



## **Eastowne SUP Medical Office Building (MOB) Comment Responses**

*September 19, 2018*

*The following information includes applicant and staff responses to a series of Council concerns that were originally published August 16, 2018. This document also contains additional Council questions (identified with an asterisk) that were received through September 12, 2018.*

*The questions and answers are categorized by the topics shown on the next page. Category headers appear at the top of each page.*

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## **Town Council Concerns and Responses**

### Executive Summary

UNC Health Care (UNC HC) is a leading provider of healthcare that is:

- accessible
- affordable
- patient-centered

UNC HC provides services across the state and is one of the largest employers. System wide UNC HC has:

- 30,000 employees
- 3,000,000 clinic visits annually
- 80,000 inpatient discharges annually

As a recognized leader in healthcare delivery, education, and policy we are proud to be headquartered in Chapel Hill. We take our commitment to the town very seriously - as a service provider, employer, and community partner.

## **Town Council Concerns and Responses**

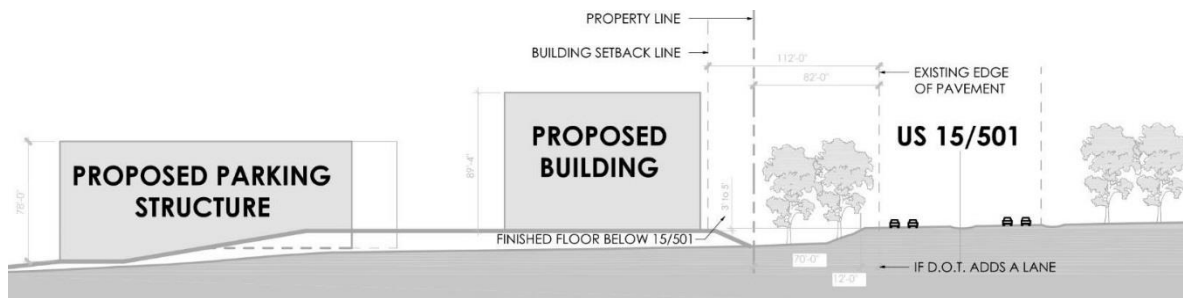
### Topics

- Building Height and Feel
- 15-501
- Eastowne Drive
- Resource Conservation District
- Greenway/Bike Path
- Tree Buffers
- Traffic Impact Analysis
- Master Plan
- Miscellaneous
- Process

**1. At 95' or 105', this building is taller than anything the current Council has approved. Other large buildings are at 90'. There has been pushback from the community on this size outside of downtown.**

Applicant Response: Building elevations have been redesigned to reduce height from 95' to a 89'-4" from Finished Floor Elevation.

Staff Response: The Land Use Management Ordinance defines building height as the distance between the mean finished grade at the foundation along the street façade to the highest portion of the structure. The proposed zoning district, Office/Institutional-3 (OI-3) does not have a maximum building core or height limitation.

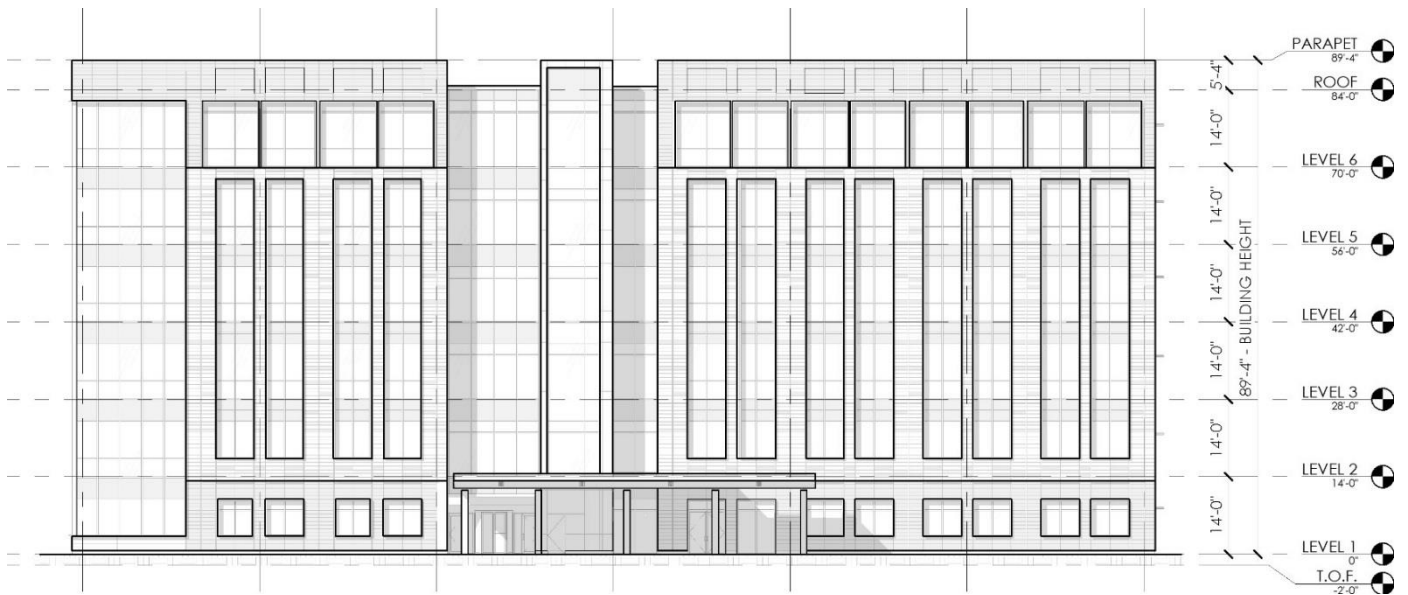


**2. It appears that the building will be 105 feet high, equivalent, perhaps, to a nine-story building. This building is too tall for the area and becomes the precedent for all future buildings in the area.**

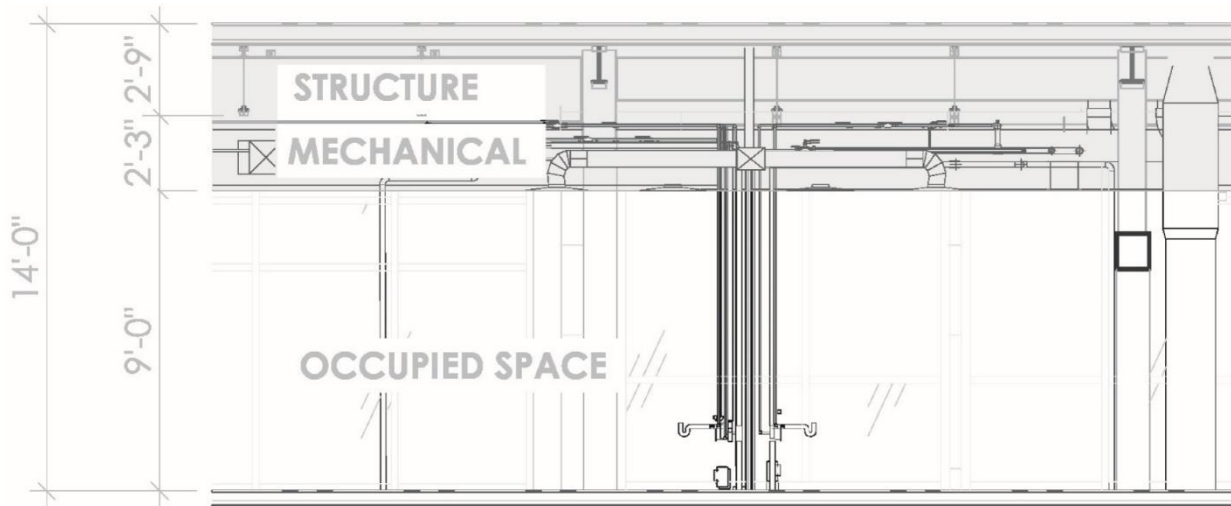
Applicant Response: The proposed building is 6 stories (14' 0" typ x 6 + parapet) or 89'-4" with a ceiling height of 9 feet which provides additional clearance for specialty HVAC. Reducing floor to floor heights will lower the building height to under 90', which is modified from 5'. See following elevation and floor to floor section illustrating use of heights specified.



## 2. Revised Elevations



## 2. Breakdown of floor to floor heights:



**2. Section Elevation:** The following diagram shows the overall height of the building from finished floor elevation to its highest point as well as the varying building height relative to 15-501. Please note that 15-501 is above the finished elevation of the building.



**\*2. If the SUP will stipulate the building’s height, it should not allow for administratively approved increases, since that would get back to where we were.**

Staff Response: The applicant has agreed to a new maximum building height of 90' that has been included as a new stipulation. This will not allow any administrative increases.

