

Members Present:

Peter Klose (Chairman)
Ted Sestak
Daniel Jean-Gilles
Peter Voletsky
Glenn E. Keene - alternate member
Allan Englander – alternate member

Also Present:

Don Yacopino, Building Inspector
Walter Sevastian, Village Attorney

Absent: None

Called the meeting to order at approximately 7:30 p.m.

- 1. 160 North Midland Ave. Dennis Lynch for Nyack Hospital. Application for a text amendment to the Zoning Code-referred to P.B. by the Village Board- to reinstate Hospital zoning district eliminated by enactment of revised Zoning Code, January 1, 2010, placing hospital in TFR zone.***

Background - Building Inspector-- Proposal has been forwarded to Village Engineer, Rockland County Department of Planning and NYSDOT for comment. Various memos and letters enclosed for your review, including prior Hospital zoning information and September 10, 2008 RC Dept. of Planning comments. Applicant has escrowed for the Village Planner Robert Geneslaw to comment on the application and such comments dated May 1, 2011 (Interim Report), where circulated prior to the Meeting. [Which is incorporated by reference herein].

Dennis Lynch representing Nyack Hospital

Referenced Mr Geneslaw's interim report. His petition is to restore Hospital Zone as written in the Old Code. Neil Wilson – Hospital planner present (did not speak). John Wontau – Nyack Hospital Executive described a potential expansion project for the hospital which will involve transferring beds from psychiatric center to Hospital, as part of a HEAL grant.

Robert Geneslaw – If there are issues we see with old code then make mention of those to VB (parking for example), who is charged with adopting the language from the Code, updating the law and incorporating any changes. Problem is once you put back old zone, it references things like parking, lighting, signage, landscaping that were not addressed in the new code but would have provided the Hospital with an understanding of the guidelines. Hospital is now pre-existing nonconforming use, then question is whether old or new lighting, parking, and landscaping requirements prevail. Village Board must take careful note of all sections to be plugged into the new code to be sure that all items might be addressed

Geneslaw Interim Report

Identifies several problems with present code:

The present code provides no guidance for the owner of any non-conforming use or building who wishes to modify or increase the bulk of a building or to the extent of areas needed for parking, landscaping, and possibly for storm-water management.

Recommends:

The recommended approach would be to change the hospital property from a nonconforming use in the TFR District to a permitted use requiring a special permit for an expansion or change in the TFR District.

Separate use specific standards could be established for hospitals that are specifically related to the characteristics of Nyack Hospital and the residential community in which it is located.

The Interim Report is designed to raise issues for the Village Board to consider in revamping the Code to reinstate the prior code language as requested by the Applicant/Petitioner. Given the speed with which this application was considered and the need for the Village Board to consider and determine whether to reinstate the old code vis-à-vis the new code, Planner recommends considering some additional neighborhood concerns, as follows:

Parking

Revise parking requirements so that there is a closer relationship to the various demands – categories could include office visits, same day patients, inpatients, medical staff, other staff, vendors and suppliers, emergency room visits, and other categories. In order to have a reasonably enforceable requirement, the categories can be summed to a requirement based on a ratio of inpatient beds/outpatient visits to parking needs.

Establish a maximum proportion of site area that may be used for parking, aisles, and driveways. This, in conjunction with limiting building coverage, would result in a total development coverage, which is useful in establishing the impervious surface area for which stormwater management measures would be necessary, and would provide space for landscaping.

Require a proportion of the parking to be underground or in above ground structures with the latter designed and located to minimize visual impact on the surrounding residential area. The code already has similar standards for structure parking downtown.

Require that as part of any approval, before construction activities on the site

begin, in excess of a specific threshold, that alternate off-site preferably offstreet, parking be provided to replace any parking areas that are to be disturbed as part of the construction process.

- Establish limitation on duration of parking on neighboring residential streets designed in a manner to discourage long term employee parking
- Establish permit parking for residents on nearby residential streets, including provisions for guest parking.

Visual and Sound Impact

- Require significantly more screening, possibly with a combination of landscaping and constructed elements, along all sides of the Hospital properties facing a street to a height that will obscure vehicle headlights and vehicle roofs. The code now requires screening to a height of between 4 – 6 ½ feet.
- Provide treatment on Hospital windows facing residential areas that reduce lighting levels facing residential area.

[Geneslaw Interim Report pages 8-9].

