

# **TOWNSHIP OF SADDLE BROOK**

## **ZONING BOARD OF ADJUSTMENT MINUTES**

The Saddle Brook Zoning Board of Adjustment will hold a regular meeting on Monday, **December 21, 2020 at 7:00 p.m. at (The Saddle Brook Senior Center)**

### **1. CALL THE MEETING TO ORDER.**

### **2. FLAG SALUTE**

**3. OPEN PUBLIC MEETING ACT:** adequate notice of this meeting has been sent to all members of the Zoning Board and to all legal newspapers in Accordance with all the Provisions of the "Open Meetings Act", Chapter 231, P.L. 1975.

**4. ROLL CALL** - Mr. Duffy, Mr. Mazzer, Mr. Schilp, Mr. Tokosh, Ms. Murray – PRESENT, Board Attorney Stephen Pellino, Board Planner Gary Paparozzi and Board Engineer Anthony Kurus also in attendance.

### **5. NEW BUSINESS**

#### **A.) RPM Hospitality Group, LLC, 129 Pehle Avenue, Block 1311, Lot 36**

**This application is being continued from the November 16<sup>th</sup> meeting without further noticing.**

Applicant requests the conversion of an existing hotel & associated amenities to an assisted living facility as well as constructing a new building for further expansion with use & bulk variances.

Mr. Alampi – We have 4 witnesses to testify 2 of which had given testimony at the last meeting. We will recall the architect briefly because he already testified but we asked him to make changes to the architectural plans. You all have received a revised set of architectural engineering plans along with a letter outlining the changes. We listened to the concerns of the Board Members regarding the adult daycare center and whether it would create an overflow of shuttle bus activity and traffic. We have determined to eliminate the adult daycare from this application. We don't know if in the future we would like to entertain that or not but if we do we would have to come back to the Board for a separate application. The other change we made is with the physical therapy. There was some concern that it would be open to the general public because of the square footage. It will only be a one story physical therapy center instead of a 2 story building and will not be open to the public only the residents of the assisted living. We delineated this on the plans and on a letter dated December 10, 2020 from Mr. Carballo who will go over this in a few moments. We also received another review letter from the Board Engineer outlining the changes that were made and that we have complied with the comments and that we provided the information. We will call back Mr. Carballo to go over the details and to clarify the number of rooms versus the number of beds. In some instances a room might have 2 beds and others there would be a single bed so beds and rooms are a different number.

Mr. Pellino reminds Mr. Carballo that he was sworn in at the last meeting, that he is still under oath and that he was recognized as an expert in the field of architecture.

Mr. Alampi – Jose lets pick up with December 10<sup>th</sup> submission of the revised plans and your letter reflecting the changes. Let's mark the plans how many pages and the last revision dates. I'm thinking at the last meeting we only marked your architectural plans can we start over again or will that confuse your record.

Mr. Pellino – My notes show that you did A1 you can make this A2.

Mr. Alampi – How many sheets is your plan?

Mr. Carballo – Eleven.

Mr. Alampi – Just identify the revision dates and you can go with your testimony.

Mr. Carballo – The latest revision date is December 9<sup>th</sup> 2020 which includes several sheets.

It seems last time there was a concern with the extent of the project. Mr. Alampi explained how we eliminated from the plan the adult daycare center. That daycare center was going to be in what was the restaurant and now the restaurant will be just a dining hall for the residents of the assisted living facility. One of the things we did was establish the number of rooms that we have with phase 1 which is 156 and phase 2 will have 105 units.

Mr. Alampi – The revisions are in the upper right hand corner where it shows the description.

Mr. Carballo – Yes that's correct. There was a previous revision based on the engineer's comments and the second one is the new submission to the Board.

Mr. Alampi – The one revision was done with the engineer's comments from the November meeting and the other is the latest revision. Take us through the plans briefly but before you do that the restaurant kitchen and ballroom dining area will remain now even when we construct phase 2?

Mr. Carballo – Yes it will. It will become the dining area for phases 1 and 2 just for the residents.

Mr. Alampi – There is no need to relocate it because we are not using it for the adult daycare.

Mr. Carballo – Absolutely once it gets refurbished with all new equipment and cabinets it will remain there for the duration of the project.

Mr. Alampi – When phase 2 is constructed will residents be able to go internally from the phase 2 building to that dining room?

Mr. Carballo – Yes. The rooms on the phase 2 side the second level they will be able to cross the phase 1 building at that level and go into the dining area via the elevator or stairs.

Mr. Alampi – So they will be able to go in and out from one side to the other internally.

Mr. Carballo – Absolutely the entire project is interconnected.

Mr. Alampi – With the physical therapy and swimming pool area are there any adjustments to get in and out of the physical therapy area internally?