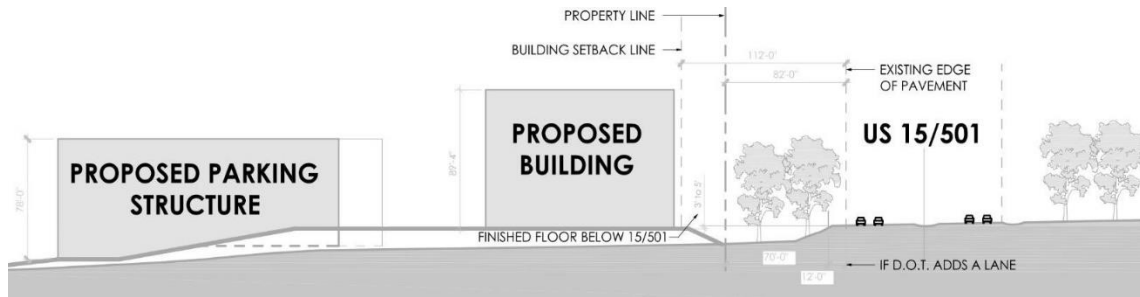
**\*2. How will building height be measured from US 15-501 and Eastowne Drive, and what will this mean as the immediate area develops and redevelops?**

Staff Response: The building height is measured from the “finished floor elevation”, which is essentially the floor of the 1<sup>st</sup> story. The applicant has agreed to limit the height to a maximum of 90' from the floor elevation, including the parapet and mechanical equipment on the roof. A section drawing provided by the applicant shows that this height would be lower than the top of the existing former Blue Cross Blue Shield building on the east side of US 15-501. The applicant has also provided an initial section drawing from Eastowne Drive, and is preparing a view from the sidewalk along Eastowne Drive to the parking deck.

**3. This sets the tone for the whole 15-501 corridor. Will there be requests for even higher buildings in this section of town? With Gateway & SECU Developments, the feel of coming into such tall buildings at this main entrance to Chapel Hill is important. / Being so large so close to the road, makes the building feel even bigger. Our interest is urban design but not at the expense of feeling like a canyon down 15-501**

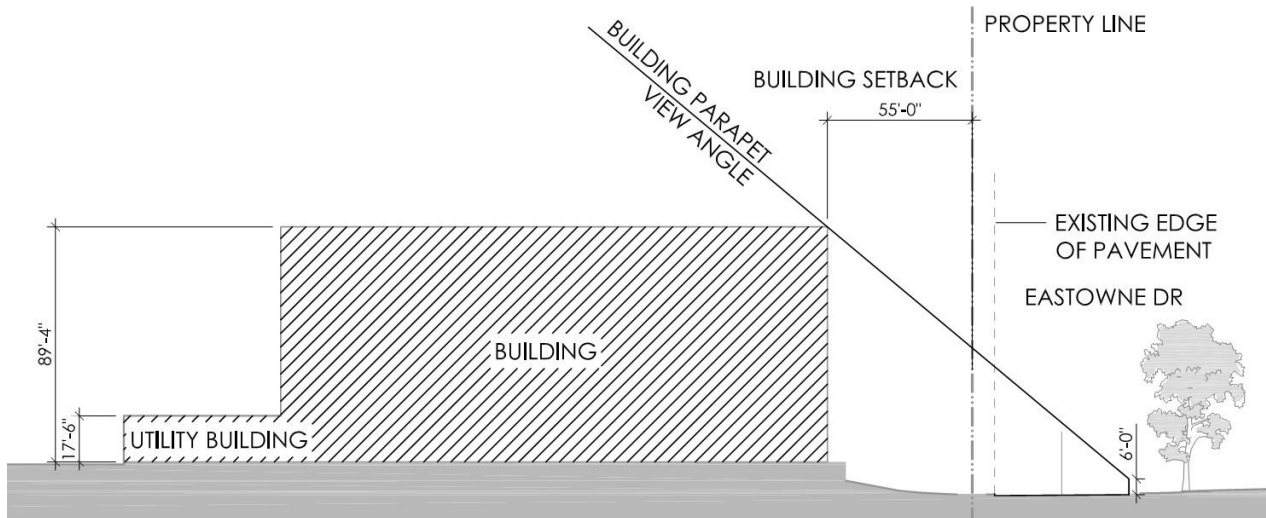
Applicant Response: Building is set back from 15-501 a distance of 112'. We are

proposing to preserve a considerable amount of the buffer vegetation and even with future road widening along 15-501, there will still be 100' of separation. The required on-site 30' buffer is being maintained. Also, please note that the building height is less than the set back from the edge of pavement. This creates a commonly accepted 1 to 1 ratio.



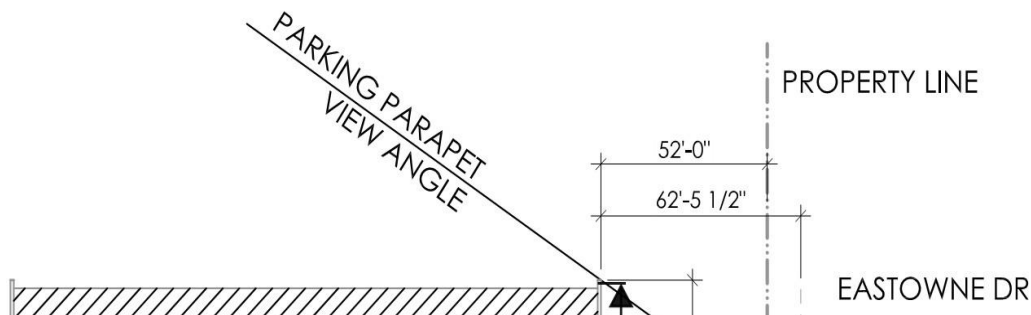
**3. cont'd.**

Applicant Response: Building is set back from Eastowne by 55' and parking deck by 52'. Below is a site section showing position of Eastowne relative to building and parking structure.



**3. cont'd.**

Applicant Response: Building is set back from Eastowne Drive by 55' and the Parking Deck is set back by 52'. Below is a site section showing position of Eastowne Drive relative to building and parking structure.



**\*3. What review work has urban designer Tony Sease been doing, how it has changed the plan we first saw, and how will it help us address the question of the gateway and place-making for both sides of the road?**

Staff Response: Tony Sease has had an initial consultation with the development team. Regarding placemaking and gateway interest, we anticipate that they would be addressed as part of the Master Planning process, We have included a stipulation in Revised Resolution A that reads:

Urban Design Review: Town staff will select a third-party urban designer, and the applicant will pay for the urban design review based on the rate listed in the Planning and Development Services Fee Schedule for Blue Hill District Urban Design review. The Urban Designer will review the project plans in light of Town values as expressed in the Town's Strategic Plan and the 2020 Comprehensive Plan, discuss them with the applicant, and present their recommendations to the application for consideration prior to submittal of Final Plans for construction of the project. The Community Design Commission shall provide courtesy review comments on the recommendations prior to issuance of a Zoning Compliance Permit.

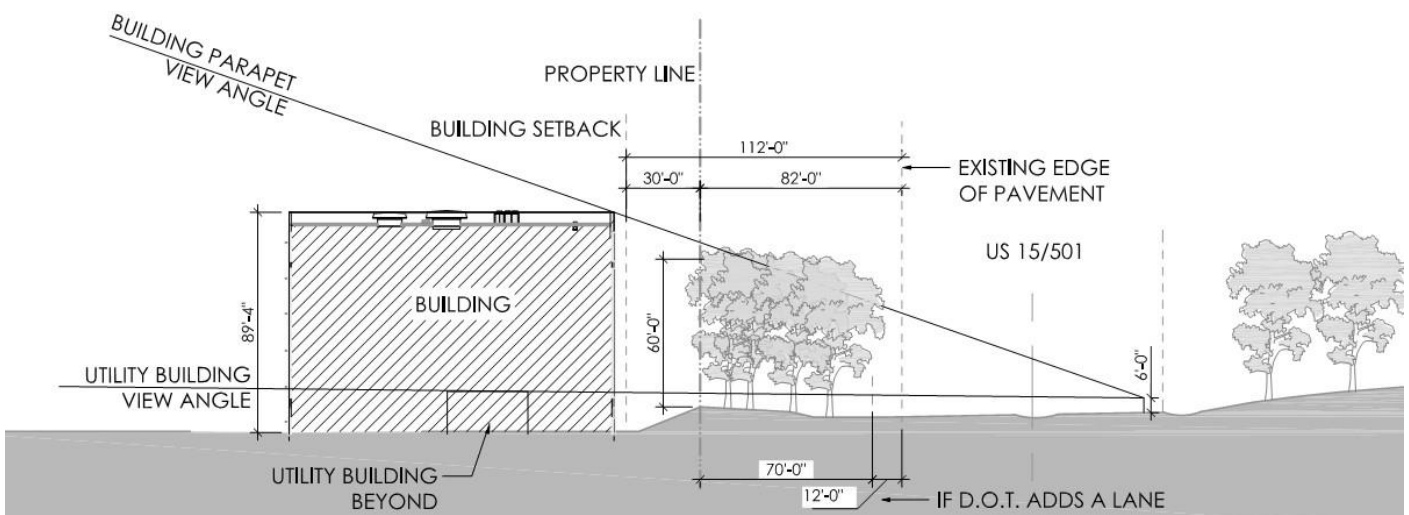
**4. Is a basement level a strategy to reduce overall height?**

Applicant Response: A basement is not practical for this project due to costs of rock excavation and foundation walls, an increase of required rock blasting, and access to daylight for patients.