Walter - Application is to restore a Zone that was eliminated. Under Village of Nyack Zoning Code § 360-5.6, which permits amendments to the Code, the Codes provides, as follows:

A. Purpose and applicability. The Board of Trustees may from time to time on its own motion, or on petition, or on recommendation of the Planning Board or the Zoning Board of Appeals or Architectural Review Board amend, supplement or repeal the regulations and provisions of this chapter after public notice and hearing, as provided in §§ 7-706 and 7-708 of the Village Law of the State of New York.

B. Procedure.

(3) Step three: Application referral, review and staff report. Applicable, with the following referral requirements:

(a) Planning Board. Every such proposed amendment shall be referred by the Board of Trustees to the Planning Board for a report before the public hearing. The Board of Trustees shall not take action on any such amendment without a recommendation from the Planning Board unless the Planning Board fails to render such report within 60 days after the next regularly scheduled meeting of such Board following the time of such referral.

5. Commenting and Discussing each of the Criteria to be considered in making any Zone Change under VON Zoning Code, 360-5.6(C)(Criteria). In considering a

proposed amendment, the Planning Board and Board of Trustees shall consider the following items:

(1) Text amendments.

- (a) Whether such change is consistent with the aims and principles embodied in this chapter as to the particular districts concerned.
- (b) Which areas and establishments in the Village will be directly affected by such change and in what way they will be affected.
- (c) The indirect implications of such change in its effect on other regulations.
- (d) Whether such proposed amendment is consistent with the aims of the Comprehensive Plan of the Village.

Discussion from various PB members.

Ted Sestak – “No one has explained to me why the hospital zone was dropped from the new code. And it sounds like we will never know. So with that in mind I suggest we classify the hospital under the old code, taking into account any suggestions from Mr. Geneslaw’s Interim Report”

Daniel Jean-Gilles - Agreed that the code needs to include the Hospital Zone

Don Hammond - Believed that the Planning Board should report to the Village Board that the Hospital Zone is an important aspect of the Code as recommended by the Planner and that we should advise the VB to implement a new code for the Hospital.

Peter Voletsky - Expressed his concern that the Code adequately address the legal status of the Hospital and reinstate some lot and bulk requirements into the code.

Allen Englander - Agreed with the need to incorporate additional language into the Hospital Zone to address neighborhood concerns as related by the Geneslaw Report.

Alternate Glenn Keene - "I agree with (Don?) who questioned why the removal of the Hospital zone occurred. Without knowing the why for this action we have no context within which to determine if it was rational or correct. That being so we should reinstate the zone language as it was before the removal from the code."

Peter Klose—Had wanted to propose actual language and amendments to the Zone, but would rely on the good sense of the Village Board and Village Attorney to adopt and adapt the Code to adequately address the concerns of the Planner.

Public comment – None.

Motion to Close public hearing by Planning Board by Daniel Jean-Gilles, second by Don Hammond. Passes 5-0.

Village Attorney Walter Savestian states the PB should consider 4 items when recommending Text Amendments called out in 59-5.6 C1.

- a) Aims and Principles - Neighborhood impact – Page 6 of GIR(Geneslaw Interim Report). It's more of a clarification of how a hospital can proceed. Applicant needs to consider how an application will impact this.
- b) Which areas will be affected? - The Hospital, neighboring streets
- c) Indirect implications – lot bulk, parking, signage, lighting, landscaping are currently not in place for the hospital.
- d) Aims of Comprehensive Master Plan – Language of CMP implies that the Hospital should stay.

MAY 26 is Village Board Mtg. – Planning Board had the obligation to report on its findings and is willing to utilize the Geneslaw report as a first step to identifying the issues relative to any insertion of new code.

Village Board should also consider the need to amend the TFR zone to specify only the Hospital and make the map comply.

Motion by Peter Voletsky –

A positive recommendation to Village Trustees to grant the Petition of the Applicant (received March 24, 2011) to reinstate the text of the Hospital Zone (Hospital H) from the Old Code with bulk and lot tables and ancillary provisions that may affect other sections of the new Code, with a further recommendation that the Village Board make such adjustment and clarifications of language and intent as suggested by Mr. Geneslaw in his report (dated May 2, 2011—and attached hereto) that reinstated text language be consistent with and reference appropriate provisions in the current code and address the concerns referenced in the Interim Report of Mr. Geneslaw. Second by Don Hammond. Passes 5-0

2. *43 North Broadway. Laura Weintraub. Application to convert Office Space to Residential Space—Seeking a ZBA Use Variance.*

Laura Weintraub – the applicant purchased the red brick building recently and has applied for a use variance to convert from commercial office/retail use to two floors of residential. She has reviewed the four (4) way test of a Use Variance, and reported her findings. The applicant has essentially researched the history and found that this physical structure was a residential structure for years, is historic, and seems to fit the profile of the neighborhood as a residential structure with two apartments (First Floor and Second Floor). There is no need to consider any parking requirements because the house has and is required to have as many as are grandfathered. Intent

is for two residential apartments first and second floor 2 apartments(1st and 2nd Floor), no plans to rent the basement.