Mr. Carballo – Yes 2 adjustments were made one is that the area is now a 1 story building not a 2 story as previously submitted. The second thing we did is we took the advice of some of the Members and we connected the existing building to the physical therapy facility through an enclosed area way. That enclosed area way also contains the ramp that will negotiate the change in the level from the existing building down to the physical therapy as well as the outdoor area. The outdoor ramp we had previously is now gone.

Mr. Alampi – So this is all ADA compliant?

Mr. Carballo – The entire building will be ADA compliant.

Mr. Alampi – Why don't you highlight the details of the plan. It seems to be much simpler with less movement on it now.

Mr. Carballo – One of the things we did was define phase 1 and phase 2 and basically there is a line that separates the existing buildings from the addition. The existing buildings including the physical therapy building will contain 156 rooms potentially 200 residents. The phase 2 building is a new building and that will just be phase 2 there will be nothing else on phase 2.

Mr. Carballo – That will be completely residential and all the other dining and common areas the bistro the lobby all that stays in.

Mr. Carballo – Both buildings will be residential for assisted living.

Mr. Alampi – You want to take us through the plans?

Mr. Carballo – One of the things we did is we had some amenity spaces in the existing building in consultation with Karen the consultant is to place activities in those spaces. One is a non-denominational chapel that's on sheet 3 of 11 it's called A2. We also have a salon, some craft rooms, and other activity areas. One of the things we do on the second phase is we have a basement and we wanted to have a bowling alley and a pub. This is not an alcohol serving pub there will be no alcohol served or sold. It is a place where you could meet your friends and watch a football game or whatever is on TV.

Mr. Alampi – The bowling alley is going to be an automated bowling alley?

Mr. Carballo – Yes it will be.

Mr. Alampi – Two lanes or four lanes?

Mr. Carballo – The bowling alley will be automated and four lanes. The bar has seating and a lounge area.

Mr. Alampi – The multi-purpose rooms, craft rooms all of these were done in collaboration with Karen Stratoti from her testimony last month.

Mr. Carballo – Yes absolutely.

Mr. Alampi – You want to take us through each level? That was in the basement right?

Mr. Carballo – That was the basement. The next level is the proposed first floor and it is drawing 4 of 11. There you can see the existing hotel building and on the first floor alone is going to be a dementia wing. This floor is actually closed off from the rest of the building so as to keep control of the type of residents who will be there. We have an activity room indoor for them. We also have an outdoor deck that is raised from the green areas down below so it gives this type of participant a little more privacy. The railings are high so there is no danger of anybody jumping over. That is the first floor of the existing building. We still have the lobby in the same place. We now have a bistro area in the back of the elevators and this will be an area where you can grab coffee or sit and read. There will be cookies and snacks and things of that nature. To the left you have your dining area what used to be the restaurant was the kitchen in the back and the service area right off of the kitchen. From here you can also see the ramp that enclosed area that connects the existing building to the physical therapy area. We have a drop in grade at this point and it allows the residents to go from the existing building down to the outdoor activity areas. The phase 2 new building is connected to the existing building. The first floor is wide open. We are calling it an activity area. Here the activities are a little different it could be a show. It could be a medical workshop or things like that. It's an area where you can congregate almost the entire population of the assisted living facility.

Mr. Alampi – The activity area can be separated and broken down to smaller sections or it could be opened up.

Mr. Carballo – It could be partitioned off with temporary partitions or office landscaping. It could be broken down or it could be for a large group of people to congregate with no specific permanent use of that area. The elevators there are 3500 pounds stretcher size elevators and we have 2 of those that will service the entire facility. One of the things you will notice is that you will see clouded over here is that end of the building is actually enlarged so this building is longer than the original building that was submitted last time. The reason why is they wanted to make the rooms in this part of the building phase 2 to be larger than phase 1.

Mr. Alampi – I didn't follow you. The footprint is larger?

Mr. Carballo – The footprint is longer it has been extended.

Mr. Alampi – By how much?

Mr. Carballo – It was extended about 20 feet. If you go to sheet 5 of 11 you can see it.

Mr. Schilp – The dividers are they going to be the ones that fold in the wall and you can pull them out?

Mr. Carballo – They are ones that can just roll. If you look at an office space where you have the acoustical wall panels that you can put together.

Mr. Schilp – They are not going to be mounted on the wall?

Ms. Murray – Free standing.

Mr. Carballo – They are not going to be the accordion type that you pull like you would see in a hotel meeting room.

Mr. Schilp – So they would be portable type.

