code sec. 1-2531 (1987), section 267 of D.C. Law 2-38, the Human Rights Act of 1977, the applicant is required to comply fully with the provisions of D.C. Law 2-38, as amended, codified as D.C. Code, Title 1, Chapter 25 (1987), and this Order is conditioned upon full compliance with those provisions. Nothing in this order shall be understood to require the Zoning Regulations Division/DCRA to approve permits, if the applicant fails to comply with any provision of D.C. Law 2-38, as amended.

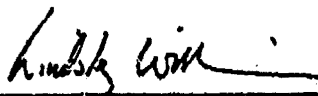
Vote of the Zoning Commission at the public hearing on April 13, 1989: 3-0 (Maybelle Taylor Bennett, Lloyd D. Smith,

Z.C. ORDER NO. 61,
CASE NO. 88-34M/70-3
PAGE 9

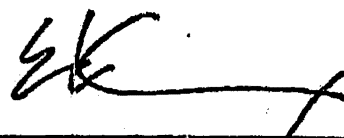
Lindsley Williams to approve with conditions, Elliott Carroll and John G. Parsons, present, not voting).

This order was adopted by the Zoning Commission at the monthly meeting on July 10, 1989 by a vote of 3-0 (Maybelle Taylor Bennett, Lloyd D. Smith and Lindsley Williams to approve, John G. Parsons, present, not voting, William L. Ensign, not voting not having heard the case).

Pursuant to 11 DCMR 3028, this order is final and will take effect upon publication in the D.C. Register, that is



LINDSLEY WILLIAMS
Chairman
Zoning Commission



EDWARD L. CURRY
Executive Director
Zoning Secretariat

zcorder619/EB50

G

Government of the District of Columbia
ZONING COMMISSION



ZONING COMMISSION ORDER NO. 784
Case No. 94-21C
(PUD & Map Amendment - Washington Hospital Center)
September 11, 1995

Pursuant to notice, a public hearing of the Zoning Commission for the District of Columbia was held on May 15, 1995. At that hearing session, the Zoning Commission considered the application of the Medlantic Healthcare Group, Inc., d/b/a Washington Hospital Center ("WHC"). The application requested consolidated review and approval of a planned unit development (PUD) and related amendment to the Zoning Map of the District of Columbia, pursuant to Chapter 24 and Section 102, respectively, of the District of Columbia Municipal Regulations (DCMR), Title 11, Zoning. The public hearing was conducted in accordance with the provisions of 11 DCMR 3022.

FINDINGS OF FACT

1. The application, which was filed on December 12, 1994, requested consolidated review and approval of a PUD and related change of zoning from R-5-A to SP-1 for a portion of Lot 2 in Square 3129 located at 110 Irving Street, N.W.
2. The application requested permission to construct a physicians' office building, certain adjunct hospital-related facilities and a parking structure. The project will provide much needed office space for physicians who practice at WHC and convenient parking for patients, staff and visitors to the Center's various medical facilities.
3. The project site consists of 237,726 square feet of land (5.48 acres) which is currently used predominantly as a surface parking lot. The PUD site is also occupied by an existing four-story physicians' office building which was built in 1967. The subject site is located entirely within the WHC campus, which itself is a 39 acre parcel of land near the intersection of Irving and North Capitol Streets, N.W.
4. The PUD site is rectangular in shape with approximately 417.58 feet of linear frontage on First Street, N.W., and approximately 552.80 feet of linear frontage on Hospital Drive. At this location, both First Street, N.W. and Hospital Drive are private roads maintained by WHC.

5. The WHC campus and the PUD site, are located in Ward 4 in the northwest quadrant of the District of Columbia, near the intersections of North Capitol Street and Michigan Avenue and Irving Street, N.W. The street address for WHC is 110 Irving Street, N.W.
6. The R-5-A District permits matter of right single-family detached and semi-detached dwellings, and with the approval of the Board of Zoning Adjustment (BZA), low density development of general residential uses including rowhouses, flats, and apartments to a maximum floor area ratio (FAR) of 0.9, a maximum lot occupancy of 40 percent, and a maximum height of three-stories/40 feet.
7. The SP-1 District permits matter of right medium/high density development including all kinds of residential uses, with limited offices for nonprofit organizations, trade associations and professionals permitted as special exceptions requiring approval of the BZA, to a maximum height of 6.5 feet, a maximum FAR of 4.0 for residential and 1.5 for other permitted uses, and a maximum lot occupancy of 80 percent for residential uses.
8. Under the PUD process of the Zoning Regulations, the Zoning Commission has the authority to impose development conditions, guidelines and standards which may be more or less than the matter of right standards. The Commission may also approve uses that are permitted as special exceptions by the BZA, and may approve development variances that are required by the project design.
9. The District of Columbia Generalized Land Use Map of the Comprehensive Plan for the National Capital designates the WHC campus and the PUD site as being in the institutional land use category.
10. WHC proposes to construct the PUD project in two phases on land which it owns in fee simple. Phase I of the project will be comprised of three building elements: (1) a 146,608 gross square foot physicians' office building with below grade parking (approximately 132 spaces); (2) a parking structure with approximately 719 spaces (two levels of which will be below grade) and (3) a 18,424 gross square foot Atrium Connector system. Phase I of the project will consist of a floor area ratio of 1.82. The proposed office building will be 67 feet in height (five stories) above grade and two levels of parking below grade. The building will include up to 30 guest rooms (16,000 gross square feet). The parking facility

will be 22 feet in height (three levels) above grade and two levels below grade. The project will occupy 55 percent of the PUD site. Phase I will be built in a single construction phase.

11. Phase II is an addition to the proposed physicians' office building and parking garage, which will provide an additional 24,740 square feet of gross floor area in the office building and two additional levels on the parking structure. Phase II will bring the project to a total of 454,006 square feet of gross area yielding a F.A.R. of 2.47. The two additional levels of parking on the parking structure will increase the parking supply by an additional 310 spaces. Phase II is intended to be built within ten years of completion of Phase I, or when office space needs exceed the available supply.
12. Vehicular access will be provided from the existing entrances to the campus. One loading area (45 feet x 50 feet) will be provided for light service and delivery vehicles. Major deliveries will be provided through the existing WHC system using the hospital's central service loading docks.
13. The Atrium Connector system will be a one-story element and provide an enclosed passageway between the new parking structure, the proposed and existing physicians' office buildings, the WHC Cancer Institute and the main hospital building. The Atrium Connector will serve as a hub of out-patient activity by providing a comfortable and secure circulation space that will include a pharmacy, laboratory drawing station, a radiology suite, a heart monitoring station and patient rest areas.
14. The Executive Vice President of Medlantic Healthcare Group, Inc. ("Medlantic"), testified on behalf of the application. He briefly described Medlantic as a integrated health delivery system established in 1982 as a not-for-profit organization governed by a 30-member Board. This health care delivery system includes the Washington Hospital Center, the National Rehabilitation Hospital, the Visiting Nurse Association of D.C., Medlantic Manor at Lamont Riggs (nursing home) and Medlantic Center for Ambulatory Surgery. He testified that Medlantic provides health care services to 250,000 persons annually, employs 6,000 persons and has a medical staff of 1,200 members. He indicated that, in addition to its 907-bed flagship teaching/tertiary care hospital, the Washington Hospital Center provides the following key services: Washington Heart, a cardiac care service with open heart program and heart transplantation; Washington Cancer Institute; Kidney and Pancreas Transplantation Programs; MedStar Trauma Center; and a regional burn center.

He testified that as a not-for-profit organization, the applicant receives no federal or local subsidies. It derives its \$850-million annual gross revenues primarily from patient care services. As part of its mission, it provides \$70 million (\$36 million in costs) in uncompensated care to its patients and it provides \$9 million in community-based services.

15. The Vice President of Medlantic testified as to the importance of the PUD project to the WHC. He indicated that the PUD, if approved, would provide new office capacity for new physicians, 30 guest rooms for out-of-area patients and families and 350 additional parking spaces on a campus that is pressed for parking.
16. Medlantic's Chief Financial Officer and Vice President for Finance of the WHC, testified as to the current structure of health care compensation, underscoring the problems brought to the forefront by uninsured, or underinsured, patients. He also testified with regard to other general health care issues, including the interrelationship of doctors and hospitals, the general trends in the industry towards the shrinkage of the health care dollar, emphasis on costs, the increasing role of the insurer and the move from in-patient to out-patient care. He testified as to the financial stability of the Washington Hospital Center indicating that the annual profit margins for the WHC have been approximately one percent versus the industry's norm of three to five percent. He, thus, indicated that the surplus earnings of WHC were very fragile in any given year. He stressed that WHC has taken aggressive action to provide economic stability, including cost improvements, increasing its market share and providing, above all, quality services.
17. The Chief Financial Officer also testified as to the Phase II implementation plan indicating that it will only begin if both physicians' office buildings are at capacity and there are unmet needs for office space on the campus. He also indicated that the second phase needs to be feasible both with regard to preleasing commitments, competitive rental rates and a financial break even pro forma.
18. The project's architect testified as an expert in architecture and planning and was recognized as such by the Commission. He indicated that the location of the proposed project was the product of a study of all available sites on the WHC campus. He indicated that the master planning concept for the project was to develop a focal point for all ambulatory care services on campus, to create a better orientation to visitors to the

campus, tie together the existing physicians' office building and solve some of the visual problems inherent in the campus' current physical layout.

19. He stated that the project will be built in phases, and that Phase I will include 146,608 gross square feet in a five-story, medical office building. He indicated that the first floor, and the Atrium Connector (approximately 18,424 square feet), will be primarily for ambulatory care facilities and diagnostic testing centers, with floors two through four for physicians' offices. He indicated that the top floor of Phase I will be utilized for approximately 30 guest rooms for visitors to the campus. As part of Phase I, the applicant proposes to build a two-story parking structure to accommodate 719 cars. There also will be two levels of parking below the physicians' office building, which will interconnect with the garage underneath the existing physicians' office building. The architect indicated that the design concept of the project was to integrate the existing uses on the campus with the proposed uses in an orderly, efficient manner. After working closely with the Office of Planning, he had developed a tripartite architectural theme that delineated a base, a middle and a top to the physicians' office building. This architectural theme was carried through to the parking garage and tied together with decorative colored railings and window treatment. The applicant introduced this new architectural facade treatment at the public hearing with leave of the Commission.
20. The architect testified that Phase I will have a gross floor area of 334,758 square feet (1.82 FAR). The total project, when Phase II is completed, will have 454,006 gross square feet (2.47 FAR). The total new parking spaces added in Phase I will be 851, with an additional 310 added in Phase II. Lot occupancy of Phase I will be 55 percent and it will rise to 59 percent with the construction of Phase II. The maximum building height of the project will be achieved in Phase I and will be 67 feet.
21. The landscape architect, recognized as an expert by the Commission, presented the campus landscaping plan, contained in Exhibit 19 of the record, to the Commission. He indicated that the landscape plan took into account the various landscaping opportunities with the idea to enhance and refine the major entrances to the campus, as well as to provide durability and flexibility of plantings. He testified that the overall concept of the landscape plan would mitigate the activity and development that is occurring on the campus and create a friendlier environment for patients and users of the campus. He also described the landscaping plan for the

project, identifying the key species of plants and treatments for those various species and plants. He further stated that the landscaping design was intended to represent a human scale with well-proportioned and appropriate open spaces with other site amenities, such as walkways, lighting and signage, to create an inviting environment for the campus.

