March 4, 2014

Via Hand Delivery

Hon. Meenakshi Srinivasan, Chair
New York City Board of Standards and Appeals
250 Broadway, 29th Floor
New York, NY 10007

Re: New York Methodist Hospital
Center for Community Health
505-525 6th Street (Block 1084, Lots 25, 26, 28, 39-44, 46, 48, 50-59, 164, 1001, and 1002)
BSA Cal. No. 289-13-BZ

Dear Chair Srinivasan:

Enclosed are one (1) original and two (2) hard copies of revised and supplementary materials in support of an application (the "Application") on behalf of New York Methodist Hospital ("NYM" or the "Hospital") for a variance to allow the development of a new outpatient care facility, known as the Center for Community Health (the "Center"), on the Hospital's main campus in Park Slope, Brooklyn. An electronic copy of the revised materials will be submitted to the Board by e-mail.

The revised Application materials, which supersede their previously submitted counterparts, consist of the following:

- Revised Application Form BZ;
- Updated Notice of Objections from the Department of Buildings, dated February 6, 2014 (the "DOB Objections);
- Revised Statement of Facts and Findings, dated March 4, 2014;
• Letter from NYM to the Board, dated March 4, 2014, superseding and modifying the
NYM letter submitted to the Board on January 28, 2014 (the “NYM Letter”);

• Revised Drawings G-01, G-02, and Z-01 through Z-52, dated March 4, 2014,
prepared by Perkins Eastman Architects (“PEA”);

• Revised BSA Zoning Analysis Form; and

• Revised Environmental Assessment Statement (“EAS”).

The supplementary materials consist of the following:

• Letter from PEA to the Board, dated March 4, 2014, with attachments (the
“Supplementary Architect’s Letter”);

• Letter from Philip Habib & Associates (“PHA”) to the Board, dated March 3, 2014,
regarding the PHA Traffic Assessment, dated October 28, 2013, attached thereto;

• Letter from Kramer Levin Naftalis & Frankel LLP to the Board, dated March 4, 2014,
responding to the February 4, 2014, letter of Eve C. Gartner, Esq.;

• Copy of the letter from NYM to Brooklyn Community Board 6, dated January 7,
2014, regarding the Hospital’s participation in a community advisory task force on
the development of the Center;

• Copy of the letter from NYM to Brooklyn Community Board 6, dated January 8,
2014, regarding the Community Board’s resolution on the Application, with a copy of
the Community Board resolution;

• Copy of the letter from AKRF to Rory Levy, BSA staff member, dated February 10,
2014, responding to comments from the New York City Department of
Environmental Protection on the air quality and noise attachments to the EAS;

• Copy of the draft Subsurface (Phase II) Investigation Sampling Protocol and draft
Health Safety Plan, transmitted electronically to Rory Levy, BSA staff member, on
February 14, 2014;

• Streetscape elevations of the proposed Center, dated March 4, 2014, prepared by
PEA; and
Changes to the Application Materials

The revised materials enclosed with this letter reflect three types of modifications to the Application:

1. Zoning Compliance – Rear Yard and Rear Yard Equivalent

The zoning calculations set forth in the materials previously submitted to the Board incorrectly indicated that, within the required rear yard and rear yard equivalents on the Zoning Lot, any portion of the proposed Center or the Complying Development with a height not exceeding 23 feet or 1 story, whichever is less, would be a permitted obstruction. While community facility buildings satisfying these height criteria are typically a permitted obstruction, Use Group 4 ambulatory care facilities located in certain residential districts, including R6, R6B, and R7B districts, are not. ZR § 24-33(b)(3)(iii). The proposed Center therefore requires an additional waiver to modify the rear yard regulations applicable to the interior lot portion of the Zoning Lot in the R6 district. ZR § 24-36. The required waiver is listed on the updated DOB Objections. The Application Form BZ, Statement of Facts and Findings, Drawings, BSA Zoning Analysis Form, and EAS have all been updated accordingly. The building envelope for the proposed Center has not changed.