Mr. Carballo – Yes. So if you go to page 5 of 11 you are going to see the new building phase 2 and on phase 2 you will see these rooms are larger than those in phase 1. What we wanted to do is half of the rooms in this end of the building they are nice size rooms almost 600 square feet. That would allow for either a double bed for two residents or you could have a smaller living room in one of those units. It does present a different room to the residents. One of the other things you will see different from phase 1 is we are showing some rooms with a double bed and we are not sure if they will have a double bed or not it depends on the residents themselves. One of the things that we show are removable partitions so two residents that may not be related to each other so they can have a little bit of privacy.

Mr. Pellino – Is this phase 1 or phase 2?

Mr. Carballo – The partition will be on phase 1 but can also happen on phase 2 on any one of those rooms. On page 6 of 11 is a roof plan where it shows on phase 2 the old roof vents. Drawing 7 of 11 shows the different types of rooms. This is an example that is the partition able we are talking about that would separate the two beds. You can see the larger rooms throughout.

Mr. Alampi – So throughout the complex there will be any one of these five scenarios right?

Mr. Carballo – That is correct. Drawing 8 of 11 shows the elevations most notably it shows the one story physical therapy building which used to be 2 stories. One of the things we did on this side of the building is we eliminated the balconies and will use that space for living area.

Mr. Alampi – In the existing building?

Mr. Carballo – Yes. Because the existing building is the one with the balconies.

Mr. Alampi – How will you enclose it you're just going to enlarge the rooms themselves?

Mr. Carballo – That's correct. What we are going to do is eliminate the exterior wall and build to the end of the terrace and have a glass wall that will separate the inside from the outside. That will increase the size of the room and allow for a larger nicer sized room. Sheet 10 of 11 shows the one story physical therapy building. The last drawing is 11 of 11 you will see renderings. You will see the existing view and you will see the new view. One of the things you will be seeing here is a lot of landscaping separating the facility from the residential area. We wanted to make it so that the neighbors across the street have a nice buffer between our project and their houses.

Ms. Murray – Mr. Kurus do you have any questions for the architect?

Mr. Kurus – I do not have any questions for the architect.

Ms. Murray – Gary do you have any questions.

Mr. Paparozzi – The maximum bed count is going to be 312 is that the maximum because in phase 2 some of those rooms can accommodate 2 residents and even in phase 1 some of them can accommodate 2. The reason I'm asking is all those one room bedrooms go to two will increase your parking requirement. Is this going to be a max for the whole complex 312?

Mr. Carballo – We believe so but I am going to let Karen answer that because she is dealing with the state regarding the number of beds so she will be explaining that.

Mr. Paparozzi – Okay and how do the occupants of each room get their garbage out? How do they move their waste?

Mr. Carballo – Again that is more operational, this is no different than a hotel.

Mr. Paparozzi – I know but some of them have kitchenettes so there is going to be some garbage even if they don't have a kitchenette and they get a gift basket or bring in food there is going to be some garbage. There is no garbage chute or anything proposed in this complex so that is the reason I'm asking.

Mr. Carballo – That is correct this is not a residential project where they generate that kind of refuse or recycling. Most of what you see in a residential project is kitchen driven. It's generated by cooking or stuff like that.

Mr. Paparozzi – There is still going to be some garbage.

Mr. Carballo – There is still going to be some. The place is staffed and Karen can speak to that. You don't want these people carrying trash or boxes and things like that so that will be done for them.

Mr. Paparozzi – You mentioned that the restaurant will be used for the residents.

Mr. Carballo – For the use of the restaurant and the facility.

Mr. Paparozzi – What if there guests going to visit one of the residents?

Mr. Carballo – That's fine with the residents of the facility.

Mr. Paparozzi – So guests would be allowed to use the restaurant as well?

Mr. Carballo – Guests of residents yes.

Mr. Paparozzi – But it's not open to the public.

Mr. Carballo – No it is not.

Mr. Paparozzi – I had a comment earlier about the trash enclosure and I noticed that you and the engineer increased the trash enclosure. It should be separated though mark one side recyclable one side refuse so that there is no issue and the recycling program can continue for the town.

Mr. Carballo – I agree.

Mr. Paparozzi – On sheet 2 of 11 you want to go there real quick. To the west of the physical therapy I notice the engineer revised the parking to eliminate the variance so the original 6 spaces became 5. You show 5 but you say 6 it's a minor thing.

Mr. Carballo – I will defer to the engineer when it comes to that.

Mr. Paparozzi – You just have to revise you have to show 5 spaces.

Mr. Carballo – Not a problem.

Mr. Paparozzi – That's all I have Madame Chair.

Ms. Murray – Mr. Duffy do you have any questions for the architect?

Mr. Duffy – On sheet 2 of 11 the covered walkway it's covered or is it enclosed?

Mr. Carballo – It's completely covered and enclosed.

Mr. Duffy – Okay.

Mr. Carballo – On a day like today you can walk through in your undershirt. It is heated space.

Mr. Duffy – On 3 of 11 you go to the basement and the pub. The pub is not going to sell alcohol.