22. The applicant's traffic consultant, recognized as an expert by the Commission, testified that the traffic generated by the project could easily be accommodated on the existing street network and that all intersections in the vicinity of the site would operate at acceptable levels of service. He indicated that his report had been coordinated with the District of Columbia Department of Public Works, which agreed with his conclusions that the project would have no adverse impact on traffic and transportation in the vicinity of the site. He concluded that, based on the data and analysis prepared by his office, he believed that the road network would be adequate to accommodate both phases of the proposed development and that the development would not result in any adverse impact on the local transportation network.
23. The applicant's community development consultant, testified at the hearing that the benefits and amenities offered by this PUD project were consistent and comparable to other not-for-profit PUDs that have been approved by the Zoning Commission. She testified that the following benefits would accrue from approval of this application, including continuing many of the programs of benefit to patients and residents in the District:
 - (1) Construction of a new physicians' office building and parking garage to expand and stabilize the Center's physician base and provide expanded and convenient out-patient health care services;
 - (2) A physical link between the two physicians' office buildings and the parking garage;
 - (3) The creation of 125 construction jobs with at least 51 percent of the jobs targeted for D.C. residents;
 - (4) The creation of 120-125 new office staff jobs to service the physicians' office building;
 - (5) Increased revenues to the District of Columbia with projected payroll taxes of \$3.6-\$3.8 million annually, with parking garage revenues of \$52,000;

- (6) The provision of at least 35 percent of the procurement services for the project to be targeted to certified local, small and disadvantaged businesses;
 - (7) The continuation of the WHC's jointly sponsored job training program with DOES, previously scheduled to end next year, for an additional three years;
 - (8) The continuation by the WHC of its Youth Mentoring Program; and
 - (9) The continuation of WHC's Social Services Department, which serves as a critical link between the clinical services provided at the hospital and the social services available in the community.
24. The community development consultant also testified that the applicant had entered into the First Source Agreement with the District of Columbia Department of Employment Services and has expected a Memorandum of Understanding with the Department of Human Rights and Minority Business Development to insure maximum opportunities for District residents and local, small and disadvantaged businesses.
25. The applicant requested that the PUD project be permitted to be developed in two phases as shown in the drawings prepared by Marshall, Erdman and Associates, Inc. marked as Exhibit No. 19 of the record. This phasing would allow the WHC to avoid unnecessary expenditures of monies and be most flexible to respond to market demand for additional office space for physicians practicing on the campus.
26. The District of Columbia Office of Planning (OP), by memorandum dated May 4, 1995, and through testimony at the public hearing, recommended approval of the application. OP indicated the following:

"The existing R-5-A zone district does not permit the construction of the proposed project because of the project's height and FAR requirements. The requested rezoning of the site along with approval of the proposed PUD would allow the additional height and FAR needed. The proposed project and the requested change in zoning are consistent with the designation of the site as institutional on the Generalized Land Use Map of the Comprehensive Plan".

In the Office of Planning's opinion, it is unlikely that the project would have negative impacts on the immediate neighborhood in terms of noise, traffic or other

objectionable conditions because of its location well away from the community and within the confines of the WHC Campus. Based upon the analysis above, the Office of Planning recommends that the Zoning Commission approve this application".

27. By letter from the Assistant City Administrator for Economic Development, dated May 4, 1995, and by testimony from the Chief of Staff for the Office of Economic Development, the Office of Economic Development recommended approval of the subject application.
28. The District of Columbia Department of Employment Services by a letter from its Director, dated May 4, 1995 to the record indicated DOES' wholehearted endorsement of the PUD and recognized Medlantic's previous contributions to joint job training initiatives and other DOES programs for training in various health care professions.
29. District of Columbia Councilmembers Charlene Drew Jarvis, Harry B. Thoms, Sr., Jack Evans, Linda W. Cropp, John L. Ray and Frank Smith submitted letters of support to the record of the application.
30. Advisory Neighborhood Commission (ANC) 4D, by letter dated May 5, 1995 and by testimony delivered at the public hearing, recommended approval of the project noting that its constituents, in particular, and other District residents, in general, need more primary care physicians and health services to assist in improving the quality of health, especially among its seniors, infants, teenagers and young adults. ANC 4D indicated its full support for the request to construct the physicians' office building.
31. Advisory Neighborhood Commission (ANC) 5A, an adjacent ANC, by letter dated May 3, 1995, jointly with the Brookland Neighborhood Civic Association, Inc., evidenced support of the application. Both organizations believe that the project will benefit the community and the District of Columbia.
32. There were no other parties in support of or in opposition to the proposal either entered into the record or appearing at the public hearing.
33. Two practicing physicians, both residents of the District of Columbia who practice at the Washington Hospital Center, testified in support of the application indicating the need for the facility and the need for the provision of quality health care services in the District of Columbia. In addition, an employee of the dialysis clinic currently

operating in the existing physicians' office building on campus testified in support of the application.

34. The record contains approximately 120 letters in support of the application, including letters of support from the principal of Taft Junior High School, the Fort Stevens Senior Center and the Mended Hearts, Inc. WHC has a youth mentoring program with Taft Junior High School and works closely with both the Fort Stevens Senior Center and the Mended Hearts, Inc.
35. There were no letters in opposition to the proposal submitted for the record of the case, and no persons in opposition to the proposal testified at the public hearing.
36. At the conclusion of the public hearing, the Zoning Commission left the record of the case open for the applicant to submit the First Source Agreement, the MBOC Agreement, a revised landscape plan for the front courtyard of the new physicians' office building and the full written statement of the community development consultant, and for the Department of Public Works to submit as report.
37. On May 26, 1995, the applicant submitted the community development consultant's testimony, the First Source Employment Agreement and the Memorandum of Understanding with the Department of Human Rights and Minority Business Development, as well as revised landscape and grading plans for the courtyard in front of the new office building. The Department of Public Works did not file a report in the record.
38. By letter dated June 12, 1995, the applicant requested the Zoning Commission to reopen the case to accept a legal description of the proposed PUD site. The applicant indicated that the legal description is one of fact, which is not subject to substantive challenge by any party.
39. The Commission, by consensus vote at its June 12, 1995 monthly meeting, reopened the record and accepted the June 12, 1995 legal description of the proposed PUD site.
40. On June 12, 1995 at its monthly meeting, the Commission took proposed action to approve the application.
41. The Commission concurs with the recommendations and positions of OP, DHCD, DMED, ANC-4D, ANC-5A and the applicant and believes that the application should be approved.

42. The Commission finds that the PUD project and map amendment is in conformance with the Comprehensive Plan which designates the site for institutional use.
43. The Commission finds that the approval of this application will result in the efficient, economic utilization of the site; provide improved urban design; opportunity for increased health care facilities; and adequately address the protection of the public health, safety, welfare and convenience.
44. The Commission finds that the applicant has met the requirements of 11 DCMR Chapter 24 and has fulfilled the intent and purposes thereof.
45. The proposed action of the Zoning Commission to approve the application with conditions was referred to the National Capital Planning Commission (NCPC) pursuant to the terms of the District of Columbia Self-government and Governmental Reorganizational Act. The NCPC, by report dated September 7, 1995, indicated that the proposed action of the Zoning Commission would not adversely affect the Federal establishment or Federal interests in the National Capital or be inconsistent with the Comprehensive Plan for the National Capital.

CONCLUSIONS OF LAW

1. The planned unit development process is an appropriate means for controlling development of the site in a manner consistent with the best interests of the District of Columbia.
2. The development of this PUD carries out the purposes of Chapter 24 of the Zoning Regulations to encourage the development of well-planned institutional, commercial and mixed-use developments which will offer a variety of building types with more attractive and efficient overall planning and design than might otherwise be achieved under matter of right development.
3. The development of this PUD is compatible with District-wide and neighborhood goals, plans and programs, and is sensitive to environmental protection and energy conservation.
4. The approval of this application is not inconsistent with the Comprehensive Plan for the National Capital because it will stabilize the delivery of health care services, strengthen the distinguishing physical characteristics of the area, and increase employment opportunities.

5. The approval of the application is consistent with the purposes of the Zoning Act and the Zoning Regulations of the District of Columbia, which include stabilizing land values and improving mixed-use areas.
6. The application can be approved with conditions which ensure that the development will not have an adverse affect on the surrounding community or the District. The project will enhance the area.
7. The approval of this application will promote orderly development in conformity with the entirety of the District of Columbia Zone Plan as embodied in the Zoning Regulations and Map of the District of Columbia.
8. This application is subject to compliance with D.C. Law 2-38, the Human Rights Act of 1977, as amended.
9. The Zoning Commission has accorded the recommendations and opinions of ANC 4D the "great weight" to which they are entitled.

DECISION

In consideration of the findings of fact and conclusions of law herein, the Zoning Commission for the District of Columbia hereby orders APPROVAL of this application for consolidated review of a planned unit development for a portion of Lot 2 in Square 3129, and the amendment to the Zoning Map from R-5-A to SP-1. The approval is subject to the following guidelines, conditions and standards:

1. The planned unit development (PUD) shall be developed in accordance with the plans prepared by the architectural firm, Marshall Erdman and Associates, that part of the record in this case marked as Exhibits 19 and 155 as modified by the guidelines, conditions and standards of this Order.
2. The PUD site shall be developed with mixed-use buildings, including institutional, health care, medical office, commercial and parking uses.
3. The PUD shall be completed in two phases, and have a maximum floor area ratio (FAR) of 2.47.
4. Phase I shall be comprised of three building elements: a 146,608 gross square foot physicians' office building with below grade parking (approximately 132 spaces); a parking structure with approximately 719 spaces; and a 18,424 gross square foot Atrium Connector system. The physicians' office building shall not exceed 67 feet in height (five stories)

above grade and two levels of parking below grade. Phase I shall have a maximum FAR of 1.82 and shall be built in a single construction phase.

5. Phase II shall be an addition to the physicians' office building and parking garage completed in Phase I. Phase II shall provide an additional 24,740 square feet of gross floor area in the office building and two additional levels on the parking structure for an additional 310 parking spaces.
6. The applicant must apply for a building permit for Phase II of the project within 10 years of the issuance of a Certificate of Occupancy for Phase I.
7. Loading areas, driveways and walkways shall be located on the site as shown on Exhibit 19 of the record.
8. Landscaping and signage shall be provided for the campus and for the site as shown on the landscape plans marked as Exhibits 19, 155 and 160 of the record. The landscape plan for the campus shall be completed within five years of the effective date of this order.
9. Antennas and satellite dishes shall be permitted on the roof of the buildings subject to the applicable Zoning Regulations.
10. The applicant shall have the flexibility with respect to the following matters:
 - (a) Varying the location and design of all interior components, including partitions, structural elements, slabs, doors, hallways, columns, stairways, location of elevators, electrical and mechanical rooms, provided that the variations do not change the exterior configuration of the buildings;
 - (b) Making minor adjustments in the facade, window and balcony detailing, including the flexibility to shift the location of doors on the ground floor;
 - (c) Varying the location of exterior lighting fixtures;
 - (d) Varying the species of plant materials within the ranges proposed in the landscaping plan;
 - (e) Varying the final selection of exterior materials within the color ranges and material types as proposed, based on availability at the time of construction; and

- (f) Varying the arrangement and number of parking spaces, modification of below-grade space to accommodate the need of tenants and users of the project and handicapped persons, provided that there is no reduction in the total number of parking spaces provided.
- 11. The applicant shall enter into a First Source Agreement with the Department of Employment Services (DOES) which provides that the applicant will use DOES as its first source for recruitment, referral and placement of employees in connection with the construction of the project.
- 12. The applicant shall enter into a Memorandum of Understanding with the Department of Human Rights and Minority Business Development which provides for the applicant to make a bona fide effort toward at least 35 percent of project related costs to certified local, disadvantaged and minority business enterprises.
- 13. The applicant shall continue its commitment to jointly sponsor a job training program with DOES for three years after the effective date of this Order.
- 14. The applicant shall continue its Youth Mentoring Program with Taft Junior High School for five years after the effective date of this Order.
- 15. The applicant shall continue its Social Services Department for five years after the effective date of this Order.
- 16. No building permit shall be issued for the site until the applicant has recorded a covenant in the land records of the District of Columbia between the owner and the District of Columbia satisfactory to the Office of Corporation Counsel and the Zoning Regulatory Division of the Department of Consumer and Regulatory Affairs (DCRA). The covenant shall bind the owner and all successors in title to construction and use of the property in accordance with this Order and amendments thereto of the Zoning Commission.
- 17. The amendment to the Zoning Map from R-5-A to SP-1 for the PUD site shall be effective upon recordation of the PUD covenant as required by 11 DCMR Section 2407.
- 18. The Office of Zoning shall not release the record of this case to the Zoning Division of DCRA until the applicant has filed a certified copy of the covenant with the records of the Zoning Commission.