Public comment – None.

Motion to close public hearing by Ted Sestak, second by Don Hammond. Passes 5-0

Motion by Chairman Klose -

In light of the obvious physical layout of this particular building, the recommendation to the ZBA to actively consider and permit the full residential use of this property in the form of two apartments on the basis that the building is uniquely situated near other residences, would require too much alteration from its present charm and character to alter the historically residential building to commercial or retail space, because generally residences are encouraged in the Village, because the step up from street level is not a viable economic change, and any such change would make the feel farm more commercial, while restoring it to a residential use would be beneficial to the community by restoring the intended look as a residential building. Second by Member Voletsky. Passes 5-0.

Other Business:

A motion was made by Chairman Klose, seconded by Member Voletsky, to accept the minutes of the April 2011 Planning Board meeting. The motion passed by a vote of 5-0.

The meeting adjourned at 8:55 PM.

**NYACK HOSPITAL
PETITION FOR ZONE CHANGE (TEXT)
PLANNING BOARD
VILLAGE OF NYACK**

INTERIM REPORT



Prepared by:

**Robert Geneslaw Co.
Planning and Development Consultants
Robert Geneslaw, AICP**

**368 New Hempstead Rd. #320
New City, NY 10956**

May 2, 2011

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To be provided in final report

This interim report is based on an examination of the petition for change of zone (text) amendment, documents provided by the Village, a site visit by the consultant, review of the former and current zoning code, and independent research by the consultant of other codes for communities with hospitals in or adjacent to residential neighborhoods. It is intended to be as a starting point for discussion with the Planning Board and will be finalized after the discussion has taken place. The recommendations of Rockland County Planning will be responded to once the PB issues its recommendation and the Village Board decides on a course of action.

INTRODUCTION

Nyack Hospital has petitioned the Nyack Village Board for an amendment to the Zoning Code that would reinstate the Hospital Zone as it appeared before the comprehensive amendment to the Zoning Code adopted after the completion of the Comprehensive Master Plan that was adopted by the Village Board on January 11, 2007. The petition did not include a request to amend the zoning map to show the hospital zone, but it is reasonable to expect such a request if the petition to amend the text is granted.

The Village Board has referred the petition for the amendment to the Village Planning Board for a recommendation, as is required by the Village Code. The Planning Board has, in turn, retained a professional planning consultant to advise the Planning Board, and possibly the Village Board, with respect to the petition and in meeting the requirement of the State Environmental Quality Review Act (SEQRA).

As part of the assignment a representative of this office has visited the site and surrounds and reviewed various materials, some furnished by the Village, and some in the consultants file.

1. Petition for zone change submitted by Nyack Hospital, dated March 21, 2011.
2. Village of Nyack Comprehensive Master Plan (CMP) adopted by the Nyack Board of Trustees, January 11, 2007.
3. Village of Nyack Zoning Code in effect prior to the adoption of the comprehensive amendment to the zoning code.
4. Village of Nyack Zoning Code, adopted after the adoption of the CMP, enacted January 1, 2010.
5. Letter report from the Rockland County Planning Department in response to the General Municipal Law referral, dated April 4, 2011.
6. Plan Review Summaries by Donald Yacopino, Building Inspector, dated April 4, 2011 and May 2, 2011.
7. Communication form Eve Mancuso, P.E., representing the Village Engineer to Nyack Building Department, dated March 27, 2011.
8. Letter from Dennis E. A. Lynch Esq., of Feerick Lynch MacCartney PLLC, attorneys for Nyack Hospital to Donald Yacopino, Chief Building and Zoning Inspector, dated March 23, 2011.
9. Letter from McCarter & English, Attorneys at Law, to John S. Burke, Chief Financial Officer, Nyack Hospital, dated February 23, 2011.