Mr. Carballo – That is correct.

Mr. Duffy – What are they selling?

Mr. Carballo – Juices, shakes.

Mr. Duffy – Okay what about food?

Mr. Carballo – Possibly, we are not preparing food there it would be sandwiches and things of that nature.

Mr. Duffy – So this would be prepared in the kitchen on the other end?

Mr. Carballo – Like a catered product.

Mr. Duffy – Like a caterer so this is the selection of the day and when that's gone it's gone.

Mr. Carballo – Correct.

Mr. Duffy – It's not an eatery it's just a cafeteria.

Mr. Carballo – it's a hangout place.

Mr. Duffy – So is a pub but you know. This went from an open area to a 4 lane bowling alley and a pub.

Mr. Carballo – Absolutely we are trying to get these people to be active and have things to do.

Mr. Duffy – That's great, it's not clear as to what will be served or anything.

Mr. Carballo – We are not preparing any food.

Mr. Duffy – Then we need a kitchen detail and we have to have and this is in the basement so this brings up another fire so that would be a concern.

Mr. Carballo – I understand.

Mr. Duffy – The phase 2 is I remember correctly from the last meeting the beginning of that phase predicated on occupancy in phase 1 was I correct on that?

Mr. Alampi – As phase 1 fills in.

Mr. Duffy – Right and the need is warranted so it could be a year or two years.

Mr. Alampi – And the cost of financing you wouldn't get financing if you didn't have certain occupancy just like condominiums. When you go to build multiple buildings the bank always required certain things.

Mr. Duffy – They want to see some return. So based on that we go back to the engineer's comments on the architectural comments with respect to proposed elevators as it relates to EMT access stretcher access will be provided. You did mention that in phase 2 those elevators will be sufficient for stretchers.

Mr. Carballo – That's correct.

Mr. Duffy – That leaves us with the dilemma on the existing elevators because aren't they small to begin with?

Mr. Carballo – They are smaller than that fully stretcher size.

Mr. Duffy – There's 3 elevators I understand.

Mr. Carballo – That's correct two on one end and one on the other end.

Mr. Duffy – The one on the other end is not big enough by itself?

Mr. Carballo – It's not big enough either.

Mr. Duffy – it could be two or three more years of who wouldn't be able to get a stretcher on an elevator in that building.

Mr. Carballo – A full stretcher correct.

Mr. Duffy – in my estimation that poses a bit of a problem.

Mr. Carballo – Actually I did call the DCA the Department of Community Affairs just to get their take on something like this. In a conversion of a building those elements that are not being touched or are not being replaced you can keep those same elements. That's why we left them like that. There are incline chairs and other type of equipment that will allow for someone to be brought down in case of emergencies.

Mr. Duffy – I think of the what if's. There is always the situation where someone is you're not going to be able to sit them up. I do have a concern about that and I don't know how to address it short of making 2 elevators 1.

Mr. Carballo – We tried that I actually called two elevator companies they do custom elevators and with the dimensions that we have they could not do it.

Mr. Duffy – Where it would be such an exorbitant price.

Mr. Carballo – They just can't do it.

Mr. Duffy – The balconies on the existing building all of them will be enclosed or only some of them?

Mr. Carballo – Currently there are only balconies on the Pehle Avenue side all of them would be enclosed.

Mr. Schilp – It's going to be a big flat side.

Mr. Carballo – That's correct.

Mr. Schilp – Are there going to be windows that can be opened?

Mr. Carballo – Yes openable windows.

Mr. Schilp – How often do they intend on picking up garbage? Gary was saying the area for garbage is not that much and you're going to have give or take 150 people in the building.

Mr. Alampi – why don't we let Karen the operations person address that.

Mr. Schilp – Okay that's good.

Ms. Murray – Mr. Mazzer any questions for the architect?

Mr. Mazzer – I just had a problem the same thing with the elevators. You got to try and make one of them elevators and I don't care which one available for a stretcher.

Ms. Murray – Mr. Tokosh do you have any questions.

Mr. Tokosh – What do you intend to do if a person couldn't sit in a chair? How would you handle that on the fifth floor?

Mr. Carballo – I don't have the experience maybe Karen does but I don't have the experience to answer that. I do see a problem I see the issue.

Ms. Murray – I don't have any comments other than what the rest of the Board has raise except for the maximum number of residents. I do appreciate that you took into consideration everything that was said here last month and took into consideration some of the neighborhood comments about the size and scope of everything. I do appreciate the fact that you also delineated it such that we could see phase 1 phase 2. I just want to make those comments that it was important for us to see more clarity.

Mr. Carballo – Thank you.

Ms. Murray – That's all the comments we have for the architect.