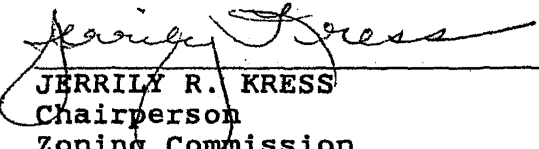
GUIDELINES, CONDITIONS & STANDARDS
Z.C. CASE NO. 94-21C
PAGE NO. 14

19. The PUD approved by the Zoning Commission shall be valid for a period of two years from the effective date of this Order. Within such time, the applicant must file for a building permit as specified in 11 DCMR Section 2407.1 and Section 2406.8. Construction shall start within three years of the effective date of this Order.
20. Pursuant to D.C. Code Section 1-2531 (1987), Section 267 of D.C. Law 2-38, the Human Rights Act of 1977, the applicant is required to comply fully with the provisions of D.C. Law 2-38, as amended, codified as D.C. Code, Title 1, Chapter 25, (1987), and this Order is conditioned upon full compliance with those provisions. Nothing in this Order shall be understood to require the Zoning Division of DCRA to approve permits if the applicant fails to comply with any provisions of D.C. Law 2-38, as amended.
21. The applicant shall file a master plan for the Washington Hospital Center campus prior to seeking any further zoning approvals for the campus.

Vote of the Zoning Commission taken at the regular monthly meeting on June 12, 1995: 3-0 (Maybelle Taylor Bennett, John G. Parsons and Jerrily R. Kress to approve with conditions - William L. Ensign not present, not voting).

This order was adopted by the Zoning Commission at its regular public meeting on September 11, 1995 by a vote of 3-0: (John G. Parsons, Maybelle Taylor Bennett and Jerrily R. Kress to adopt; William L. Ensign not voting, not having participated in the case).

In accordance with the processing of 11 DCMR 3028, this order shall become final and effective upon publication in the D.C. Register; that is on OCT 27 1995.


JERRILY R. KRESS
Chairperson
Zoning Commission


MADELIENE H. ROBINSON
Director
Office of Zoning

11

Government of the District of Columbia
ZONING COMMISSION



Zoning Commission Order No. 969
Case No. 00-02
(PUD Map Amendment – MedStar Health)
October 17, 2002

Pursuant to notice, a public hearing of the Zoning Commission for the District of Columbia was held on December 7, 2000. At the hearing session, the Zoning Commission considered the application of MedStar Health ("MedStar" or the "Applicant"). The application requested a rezoning from R-5-A to SP-1 and SP-2 for all of the area of Square 3129 that is zoned R-5-A. Subsequently, the application was amended by the Applicant to request a consolidated review and approval of a Planned Unit Development ("PUD") and related amendment to the zoning map of the District of Columbia pursuant to Chapter 24 and § 102, respectively, of the District of Columbia Municipal Regulations ("DCMR"), Title 11 Zoning. The public hearing was conducted in accordance with the provisions of 11 DCMR 3022. For the reasons stated below, the Commission granted first-stage approval with conditions.

FINDINGS OF FACT

1. This application was filed on November 4, 1999, requesting a map amendment rezoning from R-5-A, a flexible multi-family residential classification, to SP-1 and SP-2, medium-density and medium-high-density districts, respectively, all of the area within Square 3129 that is zoned R-5-A (the "Site"). The Site is part of Lot 2 in Square 3129 and contains approximately 1,460,851 square feet or 33.53 acres of land area.
2. Square 3129 contains numerous medical facilities, including the Washington Hospital Center, The National Rehabilitation Hospital, The Children's Hospital National Medical Center, and the Veterans Affairs Medical Center.
3. Lot 2, which is the subject of this application, is occupied by the Washington Hospital Center and The National Rehabilitation Hospital. The remaining portion of Lot 2 was rezoned by Zoning Commission Order No. 784 (September 11, 1995), in which the Commission approved a PUD and map amendment to allow the construction and use of the Physicians' Office Building, certain adjunct hospital related facilities, and a parking structure. That PUD also approved a rezoning from R-5-A to SP-1 of approximately 237,726 square feet of land (5.48 acres), which was used predominantly for surface parking. All other areas of Lot 2 remained in the R-5-A district.

4. The Site is located in the northwest quadrant of the District of Columbia and is bounded by Irving Street to the north, Michigan Avenue to the south and west, and North Capitol Street to the east. Directly to the north and south of the Site are government facilities that are unzoned, including the United States Soldiers' and Airmen's Home to the north, the Veterans Administration Hospital to the east, and the Macmillan Reservoir and (old) Sand Filtration site to the south. The reservoir property is operated by the U.S. Army Corps of Engineers. The old Sand Filtration site is owned by the Government of the District of Columbia. The site slopes approximately 15 feet from the northwest to the southeast and is 40% occupied by the buildings and structures, 31% paved, and 29% open space.
5. The R-5-A district permits matter-of-right single-family detached and semi-detached dwellings, and, with the approval of the Board of Zoning Adjustment, low-density development of general residential uses including row houses, flats, and apartments to a maximum floor area ratio ("FAR") of 0.9, a maximum lot occupancy of forty percent (40%) and a maximum height of three (3) stories/forty (40) feet.
6. The SP-1 district permits matter-of-right, medium high-density development including all kinds of residential uses, and office development, both to be compatible with surrounding properties, to a maximum height of sixty-five (65) feet, a maximum FAR of 4.0 for residential and 1.5 for other permitted uses, and a maximum lot occupancy of eighty percent (80%) for residential uses.
7. The SP-2 district permits matter-of-right, medium high-density development including all kinds of residential uses, and office development, both to be compatible with surrounding properties, to a maximum height of ninety (90) feet, a maximum FAR of 6.0 for residential and 3.5 for other permitted uses, and a maximum lot occupancy of eighty percent (80%) for residential uses.
8. The Applicant assembled and submitted a "Master Plan 2000" for its campus, including the Site, upon which it based its application for the map amendment that it seeks. That document sets forth the history of the medical uses on the Site; the current zoning scheme; the development objectives of the Applicant for a fifteen (15) year period; the methodology that was used to assemble the Master Plan 2000; a description of the streets, building, topography, political jurisdictions, and comprehensive plan land use designations, adjacent planning considerations, adjacent zoning considerations; a public and bicycle transportation plan; an assessment of public transportation and bicycle routes; an explanation of existing conditions, a discussion of the programmatic and space needs of the hospital; development guidelines; a discussion of planning alternatives; floor plans; landscape plans; design illustrations, signage plans, circulation and way-finding designs; and an implementation schedule for the proposed development.

9. The implementation sequences are described in Phase I (the Emergency and Intensive Care Unit addition); Phase II (Laboratory and Administrative addition); Phase III (the Radiology and Mechanical Equipment addition); Phase IV (the Cancer Institute Expansion); Phase V (the addition to the East Building); and Phase VI (the Southeast Complex). The Master Plan suggests three zoning alternatives, labeled "A", "B", and "C." Of these, the Applicant seeks approval, through the PUD process, of Zoning Strategy B which is described at Figure 6.6c of the Master Plan 2000. The area proposed for rezoning to the SP-1 district contains 623,866-square-feet. The existing floor area amounts to 537,657 square feet. Rezoning this parcel to SP-1, which has a maximum FAR of 1.9, will result in a maximum building floor area of 1,185,345 square-feet (FAR) at a maximum permitted height of sixty-five (65) feet.
10. The area proposed for the SP-2 district contains 836,985-square-feet. The existing floor area in that parcel is 902,972 square feet. Thus, the maximum 3.4 FAR permitted in the SP-2 district would permit an additional building floor area of 1,942,792 square-feet at a maximum height of ninety (90) feet. Thus, the approval of Zoning Strategy B will result in a maximum total additional building floor area of 2,845,749 square feet of building space to be used primarily for the medical services and related uses described in the Master Plan 2000.
11. On January 25, 2001, the Applicant formally adopted the Master Plan 2000 as its development guide for the period 2001 to 2020.
12. The Applicant also submitted a transportation impact analysis which discusses peak hour traffic counts, roadway capacities under the existing zoning, trip generation rates under the existing zoning and roadway, and trip generation capacities under the proposed rezoning. This study concluded that three (3) of the nine (9) intersections within the immediate vicinity of the Site operated at less than acceptable levels of service and, the existing parking supply is "somewhat inadequate." However, the report goes on to recommend improvements to those three (3) intersections and concludes that the increased parking supply proposed in the Master Plan 2000 will increase the parking supply to an adequate level.
13. The Applicant testified at the public hearing that it was in discussions with the District Division of Transportation of the Department of Public Works (now the District Department of Transportation ("D-DOT")) to formalize an Agreement to improve nearby roadway capacities and efficiencies. By this proposed agreement, the Applicant would provide partial funding for certain roadway improvements that are deemed appropriate and necessary to resolve the intersection and parking supply deficiencies associated with the proposed development plan.
14. At the public hearing, Christine Swearinger, the Applicant's Senior Vice-President, testified that MedStar is the largest health care system in the Baltimore-Washington region. It consists of seven (7) hospitals, more than 3,000 licensed

beds, 22,000 employees, and 4,000 affiliated positions. In Washington, D.C., MedStar operates the Washington Hospital Center, the National Rehabilitation Hospital, Georgetown University Hospital, the Visiting Nurses Association, and MedStar Manor at Lamond Riggs. The Washington Hospital Center was founded in 1958 at its current location as a result of the merger of the old Garfield Memorial Hospital; the Episcopal Eye, Ear, and Throat Hospital; and the Central Dispensary and Emergency Hospital. The Washington Hospital Center is now the District of Columbia's largest health care facility providing the largest number of inpatient/outpatient and emergency services for the residents of the District of Columbia, especially for residents who live east of Rock Creek Park.

15. Ms. Swearinger testified that the developments proposed under the Master Plan 2000 were critical to alleviate crowded and cramped facilities, to renovate substandard facilities to modern standards, to replace obsolete facilities, and to improve access to facilities and service areas within the Washington Hospital Center campus. She stated that the density limitations of the existing residential zoning (0.9) FAR accord the Washington Hospital Center no more latitude to expand facilities to serve the needs of its patients and physicians. The hospital campus is built to the capacity of the existing R-5-A zoning envelope. She testified further that it is extremely unlikely that the Site would ever be used for the residential purposes for which it is zoned.
16. Clarence Brewton, Jr., the Applicant's Vice-President of Regulatory Compliance and Community Development, testified that the Applicant held meetings with neighboring residents, its patients, its institutional neighbors, Advisory Neighborhood Commissions, civic and citizens associations, community leaders, elected officials, and oversight agencies to create and comment upon the Master Plan 2000. The Applicant also surveyed 21,000 households and incorporated those summary views into its Master Plan 2000.
17. Albert G. Dobbins III, of A.G. Dobbins & Associates, a planning consultant who was recognized as an expert in planning and zoning by the Commission, testified that the proposed rezoning from R-5-A to SP-1 and SP-2 is not inconsistent with the comprehensive plan, supports the theme of the National Capital Planning Commission's ("NCPC") Extending the Legacy Plan, is in harmony with the surrounding uses and zoning, and is consistent with the past and present uses of the site and the zoning regulations.
18. Gerald Oudens, of Oudens & Knoop Architects, recognized by the Commission as an expert in planning and zoning, testified to the site development history, the planning methodology of the Master Plan 2000, the existing conditions on the Site, functional issues, vehicular access issues, landscaping, the major space needs of the hospital, the gross floor area needs, the development plan objectives, the proposed development plan, and the proposed zoning and phased construction schedule. The specifics of his testimony are included in the Master Plan 2000 and

in slides submitted into the record by the Applicant on March 15, 2001. (Exhibit Number 20C)