10. Letter from Rockland County Planning Department to Steven Knowlton, Esq., Chair of the Nyack Zoning Code Revision Commission, dated September 10, 2008 regarding the June 2008 Working Draft of the zoning code.
11. Memorandum from Walter R. Sevastian, Esq., Village Attorney to the Building Department dated March 17, 2011.
12. Notice of Lead Agency Coordination from Nyack Village Board to various agencies, dated March 10, 2011.
13. Memo from Donald Yacopino, Chief Building and Zoning Inspector to Village Board of Trustees regarding zoning code amendment procedure dated March 9, 2011.
14. Short Environmental Assessment Form, prepared by Dennis E. A. Lynch, Esq., dated March 18, 2011.
15. Letter from Dennis E.A. Lynch, Esq., to Walter R. Sevastian, Esq., Nyack Village Attorney dated January 4, 2011.

In addition, the consultant has reviewed the zoning codes of several other small communities with hospitals in or adjacent to residential areas to ascertain the manner in which other communities regulated hospitals.

FORMER ZONING (59-16(B)(1))

The former zoning code and map provided for a Hospital Zone. The principal permitted uses in the Hospital Zone were: hospitals, clinics, and related health care facilities; medical education facilities; professional offices related to medical use; residential treatment facilities meeting the requirements of the relevant state and county authorities. The code also included an HM-R District, which allowed multiple residences for hospital staff and off-street parking for the hospital.

In addition the code included dimensional (bulk) requirements:

Village of Nyack
 Section 59 Attachment 3
 Lot and Bulk Regulations for H and HM-R Districts

Minimum Required	H District	HM-R District
Lot area (square feet) total	40,000	20,000
Density (units per acre)	N/A	14
Lot width (feet)	200	100
Lot depth (feet)	200	100
Front yard (feet)	(2)	30(1)
One side yard (feet)	(2)	20(1)
Both side yards (feet)	(2)	40
Rear yard (feet)	(2)	25(1)
Usable open space per dwelling unit	N/A	100
Maximum Permitted		
Building height:		
Stories	3 ½	3 ½
Feet	40(3)	40
Floor area ratio	1.2	
Building coverage (percent)	31%	35%
Length of structure (feet)	N/A	160

NOTES:

- (1) Or ½ the height of the building, whichever is larger.
- (2) The minimum setback from a street line must be a minimum of 15 feet, except that, where a structure in an H District faces a street occupied by on- and two-family residences on the opposite side, the structure must be set back a minimum of 25 feet.
- (3) Building height may be increased two feet for each additional foot of setback from surrounding streets, provided that in no case shall a structure exceed six stories or 72 feet.

CURRENT ZONING

The current zoning code does not include a Hospital zone. Nyack Hospital is included in the TFR or Two-Family Residential Zoning District “the purpose of the TFR District is to provide a suitable area for a mixture of one and two-family dwellings in areas characterized by a mixture of housing types, and for other uses and facilities that are compatible with residential neighborhood development in the Village.” This district includes, as principal uses, single family and two family detached dwellings; and conversion of a single-family dwelling to a two –family dwelling; governmental use; and elementary and secondary schools. Special permit uses include group home; bed and breakfast; clubhouse, community center or place of worship; daycare center, child, or nursery school; utility structure. The TFR Zone includes a large primarily residential

portion of the westerly end of the Village excluding the Main Street corridor and some smaller adjacent areas

Hospitals are not permitted uses in any district and are noted in the Table of Permitted Uses (3-1) as a prohibited use, which suggests that a new hospital could not be established anywhere in the Village of Nyack without a variance.

- Table 4-2: Minimum Parking Requirements contains a footnote (4) indicating that “Hospital, clinic or related health care facility are not an allowed use and expansion of pre-existing use will require a variance”. The parking requirements remain as in the former zoning code.
- The code provides that “any nonconforming use may be continued indefinitely, but ...shall not be enlarged, extended....”
- The code provides that “alteration, enlargement or horizontal extension of a building that is nonconforming with respect to dimensional and development standards...shall require a variance from the Zoning Board of Appeals.”

DESCRIPTION OF ENVIRONS

Nyack Hospital occupies all of the block bounded by Highland Avenue on the west, Fifth Avenue on the north, North Midland Avenue on the east and Sickles Avenue on the south. This block includes the main hospital buildings and parking for about 425-450 automobiles, separated as physician, visitor and special visitor parking. Driveway access is from all sides with the exception of Sickles Avenue. In addition, hospital destination parking occurs on streets in the immediate area. The hospital also has a parking lot about a quarter mile away on Highland Avenue which accommodates 175-200 cars.