Mr. Schilp makes a motion seconded by Mr. Duffy to open to the public for the architect.

All in favor – YES.

Mr. Schilp makes a motion seconded by Mr. Duffy to close to the public for the architect.

All in favor – YES.

Mr. Alampi – I want to recall Ms. Stratoti. He explains that she was sworn in last month and is still under oath. Karen again you have 40 plus years' experience in nursing health care especially in the area of geriatrics and assisted living correct?

Ms. Stratoti – Correct.

Mr. Alampi – Let's answer a few questions first. Some Commissioners raised the issue and the Planning Consultant for the town raised the issue people are going to generate garbage whether they have a small kitchenette or not even though these are elderly people and do not generate the garbage a private family

of five would. How do we handle the refuse from their apartment? You don't expect them to carry their garbage down to the street.

Ms. Stratoti – Each of the nurses' aides when they go in to look at the residents and ask how things are going and help them get dressed toilet and bathed are also helping with light housekeeping the room. They will be clearing out the bags and they will bring bags to the bottom of the furthest ends of the hallway and at the end of their shift or during their shift they'll be bringing it down and putting it into dumpsters.

Mr. Alampi – That's like in an office building.

Ms. Stratoti – Yes every day.

Mr. Alampi – Where they empty the waste baskets and things and bring it to the lobby or elevator and they bring it out to the dumpster.

Ms. Stratoti – the pickup of the trash they were asking about that. We have the option of having a pickup five days a week if needed. It's going to be less than that in the beginning until our census starts to build up and we figure out what we need.

Mr. Alampi – You will use a private company.

Ms. Stratoti – Yes.

Mr. Alampi – Lastly the big question not expanding the number of rooms but the fact you can put 2 occupants in some rooms or many rooms we can have 312 residents spread out but what is our license stating and Certificate of Need what will be the maximum number of people.

Ms. Stratoti – I only have 1 Certificate of Need at this time and that's for the old building and that was for 200 residents. That doesn't mean we're going to fill it up to 200 it means if a husband and wife come in they want to be in the same room they can. On the opposite side we're going to have a Certificate of Need for 105 I think he said and with that we may have 20% be double rooms just in case somebody comes in with a sister or brother a husband a wife.

Mr. Alampi – How can you assure the Board it will not be 50%?

Ms. Stratoti – We're not allowed once the Certificate of Need is given out by the state we have to abide by it. We're not allowed to go over the Certificate of Need.

Mr. Alampi – Now can you say under oath as the facilitator of the licensing that the state and the Certificates of Needs that you're applying for 105 rooms with 112 occupancy can you say that that will be the application that's filed for phase 2?

Ms. Stratoti – Yes.

Mr. Schilp – You said 105 rooms twenty percent of 105 is 21 so 21 and 105 is 126 so we need to update something.

Mr. Alampi – You're right when she files the certificate it will be up to 126.

Ms. Stratoti – The second Certificate of Need hasn't been filed yet so it will be.

Mr. Alampi – We clarified that will be as a matter of law and under the licensing so maybe up to 126 not 312 it would be up to 326. Is there anything you wanted to add to your testimony from last month now that you and the architect collaborated in great detail and showed all these amenities or do you feel the plan reflects your testimony from November?

Ms. Stratoti – The plan reflects my testimony there is one thing and I was going to talk about. There was concern about the roof on the old building because of fire safety you said sometimes the firemen come down dipping in the water and everything and we had done some plans on that roof to make it more amenable in case you had a fire and had to answer for a fire. I don't know if you had mentioned that. The other part is on the phase 2 the whole reason for having the bottom floor open was we talked about having a casino effect. We are going to have some slot machines some gambling tables. One end we may have a book club. We may have healthcare presentations going on in another area. We're really going to keep that room for both sides of the buildings not just the new side.

Mr. Alampi – So it's for all the residents whether it is phase 1 or 2.

Ms. Stratoti – Right. That's pretty much it. We wanted to see if we could get some garden areas in our sit down area outside to make it more like an outside garden for the people that are living there. As far as the elevator is concerned there are comprehensive personal care homes that are conversion buildings