19. O.R. George, of O.R. George & Associates, who was recognized by the Commission as an expert on traffic and parking, testified to MedStar's current site access needs and their impacts on the transportation and parking infrastructure with respect to the proposed development outlined in the Master Plan 2000. He also discussed the roadway and parking usage under both the current and the proposed development, and the improvements needed at critical intersections to reasonably accommodate the Applicant's development plan. The recommended improvements included intersection improvements at Irving and First Streets, N.W., First Street and Michigan Avenue, N.W., and at Michigan Avenue east, and west of the Children's Hospital Building. With these improvements, Mr. George concluded that the rezoning and development of the Washington Hospital Center campus site could be undertaken as proposed, without an adverse impact to area roadways.
20. On December 4, 2000, the D.C. Office of Planning ("OP") submitted a report and later testified at the public hearing in support of the application conditioned upon the approval of a letter agreement regarding roadway improvements between the Applicant and the D.C. Department of Public Works. In making this recommendation, the OP noted the design control and transportation management advantages of this application being processed as a PUD instead of as a map amendment case.
21. Representatives of the Children's Hospital National Medical Center, the Department of Veterans Affairs, Providence Hospital, Catholic University, the D.C. Chamber of Commerce, and the American Heart Association all submitted letters to the record in support of the application.
22. Various citizens, including a Commissioner from Advisory Neighborhood Commission ("ANC") 5C submitted statements to the record in support of this application.
23. By letter dated August 16, 2000, ANC 4D recommended that this application be approved. The letter did not address any particular issue or concern, but noted that the plan did not address the issue of offering some free parking for patients and visitors.
24. By letter dated December 1, 2000, ANC 5C expressed its support for the application. ANC 5C indicated that approval of the application, "will have negligible adverse impact upon the surrounding residential community." ANC 5C based its conclusion upon traffic control measures already taken by the Applicant as well as the District government, and the Applicant's commitment to work with ANC 5C to resolve any traffic or parking issues that might arise. Like

ANC 4D, ANC 5C expressed the concern of some of its members, "about the affordability of public parking for visitors and patients of the hospital." ANC 5C therefore recommended that MedStar should either provide a certain amount of free parking or implement a system of discounted parking.

25. Ms. Cleopatra Jones, President of the Bloomingdale Civic Association, appeared at the hearing to express that organization's support for the application.
26. Several area residents, including a Commissioner from ANC 4D, testified in support of this application.
27. There were no letters in opposition to the application submitted for the record , and no persons in opposition to the proposal testified at the public hearing.
28. At the conclusion of the testimony, the Commission asked the Applicant to consider how it might achieve its objectives using the process of a PUD rather than through a map amendment. Thereafter, the Applicant met with the OP to explore the means by which the Applicant's need for growth and flexibility could be accommodated within a PUD framework.
29. By its report dated, April 10, 2001, the OP indicated that it had developed a consensus approach that called for the Applicant to request a "hybrid" PUD. Under this approach, the Master Plan would be considered the PUD project. Each building would be reviewed by the Zoning Administrator for consistency with the master plan. OP and the Applicant disagreed over whether OP should also certify consistency. By letter dated April 9, 2001, the Applicant, "urge[d] the Commission to approve MedStar's rezoning request as stated in the Office of Planning's memorandum," with the exception of the OP certification process.
30. At its meeting on May 14, 2001, the Commission treated the Applicant's letter as an application for a consolidated PUD. The Commission, however, determined that the record evidence only supported approval of a first-stage PUD. Accordingly, it voted to approve Phases I through VI, as stated in the Master Plan 2000, as a first-stage PUD. However, the Commission specifically rejected the density proposed in Phase VI, stating that a project of lesser density should be submitted for later approval. The approval was also subject to the terms of the memorandum agreement relating to roadway improvements between MedStar and the D.C. Department of Public Works. The approval extends to Zoning Strategy B with a limit of 1.9 FAR in the SP-1 district and a limit of 3.4 FAR in the SP-2 district and square footage and height limitations as stated in the Master Plan 2000. All hospital uses, including Physicians' Office Buildings and related parking facilities, are approved as a matter-of-right.

31. On June 25, 2002, prior to the Commission taking final action to approve the first-stage PUD, the Applicant submitted plans and documents in satisfaction of the second-stage PUD application requirements of § 2406.12 of the Zoning Regulations. The Applicant specifically requested the Commission to:

- a. rescind its vote of May 14, 2001 approving projects I, II, III, IV, V, and VI as a first-stage PUD; and
- b. approve projects I, II, III, and IV as a consolidated PUD.

The Applicant stated that it would submit appropriate documents supporting subsequent approvals for projects V and VI (the East Building, the Southeast complex, and the expansion of the National Rehabilitation Hospital) separately for Commission action at a later date.

32. The Commission considered the June 25, 2002, submission at its public meeting of July 8, 2002, and, in the absence of comment on these documents by the OP and by ANC 4D, the Commission accorded those entities until August 30, 2002, to comment.

33. By memorandum dated September 3, 2002, the OP concluded that the Applicant had submitted documents sufficient to meet the requirements of § 2406.12 and stated its concern with the Commission acting on the Applicant's request without holding another public hearing. OP further recommended that the Commission incorporate the substantive provisions of MedStar's proposed agreement with D-DOT, relating to roadway improvements to be incorporated into the Zoning Commission's first-stage PUD Order.

34. ANC 4D did not make a submission into the record.

35. By letter dated September 9, 2002, D-DOT asked the Commission to incorporate the substantive provisions of its proposed memorandum agreement with the Applicant, as those provisions are stated in Appendix A to the OP's September 3, 2002, Memorandum, into any final zoning order in this case.

36. On September 9, 2002, at its monthly meeting, the Commission took no action with respect to the Applicant's request to rescind the previous vote in as much as such a request is not recognized under the Commission's rules of procedure. However, in recognition of the September 3, 2002, recommendation of OP and the September 9, 2002, recommendation of D-DOT, the Commission modified its earlier proposed action by adding conditions, inclusion of the provisions of the D-DOT agreement, to its first-stage approval.

37. The Commission finds that the first-stage elements of the PUD project and the related map amendment are in conformance with the comprehensive plan, which designates the site for institutional uses.
38. The Commission finds that the approval of this application will result in the efficient, economic utilization of the land; will provide improved building design; will create the opportunity for an increase in health care facilities; and will adequately address the protection of the public health, safety, welfare, and convenience.
39. The Commission finds that the Applicant has met the requirements of 11 DCMR, Chapter 24, with respect to first-stage PUDs and has fulfilled the intent and purposes thereof.
40. The proposed action of the Zoning Commission to approve the application as a first-stage PUD with conditions was referred to the NCPC pursuant to the terms of the District of Columbia Home Rule Act. The NCPC, by report dated October 3, 2002 indicated that the proposed consolidated PUD would not adversely affect the federal establishment or other federal interest in the National Capital, nor be inconsistent with the Comprehensive Plan for the National Capital

CONCLUSIONS OF LAW

1. Pursuant to the Zoning Regulations, the PUD process is designed to encourage high-quality development that provides public benefits. 11 DCMR 2400.1. The overall goal of the PUD process is to permit flexibility of development and other incentives, provided that the PUD project, "offers a commendable number or quality of public benefits, and that it protects and advances the public health, safety, welfare, and convenience." 11 DCMR 2400.2.
2. The development of this PUD carries out the purposes of Chapter 24 of the Zoning Regulations to encourage the development of all well-planned institutional, commercial, and mixed-use developments which will offer a variety of building types with more attractive and efficient overall planning and design that might otherwise be achieved under matter-of-right development.
3. The development of this PUD is compatible with District-wide and neighborhood goals, plans, and programs and is sensitive to environmental protection and energy conservation.
4. The approval of this application is not inconsistent with the comprehensive plan for the National Capital Area because it will stabilize the delivery of healthcare services, strengthen the distinguishing physical characteristics of the area, and increase employment opportunities.

5. The approval of this application is consistent with the purposes of the Zoning Act and the Zoning Regulations of the District of Columbia which include stabilizing land values and improving mix-use areas.
6. The application can be approved with conditions, which ensures that the development would not have an adverse effect on the surrounding community or the District.
7. The proposed PUD meets the minimum area requirements of § 2401.1 of the Zoning Regulations.
8. The approval of this application will promote orderly development in conformity with the entirety of the District of Columbia Zone Plan as embodied in the Zoning Regulations and Map of the District of Columbia.
9. This application is subject to compliance with D.C. Law 2-38, the Human Rights Act of 1977, as amended.
10. The Zoning Commission has accorded the recommendations and opinions of ANCs 4D and 5C the "great weight" to which they are entitled. The Commission is required under D.C. Code §1-309.10(d) (2001) to give great weight to the issues and concerns raised in the recommendations of the affected ANCs. ANC 4D did not indicate any issues or concerns, other than to indicate its position in favor of approval. The ANC did note that the provision of affordable public parking remained an open question. ANC 5C, for its part, indicated its belief that the adverse impact of the approval of this application would be negligible, the Commission notes the concerns raised by OP, to whom it must also give great weight, with respect to potential transportation-related impacts. However, the Commission, therefore, conditions this first-stage approval upon compliance with the substantive provisions of the agreement reached between the Applicant and D-DOT. The Commission notes that this agreement concerns actions which are tied to the issuance of building permits and certificates of occupancy, neither of which can be issued to the Applicant based upon first-stage PUD approval. Nevertheless, the Commission believes it is appropriate to include the substantive provisions of this agreement in this first-stage order in order to give the Applicant fair notice of its obligations should second-stage PUD approval be granted.
11. ANC 5C also recommended that MedStar address the need for affordable parking for patients and visitors. The Commission finds that the transportation and off-street parking plan, as conditioned hereby, is sufficient to avoid any adverse impacts resulting from the approval of this PUD. There are sufficient off-street parking spaces to accommodate the needs of the employees and guests of the Applicant. The Commission will not order the applicant to provide free parking spaces to the public, as raised by ANCs 4D and 5C, because no adverse impact from parking is anticipated from the proposed development.

DECISION

In consideration of the findings of fact and conclusions of law contained in this order, the Zoning Commission of the District of Columbia orders APPROVAL of this application as a first-stage PUD for a portion of Lot 2 in Square 3129 and an amendment to the zoning map from R-5-A to SP-1 and SP-2 as set forth in Zoning Strategy B of Master Plan 2000 (Figure 6.6c). The approval is subject to the following guidelines, conditions and standards, and such other condition as the Commission may impose in any subsequent order it may issue granting final PUD approval:

1. The PUD shall be consistent with the Washington Hospital Center, MedStar Health Master Plan 2000, as revised and dated August 2000, and submitted to the Zoning Commission record on April 6, 2001. The following conditions shall also apply to the PUD approval and shall supercede, or be in addition to, any elements of the Master Plan in contradiction to, or silent on these conditions.
2. The zoning that shall accompany the PUD shall be that shown in Zoning Strategy B, WHC Master Plan 2000.
3. The total gross floor area shall be limited to approximately 4.5 million square feet (3.1 million square feet of additional gross floor area (gfa) added to the current 1.4 million square feet).
4. The FAR for the 623,866-square-foot SP-1 portion of the PUD shall be limited to a cumulative 1.9, for a total of 1,185,345 FAR-countable square feet.
5. The FAR for the 836,985-square-foot SP-2 portion of the PUD shall be limited to a cumulative 3.4, for a total of 2,845,749 FAR countable square feet.
6. While included in the above totals, approval of the square footage for the Southeast Complex/Phase VI building, as indicated in Figure 7.7e of the Master Plan, is withheld pending consideration of FAR for this phase in a later Stage II application for the Phase VI area.
7. Buildings within the SP-1/PUD shall not exceed sixty-five (65) feet.
8. Buildings within the SP-2/PUD shall not exceed ninety (90) feet.
9. Sight lines from the United States Soldiers' and Airmen's Home, as illustrated in the Applicant's submission of March 5, 2001, Tab C, shall be maintained.
10. Assuming 2nd Stage PUD approval is granted, no more than 2,500,000 square-feet of new below-grade, non-FAR-countable space shall be constructed without an approved PUD modification. Permitted uses shall include all uses described in

Chapter 4, pages 5-8 and Chapter 7, pages 11-14 of the Master Plan 2000 dated August 2000, as submitted for the record on April 6, 2001.