**5. Where is the best place for the mechanicals of the building?**

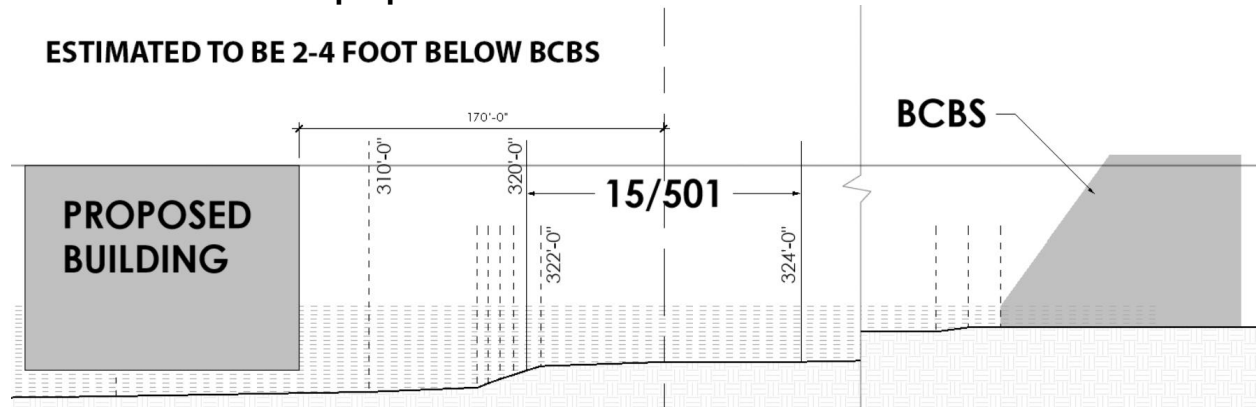
Applicant Response: There are small fans and mechanical equipment located on the roof within the 90' limit on height. Air cooled chillers are located and screened behind the small, single story utility building which is located approximately 10' below 15-501 elevations and any exterior mechanical units will also be shielded from view by an evergreen landscape. See following line of sight drawing for further clarification.

**5. Illustrations:**





**5. Illustrations cont'd. Below is a comparison between BCBS height relative to 15-501 as well as the proposed Eastowne MOB.**



**5. Illustrations cont'd. Below is a list of other taller buildings located throughout Town.**

Building	Height
UNC Healthcare	90 Feet
140 West	105 Feet
BCBS (SECU)	65 Feet
Berkshire	95 Feet
Carolina Square	138 Feet
East 54	81 Feet
Granville Towers	90 Feet
Greenbridge	135 Feet
Memorial Hospital	140 Feet
Shortbread Lofts	97 Feet

**6. Is there a way to push this building back to make it seem smaller or to make it smaller and then allow taller buildings deeper into the site to set a better tone? Stepping back into the overall site.**

Applicant Response: We have redesigned building to reduce height by 5'-8". This will

## ***Building Height and Feel***

require some areas of the clinic to have lower than market ceilings (8'-6") and require bulkheads to be built for some structure/mechanical infrastructure; however, we are committed to meeting the Town's concerns regarding height/mass.

We believe the site depth should be used for pedestrians in lieu of separation from traffic. This has been discussed in detail with Tony Sease as well and fits with his thoughts on urban design. These discussions also consider how we bring people from Eastowne into the site and direct them toward the MOB and future developments. The more we engage visitors between the parking deck and building and direct movement away from US15-501, we believe the better for public safety and engagement.

### **7. How tall will the building be from each corner to the ground?**

Applicant Response: The topography around the building varies; therefore, we have shown multiple heights along 15-501 to try and clarify building height at FFE versus the topography created in the grading plans. Please see exhibit on the following slide.

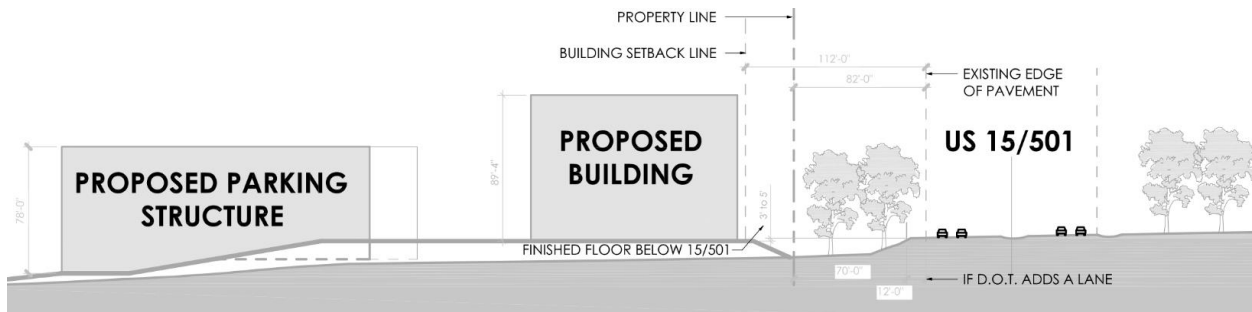
### **8. How big is the Ambulatory Care Center? Will this building be similar in use? Will there be emergency care? Urgent care?**

Applicant Response: The ACC building is approximately 123,000 SF. The program for this building will not be similar and there will be no emergency care or urgent care.

**9.** If 15-501 may be widened someday to three lanes on each side. How will this building feel then – maybe it needs to push back just a bit

Applicant Response: We will reduce building by 5'-8".

Staff Response: NCDOT has done some very preliminary analysis and believes sufficient right-of-way exists on US 15-501 to accommodate anticipated widening. The development is maintaining the required 30 foot buffer along the US 15-501 frontage.



**10.** How will emergency vehicles cross 15-501 to enter fire lane?

Applicant Response: The secondary access point along 15-501 is for an emergency access only, which is required by code. Fire access would be primarily at the Eastowne Drive entrance. If this entrance is not available, fire personnel could perform a U-turn at the Lakeview Drive and US 15-501 intersection.



15-501

## 10. Cont'd.

Staff Response: Fire access would be primarily from Eastowne Drive at the primary entrance. If the Eastowne Drive entrance was not available, fire access would use the Lakeview Drive and US 15-501 intersection for a U-turn. The secondary means of access also provides initial access to mutual aid equipment responding from Durham.

**\*10. This page notes that the emergency fire lane is required by code. Is that a Town or State code? If the former, is it something we could consider waiving? Further, is this lane something that might no longer be needed after full build out of the site?**

*Staff Response:* The Fire Code is a State requirement, which the Town does not have the authority to make exceptions to. Fire code requires that the site have 2 points of access, with adequate spacing between them. Since one access point has already been placed on Eastowne Dr, it is best practice to have the second access point coming onto the site from a different side. The applicant has the ability to propose a secondary connection through the RCD during the Master Plan process, however it is not being considered at this time, and would not be built for another 4-5 years if approved. The new building will still require adequate fire access prior to that point.

**11. Need to make sure there is no traffic stacking onto 15-501 from this entrance or even between the two lights at Eastowne Rd and Lakeview Rd intersection.**

Applicant Response: Improvements will be made as recommended in the TIA.

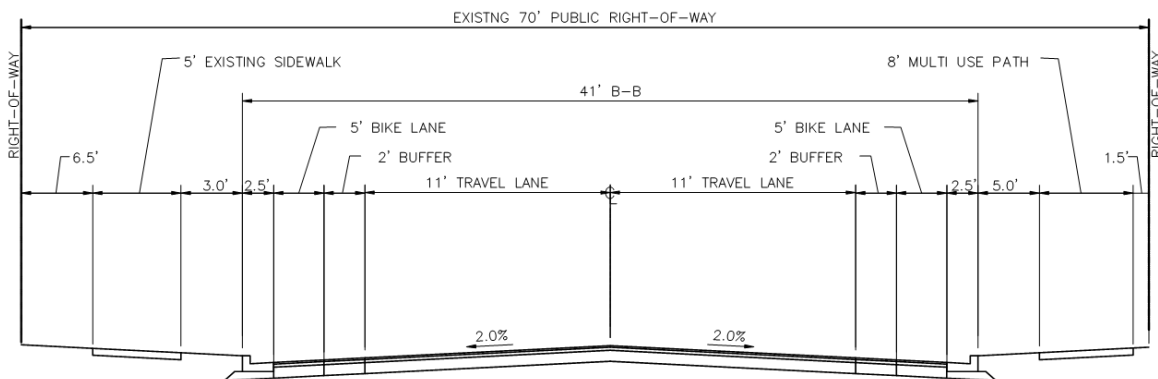
Staff Response: The TIA addresses this concern and improvements are addressed in the report.

- Traffic simulation model for build-out conditions with mitigation measures does not indicate any issues with vehicle queues.
- Traffic signal synchronization should eliminate any vehicle queues during peak hours.

**12. Need to make sure there is space left along Eastowne Road in case it has to be widened at some point in the future – turn lane width or additional lanes. Building placement should not preclude this –**

Applicant Response: We will defer to Staff's response and are supportive of their recommendation.

Staff Response: Town staff identified a possible cross section based on the draft Town Design Manual. The cross-section would have two 11' travel lanes; one 10' turn lane at intersections; two 5' bike lanes with buffer; planting strip; and sidewalks. The placement of the building and the parking deck would be located outside of these right-of-way requirements. Please see following drawing for clarity.