for assisted living and I brought up last month Villa Marie Claire that they have a smaller elevator now they are able to replace it after 10 years of being in business. I had a building down in Camden where we had 1 elevator for 150 people and believe me it wasn't a big elevator. When someone is having a problem with blood pressure bottoming out and things like that there is a way to bring them down with their head down and legs elevated if we have to. My goal is to have nurses around the clock to make sure people don't get to that point. If somebody is having that big of a difficulty where they have to be rushed to the hospital then in my opinion the nurses are not doing what they have to do. Our goal with assisted living is to keep people aging in place until death. We don't want to send them to the nursing home and I don't want to send them to the hospital. The doctors are going to come into that building and see their patients in their apartments and hopefully adjust the medications properly. We're going to be having pharmacy services and we're going to have a lot of communication between the shifts which each of the people almost like a nursing home but not quite. We are going to try to help them stay in place with their friends surrounding them. That doesn't mean we're not going to have an emergency like that I'm not implying that. If someone is feeling sick we are going to have an area in the nurses' lounge that is downstairs where the director of nursing area is as you come in right off the bistro near the elevators. If that person is sick that day I'm keeping that person down there. We'll have a bed in there and if I have to call an ambulance the ambulance is going to come to the first floor and get that person. I was an ICU and CCU nurse you name it I've done it and I do believe that we have to respect where people are at. Most of the people that come in there are going to have advance directives some of them are going to tell me I don't want anybody to be called I don't want anything done. If somebody needs to go to a hospital and needs to see a doctor an urgent situation we are trying to cooperate with Rutgers University to bring in some of their doctors. We may be able to have a contract with them to have a doctor around the clock. It will be a much more convenient thing to do that than to send them to an emergency room to sit in a hospital for hours and not know whether they are going to stay. Keeping them out of the hospital especially in today's COVID state would be the best way to go.

Mr. Alampi – One last question with regard to the overall healthcare of people you have a nurses station is there a nurses station one each floor?

Ms. Stratoti – Yes nurses' aides are going to be on each floor there will be a station there we'll have blood pressure cuffs and weights and charts on the people on each floor.

Mr. Alampi – So there will be some type on each floor to relieve somebody if they are having hypertension.

Ms. Stratoti – Yes and medication carts will be there with peoples medications. If they can give their own medication they're allowed to do that as long as we do the testing and cognitively everybody understands what they are taking. If they can't give their own medication we do that for them. Our aides will be certified medication aides as well as nurse's aides.

Mr. Alampi – With regard to ambulance service and activity most people who come to the facility will come by private vehicle with their family and relatives.

Ms. Stratoti – Yes.

Mr. Alampi – Not by ambulance when they first come.

Ms. Stratoti – No.

Mr. Alampi – You're loath to send somebody to the hospital unless it is a real emergency. When you do that do you contract with local hospitals like Hackensack University?

Ms. Stratoti – Yes we can do that it depends on where the resident wants to go.

Mr. Alampi – Those hospitals provide their own ambulance service?

Ms. Stratoti – They do.

Mr. Alampi – What about a private ambulance service?

Ms. Stratoti – We can contract with private too.

Mr. Alampi – In Hackensack there's Aero Ambulance service and I'm sure elsewhere. What's your experience with contracting so we don't overwhelm the municipal volunteer ambulance corp. I know we will rely on them to a degree how do we assure that we don't overwhelm the volunteers?

Ms. Stratoti – We could have contracts in place. When the state Department of Health comes down to inspect us just to open up I have to have contracts with every entity we will be dealing with. Business

HIPA compliance forms and everything. We will have a contract with the ambulance services as well as the hospital systems. We'll have a contract with a psychiatric hospital too as well as a long term care facility so all those contracts have to be in place for us to be okay with the health department.

Mr. Alampi – I have no further questions for Ms. Stratoti.

Ms. Murray – Let's start with Gary.

Mr. Paparozzi – When the nurses or aides go to check on each of the occupants you said they would remove any garbage bags and bring them down at the end of the hall. Now at the end of the hall if you go east you have the elevator and stairs if you go west you have the elevator and stairs in the lobby. Where would they pile these possibly fifteen or twenty bags?

Ms. Stratoti – Outside each door then there would be a pickup just like in a hotel like at the end of cleaning a room.

Mr. Paparozzi – The pickup would be done by janitorial services?

Ms. Stratoti – It would be done by janitorial or a housekeeper directing that floor but the nurses' aides would also assist with that type of trash emptying.

Mr. Paparozzi – That's all.

Ms. Murray – Mr. Duffy?

Mr. Duffy – One thing that I wondered is how are they going to do laundry?

Ms. Stratoti – There are going to be laundry areas at the end of each of the halls. If the resident wants to do their own laundry they can. If their family comes in and wants to take mom's laundry home because we don't want to be mixed with other people's laundry they can. The staff will also do the laundry. A lot of times the night shift in particular is scheduled to that particular floor will take the laundry bags. Laundry bags are usually hung outside the door picked up at the beginning of the shift and they are cleaned and folded and brought back by the end of the shift.

Mr. Duffy – So there is one washer and one dryer on each floor day one on each floor?

Ms. Stratoti – Yes.

Mr. Duffy – The elevator is bothering me because and I understand what you are talking about as far as a health issue if someone becomes sick. My concern is what if they fall, an elderly person falls we have a broken hip they can't get them sitting down. I don't know how to move them there except on a board on a stretcher. If they slip in a shower or bathtub with that type of injury we have to be very careful. I look at it and I see we have one washer and dryer there is a wellness aid station plus laundry I don't know if you will need any more and I guess the nurses station for phase 1.