11. The square footage allocable to physicians' office space, guest accommodations, and parking garages shall be that permitted as a matter-of-right under the zoning associated with the PUD.
12. The Applicant shall submit general site plans of all the proposed buildings, as well as dimensional floor plans, architectural facades, and sections for each of the buildings to be initially considered for Stage II PUD approval: i.e. Master Plan Phase I (the Emergency and ICU addition); Master Plan Phase II (Laboratory and Administrative addition); and Master Plan Phase III (the Cancer Institute and Linear Accelerator Addition).
13. The applicant shall adhere to the following transportation-related conditions:
 - a. MedStar shall implement the transportation management plan outlined in the Master Plan dated August 2000;
 - b. MedStar shall reimburse the District of Columbia Government for 100% of the traffic engineering and construction costs of Roadway Improvements 1 through 4, up to MedStar's Reimbursement Amount, as outlined in the table below:

Roadway Improvements	Reimbursement Amount
1. Irving Street and Hobart Place at-grade access.	\$1.2 million
2. Irving Street at-grade right turn in and right turn out access to Parking Pavilion I	\$75,000
3. Michigan Avenue at Hospital Center Drive (south) signalization and signage (including interconnection with adjacent signal).	\$100,000
4. Michigan Avenue and First Street signalization and geometric improvements.	\$100,000

- c. MedStar shall pay D-DOT the total Reimbursement Amount of \$1,475,000 prior to the issuance of a building permit to construct any structure, that individually, or in combination with existing structures or with other structures not yet built but for which building permits have been applied, would cause the development on the property, which is the subject of Zoning Commission Case #00-02 to be increased by 300,000 square feet of net building space (including underground or parking facilities) beyond what existed on the date of the final approval of this Order. MedStar shall notify D-DOT prior to

filing each application for a building permit for a structure authorized by final PUD approval, until such time as MedStar makes the full payment set forth above.

- d. All design plans for Roadway Improvements 1 through 4 are to be reviewed and approved by D-DOT prior to construction;
- e. Roadway Improvements 1 through 4 shall be constructed before any new Certificate of Occupancy is issued to any structure that causes the total development on the property which is the subject of Zoning Commission Case #00-02 to be increased by 300,000 square feet of net building space (including underground parking or parking facilities), provided that Roadway Improvements 1 and 4 are constructed by D-DOT in a reasonable time after D-DOT has been notified of MedStar's intention to apply for a building permit;
- f. MedStar shall, at its own expense, prepare and submit to D-DOT the design plans for Roadway Improvements 5 and 6 consistent with the following table:

Roadway Improvements	Estimated Construction Cost	Due Date for Design Plans
5. Irving Street and First Street intersection signalization and geometric improvements.	\$700,000	To be determined by D-DOT
6. North Capitol Street and Irving Street interchange improvements.	\$800,000	To be determined by D-DOT

- g. D-DOT shall be responsible for all construction engineering and construction costs related to Roadway Improvements 5 and 6. D-DOT shall seek eighty percent (80%) federal aid funding for the construction engineering and construction costs of these two projects which will be provided by the District local transportation trust fund, subject to appropriations;
- h. All design plans related to Roadway Improvements 5 and 6 shall be reviewed and approved by D-DOT prior to construction;
- i. D-DOT shall incorporate the design plans for Roadway Improvements 5 and 6 into a contract for the reconstruction of North Capitol Street near Irving Street, N.W.;

- j. Roadway Improvements 5 and 6 shall be constructed before any new Certificate of Occupancy is issued to any structure that individually, or in combination with existing structures or with other structures not yet built but for which building permits have been applied, would cause the development on the property which is the subject of Zoning Commission Case #00-02 to be increased by 300,000 square feet of net building space (including underground or parking facilities) beyond what existed on the date of the final approval of this Order, provided that Roadway Improvements 5 and 6 are constructed by D-DOT in a reasonable time after D-DOT has been notified of MedStar's intention to apply for a building permit.
 - k. There shall be at least five (5) entrances to the site; three (3) of those entrances should be via First Street, N.W.; one (1) via Michigan Avenue, west of the Children's Hospital National Medical Center; and one (1) shall be via Kenyon Street/Hobart Street from the west;
 - l. The entrances from the north shall be designed to accommodate approximately sixty-five percent (65%) of the anticipated vehicular traffic. Of the two (2) entrances from the north, one (1) entrance shall be for direct access to the existing Parking Pavilion I from the vicinity of Kenyon Street; the other – primary – entrance shall be from Irving Street at First Street; and
 - m. The entrance from the west side shall be designed to incorporate an entry into the Emergency Services Department.
15. This first-stage PUD approval by the Zoning Commission shall be valid for a period of one (1) year from the effective date of this order. Within such time, the Applicant must file a second-stage PUD application in order for this first-stage application to remain in effect.
16. The Applicant shall abide by the terms of the executed Memorandum of Understanding with the D.C. Office of Local Business Development in order to achieve, at a minimum, the goal of thirty-five percent (35%) participation by local, small, and disadvantaged businesses in the contracted development costs in connection with the design, development, construction, maintenance, and security for the project to be created as a result of the PUD project. After the completion of construction of the project, the Applicant shall provide a written status report to the Zoning Commission and the D.C. Local Business Opportunity Commission regarding compliance with this agreement.

17. The Applicant shall abide by the terms of the executed First Source Employment Agreement with the Department of Employment Services (DOES) in order to achieve the goal of utilizing District of Columbia residents for at least fifty-one percent (51%) of the jobs created by the PUD project. After completion of construction of this project, the Applicant shall provide a written status report to the Zoning Commission and the DOES regarding compliance with this agreement.
18. The Applicant is required to comply fully with the provisions of the Human Rights Act of 1977, as amended, and this order is conditioned upon full compliance with those provisions. In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Official Code § 2-1401.01 et seq., (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, familiar status, family responsibilities, matriculation, political affiliation, disability, source of income, or place of residence or business. Sexual harassment is a form of sex discrimination which is also prohibited by the act. In addition, harassment based on any of the above protected categories is also prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action. Nothing in this order shall be understood to require the Zoning Division of DCRA to approve permits if the Applicant fails to comply with any provision of the Human Rights Act.
19. The zoning designation approved herein shall not become effective unless the Commission grants final PUD approval and, then, not until the covenant required in 11 DCMT 2409.3 has been recorded

Vote of the Zoning Commission taken at the regular monthly meeting of May 14, 2001: 5-0-0 to grant first-stage approval (Carol J. Mitten, John G. Parsons, Anthony J. Hood, and Herbert M. Franklin to approve; Kwasi Holman to approve by proxy).

Vote of the Zoning Commission taken at the regular monthly meeting of September 9, 2002: 3-0-2 (Carol J. Mitten, John G. Parsons, and Anthony J. Hood to grant first-stage approval with conditions; Peter J. May and James H. Hannaham not voting, not having participated in the case).

This order was adopted by the Zoning Commission at its special public meeting on September 17, 2002 5-0-0 (John G. Parsons, Peter J. May, Carol J. Mitten, Anthony J. Hood, and James H. Hannaham) adopt first stage with conditions. In accordance with the processing of 11 DCMR 3028, this order shall become final and effective upon publication in the D.C. Register; that is on

NOV 1 2002



CAROL J. MITTEN
Chairman
Zoning Commission



JERRILY R. KRESS, FAIA
Director
Office of Zoning

I

Government of the District of Columbia
ZONING COMMISSION



Zoning Commission Order No. 02-43
Case No. 02-43/00-02
(PUD Map Amendment – MedStar Health)
February 24, 2003

Pursuant to notice, public hearing of the Zoning Commission for the District of Columbia was held on January 9, 2003, to consider the application of MedStar Health, Inc. ("MedStar" or the "Applicant"). The application requested final (second-stage) review and approval of a planned unit development ("PUD") and related map amendment to SP-1 and SP-2 for all of the area of Square 3129 that is zoned R-5-A, pursuant to Chapter 24 and § 102, respectively, of the District of Columbia Municipal Regulations ("DCMR"), Title 11 Zoning. The public hearing was conducted in accordance with the provisions of 11 DCMR § 3022. For the reasons stated below, the Commission grants second-stage approval with conditions.

FINDINGS OF FACT

1. On November 4, 1999, MedStar filed an application requesting a map amendment rezoning all of the area within Square 3129 that is zoned R-5-A, a flexible multi-family residential classification, (the "Site" or "PUD Site") to SP-1 and SP-2, medium-density and medium-high-density districts, respectively. The Site is part of Lot 2 in Square 3129 and contains approximately 1,460,851 square feet or 33.53 acres of land area.
2. MedStar filed an application with the Zoning Commission requesting final (second-stage) approval of a PUD and a related map amendment for the PUD site from a Zone District classification of R-5-A to the Zone District classifications of SP-1 and SP-2. The application was assigned Zoning Commission Case No. 02-43 (the "Second-Stage Case") by the Office of Zoning.
3. The Zoning Commission previously granted preliminary (first-stage) approval of the PUD and related map amendment changing the Zoning Map designation of the PUD Site from a Zone District classification of R-5-A to the Zone District classifications of SP-1 and SP-2, subject to certain guidelines, conditions, and standards. Zoning Commission Order No. 969, dated October 17, 2002, reflects the Zoning Commission's decision on that application ("First-Stage Order").

4. Square 3129 contains numerous medical facilities, including the Washington Hospital Center, The National Rehabilitation Hospital, The Children's Hospital National Medical Center, and the Veterans Affairs Medical Center.
5. Lot 2, a portion of which is the subject of this application, is occupied by the Washington Hospital Center and The National Rehabilitation Hospital. The remaining portion of Lot 2 was rezoned by Zoning Commission Order No. 784 (September 11, 1995), in which the Commission approved a PUD and related map amendment to allow the construction and use of the Physicians' Office Building, certain adjunct hospital related facilities, and a parking structure. That PUD also approved a rezoning from R-5-A to SP-1 of approximately 238,928 square feet of land (5.48 acres), which was used predominantly for surface parking. All other areas of Lot 2 remained in the R-5-A district.
6. The Site is located in the northwest quadrant of the District of Columbia and is bounded by Irving Street to the north, Michigan Avenue to the south and west, and First Street to the east. Directly to the north and south of the Site are government facilities that are unzoned, including the United States Armed Forces' and Airmen's Home to the north, the Veterans Administration Hospital to the east, and the Macmillan Reservoir and (old) Sand Filtration site to the south. The reservoir property is operated by the U.S. Army Corps of Engineers. The old Sand Filtration site is owned by the Government of the District of Columbia. The Site slopes approximately fifteen (15) feet from the northwest to the southeast and is forty percent (40%) occupied by buildings and structures, thirty-one percent (31%) paved, and twenty-nine percent (29%) open space.
7. The R-5-A district permits matter-of-right single-family detached and semi-detached dwellings, and, with the approval of the Board of Zoning Adjustment, low-density development of general residential uses including row houses, flats, and apartments to a maximum density of 0.9 floor area ratio ("FAR"), a maximum lot occupancy of forty percent (40%), and a maximum height of three (3) stories/forty (40) feet.
8. The SP-1 district permits matter-of-right, medium/high-density development, including all kinds of residential uses and office development, both to be compatible with surrounding properties, to a maximum height of sixty-five (65) feet, a maximum density of 4.0 FAR for residential use and 2.5 FAR for other permitted uses, and a maximum lot occupancy of eighty percent (80%) for residential uses.
9. The SP-2 district permits matter-of-right, medium/high-density development, including all kinds of residential uses and office development, both to be compatible with surrounding properties, to a maximum height of ninety (90) feet, a maximum density of 6.0 FAR for residential use and 3.5 FAR for other permitted uses, and a maximum lot occupancy of eighty percent (80%) for residential uses.