PROPOSED SECTION FOR EXISTING ROAD  
(70' R/W, 41' B-B)

**13. Consider traffic circle in front of parking deck – there is already a great number of cars coming down Eastowne Rd from other medical & apartment complex such that making a left turn out of the parking deck onto Eastowne Rd is complicated – maybe not for first building but for full build out – at least plan for this to help with traffic flow. Adding this number of cars into one entrance is huge for this section of road – traffic circle or something to keep movement and prevent stacking in either direction**

Applicant Response: We considered a traffic circle at this location and determined it created several impacts to the project and adjacent landowners, including the loss of full access movement for Pinegate Apartments, and impact on existing environmental features. A traffic circle may be viable with the future Pinegate redevelopment but should be evaluated with overall Master Plan.

### 13. Cont'd

Staff Response: We believe placement of a traffic circle at the parking deck entrance may cause conflict with the Pinegate Apartments driveway. It is recommended as part of the Master Plan traffic impact scope of work that a traffic circle be considered at the intersection of Eastowne Drive and Old Sterling Drive.



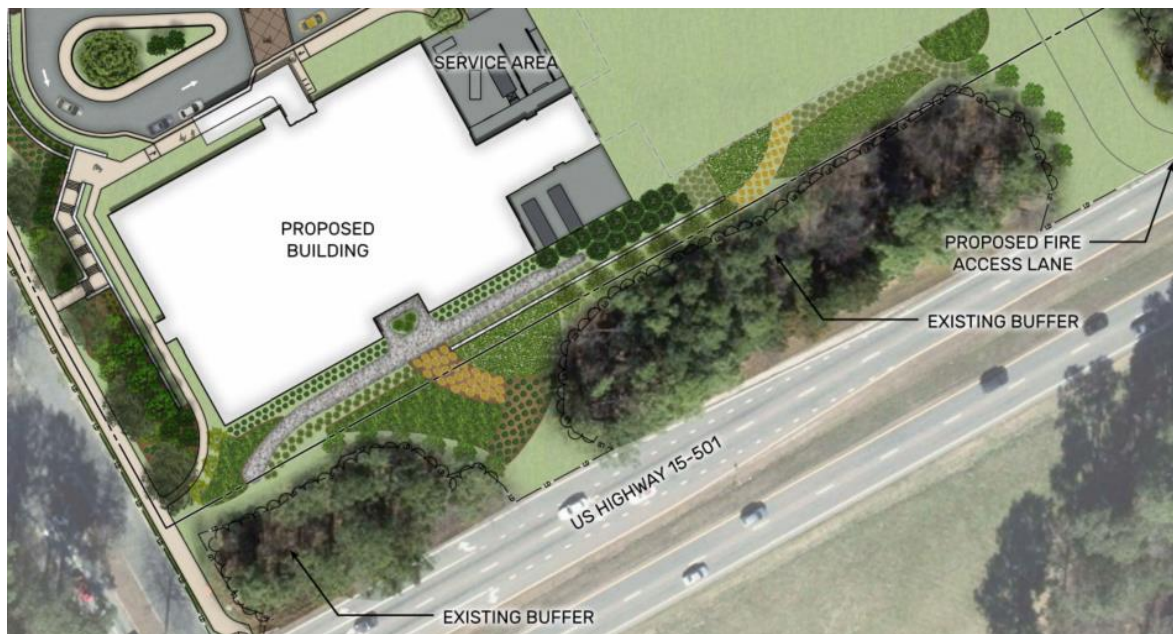




**15.** Is there a way to connect bike path/multi modal pathway through complex and adjoin to fire road or just not against roadway? Want mobility but not at the expense of tree buffer and possible widening of 15-501. Is multi use of fire path a good option?

Applicant Response: We have removed the greenway trail along 15-501 and are open to having a pedestrian connection go thru this site and connect to future greenway as part of the masterplan.

- ✓ Clean up buffer of 15-501 ROW & landscaping enhancements.
- ✓ Removed Greenway
- ✓ Provided a view corridor.
- ✓ 68% of wooded frontage is being retained.
- ✓

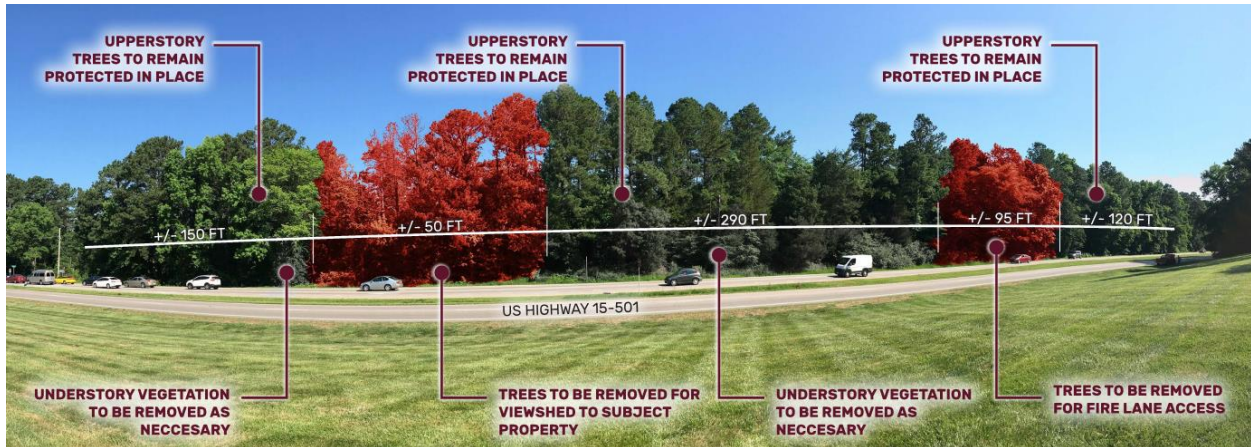


Staff Response: The developer is considering connection of multi-use paths through the entire Eastowne property. A stipulation has been included in Revised Resolution A. Bicycle and pedestrian facilities are recommended along Eastowne Drive providing connections to Old Sterling Drive and Dobbins Drive.



**16.** This is a tall building and will be visible above tree level, want to maximize tree feel along 15-501 corridor. Leaving existing mature trees in buffer areas

Applicant Response: We propose the following changes to the buffer in lieu of clearing, grading and installation of greenway along 15-501.



- Poor quality understory vegetation to be removed to clean up buffer.
- Trees in viewshed are poor quality.

Applicant Response: For further clarification, here is a panorama of the proposed buffer and proposed project.



Staff Response: The applicant has revised the plans, and additional trees along the US 15-501 frontage are being preserved.

**17.** Are the trees shown in the Powerpoint accurate in terms of their height?

Applicant Response: To the best of our abilities.

**18.** How big are the tree openings along US 15-501?

Applicant Response: There are two openings approximately 50' and 95'. The 95' opening will be reduced to 55' with plantings.

**19. What does the Eastowne TIA tell us?**

Staff Response: The June 2018 Traffic Impact Study (TIA) finds that with some minor improvements, the existing roadway network can accommodate the projected traffic from the proposed UNC Health Care Eastowne Medical Office Building. The applicant is proposing to build these improvements as part of the project.

**\*19. Do the numbers used in the traffic study reflect the capacity of the full parking deck or just the first building?**

Staff Response: Traffic analyses focus on activities that draw traffic to and from a site. In this case, the traffic generator is the Medical Office Building as employees and patients come to the site to work and utilize the medical services. As a result, the Transportation Impact Analysis (TIA) calculates trip generation numbers based on the Medical Office Building, not the size of the parking deck. The additional capacity of the parking deck could be used by additional development on the site, if approved under a separate future application that would require its own TIA. However, it would not increase the amount of traffic generated by the building currently being proposed.