Minor design changes have been made to the Complying Development so that there are no non-permitted obstructions within the required rear yard and rear yard equivalents on the Zoning Lot. In particular, the one-story portion of the building previously located in the interior lot portion of the R6 district, which contained amenity space, has been eliminated. The portions of the at-grade vehicular driveway and loading area located in the R6/R6B rear yard equivalent, which were previously enclosed, are now open to the sky. The Complying Development, as modified, has less floor area than the version shown in prior submissions, but its configuration and scale remain the same. In particular, the Complying Development would still consist of two building segments with narrow floor plates, limited functional adjacencies, and an inefficient duplication of support spaces, and circulation between the two building segments would be possible only through the at-grade vehicular driveway and loading area. The Statement of Facts and Findings, Drawings, and EAS have all been updated to incorporate the modified design of the Complying Development. As indicated in the revised EAS, the findings of the environmental analysis have not been affected.
2. Additional Application – Required Parking

As set forth in the Application materials previously submitted to the Board, the construction of the Center would require a modification of the drawings approved in connection with the Board’s special permit for the existing Hospital garage on the Zoning Lot so as to accommodate some of the required parking for the Center. The Hospital will be submitting a separate Special Order Calendar (SOC) application to the Board to effectuate this modification. The Statement of Facts and Findings, Drawing, and EAS have been revised to reference the SOC application.

3. Additional Information – Programmatic Need and Floor Plans

At the February 11, 2014, public hearing on the Application, the Board requested that NYM submit (i) more information on the Hospital’s programmatic need and (ii) floor plans depicting the Center’s interior configuration in greater detail. As described in greater detail below, the enclosed NYM Letter, Statement of Facts and Findings, and Drawings have been revised in response to these requests.

Responses to the Board’s Comments

At the February 11, 2014, public hearing on the Application, the Board requested that NYM submit additional materials in response to certain comments made by the Commissioners. The comments, and our response to each, are as follows:

1. Provide additional information on the Hospital’s programmatic need for the Center.

The enclosed NYM Letter and Statement of Facts and Findings have been updated to incorporate additional historical data that formed the basis of NYM’s strategic planning, which resulted in the Hospital’s decision to build the Center. This data demonstrates the growth of the Hospital as well as the outpatient departments and services to be relocated to the Center. It also contains historical data on the geographic and demographic make-up of the Hospital’s patients. The relationship between this data and the Hospital’s programmatic need for the Center is discussed in greater detail in the NYM Letter.

2. Provide floor plans that depict the Center’s interior configuration in greater detail.

The enclosed Drawings have been revised to incorporate more detailed floor plans for the proposed Center.
3. Provide a streetscape elevation of the Center, depicting the building in a broader neighborhood context.

   The enclosed streetscape elevations show (i) the north and south sides of 5th Street, including the northern elevation of the Center, from approximately 150 feet west of 7th Avenue to approximately 150 feet east of 8th Avenue; (ii) the north and south sides of 6th Street, including the southern elevation of the Center, from approximately 150 feet west of 7th Avenue to approximately 150 feet east of 8th Avenue; and (iii) the east and west sides of 8th Avenue, including the eastern elevation of the Center, from 8th Street to 4th Street. Also enclosed is a contextual photo study encompassing a larger area surrounding the Zoning Lot. The photo study contains street-level views of neighboring buildings and, in cases where it would be visible from such perspective, the Center. These materials evidence the varied scale and heights of the buildings within the vicinity of the Zoning Lot, as described in the Statement of Facts and Findings.

4. Provide studies of lesser variance options for the Center that (i) fully comply with the applicable height and setback regulations in the R7B district and (ii) reduce the degree of the building’s non-compliance with the applicable height and setback regulations in the R6B district.

   The studies of the proposed lesser variance options for the Center are attached to and discussed in the Supplementary Architect’s Letter. As discussed in the Letter, increasing the depth of the building’s 5th Street setbacks to fully comply with the applicable height and setback regulations in the R7B district and/or reduce the degree of the building’s non-compliance with the applicable height and setback regulations in the R6B district would require significant modifications to the size, configuration, and location of certain programs to be included in the Center, in some cases requiring that facilities be eliminated altogether. As stated in the Letter, a building that conforms with any of the lesser variance options would not fully satisfy the Hospital’s programmatic needs.

5. Provide diagrams illustrating the programmatic issues associated with constructing a larger portion of the Center, e.g. up to five stories, over the existing Hospital garage.