10. The Applicant assembled and submitted a "Master Plan 2000" for its campus, including the Site, upon which it based its application for the map amendment. That document sets forth the history of the medical uses on the Site; the current zoning scheme; the development objectives of the Applicant for a fifteen- (15) year period; the methodology that was used to assemble the Master Plan 2000; a description of the streets, buildings, topography, political jurisdictions, and comprehensive plan land use designations, adjacent planning considerations, and adjacent zoning considerations; a public and bicycle transportation plan; an assessment of public transportation and bicycle routes; an explanation of existing conditions and a discussion of the programmatic and space needs of the hospital; development guidelines; a discussion of planning alternatives; floor plans; landscape plans; design illustrations, signage plans, circulation, and way-finding designs; and an implementation schedule for the proposed development.
11. The implementation sequences are described as Phase I (the Emergency and Intensive Care Unit addition); Phase II (Laboratory and Administrative addition); Phase III (the Radiology and Mechanical Equipment addition); Phase IV (the Cancer Institute Expansion); Phase V (the addition to the East Building); and Phase VI (the Southeast Complex). Master Plan 2000 suggests three (3) zoning alternatives, labeled "A," "B," and "C". Of these, the Applicant seeks approval, through the PUD process, of Zoning Strategy B which is described at Figure 6.6c of Master Plan 2000. The land area proposed for rezoning to the SP-1 district contains 623,866 square feet. The existing floor area amounts to 537,657 square feet. Rezoning this parcel to SP-1, which has a maximum density of 1.9 FAR, will result in a maximum building floor area of 1,185,345 square feet to a maximum permitted height of sixty-five (65) feet.
12. The land area proposed for the SP-2 district contains 836,985 square feet. The existing floor area on that parcel is 902,972 square feet. Thus, the maximum 3.4 FAR permitted in the SP-2 district under Zoning Strategy B would permit additional floor area of 1,942,792 square feet to a maximum height of ninety (90) feet. Thus, the approval of Zoning Strategy B will result in a maximum total building floor area of 2,845,749 square feet of building space to be used primarily for the medical services and related uses described in Master Plan 2000.
13. On January 25, 2001, MedStar formally adopted Master Plan 2000 as its development guide for the period 2001 to 2020.
14. During the first-stage process, the Applicant submitted a transportation impact analysis, which discusses peak hour traffic counts, roadway capacities under the existing zoning, trip generation rates under the existing zoning and roadway configuration, and trip generation capacities under the proposed rezoning. This study concluded that three (3) of the nine (9) intersections within the immediate vicinity of the Site operated at less than acceptable levels of service, and the existing parking supply is "somewhat inadequate." However, the report goes on to recommend improvements to those three (3) intersections and concludes that

the increased parking supply proposed in the Master Plan 2000 will increase the parking supply to an adequate level.

15. The Applicant testified that it was in discussions with the District Department of Transportation ("D-DOT") to formalize an Agreement to improve nearby roadway capacities and efficiencies. By this proposed agreement, MedStar would provide partial funding for certain roadway improvements that are deemed appropriate and necessary to resolve the intersection and parking supply deficiencies associated with the proposed development plan.
16. Christine Swearingen, MedStar's Senior Vice-President, testified that MedStar is the largest health care system in the Baltimore-Washington region. It consists of seven (7) hospitals, more than 3,000 licensed beds, 22,000 employees, and 4,000 affiliated positions. In Washington, D.C., MedStar operates the Washington Hospital Center, The National Rehabilitation Hospital, Georgetown University Hospital, the Visiting Nurses Association, and MedStar Manor at Lamond Riggs. The Washington Hospital Center was founded in 1958 at its current location as a result of the merger of the old Garfield Memorial Hospital; the Episcopal Eye, Ear, and Throat Hospital; and the Central Dispensary and Emergency Hospital. The Washington Hospital Center is now the District of Columbia's largest health care facility providing the largest number of inpatient/outpatient and emergency services for the residents of the District of Columbia, especially for residents who live east of Rock Creek Park.
17. Ms. Swearingen testified that the developments proposed under Master Plan 2000 were critical to alleviate crowded and cramped facilities, to renovate substandard facilities to modern standards, to replace obsolete facilities, and to improve access to facilities and service areas within the Washington Hospital Center campus. She stated that the density limitations of the existing residential zoning (0.9 FAR) accord the Washington Hospital Center no further latitude to expand facilities. The hospital campus is built to the capacity of the existing R-5-A zoning envelope. She testified further that it is extremely unlikely that the Site would ever be used for the residential purposes for which it is zoned.
18. Clarence Brewton, Jr., MedStar's Vice-President of Regulatory Compliance and Community Development, testified that MedStar held meetings with neighboring residents, its patients, its institutional neighbors, Advisory Neighborhood Commissions, civic and citizens associations, community leaders, elected officials, and oversight agencies to create and comment upon Master Plan 2000. MedStar also surveyed 21,000 households and incorporated those summary views into its Master Plan 2000.
19. Albert G. Dobbins, III, of A.G. Dobbins & Associates, a planning consultant who was recognized as an expert in planning and zoning by the Commission, testified that the proposed rezoning from R-5-A to SP-1 and SP-2 is not inconsistent with the comprehensive plan, supports the theme of the National Capital Planning

Commission's ("NCPC") Extending the Legacy Plan, is in harmony with the surrounding uses and zoning, and is consistent with the past and present uses of the Site and the zoning regulations.

20. Gerald Oudens, of Oudens & Knoop Architects, recognized by the Commission as a expert in planning and zoning, testified to the site development history, the planning methodology of Master Plan 2000, the existing conditions on the Site, functional issues, vehicular access issues, landscaping, the major space needs of the hospital, the gross floor area needs, the development plan objectives, the proposed development plan, and the proposed zoning and phased construction schedule. The specifics of his testimony are included in Master Plan 2000 and in slides submitted into the record by the Applicant on March 15, 2001. (Exhibit Number 20C)
21. Osborne George, of O.R. George & Associates, who was recognized by the Commission as an expert on traffic and parking, testified to MedStar's current site access needs and their impacts on the transportation and parking infrastructure with respect to the proposed development outlined in Master Plan 2000. He also discussed the roadway and parking usage under both the current and the proposed development and the improvements needed at critical intersections to reasonably accommodate MedStar's development plan. The recommended improvements included intersection improvements at Irving and First Streets, N.W., First Street and Michigan Avenue, N.W., and at Michigan Avenue east and west of the Children's Hospital Building. With these improvements, Mr. George concluded that the rezoning and development of the Washington Hospital Center campus site could be undertaken as proposed, without an adverse impact to area roadways.
22. The D.C. Office of Planning ("OP") submitted a report in support of the first-stage application conditioned upon the approval of a letter agreement regarding roadway improvements between MedStar and the D.C. Department of Public Works.
23. Representatives of The Children's Hospital National Medical Center, the Department of Veterans Affairs, Providence Hospital, Catholic University, the D.C. Chamber of Commerce, and the American Heart Association submitted letters to the record in support of the first-stage application.
24. Various citizens, including a Commissioner from Advisory Neighborhood Commission ("ANC") 5C, submitted statements to the record in support of the first-stage application.
25. By letter dated August 16, 2000, ANC 4D recommended that the first-stage application be approved. The letter did not address any particular issue or concern, but noted that the plan did not address the issue of offering some free parking for patients and visitors.

26. By letter dated December 1, 2000, ANC 5C expressed its support for the first-stage application. ANC 5C indicated that approval of the first-stage application "will have negligible adverse impact upon the surrounding residential community." ANC 5C based its conclusion upon traffic control measures already taken by the Applicant as well as the District government and the Applicant's commitment to work with ANC 5C to resolve any traffic or parking issues that might arise. Like ANC 4D, ANC 5C expressed the concern of some of its members, "about the affordability of public parking for visitors and patients of the hospital." ANC 5C therefore recommended that MedStar should either provide a certain amount of free parking or implement a system of discounted parking. These issues were discussed and decided by the Commission in its First-Stage Order No. 969.
27. Ms. Cleopatra Jones, President of the Bloomingdale Civic Association, appeared at the first-stage hearing to express that organization's support for the first-stage application.
28. Several area residents, including a Commissioner from ANC 4D, testified in support of the first-stage application.
29. There were no letters in opposition to the application submitted for the record, and no persons in opposition to the proposal testified at the first-stage public hearing.
30. Pursuant to Chapter 24 of the Zoning Regulations, the Zoning Commission has the authority to consider this application as the second-stage of a two-stage PUD proceeding.
31. On November 4, 2002, the Zoning Commission set this application down for public hearing having found that the conditions specified in the First-Stage Order for consideration of an application for second-stage approval of the PUD had been satisfied.
32. In a pre-hearing submission dated November 8, 2002 (the "Pre-hearing Submission"), MedStar submitted a Statement of Uses, a detailed site plan, landscape and grading plans, floor plans and elevations, vehicular and pedestrian circulation plans, and a statement of compliance with the Zoning Regulations and the First-Stage Order.
33. The Zoning Commission held a public hearing on the second-stage application on January 9, 2003.
34. The record in Zoning Commission Case No. 00-02, from which the First-Stage Order arose, was incorporated by reference into the Second-Stage Case.
35. There were no requests for party status made at the January 9, 2003, hearing or filed with the Zoning Commission.

36. At the hearing on January 9, 2003, MedStar submitted written testimony supplementing the application and the Pre-hearing Submission and provided evidence that it had satisfied each of the guidelines, conditions, and standards set forth in the First-Stage Order and the applicable Zoning Regulations, and required for second-stage approval of the application.
37. By report dated December 30, 2002, and by testimony at the public hearing on January 9, 2003, the Office of Planning determined that the Application was in compliance with the conditions set forth by the Commission in the First-Stage Order and recommended approval of the application provided that D-DOT did not object to the Applicant's plans to implement the transportation improvements and transportation management plan required by Condition 13 of the First-Stage Order.
38. D-DOT determined that it has no objection to the information provided by the Applicant concerning the implementation of the transportation improvements and the transportation management plan required by Condition 13 of the First-Stage Approval Order.
39. ANC 4D submitted a letter in support of the second-stage application.
40. ANC 5C did not appear at the January 9, 2003, public hearing and made no submission into the record of the second-stage application.
41. The Commission finds that the second-stage elements of the PUD project and the related map amendment are in conformance with the comprehensive plan, which designates the site for institutional uses.
42. The Commission finds that the approval of this second-stage application will result in the efficient, economic utilization of the land; will provide improved building design; will create the opportunity for an increase in health care facilities; and will adequately address the protection of the public health, safety, welfare, and convenience.
43. The Commission finds that the Applicant has met the requirements of 11 DCMR, Chapter 24, with respect to second-stage PUDs and has fulfilled the intent and purposes thereof.
44. At the conclusion of the public hearing held on January 9, 2003, the Zoning Commission took proposed action by a vote of 3-0-2 to approve with conditions the Applications and plans presented at the public hearing.

45. The proposed action of the Zoning Commission to approve the application as a second-stage PUD with conditions was referred to NCPC pursuant to the terms of the District of Columbia Home Rule Act. NCPC did not file a report.
46. The Zoning Commission took final action to approve the Applications with conditions at its public meeting on February 24, 2003.

CONCLUSIONS OF LAW

1. Pursuant to the Zoning Regulations, the PUD process is designed to encourage high-quality development that provides public benefits. 11 DCMR § 2400.1. The overall goal of the PUD process is to permit flexibility of development and other incentives, provided that the PUD project, “offers a commendable number or quality of public benefits, and that it protects and advances the public health, safety, welfare, and convenience.” 11 DCMR § 2400.2.
2. The development of this PUD carries out the purposes of Chapter 24 of the Zoning Regulations to encourage the development of all well-planned institutional, commercial, and mixed-use developments that will offer a variety of building types with more attractive and efficient overall planning and design than might otherwise be achieved under matter-of-right development.
3. The development of this PUD is compatible with District-wide and neighborhood goals, plans, and programs and is sensitive to environmental protection and energy conservation.
4. The approval of this application is not inconsistent with the comprehensive plan for the National Capital Area, because it will stabilize the delivery of healthcare services, strengthen the distinguishing characteristics of the area, and increase employment opportunities.
5. The approval of this application is consistent with the purposes of the Zoning Act and the Zoning Regulations of the District of Columbia which include stabilizing land values and improving mixed-use areas.
6. The second-stage application can be approved with conditions, which ensures that the development will not have an adverse effect on the surrounding community or the District.
7. The proposed PUD meets the minimum area requirements of § 2401.1 of the Zoning Regulations.
8. The approval of this second-stage application will promote orderly development in conformity with the entirety of the District of Columbia Zone Plan as embodied in the Zoning Regulations and Map of the District of Columbia.