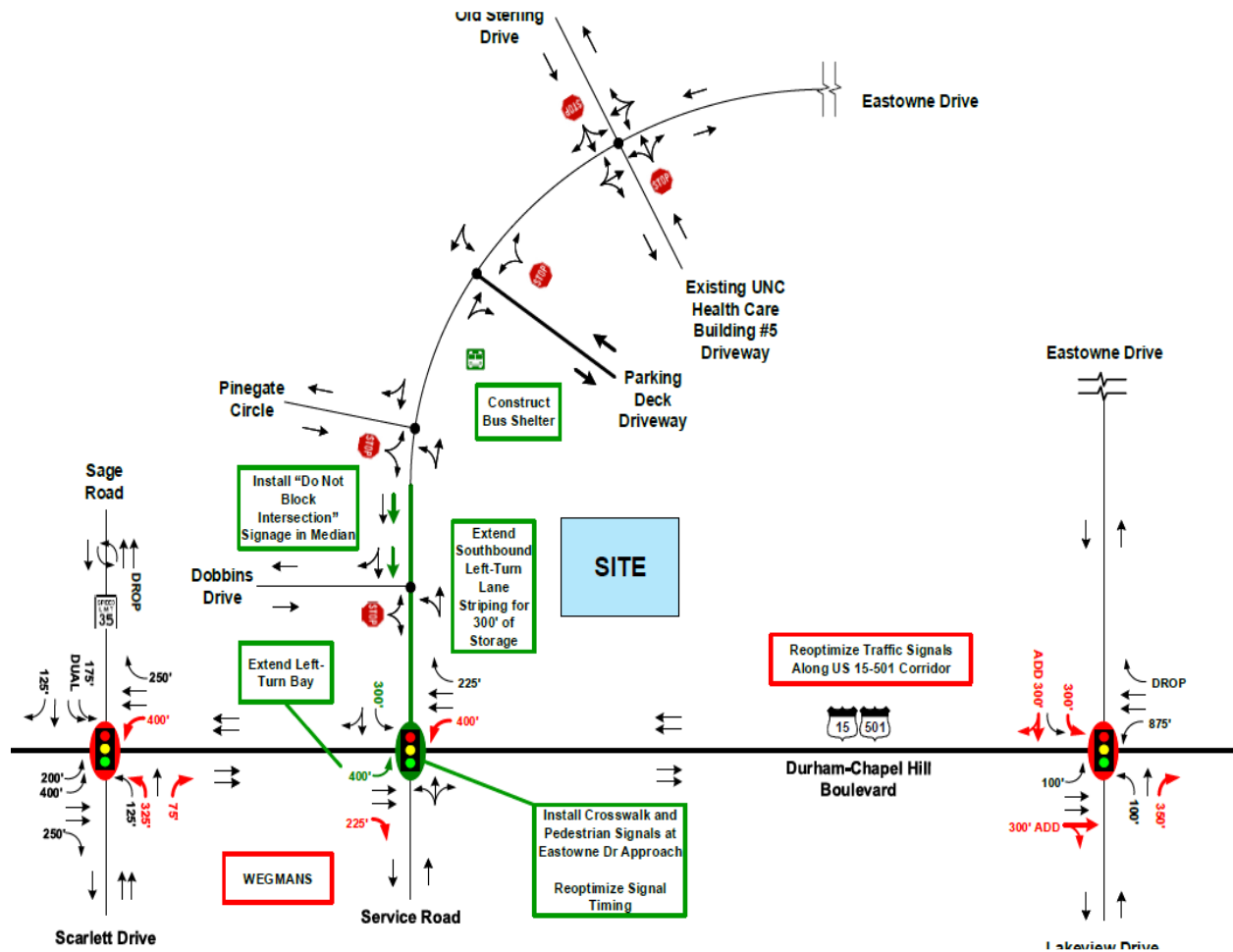
**20. What specific improvements are required?**

Staff Response: Improvements required are shown below:

- Extend northbound left-turn lane on 15-501 to 400' for added vehicle queuing;
- Extend Eastowne Drive left-turn lane onto 15-501 to 300' for added vehicle queuing;
- Install crosswalk and pedestrian signals at Eastowne Drive for improved passage across 15-501 and a connection to the future Wegmans;
- Construct a new bus shelter along Eastowne Drive adjacent to proposed development;
- Install "Do Not Block Intersection" signage in median along Eastowne Drive.

The following improvements are required prior to issuance of a Certificate of Occupancy, if not installed by the future Wegmans:

- Reoptimization of traffic signal timing on US 15-501;
- Add a second 300' left lane from Eastowne Drive to US 15-501.



## 21. What is a Traffic Impact Analysis?

Staff Response: A TIA studies the effects of potential additional travel generated by a proposed development project (the “build” scenario) and compares that potential future travel demand to what would occur otherwise without the proposed project (the “no build” scenario). The difference between the “no build” and “build” scenarios helps the Town identify any needed improvements to the transportation system within the project area.

The Town requires all applicants seeking a Special Use Permit to conduct a Traffic Impact Analysis. This requirement can be waived under limited circumstances when traffic generation is projected to be less than 500 daily trips. The TIA study is performed by a consultant of the Town and is paid for by the applicant.

## **22. What is the 'ITE Manual' and how does it relate the estimation of vehicle trips?**

Staff Response: The *Institute of Transportation Engineers' Trip Generation Manual (ITE Manual)* provides the industry standard estimating the number of vehicle trips associated with a variety of different land use types (e.g., office, schools, retail). Trip generation rates provided in the manual are averages derived from case studies. For each land use type within the ITE Manual, vehicle trips can be estimated based on different types of variables (e.g., square footage, number of employees), with transportation engineers selecting the approach that best approximates the conditions under which a given proposed project would function.

## **23. Who prepares a Traffic Impact Analysis?**

Staff Response: The TIA conducted for development projects within the Town of Chapel Hill are:

- Contracted through Town of Chapel Hill
- Studies are paid for by the applicants
- Consultant provides "impartial" study – not working for Applicant, Town, or NCDOT
- Study adheres to Town and NCDOT guidelines

HNTB, the traffic consulting firm for this study, has provided Town on-call services (TIAs, Planning, Design) conducting 65 for the Town between 2003 and 2018. Approximately 175 total since 1998, almost exclusively under on-call TIA contracts with municipalities in North Carolina.

## **24. How is the traffic study area determined?**

Staff Response: The study area is defined by the TIA Guidelines. The study area is based on the size and extent of the proposed development. At the **minimum**, the study area shall contain include:

- adjacent streets;
- nearest arterial/arterial intersection(s);
- site driveways, sidewalks, and bicycle lanes;
- internal roads;
- all signalized or potentially future signalized intersections, either current or future years; and
- pedestrian and bike facilities within ½ mile walk or bicycle ride to/from the site.

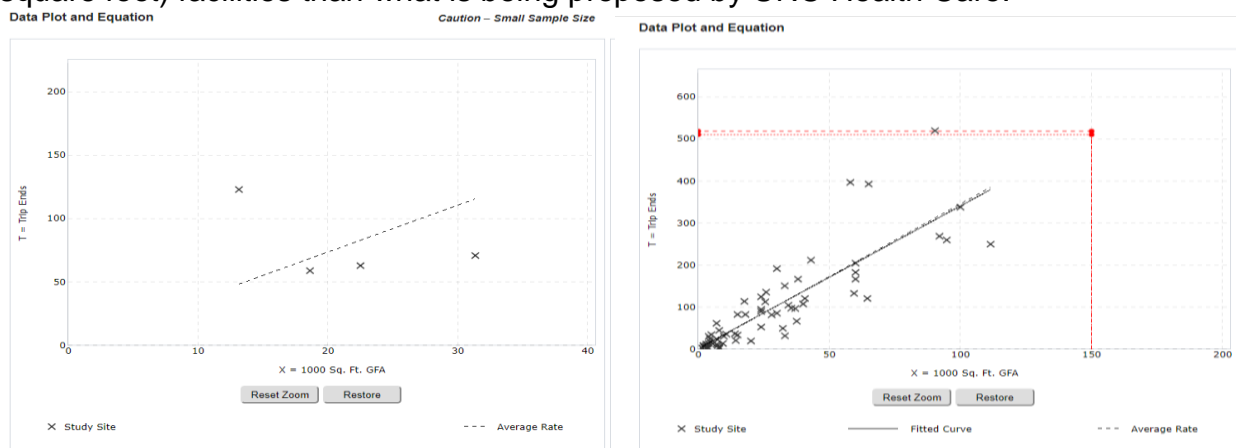
## 25. How did the consultant incorporate the ITE Manual when making trip generation calculations for the Eastowne project?

Staff Response: The consultant reviewed the available ITE Manual data on land uses related to the proposed UNC Health Care facility (720 – Medical-Dental Office Building, 630 - Medical Clinic), as well as the existing facilities. There are two trip generation options for these land uses – number of employees and square footage. Based on the ITE Manual data available and compared to the applicant-supplied information, the consultant determined that the number of employees was the most appropriate variable to use.

A second consideration is the particular land use type (or “code”) from the manual that best approximates the land use in the proposed project. In this case, the consultant averaged the trip generation results of the two land use codes listed above to best approximate the land use in the Eastowne project. For the existing site, the Applicant shared that the existing facilities function as general office buildings (not clinics), so the ITE Manual code for General Office Buildings (710) was utilized to estimate existing trip generation of the fully utilized existing facilities.

## 25. Cont'd: How are trips calculated? (Building Size)

Staff Response: A review of available information from the ITE Trip Generation Manual indicated that trip rates and field data based on building square footage for Medical Clinic and Medical-Dental Office Building land use codes were for far smaller (30,000 square foot) facilities than what is being proposed by UNC Health Care.