The area around the hospital gives the appearance of being primarily residential in nature. Sickles Avenue and the southern section of North Midland Avenue are characterized primarily by single and two family residence oriented toward the street. The northerly portion of North Midland Avenue opposite the hospital is the westerly end of the former Nyack High School building with most of the area at the westerly end being a grassy area. The homes along the north side of Fifth Avenue are oriented so that Fifth Avenue is on the side of the home and the front is oriented toward the North-South street. To the west, across Highland Avenue (Route 9 W), is the Oak Hill Cemetery.

Sickles Avenue is the most residential appearing of the four streets, with the narrowest paved width, with parking on both sides of this one way street, and a single traffic lane. North Midland Avenue, Highland Avenue and Fifth Avenue are wider, both serving as collector streets with varying regulations of on street parking.

COMPREHENSIVE MASTER PLAN (CMP)

The CMP adopted by the Board of Trustees January 11, 2007 has minimal discussion of Nyack Hospital. There are several general references to the hospital in the discussion of the Highland Avenue area. Among the recommendations of the CMP is one to “Work with Nyack Hospital to ensure that any further growth is appropriate in terms of location, scale and design” p.69. Another more general, but applicable to the Hospital property, is to “Upgrade landscaping requirements for off-street parking lots” p. 68.

NEIGHBORHOOD IMPACT

It is common for hospitals built in residential areas to have problems with the surrounding neighborhood. While it is common for hospitals, particularly community hospitals, to be located in residential areas, hospitals have typically expanded as their mission has evolved or changed, a wider range of services has been provided, more space has been needed for diagnostics and/or treatment modalities, ever changing regulatory requirements have contributed to the changes that have taken place in community hospitals. All of these factors combined with a population which tends to use automobiles rather than public transportation drives the need for more and more parking. At the same time, hospital sites are often constrained because the site size was established many decades before, when none of the subsequent special needs could have reasonably been forecast.

The size of a community hospital, both in height, ground coverage, and overall bulk is often disruptive to the surrounding residential community, and other factors such as 24 hour operation, noise (sirens, ambulances entering and exiting, delivery trucks, generators or other external equipment) and extensive parking needs exacerbate the impression of a neighborhood disruption.

In many communities, hospitals and supporting activities have expanded into residential neighborhoods, whether for on or off-street parking, stand alone buildings, or office buildings for physicians or support services. In turn, these expansions often give rise to concern, fear, and opposition on the part of neighbors.

The present code provisions provide for a greater level of review by the Village of any future expansion proposal by the hospital.

DIFFICULTIES WITH PRESENT CODE

The present code provides no guidance for the owner of any non-conforming use or building who wishes to modify or increase the bulk of a building or to the extent of areas needed for parking, landscaping, and possibly for stormwater management.

Because the hospital is not a permitted use, there are no building bulk standards in the code. There is a parking standard which provides some limited guidance for the allocation of land area for parking, but for such elements as yards, setbacks, distance between buildings, size and location of accessory buildings, height, Floor Area Ratio, and development coverage the current code provides no specific standards or general guidance. Thus, if the hospital desires to expand in any way the designer will know the programmatic needs of the client, but cannot design the building configuration to meet those needs within the constraints of the zoning code, as there are no established constraints.

The absence of code standards also affects the operation of the Zoning Board of Appeals. Since there are no code requirements, the ZBA has only the general written objectives of the variance section of the code to rely upon.

As the code is written, any applicant for a variance submits an application and plans, which are reviewed by Village representatives for completeness, and once a completeness determination has been made the application moves to a formal review process. In a typical area variance application a Building Inspector would review the application to confirm that all the necessary area variances have been identified, by comparing code specific requirements for each yard, for example with the dimensions shown on the plan. The area requirements for the TFR District are designed for 2 – 2 ½ story residences on relatively small lots and are not appropriate for a facility of the size and bulk of Nyack Hospital so the standards of the TFR District will have little guidance value for the ZBA. The example of a hospital application for bulk variances could be reduced in complexity if the applicant were to meet with the ZBA informally to establish dimensional standards, but this is a somewhat unusual approach for a ZBA and inconsistent with the general operation of a ZBA with respect to variances, which is to review requests for variances from specific dimensional requirements of the code.