9. This application is subject to compliance with D.C. Law 2-38, the Human Rights Act of 1977, as amended.
10. The Zoning Commission has accorded the recommendations and opinions of ANC 4D the "great weight" to which they are entitled. The Commission is required under D.C. Code §1-309.10(d) (2001) to give great weight to the issues and concerns raised in the recommendations of the affected ANCs. ANC 4D did not indicate any issues or concerns, other than to indicate its position in favor of approval.

DECISION

In consideration of the findings of fact and conclusions of law contained in this order ("Order"), the Zoning Commission of the District of Columbia orders APPROVAL of this application as a second-stage PUD for a portion of Lot 2 in Square 3129 and an amendment to the zoning map from R-5-A to SP-1 and SP-2 as set forth in Zoning Strategy B of Master Plan 2000 (Figure 6.6c). The approval is subject to the guidelines, conditions, and standards that were identified and approved in the First Stage Order, which are as follows:

1. The PUD shall be consistent with the Washington Hospital Center, MedStar Health Master Plan 2000, as revised and dated August 2000, and submitted to the Zoning Commission record on April 6, 2001. The following conditions shall also apply to the PUD approval and shall supercede, or be in addition to, any elements of the Master Plan in contradiction to, or silent on these conditions:
 - a. The zoning that shall accompany the PUD shall be that shown in Zoning Strategy B, Master Plan 2000.
 - b. The total gross floor area shall be limited to approximately 4.5 million square feet (3.1 million square feet of additional gross floor area ("gfa") added to the current 1.4 million square feet).
 - c. The density for the 623,866 square foot SP-1 portion of the PUD shall be limited to a cumulative 1.9 FAR, for a total of 1,185,345 FAR-countable square feet.
 - d. The density for the 836,985 square foot SP-2 portion of the PUD shall be limited to a cumulative 3.4 FAR, for a total of 2,845,749 FAR-countable square feet.
 - e. Although included in the above totals, approval of the square footage for the Southeast Complex-Phase VI building, as indicated in Figure 7.7e of the Master Plan 2000, is withheld pending consideration of FAR for this phase in a later Stage II application for the Phase VI area.
 - f. Buildings within the SP-1/PUD shall not exceed sixty-five (65) feet in height.

- g. Buildings within the SP-2/PUD shall not exceed ninety (90) feet in height.
- h. Sight lines from the United States Armed Forces' Home, as illustrated in the Applicant's submission of March 5, 2001, Tab C, shall be maintained.
- i. No more than 2,500,000 square feet of new below-grade, non-FAR-countable space shall be constructed without an approved PUD modification. Permitted uses shall include all uses described in Chapter 4, pages 5-8 and Chapter 7, pages 11-14 of the Master Plan as submitted for the record on April 6, 2001.
- j. All uses set forth in Master Plan 2000, including physicians' office space, guest accommodations, and parking garages, shall be permitted as a matter-of-right under the zoning associated with the PUD.
- k. The Applicant shall adhere to the following transportation-related conditions. These conditions reflect an agreement reached between the applicant and D-DOT. Although the conditions also include commitments by D-DOT to take certain actions, the Commission has no authority to require D-DOT's compliance. These commitments have been included to assist the public in understanding the process by which these roadway improvements will occur:
 - (i) MedStar shall implement the transportation management plan outlined in the Master Plan dated August 2000;
 - (ii) MedStar shall reimburse the District of Columbia Government for 100% of the traffic engineering and construction costs of Roadway Improvements 1 through 4, up to MedStar's Reimbursement Amount, as outlined in the table below:

Roadway Improvements	Reimbursement Amount
1. Irving Street and Hobart Place at-grade access.	\$1.2 million
2. Irving Street at-grade right turn in and right turn out access to Parking Pavilion I	\$75,000
3. Michigan Avenue at Hospital Center Drive (south) signalization and signage (including interconnection with adjacent signal).	\$100,000
4. Michigan Avenue and First Street signalization and geometric improvements.	\$100,000

- (iii) MedStar shall pay D-DOT the total Reimbursement Amount of \$1,475,000 prior to the issuance of a building permit to construct any structure, that individually, or in combination with existing structures or with other structures not yet built but for which building permits have been applied, would cause the development on the PUD Site to be increased by 300,000 square feet of net building space (including underground or parking facilities) beyond what existed on the date of the final approval of this Order. MedStar shall notify D-DOT prior to filing each application for a building permit for a structure authorized by this final PUD approval, until such time as MedStar makes the full payment set forth above.
- (iv) All design plans for Roadway Improvements 1 through 4 are to be reviewed and approved by D-DOT prior to construction;
- (v) Roadway Improvements 1 through 4 shall be constructed before any new Certificate of Occupancy is issued to any structure that causes the total development on the PUD Site to be increased by 300,000 square feet of net building space (including underground parking or parking facilities), provided that Roadway Improvements 1 and 4 are constructed by D-DOT in a reasonable time after D-DOT has been notified of MedStar's intention to apply for a building permit;
- (vi) MedStar shall, at its own expense, prepare and submit to D-DOT the design plans for Roadway Improvements 5 and 6 consistent with the following table:

Roadway Improvements	Estimated Construction Cost	Due Date for Design Plans
5. Irving Street and First Street intersection signalization and geometric improvements	\$700,000	To be determined by D-DOT
6. North Capitol Street and Irving Street interchange improvements	\$800,000	To be determined by D-DOT

- (vii) D-DOT shall be responsible for all construction engineering and construction costs related to Roadway Improvements 5 and 6. D-DOT shall seek eighty percent (80%) federal aid funding for the construction engineering and construction costs of these two

projects which will be provided by the District local transportation trust fund, subject to appropriations;

- (viii) All design plans related to Roadway Improvements 5 and 6 shall be submitted to D-DOT for review and approval prior to construction.
 - (ix) D-DOT shall incorporate the design plans for Roadway Improvements 5 and 6 into a contract for the reconstruction of North Capitol Street near Irving Street, N.W.;
 - (x) Roadway Improvements 5 and 6 shall be constructed before any new Certificate of Occupancy is issued to any structure that individually, or in combination with existing structures or with other structures not yet built but for which building permits have been applied, would cause the development on the PUD Site to be increased by 300,000 square feet of net building space (including underground or parking facilities) beyond what existed on the date of this Order, provided that Roadway Improvements 5 and 6 are constructed by D-DOT in a reasonable time after D-DOT has been notified of MedStar's intention to apply for a building permit;
 - (xi) There shall be at least five (5) entrances to the Site: three (3) of those entrances shall be via First Street, N.W.; one (1) shall be via Michigan Avenue, west of the Children's Hospital National Medical Center; and one (1) shall be via Kenyon Street/Hobart Street from the west;
 - (xii) The entrances from the north shall be designed to accommodate approximately sixty-five percent (65%) of the anticipated vehicular traffic to the PUD Site. Of the two (2) entrances from the north, one (1) entrance shall be for direct access to the existing Parking Pavilion I from the vicinity of Kenyon Street; the other primary entrance shall be from Irving Street at First Street; and
 - (xiii) The entrance from the west side shall incorporate an entry into the Emergency Services Department.
2. This second-stage PUD approval by the Zoning Commission shall be valid for a period of two (2) years from the effective date of this Order. Within such time, the Applicant must file an application for a building permit as specified in 11 DCMR § 2408.8 to preserve the effectiveness of this Order unless the Zoning Commission otherwise acts to extend the validity of this Order. Construction shall start within three (3) years of the effective date of this Order to preserve the

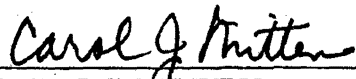
effectiveness of this Order unless the Zoning Commission otherwise acts to extend the validity of this Order. In the event that the Applicant files an application for a building permit within the two- (2) year period stated in this paragraph, the PUD approved herein shall be valid for a period of ten (10) years from the effective date of this Order.

3. The Applicant shall execute a Memorandum of Understanding ("MOU") with the D.C. Office of Local Business Development prior to the issuance of the first building permit for the phased construction projects that are contemplated by the PUD. The MOU shall be updated prior to the issuance of each subsequent building permit. The Applicant shall abide by the terms of the executed MOU in order to achieve, at a minimum, the goal of thirty-five percent (35%) participation by local, small, and disadvantaged businesses in the contracted development costs in connection with the design, development, construction, maintenance, and security for the project to be created as a result of the PUD project. After the completion of construction of the PUD, the Applicant shall provide a written status report to the Zoning Commission and to the D.C. Local Business Opportunity Commission regarding compliance with the MOU.
4. The Applicant shall be required to execute a First Source Employment Agreement (the "Employment Agreement") with the Department of Employment Services ("DOES") prior to the issuance of the first building permit for the phased construction projects that are contemplated by the PUD. The Employment Agreement shall be updated prior to the issuance of each subsequent building permit. The Applicant shall abide by the terms of the executed Employment Agreement in order to achieve the goal of utilizing District of Columbia residents for at least fifty-one percent (51%) of the jobs created by the PUD project. After the completion of construction of the PUD, the Applicant shall provide a written status report to the Zoning Commission and to the DOES regarding compliance with the Employment Agreement.
5. The Applicant is required to comply fully with the provisions of the Human Rights Act of 1977, as amended, and this Order is conditioned upon full compliance with those provisions. 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, familial status, family responsibilities, matriculation, political affiliation, disability, source of income, or place of residence or business. Sexual harassment is a form of sex discrimination which is also prohibited by the Act. In addition, harassment based on any of the above-protected categories is also prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action. Nothing in this Order shall be understood to require the Zoning Division of DCRA to approve permits if the Applicant fails to comply with any provision of the Act.

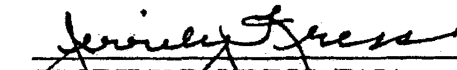
6. The zoning designation approved herein shall not become effective until the covenant required at 11 DCMR § 2409.3 has been recorded.

Vote of the Zoning Commission taken at the conclusion of the public hearing on the second-stage application January 9, 2003: 3-0-2 to **GRANT** second-stage approval (Carol J. Mitten, Anthony J. Hood, and Peter J. May to approve; John G. Parsons and James H. Hannaham, not present, not voting).