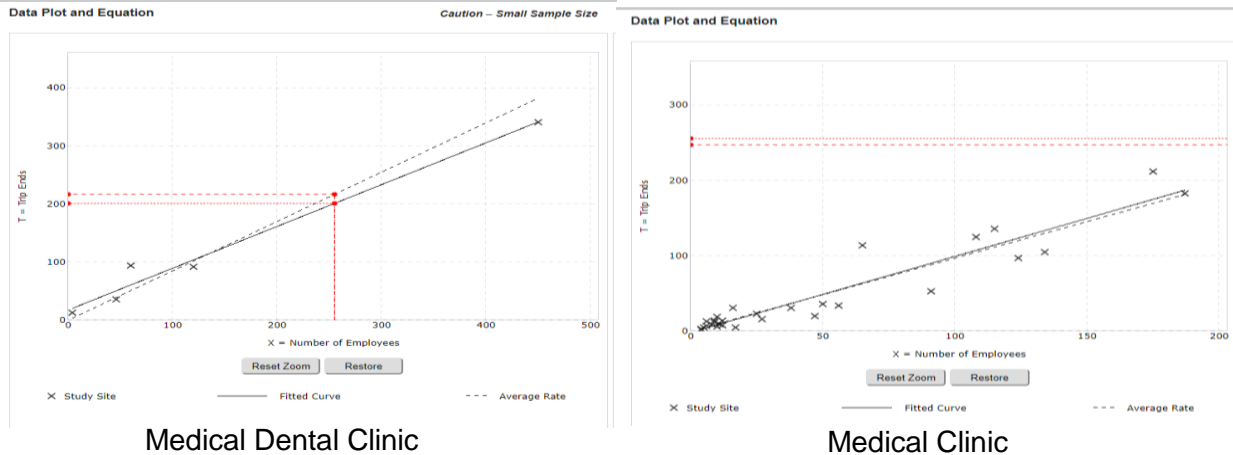


Medical Dental Clinic

Medical Clinic

**25. Cont'd: How are trips calculated? (Number of Employees)**

Staff Response: Using the maximum number of staff as a trip generating variable for the Medical Clinic and Medical-Dental Office Building ITE Land Use Codes produces comparable results that were averaged to produce an estimate of daily and peak hour trip generation for the facility at full build-out



**25. Cont'd: How are trips calculated?**

After careful consideration of information, along patient appointment distribution over the course of a typical day, a decision was made to use the **number of employees** as a trip generating variable – and averaging the land use types of Medical Clinic and Medical-Dental Office to produce trip estimates for 255 employees.

ITE LUC	Description	Density	Daily			AM Peak			Noon Peak			PM Peak		
			Enter	Exit	Total	Enter	Exit	Total	Enter	Exit	Total	Enter	Exit	Total
630	Medical Clinic	255 employees	1,180	1,180	2,360	220	66	286	112	77	189	78	139	217
720	Medical-Dental Office Building	255 employees	1,110	1,110	2,220	135	38	173	83	78	161	87	169	256
<b>TOTAL BUILD-OUT AVERAGES</b>			<b>1,145</b>	<b>1,145</b>	<b>2,290</b>	<b>178</b>	<b>52</b>	<b>230</b>	<b>98</b>	<b>78</b>	<b>175</b>	<b>83</b>	<b>154</b>	<b>237</b>
710	Existing Building #5 (Full Occupancy)	24,610 SF	136	136	272	43	7	50	12	8	20	5	25	30
710	Existing Site Demolition (Full Occupancy)	77,484 SF	414	414	828	85	14	99	25	22	47	14	75	89
710	Existing Site Total Office Generation		550	551	1,101	128	21	149	37	30	67	19	100	119
<b>NET INCREASE OVER EXISTING SITE FULL OCCUPANCY</b>			<b>731</b>	<b>731</b>	<b>1,462</b>	<b>93</b>	<b>38</b>	<b>131</b>	<b>73</b>	<b>56</b>	<b>128</b>	<b>69</b>	<b>79</b>	<b>148</b>

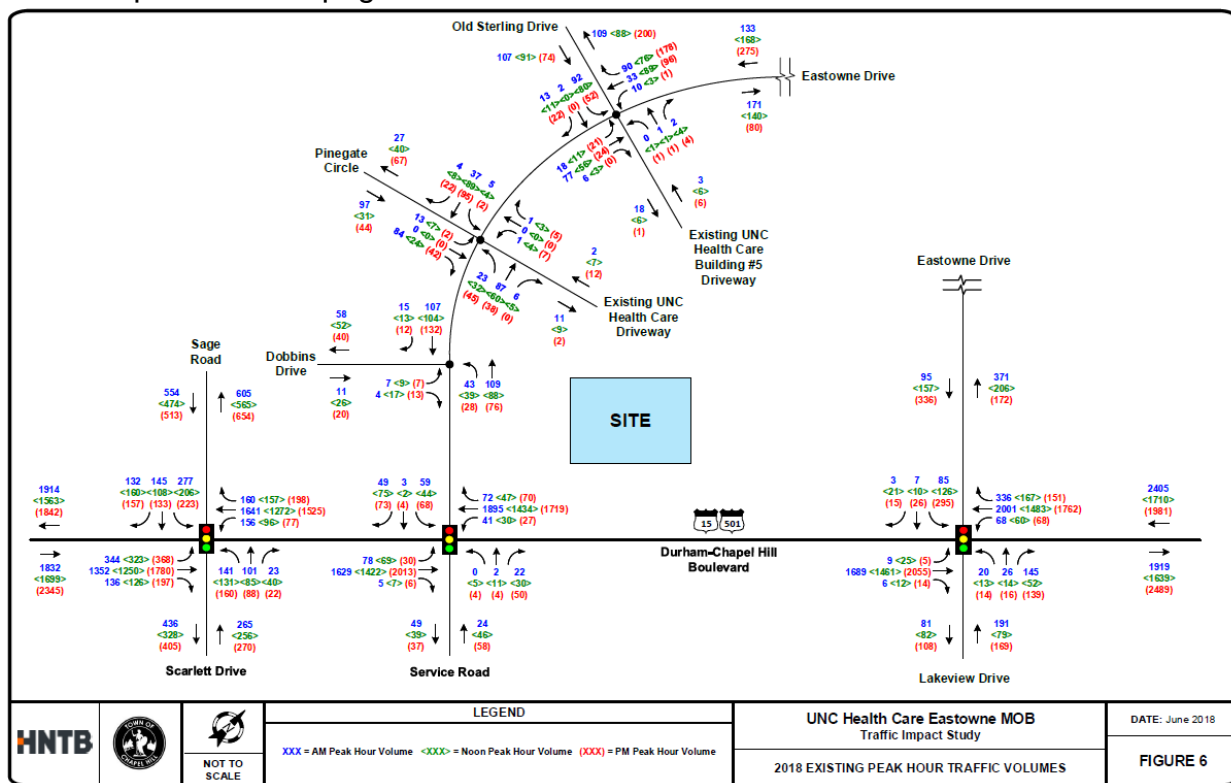


**\*25.** In developing trip numbers, might it have been possible to use estimated visits as a check? UNC says that there will be 250,000 annual visits, which is about 1,000 per work day. Coupled with trips from employees (255) and various service functions (unknown), it seems like the traffic counts are underestimating trips by perhaps eight to ten percent.

Staff Response: According to the Town’s Traffic Consultant, estimated visits could only be used as an “order of magnitude” check because number of patients or patient visits are not quantified by ITE methodologies as a trip generating variable. The datasets used to estimate trips within the ITE Manual only include building square footage and number of employees.

**\*25.** What is the current traffic counts at the Eastowne & 15-501?

Staff Response: From page 26 of the June 2018 TIA:



**\*25.** In terms of the parking deck, I’d like to make sure the traffic impacts are being looked at in a way that is both accurate and appropriate for what UNC is requesting. You mentioned that the parking deck will get taller and wider to keep it out of the RCD. Assuming the deck is planned for roughly double the capacity of the first building, do the numbers used in the traffic study reflect the capacity

**of the full deck or just the first building? If only the first building, I'd like to have the consultant run the model on the full deck so that we can better understand the impacts and mitigations for that.**

Applicant Response: Please see previous responses regarding this concern.

## **26. Why were employee counts used instead of square footage?**

Staff Response: The consultant has noted that the ITE Manual does not have a robust data set to support using square footage for the applicable land use codes (720 – Medical-Dental Office Building, 630 - Medical Clinic). The Manual only provides a limited number of samples, and the maximum square footage studied is less than ¼ of what Eastowne is proposing. In addition, UNC Health Care provided an accurate estimate of the number of employees that are expected to work in these buildings, which was compared to the trip generation derived from the ITE Manual. For these reasons, the consultant chose to use number of employees as the metric for determining trip generation. For existing general office building land uses, the use of square footage is appropriate, as the data sets and rate/equation graphs have ample data points within the range of the existing building size (77,500 square feet).

## **27. How was applicant-supplied data used?**

Staff Response: The consultant indicates that applicant-supplied data was only used for comparison and validation of the ITE Manual estimates. The temporal variation in patient visits throughout the day indicates that the highest trip generation due to patient visits currently occurs at similar existing UNC facilities (and likely for the proposed Eastowne Medical Office Building) during off peak hours.

## **28. Does the use of square footage for Medical-Dental Office (ITE Code 720) result in the need for additional recommended improvements?**

Staff Response: The consultant is currently running this analysis in order to see how it compares, and will have results to share in the next few days. Due to the Consultant's recommendations about the appropriate method of generating trips for this development, he advises caution in interpreting these results, once he has them.

## **29. What are the future buildout plans for UNC Health and thoughts on square feet overall? How do we get TIA information that is meaningful to medical office and constant flow of traffic for the entire Eastowne complex?**

Applicant Response: A comprehensive TIA will be required and completed as part of the master plan process. This work will need to take place with DOT, Durham, Chapel Hill,



Congestion Management, etc. and will take considerable time once density and uses of Eastowne are finalized. Please note that overall square footage, uses and project timing are not known at this time and will be derived as part of the Master Plan process. This information is critical to analyzing traffic for the larger development and will be required in order to finalize any improvements with the Town and DOT.