APPROACHES FOR NYACK

The recommended approach would be to change the hospital property from a non-conforming use in the TFR District to a permitted use requiring a special permit for an expansion or change in the TFR District. Such a change would provide some legal status to the hospital. The code provides use specific standards for a variety of uses, including for public and institutional uses, such as clubhouses, community centers, places of worship, day care centers, child and nursery schools, child and adult care and schools. Separate use specific standards could be established for hospitals that are specifically related to the characteristics of Nyack Hospital and the residential community in which it is located. Other sections of the code, including for example, parking, perimeter and interior landscaping, would also apply. It may be simpler to apply these other relevant sections of the code to an application for special permit than to an application of a non-conforming use for a variance. It would also avoid the necessity of deciding whether an application for hospital expansion is for a use or area variance and which tests are required. Finally, by carefully crafting the use specific

standards, complete with the general special permit standards, the specific characteristics of a hospital expansion can be addressed.

Several potential additional steps relating to parking and visual and sound impacts follow:

Parking

- Revise parking requirements so that there is a closer relationship to the various demands – categories could include office visits, same day patients, inpatients, medical staff, other staff, vendors and suppliers, emergency room visits, and other categories. In order to have a reasonably enforceable requirement, the categories can be summed to a requirement based on a ratio of inpatient beds/outpatient visits to parking needs.
- Establish a maximum proportion of site area that may be used for parking, aisles, and driveways. This, in conjunction with limiting building coverage, would result in a total development coverage, which is useful in establishing the impervious surface area for which stormwater management measures would be necessary, and would provide space for landscaping.
- Require a proportion of the parking to be underground or in above ground structures with the latter designed and located to minimize visual impact on the surrounding residential area. The code already has similar standards for structure parking downtown.
- Require that as part of any approval, before construction activities on the site begin, in excess of a specific threshold, that alternate off-site preferably off-street, parking be provided to replace any parking areas that are to be disturbed as part of the construction process.
- Establish limitation on duration of parking on neighboring residential streets designed in a manner to discourage long term employee parking
- Establish permit parking for residents on nearby residential streets, including provisions for guest parking.

Visual and Sound Impact

- Require significantly more screening, possibly with a combination of landscaping and constructed elements, along all sides of the Hospital properties facing a street to a height that will obscure vehicle headlights and vehicle roofs. The code now requires screening to a height of between 4 – 6 ½ feet.
- Provide treatment on Hospital windows facing residential areas that reduce lighting levels facing residential area.

- Locate parking facility and building lighting so that illumination is not directed toward residential properties or streets.
- Regulated noise from stationary sources so as not to be discernable beyond the Hospital property lines.
- Reduce the use of ambulance sirens within the site and on nearby streets.
- For any exterior building renovation or new construction, utilize design approaches, including materials, colors, massing and architectural features that are sympathetic to the neighborhood and visual references in Nyack.
- Establish regulations relating to building massing, such as Floor Area Ratio, height limitation on straight line building façade lengths, intended to reduce the visual impact of any additions or new construction.

SEQRA

A part of the assignment is to assist the Village in meeting the procedural requirements of the State Environmental Quality Review Act (SEQRA). The Village Board has indicated its intent to be Lead Agency, as the agency with the primary approval authority to act on a petition for a zone change. Nyack Hospital has submitted a Short Environmental Assessment Form with the petition to restore the former zoning.

If the Village Board is inclined to grant the petition and restore the Hospital zone, it is recommended that a Full Environmental Assessment Form Part 1 be prepared by the petitioner, accompanied by an analysis illustrating the mount of additional development that could take place on the Hospital property, including building space, increased traffic, necessary parking, area for landscaping, and a conceptual plan for stormwater management. This would provide the information necessary for the Village Board to take a “hard look” at the proposed amendment, identify any potential adverse impacts, and seek mitigation as part of any granting of the petition.

If the Village Board wishes to consider an alternative action to provide relief that is different from the granting of the petition, the outlines of such an alternative should be established so that any potential adverse environmental impacts can be identified and mitigation sought. This too, would require a Full Environmental Assessment Form Part 1.

Then, the Village Board would complete an EAF Part 2, identifying potential impacts, and if necessary, an EAF Part 3 would be prepared describing the potential impacts and mitigation. The final step in the SEQRA process would be the adoption of a Negative Declaration, after which the Village Board may act.