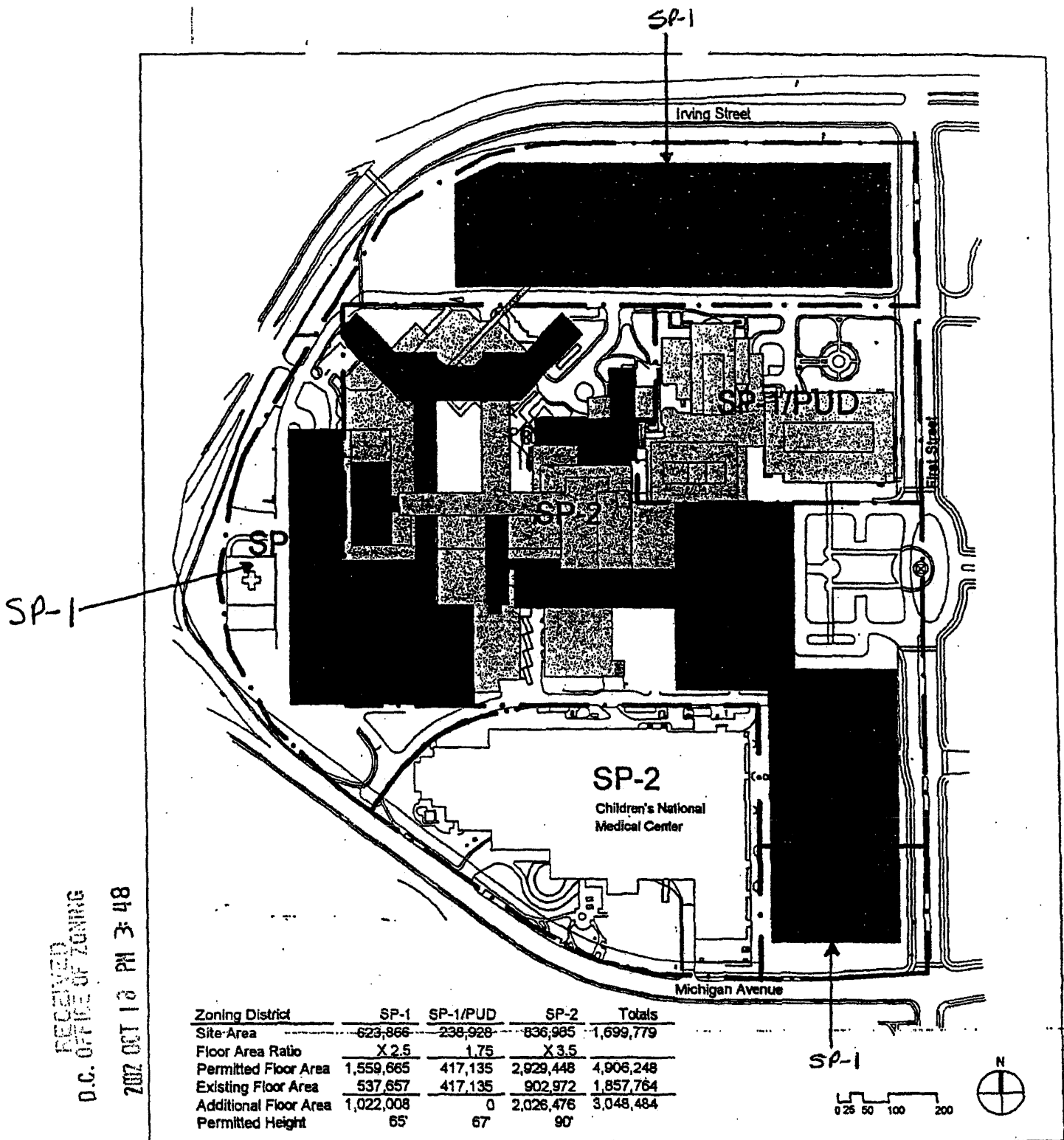
This Order was **ADOPTED** by the Zoning Commission at its public meeting held on February 24, 2003, by a vote of 5-0-0 (Carol J. Mitten, Anthony J. Hood, James H. Hannaham, John G. Parsons, and Peter G. May to adopt). In accordance with the provisions of 11 DCMR 3028, this Order shall become final and effective upon publication in the D.C. Register; that is on JUL 18 2003.



CAROL J. MITTEN
Chairman
Zoning Commission



JERRILY R. KRESS, FAIA
Director
Office of Zoning



RECEIVED
D.C. OFFICE OF ZONING

2002 OCT 12 PM 3:48

- Zoning Boundaries
- Existing Buildings
- New Construction Opportunities

Zoning Strategy B

Washington Hospital Center
Master Plan 2000
WHC Design & Construction Management
Oudens + Knoop Architects, PC

J



K

Children's National Medical Center

PUD Information

May 22, 2006

General Description for Water, Sewer, and Stormwater Systems

Children's National Medical Center is served by the District of Columbia Water and Sewer Authority (WASA).

Potable Water System

The potable water is provided to the hospital at two locations and feeds domestic water booster pumps located in the P1 Mechanical Room. The booster pumps feed a building wide distribution system. The current consumption is 73,793 gallons per day or 27 million gallons per year. The anticipated consumption after all additions is 110,689 gallons per day or 40 million gallons per year.

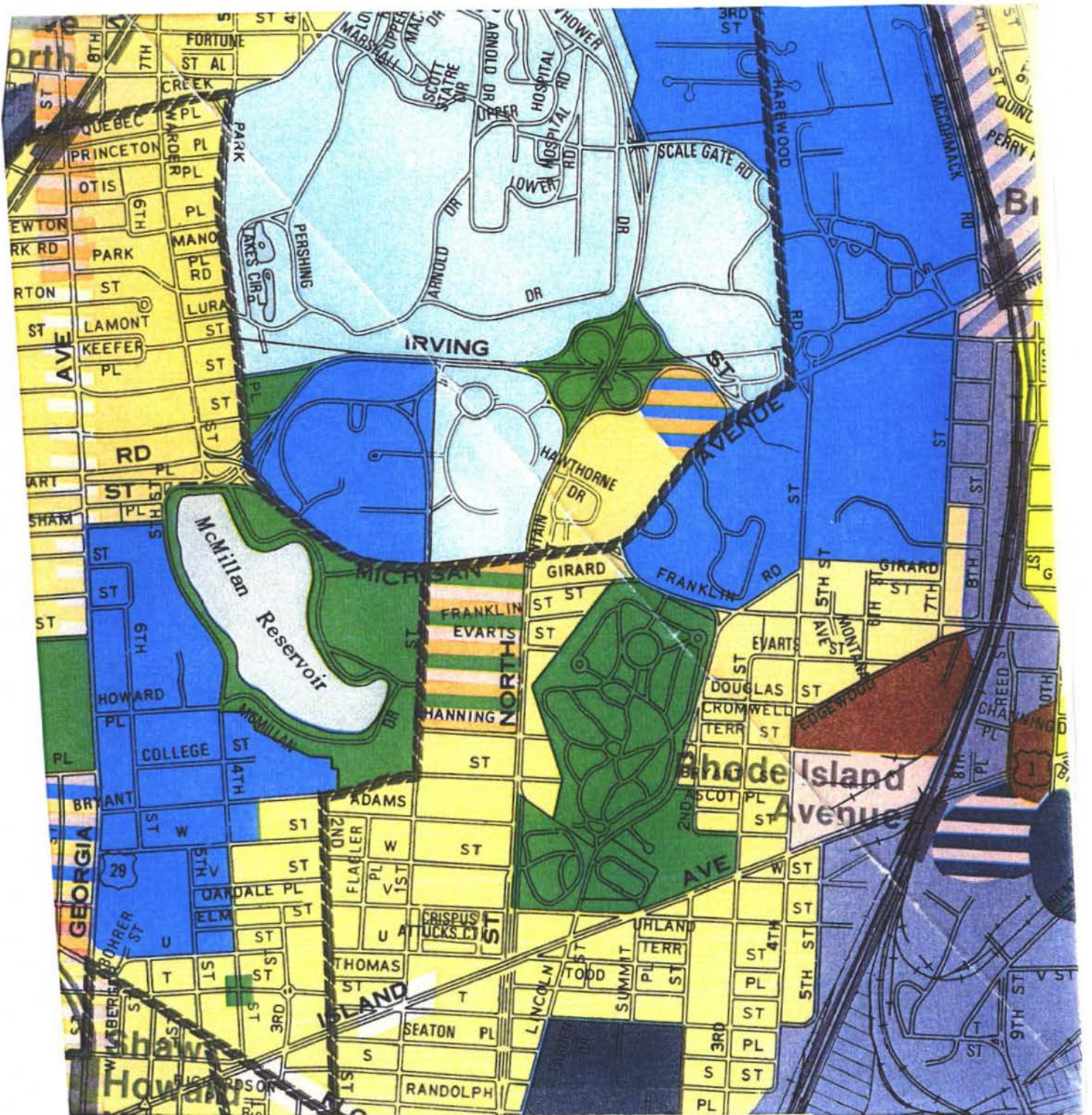
Sanitary and Storm Water Systems

The building contains two separate piping systems for sanitary and storm water discharge. Both the sanitary and storm water are collected outside of the building in manholes connected to a common sewer line. The discharge quantity of the sanitary sewer is not measured but is assumed by WASA to be equal to the potable water consumption.

The additional square footage to the building will not change the current storm water discharge. The building footprint will not change significantly and thus will not add runoff to the existing system.

The entire sanitary and storm sewer systems discharge into an existing 48" main service line.

L



M

Certificate of Notice

I HEREBY CERTIFY that a copy of the Notice of Intent to File a Zoning Application for a Modification to a Planned Unit Development for a portion of Record Lot 2 in Square 3129 (known for assessment and taxation purposes as Lot 801 in Square 3129) was mailed to Advisory Neighborhood Commission 5C and to the owners of all property within 200 feet of the perimeter of the project site on May 11, 2006, at least ten (10) calendar days prior to the filing of the application for a Planned Unit Development as required by the Zoning Regulations of the District of Columbia, 11 DCMR §2406.7.

A copy of the Notice is attached hereto as Exhibit A.



Christy Moseley Shiker

5-11-06

Date

May 11, 2006

NOTICE OF INTENT TO FILE A ZONING APPLICATION

**Application to the
District of Columbia Zoning Commission
for a
Modification to a Planned Unit Development**

Children's National Medical Center (the "Applicant") hereby gives notice of its intent to file an application for consolidated review and approval of a modification to a Planned Unit Development ("PUD") in accordance with the District of Columbia Zoning Regulations, 11 DCMR (February 2003). The application will be filed with the Zoning Commission not less than ten (10) days from the date of this notice. This notice is given pursuant to Section 2406.7 of the Zoning Regulations.

The property that is the subject of this application consists of a portion of Record Lot 2 in Square 3129 (known for assessment and taxation purposes as Lot 801 and containing approximately 7.3 acres of land area) (the "Property"). The Property is located near the intersection of 1st Street and Michigan Avenue, NW, in Ward 5. The Property is currently improved with facilities for the Children's National Medical Center, which were approved as a Planned Unit Development ("PUD") in Zoning Commission Order No. 14 and modified by Zoning Commission Order No. 619. Based on the PUD approval, the Property is zoned SP-2.

This application will modify the previously approved PUD to permit the construction of additional facilities. The height of the proposed additions are expected to be below 127.5 feet, which is within that previously approved for the PUD. With the addition, the total FAR for the Property will be under 4.5, which is that permitted for a PUD in the SP-2 District. The design of the addition will compliment the design of the existing facilities. All access (pedestrian, vehicular and service) to the facilities will remain the same, and there will be no change in the number or location of parking and loading spaces.

The Applicant is Children's National Medical Center; the architects are Karlsberger Architecture and Wilmot Sanz; and the land use counsel is Holland & Knight LLP. The Applicant is available to discuss the proposed development with all interested and affected groups and individuals.

Should you need any additional information regarding the proposed PUD application, please contact Whayne S. Quin, Esq., or Christy Shiker, Esq., of Holland & Knight LLP at (202) 955-3000.

Roster for 200 Ft. Property Owner Roster for Square 3129

<u>SQUARE/LOT</u>	<u>PREMISE ADDRESS</u>	<u>OWNER NAME AND ADDRESS</u>
3128 801	NW	District of Columbia c/o DC Office of Property Management 441 4 th Street, N.W. Suite 1100S Washington, DC 20001
3129 804	110 Irving Street NW	Washington Hospital Center Real Estate Services 106 Irving Street, N.W. Suite 301 Washington, DC 20010-2927 Advisory Neighborhood Commission 5C 140 Bates Street, N.W. Washington, DC 20001

The site plan shows three buildings and their surrounding infrastructure:

- Building 801:** A large rectangular building with a central square feature. It is surrounded by a parking lot and a ramp. Dimensions include 317.985 SF, 460.80, 368.92, 357.48, 37.39, 354.00, 408.05, 120.40, 340.71, and 628.85.
- Building 802:** A smaller, irregularly shaped building. It has a dimension of 46.658 SF.
- Building 804:** A small square building. It has a dimension of 1,630.998 SF.

The plan also includes various street names and dimensions:

- Hosp Cent Serv Rd:** A road running horizontally across the top of the plan.
- Michigan Ave NW:** A road running vertically along the right side of the plan.
- Michigan Ave NW:** A road running diagonally from the bottom left towards the center.
- Hosp Cent Serv Rd:** A road running diagonally from the top left towards the center.
- Michigan Ave NW:** A road running diagonally from the bottom left towards the center.
- Michigan Ave NW:** A road running diagonally from the bottom left towards the center.

Other features include a north arrow, a scale bar, and various dimensions for the buildings and surrounding areas.

● = the selected property