Ms. Stratoti – It's a very small area. We're hoping that we'll have lockable cabinets for meds in each of the residents' rooms and that way we won't keep too many medications in the medication cart. We'll have a smaller cart that we can lock up. This way there is less problems with med coverage and things like that. I'm really trying to wrap my head around what else can we do. If somebody falls and you have to splint them because they have a fractured hip or leg we splint them up just like emergency rooms. They are not going to be movable except to be carried down. We do have chairs that we can have that are going to try help them stand up we get them straight up and down inside of the chair but we have to make a compromise until we get the brand new elevators on the other side. Then after that then everything will be done through those elevators. People do fall but they don't always break.

Mr. Duffy – We don't get up as well as we used to.

Ms. Stratoti – Yeah I know I've had falls myself. The people we are going to have in there we are going to try and foster being conscious about their own health. We'll have exercise programs in the morning yoga and things like that. Things that will cause them to stretch more and hopefully bounce less if you know what I mean. I think the whole point of how we get them down the elevator I understand, but I look around and see the high-rise senior hotels that have been here forever that I'm sure had people that fell and cracked a hip or broke a leg and we got them up and down steps pretty good. Having been involved in burn nursing we've had to take victims down the steps when there was a burn situation. There are ways to do it and I don't really know other than to bring anybody down and that's what I would do just because of conscientious nurses. I would bring the person down to be in the nurses' station to be in the bed if there was a fall if I could move them because 9 times out of 10 people can move and we can slowly

get them up. We can bring them downstairs and get the whole assessment there and decide whether or not there is something sprained or broken. We're not going to move them unless we have to.

Mr. Duffy – I know this is not the first time a new building's been through this.

Ms. Stratoti – I was the only management company that took over a 150 bed facility in Camden where we had one elevator and one bathroom for 150 people. These are the poorest of the poor in Camden but we dealt with those people going up and down the steps. That's part of our exercise routine on a daily basis. The people that came understood that they weren't going to be carried they had to get their own exercising and things like that in order to do what they had to do. We got to know them and as a community they came together and I ran it for 5 years because nobody would touch it. We had one elevator and that elevator was tight if you had four people in it you were lucky. I'm saying it can be done it's not the best. He said that he talked to a couple of different people and they said they just can't take this area. It would be nice if we could make it into one big wide elevator but it's not possible.

Mr. Duffy – I have another question I don't know who can answer it. As I look through this and listen to you and realize we have a big dining area we have all these beds and I don't see any place here that can handle the laundry service for this building. Unless you are sending it all out because you only have a washer and a dryer on one floor.

Ms. Stratoti – There are different days for different people. Three times a week you're going to pick up two times a week. Like I said a lot of times families don't want the laundry done there and the daughter brings the laundry home and brings it back. There are some people who will be more incontinent and have problems like that where we would do laundry 5 days a week for them. They typically do it on the evening and night shift when it is down time.

Mr. Duffy – I'm looking at the dining area tablecloths and napkins.

Ms. Stratoti – Tablecloths and napkins are different I'm talking residents laundry. Tablecloths and napkins are probably going to have to be sent out.

Mr. Duffy – So we won't have to worry about that.

Ms. Stratoti – No you don't have to worry about that clogging anything up because you are not going to be able to keep them in good shape unless you send them out and have a professional laundry company do it. I didn't know that was what you were talking about.

Mr. Duffy – I look at it and my idea would have been put the washer and dryer somewhere else and make that elevator back there a little bigger. I know the double was not doable but what about that one? Again we have a lag time before we'll see phase 2 done we don't know.

Ms. Stratoti – I know we have discussed it and they didn't feel it could be done the way the building was.

Ms. Murray – What about the sheets and pillow cases?

Ms. Stratoti – A lot of the residents they bring their own sheets and pillow case. They have the linen set that their daughter gave them or whatever. They have their own comforters so those things would also be washed and stripped once a week. If they want it done more often it can be done more often by their particular aides. That laundry machine is going to be going morning noon and night by the aides or if the residents choose to do them on their own they can.

Ms. Murray – Mr. Schilp?

Mr. Schilp – What is the planned visiting hours?

Ms. Stratoti – It's twenty four seven because if we're going to have people in there. Let's say somebody comes in and they're well and then all of a sudden they need hospice care. There is going to be a twenty four seven security guard there twenty four seven nurses there and so if the family needs to come in and they're visiting all they have to do is give us a call We ask the resident if it's okay if Mary Joe comes to visit.

Mr. Schilp – What would be the normal visiting hours?