   As described in the letter from Severud Associates, dated December 19, 2013 (the “Severud Letter”), previously submitted to the Board, a vertical enlargement of the existing Hospital garage would present serious logistical issues. An enlargement of more than five stories in height would require the seismic retrofitting and structural reinforcement of the garage, as well as the suspension of the garage’s operations for approximately 17 months during construction. A vertical enlargement of up to five stories in height would require less structural
work, but it would also require the suspension of the garage's operations for a period of time during construction. In either case, the floor plates of the vertical enlargement could not be as large as those of the existing garage, as the limited capacity of several of the structure's transfer beams precludes the extension of certain columns to additional floors.

The enclosed Supplementary Architect's Letter describes in greater detail the programmatic issues involved with locating any of the Center's outpatient facilities over the existing garage, including in a building of five stories or fewer in height. As discussed in the letter and illustrated in the diagrams attached thereto, such a building could not effectively accommodate any part of the Center's program, since it would be functionally and operationally segregated from the balance of the Center. The west wing of the Center is the only area that can accommodate the Center's operating rooms and the associated support spaces on the floors above and below, and it must be maintained as a secure, sterile area to allow such facilities to function properly. The location of these facilities in the western wing thus precludes connections between the additional wing over the garage and the balance of the building.

The resulting separate building over the garage would also have floors that are too small to accommodate the proposed clinical institutes. The building would further require an additional vehicular drop-off and visitor entrance on 5th Street, with resulting increases in vehicular traffic. In short, the building would have the same deficiencies as the Complying Development, which are discussed in the Statement of Facts and Findings at pages 14 through 17.

6. Explain why the proposed floor-to-floor heights of the Center, particularly those for the 6th and 7th floors, are needed.

The rationale for the proposed floor-to-floor heights is discussed in the Supplementary Architect's Letter.

7. Discuss whether the proposed rooftop mechanical enclosures can be set back farther from 5th Street.

As discussed in greater detail in the Supplementary Architect's Letter, the proposed mechanical closures have been designed to provide the minimum required clearance around the Center's rooftop equipment. They cannot be set back farther from the street for this reason. As the design of the building advances, the Hospital will explore options for the mechanical equipment that would require smaller enclosures.
8. Submit a copy of the Traffic Assessment prepared by PHA, previously submitted to the Community Board, and discuss the projected impacts of the Center’s operation on vehicular traffic near the former John Jay Educational Campus.

A copy of the supplementary Traffic Assessment, as previously submitted to Community Board 6, is attached to the enclosed letter from PHA, dated March 4, 2014. The Traffic Assessment supplements the EAS and conservatively compares the traffic expected to be generated by the Center with existing conditions in the area, using the methodologies prescribed by the CEQR Technical Manual. As discussed in the PHA letter, the Center would not have significant traffic impacts on the neighborhood or, more specifically, on the intersection adjacent to the former John Jay Educational Campus.

We also understand that New York State Assemblymember Jim Brennan has submitted letters to the Board requesting that traffic agents be deployed to control vehicular circulation in the area surrounding the proposed Center. NYM has brought this request to the attention of the Traffic Task Force organized by Councilmember Brad Lander, and the Task Force has agreed to consider the use of additional traffic agents as part of its broader review of traffic conditions in the area. The Task Force has regularly invited Assemblymember Brennan to participate in its meetings and will continue to do so.

9. Provide responses to all of the conditions set forth in Community Board 6’s resolution approving the Application.

The Hospital wrote directly to the Community Board following the issuance of its resolution to provide responses to the conditions to the Community Board’s approval. The responses are set forth in the attached letters from NYM to the Community Board, dated January 7, 2014, and January 8, 2014.

Thank you for your continued consideration of the Application. Please let us know if you need any additional materials in advance of the Board’s continued public hearing on April 8, 2014.

Very truly yours,

Elise Wagner

Enclosures
cc: Brooklyn Community Board 6
    Hon. Eric Adams – Brooklyn Borough President
    Hon. Brad Lander – City Council Member 39th District
    Ira Gluckman, R.A. – Department of Buildings, Brooklyn
    Purnima Kapur – Department of City Planning
    Christopher Holme – Department of City Planning