**30. A piecemeal approach to addressing traffic dealing with Wegmans, this building, etc., separately is problematic. With the likely development of Gateway, the full build-out of Eastowne, and the redevelopment of the SECU site, a comprehensive approach for the area is needed.**

Applicant Response: We agree. A piecemeal approach is not advantageous. Traffic is a concern to our patients and business and we look forward to working with the Town and DOT as part of the larger development planning process. We anticipate a full traffic study be conducted with future developments, DOT, Durham and Chapel Hill once details of future development are derived from the Master Plan and public input sessions.

Staff Response: Staff has drafted a stipulation for Council's consideration: Future Traffic Analysis: That as part of entitlement process, a Traffic Impact model analysis would be prepared. This model would include a build-out year and include Wegmans, Gateway development, SECU redevelopment, and the full build-out of Eastowne, as well as any other approved development in the area.

**\*30. What are the traffic estimates from Wegmans?**

Staff Response: Please see the table from the Wegmans Supermarket Traffic Impact Study dated June 2017. The last row of this table indicates the net total new trips associated with the Wegmans development.

**Table 5. Weekday Vehicle Trip Generation Summary  
Wegmans Supermarket**

Trip Designation	% Reduction	Daily			AM Peak Hour			Noon Peak Hour			PM Peak Hour		
		Enter	Exit	Total	Enter	Exit	Total	Enter	Exit	Total	Enter	Exit	Total
Raw ITE Vehicular Calculation – LUC 850 (Supermarket) – 140,000 Square Feet		5,383	5,383	10,766	295	181	476	302	252	554	509	490	999
Transit	5%	-269	-269	-538	-15	-9	-24	-15	-13	-28	-25	-25	-50
Ped/Bike	5%	-269	-269	-538	-15	-9	-24	-15	-13	-28	-25	-25	-50
Total Vehicle Trips		4,845	4,845	9,690	265	163	428	272	226	498	459	440	899
Pass-By	18% AM&NN / 36%PM	1,454	1,454	2,908	48	29	77	49	41	90	165	158	323
Balanced Pass-by Trips		-1,454	-1,454	-2,908	-39	-39	-78	-45	-45	-90	-162	-162	-324
<b>New Trips</b>		<b>3,391</b>	<b>3,391</b>	<b>6,782</b>	<b>217</b>	<b>134</b>	<b>351</b>	<b>223</b>	<b>185</b>	<b>408</b>	<b>294</b>	<b>282</b>	<b>576</b>
Existing Vehicle Trips		-1,784	-1,784	-3,568	-181	-83	-264	-168	-171	-339	-114	-208	-322
<b>Net New Trips</b>		<b>1,607</b>	<b>1,607</b>	<b>3,214</b>	<b>36</b>	<b>51</b>	<b>87</b>	<b>55</b>	<b>14</b>	<b>69</b>	<b>180</b>	<b>74</b>	<b>254</b>

Notes: No ITE Data for Noon Peak Hour - Assume 75% of Average Between AM and PM Peak Raw Generation Data and 50% of PM Peak Pass-by Data  
Data for Existing Trips for Performance Auto Taken from Peak Hour Driveway Count Summations - Data for Existing Daily Trips Taken from ITE

**31. Will UNC Health Care agree to conduct Traffic Impact Analysis one year after occupancy.**

Applicant Response: UNC is prepared to conduct traffic counts one year after the building is open. This information can be used to adjust the trip generation for similar buildings that are constructed as part of the Master Plan. If the revised traffic study shows a revision to improvements, UNC will incorporate development required improvements into the overall build out.

Staff Response: Staff has drafted a stipulation for Council’s consideration:  
As-Built Traffic Impact Study: That within one year of issuance of a Certificate of Occupancy, UNC Health Care shall report to the Town Council with an update on traffic conditions at the site, whether they warrant further study, and if so, in what regard. If the Town Council directs that further study be conducted, the Town shall select a traffic engineering consultant to prepare a study to be paid for by UNC Health Care, of the functioning of the intersections, traffic circulation, vehicle queue lengths, and ingress and egress to the site. Development required improvements will be incorporated into the overall build-out.

**\*31. In the sections on a post-construction TIA, it appears that any additional remediation needed would not be handled until full build-out of the site – which I assume to mean post-masterplan construction. If there are problems identified, should they not be addressed immediately?**

***Traffic Impact Analysis***

Applicant Response: We will agree to recount the trip generation at our site driveways 1 year after completion to compare to the 2018 TIA and “Max Trip Generation” analysis completed in August 2018. If the trip generation at our site driveway is greater than the 2018 TIA and max trip generation analysis, UNC Health Care will commit to making revised improvements based on the 2018 traffic study background data and development assumptions. These improvements will be started within 1 year of the TIA revision assuming permits from DOT and Town of Chapel Hill can be obtained.

**32. We have heard the traffic impact analysis was not done to Town standards?**

Staff Response: The Traffic Impact Analysis (TIA) does follow Institute of Transportation Engineers (ITE), NCDOT, and Town standards and guidelines. The proper application of ITE land use codes, trip generation variables, and appropriate rate-based or equation-based generation methods were all considered in this study and required engineering judgement and proper justifications. The use of applicant supplied data was only done for comparative purposes and not a source of trip generation, although the use of such data is not expressly prohibited by ITE, NCDOT, or Town guidelines, and often, if carefully considered in comparison to ITE national data, can be a useful predictor of trip patterns and characteristics.

*Master Plan*

**33.** We have to plan ahead for a full build out and how that effects our town and its resources. We want to make sure that this first building does not preclude making improvements on Eastowne Road and this side of town for the future growth that is coming. Talking about the Master Plan would help shape those conversations & planning. Leaving room for possible Eastowne Road expansion along this site.

Applicant Response: We are working with the Town's Urban Design Consultant, Tony Sease, regarding the development of this site and how it will ultimately interact with the larger development to the North and East. This effort is productive and will enhance the product we are proposing to develop. We will also work with stakeholders to develop a connected greenway system that will be built as part of the approved Master Plan.

**\*33.** I want to know more about the work that Tony Sease has been doing, how it has changed the plan we first saw and how it will help us address the question of the gateway and place-making for both sides of the road.

Applicant Response: We have met with Tony several times and have been working toward the following concepts:

1. Provide convenient access for patients from Eastowne and the new bus stop.
2. Bring people from Eastowne into the site with a focus on access to the center of the larger 47.8 acres.
3. Provide an inviting streetscape from Eastowne toward MOB 1, future MOB 2 and the rest of the development.
4. Reserve area along Eastowne for potential future development.

We offer the following drawings showing how this will be accomplished in concept. Our design team will continue to work with Tony Sease and staff prior to submitting final plans.



Area reserved for potential development opportunities along Eastowne.



Conceptual view from Eastowne showing lobby and pedestrian experience.



***Master Plan***

**\*33.** When council talked with the applicant last Spring, we expressed concern about a request to clear the second site at the same time. At the time of our discussion, they were promising to have a Master Plan by the end of the year. Now the Master Plan is slated to talk several years so I want to clarify whether clearing of that parcel has been removed from consideration.

Applicant Response: We apologize for any confusion. Per our presentations starting in January, we always anticipated the Master Plan process taking two years. The second site needs to be cleared due to the heavy presence of rock. Blasting the site at a later date with an operational building containing sensitive medical equipment is extremely undesirable. Please note that after the removal of the existing buildings on the future building pad, that only leaves approximately 0.35 acres of vegetation to be removed and approximately 0.16 ac of that will be re-landscaped in the 30-foot buffer along 15-501.

Staff Response: The second building pad is still proposed to be cleared, but will not be developed at this time. This is because of the blasting that is required for the building pad. The applicant has noted that if it is cleared at a later date, the blasting would occur next to an active Medical Office Building, which could be harmful to the sensitive medical equipment and disruptive to the patients. This clearing doesn't constitute approval for the second building, however, which would still need a separate Modification to the Special Use Permit approved by Council.

**34.** Completion of the Master Plan for this site is important before discussion of any additional buildings.

Applicant Response: We concur and a stipulation requiring this process has been added to the SUP.

**35.** Want to make sure that the Master Plan will have a community input process in addition to the public hearings.

Applicant Response: We are willing to commit now to a community input process as a stipulation for future building construction. We have high aspirations for this development and desire it to be a place that all citizens of Chapel Hill are pleased to have as part of their community. As part of the Master Planning process, envision the following major tasks relative to the public input process:

- Public Workshops
- Public Input Sessions
- Design Team Presentations
- Review / Input Sessions with Advisory Boards
- Review / Input Sessions with Elected Officials

***Master Plan***

**36. Want to make sure that the Master Plan will have a community input process in addition to the public hearings. Cont'd.**

Staff Response: Revised Resolution A contains the following stipulation:

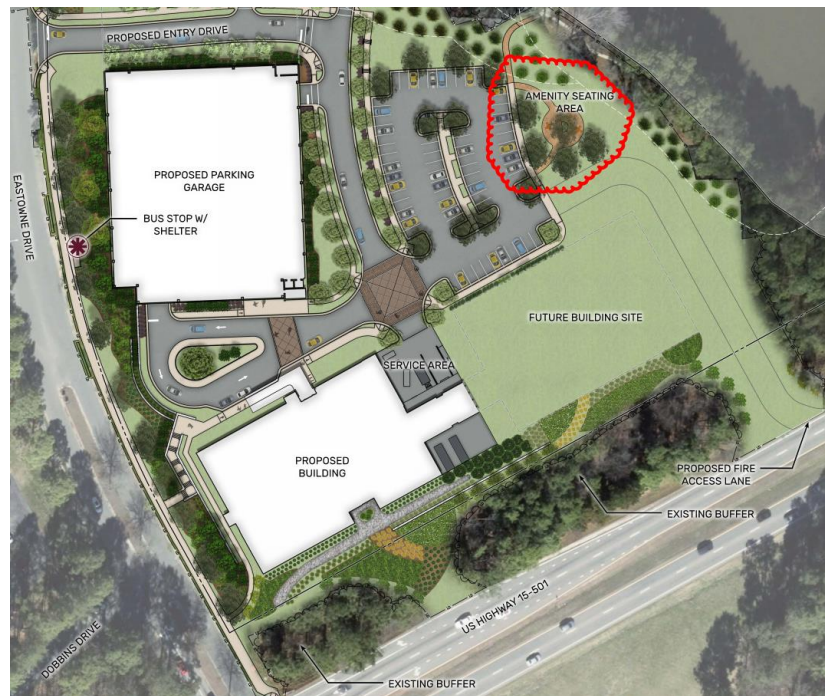
Master Plan: Before any additional new buildings are developed in Eastowne, UNC Health Care will conduct a Master Planning process that is consistent with the Town's values as expressed in the Town's Strategic Plan and the 2020 Comprehensive Plan. In addition, UNC Health Care will ensure that the process provides substantial opportunity for public participation and input. Once a draft of the Master Plan is prepared, the draft will be presented to the Town Council and Advisory Boards for their review and feedback.

Misc.

**37. What amenity space will be provided? Covered picnic shelter, bike path or other green amenity.**

Applicant Response: Amenity area with covered picnic tables and enhanced landscaping will be provided as shown.

Staff Response: Revised Resolution A contains the following stipulation:  
Public Amenity Space: The applicant shall provide shaded picnic tables for use by employees, visitors, and others upon request in a location with ready access to parking.



**38. What are the “by right” uses for this site?**

Staff Response: Under the existing Office/Institutional-2 (OI-2) zoning district, the applicant is able build a total of 93,542 square feet of floor area. The height limit in the Office/Institutional-2 (OI-2) zoning district is 60 feet.



*Misc.*

**39. Parking deck design needs to be attractive? Is there a way to incorporate artwork into the parking deck?**

Applicant Response: A revised rendering of the parking garage is shown below. The exterior design is consistent with feedback we have gotten from elected officials and advisory boards when several design iterations were presented.



**40. Parking deck design needs to be attractive? Is there a way to incorporate artwork into the parking deck? Cont'd.**

Applicant Response: We will be investigating the best locations for public art in conjunction with the Town's Cultural Art Commission. We are considering ground mounted, building or parking deck options that will engage patients and the community.

**\*40. Has enough been done to make sure the parking deck will not feel like it is in the face of the neighbors, including lighting at night?**

Staff Response: The applicant has agreed to a stipulation that would require more architectural cladding to be placed on the street facing façade of the parking deck. This would help better screen the interior of the deck, including vehicles and lighting.

**\*40. The rendering of the parking deck still seems unattractive – and art work won't solve it. Is it not possible for UNC Healthcare to use a treatment that is more "building-like" and provides less visibility of the cars? I also ask, once again, if it is not possible to build some functional space into the garage, e.g., a coffee shop, facilities for employees?**

**Misc.**

Applicant Response: Employees will have access to staff support areas, food options as well as coffee inside the MOB. Due to the revision of the parking deck, removing it completely from the RCD, the parking garage skin has increased over original plans increasing project costs. In order to address concerns regarding the skin of the deck while working to control project costs, we are willing to redistribute skin elements from the north, east and south sides of the deck to provide a more opaque façade along Eastowne. We will work with staff to prepare a stipulation that establishes criteria for percent open along each façade and present to council for consideration.

**41. Is what UNC Health Care pays sufficient to cover cost of core service impacted for this project?**

Staff Response: This initial analysis estimates the Town revenues and costs anticipated from extending Town services to the proposed Eastowne project.

This analysis focuses on the annual cost of the redevelopment after construction is complete. This analysis does not include one-time revenues and costs related to permitting or inspections.

The current Memorandum of Understanding (MOU) for the property would remain in place and future negotiation regarding future costs be part of the entitlement process.

**41. Cont'd: Is what UNC Health Care pays sufficient to cover cost of core service impacted for this project?**

<b>Revenues</b>	<b>Existing Property Use</b>	<b>Projected Property Use</b>	<b>Variance</b>
<b>Governmental Revenues</b>			
Property Taxes (General Fund & Debt)	\$ 70,810	\$ 139,628	\$ 68,818
<b>Total Governmental Revenue</b>	<b>70,810</b>	<b>139,628</b>	<b>68,818</b>
<b>Enterprise Revenues</b>			
Transit Tax	9,078	17,901	8,823
Stormwater Utility Fees	4,425	5,441	1,015
<b>Total Enterprise Revenue</b>	<b>13,504</b>	<b>23,342</b>	<b>9,838</b>
<b>Total Annual Revenues</b>	<b>\$ 84,314</b>	<b>\$ 162,970</b>	<b>\$ 78,656</b>

Misc.

Costs	Existing Property Use	Projected Property Use	Variance
<b>Governmental Costs</b>			
Public Works	\$ 2,777	\$ 5,316	\$ 2,539
Police Services	372	712	340
Fire Services	18,868	37,256	18,389
General Government	4,549	8,857	4,307
Capital - Debt Service	4,128	8,037	3,909
<b>Total Governmental Costs</b>	<b>30,695</b>	<b>60,178</b>	<b>29,483</b>
<b>Enterprise Costs</b>			
Transit	9,078	17,901	8,823
Stormwater Utility Fees	4,425	5,441	1,015
<b>Total Enterprise Costs</b>	<b>13,504</b>	<b>23,342</b>	<b>9,838</b>
<b>Total Annual Costs</b>	<b>\$ 44,198</b>	<b>\$ 83,520</b>	<b>\$ 39,321</b>

	Existing Property Use	Projected Property Use	Variance
<b>Annual Financial Impact (Revenue/Costs)</b>	<b>\$ 40,116</b>	<b>\$ 79,450</b>	<b>\$ 39,334</b>

**42. Opportunities for electric charging stations and solar roof conduit?**

Applicant Response: We will be providing 6 charging stations with conduit for 20% expansion as well as conduits for possible future solar panels on the building. This was agreed to with Transportation and Connectivity Advisory Board and Environmental Stewardship Advisory Board

Staff Response: Revised Resolution A contains the following stipulations:  
 Electric Vehicle Charging: Six parking spaces within the parking deck shall be dedicated for electric vehicle charging spaces, with stations installed. Conduit to serve at least 20 percent of the parking spaces in the parking deck for future electric vehicle charging stations shall be installed prior to issuance of a Certificate of Occupancy.

Capacity for Additional Vehicle Charging: The electrical infrastructure will be provided to meet the electricity demand of all anticipated future charging stations.

*Misc.*

**\*43.** Is there any reference to a comprehensive signage plan that will direct cars from both directions to the appropriate entrances and exits from the site?

Applicant Response: The design team will be submitting a comprehensive signage and wayfinding plan as part of the sign permit package. That package will include signage directing individuals to the North or South from the medical office building main entrance depending upon destination (Chapel Hill or I-40). We typically submit this package as part of our final engineering drawings.

*Process*

**43. Is a Development Agreement a possibility for the balance of the site?**

Applicant Response: We welcome discussions with the Town regarding how the future development of Eastowne is approved. At this moment, we are exploring a Conditional Zoning process with Town Staff paired with a public input/master planning process. Our goal is to make the Master Planning process as transparent as possible and allow the opportunity for all advisory boards, Planning Commission and Town Council to provide feedback and an open dialogue on the Master Plan for this site.

Staff Response: A Development Agreement is an option available for the Council and UNC Health Care to consider. A Conditional Zoning process paired with a master planning process could also provide the opportunity for substantial stakeholder involvement while providing a more certain decision-making process.

**44. Would like Planning Commission and CDC to have an updated review in August. Make sure they have some kind of massing scale and full dimensions of this project for viewing ahead of time! They did not see details of scope, only narrative (talking about 6 floors vs 105 feet!)**

Applicant Response: We provided this information to all of the advisory boards and to Planning Commission. Fully designed renderings of both the garage and building were shown and thoroughly discussed. We are happy to provide an update to Planning Commission and CDC on 8/22/18.

Staff Response: As the project is in middle of an open public hearing, we want to be careful to maintain the integrity of the process. Staff is meeting with the chairs of the CDC and Planning Commission to discuss options for how to update the boards and involve them appropriately at this stage. The advisory boards would also be involved in reviewing further development proposals as part of a master planning process.

**45. We value our partnership with UNC Health and are pleased they want to develop Eastowne into a place-making part of Chapel Hill. This project has to work for our community and not place extra burdens on traffic and visual appeal. Our town values its tree/green spaces and being able to move around town without getting jammed by traffic woes. We know that we can get a win-win with this project.**

Applicant Response: UNC Health Care also values the relationship with the Town of Chapel Hill. We are committed to making Eastowne a project everyone can be proud of and are confident our proposed changes will address concerns raised by Town Council and members of the community.