Ms. Stratoti – Normal hours would be eight to eight because a lot of people get tucked away at 8:00 they want to watch their shows and go to sleep.

Mr. Schilp – You said the medications will probably be locked in each room.

Ms. Stratoti – They will be in lock boxes that you can fit on top of a bureau.

Mr. Schilp – I've seen them in nursing homes. How many employees will be there between ten at night and six in the morning?

Ms. Stratoti – It will be somewhere between 12 and 15 it depends on the census.

Mr. Schilp – so basically one on every floor and then.

Ms. Stratoti – Yes extras that float up and down. They would probably be the people that are taking care of the light housekeeping and also bringing the clean close back.

Mr. Schilp – I'm sure you will have evacuation drills.

Ms. Stratoti – Yes by law and on every shift. The staff also on hiring are taken through the whole nine yards in the event of a disaster fire a bomb you name it.

Mr. Schilp – With the daycare going down the number of buses is going down as well. You only need a couple of buses to be there.

Ms. Stratoti – Yes.

Mr. Schilp – Let's say we approve this how long do you think it would be before you start occupying the building?

Mr. Alampi – I think between 9 and 12 months.

Mr. Schilp – If we approved it tonight when do you think you will start accepting occupants

Mr. Alampi – The spring of 2022.

Ms. Stratoti – Let me clarify one thing about the bar downstairs. It's not really a pub. In assisted living we are not getting any kind of liquor license or anything but people are allowed to drink in assisted living in their own apartments and if they decide to bring in a six pack of beer down because three guys are bowling they are allowed to do that as long as we have the doctor's permission.

Mr. Schilp – BYOB.

Ms. Stratoti – Yes BYOB if somebody wants to celebrate a birthday or something they bring in champagne or wine they are allowed to do that.

Mr. Schilp – That's all I got.

Ms. Murray – Mr. Mazzer?

Mr. Mazzer – I'm good.

Ms. Murray – Mr. Tokosh?

Mr. Tokosh – I'm wondering is there going to be a hospice area.

Ms. Stratoti – Not an area every person that moves in in their own apartment is allowed to stay there until death. If somebody feels they are at the end stage where the family is hurting and they feel the person needs more intensive medication like Villa Marie Claire we used to do IV cocktails to manage pain. We are not going to be IV certified to do that stuff in our building so there will be times we may have to send someone to an actual hospice. If we can get the pain under control and they can continue to live their life there comfortably we're considered the twenty four hour care givers as staff so the family doesn't have to move in but we will allow them to be there if they want to twenty four seven. That's why I said there are going to be times that we allow access twenty four seven. We may have hospice on the fifth floor one or two ladies somebody on the fourth floor someone on floor one it depends. We will be doing hospice. To move someone at the end stages of a disease process is horrific for families. The only time we would move someone is if they are not getting pain relief based on what we are doing and they need IV cocktails.

Mr. Schilp – How many of the phase 1 people would be wheelchair bound or are most of the people not?

Ms. Stratoti – Most of the people are not wheelchair bound. You might have in about six months of moving in about 10% will start using walkers and 10% will start using wheelchairs. Our goal is to keep them out of wheelchairs as long as we can because if you move it you don't lose it.

Mr. Schilp – It's a request and eventually I'm sure when they meet with the Fire Department and so on they will notify when someone is confined to a wheelchair. Across the street here when they built that people come in and we know that there are people confined to wheelchairs so if we have a fire we know that apartment 2 or 1 or 9 or whatever it is has someone that is confined.

Ms. Stratoti – The front area where the receptionist is there will be a complete roster of everybody's rooms and who needs wheelchair help who needs let's face it some people at night time take a sleeping medication. When we do our round the clock checks we take into account if they have taken something

for sleep or something like that. If there is a fire at night we have a check off basically of who you are going to have to help get out of bed. That is all up to date every time something changes so we will have that roster and it will go right to the fire people when they come to the door.

Mr. Tokosh – Let's assume that most of the occupants want to have dinner inside of their apartments. If you had 70% of the people who want that would you have the staff feed everybody in their room?

Ms. Stratoti – Most of the people in assisted living feed themselves number one. If they want to eat in their room what we typically do, they can do it but it's an extra charge. My job is to get them out socializing because they come from being in an apartment all alone. They might have lost a husband or a wife and may be depressed. When I'm getting them out to sit at a table with 3 or 4 other people and they start to chit chat they start to come alive again. That's part of our philosophy to try and get people to come out of their room. If they are sick they are allowed to have three days of meals delivered to their room and people will take away the empty trays. We'll make sure they get soup and the aides will make sure that they're needs are met. Some of the aides will be in the dining room helping us serve the people in the dining room. We get reports back in the nursing offices to who is eating and who is not eating. They just didn't like the food that's okay what else can we get you. There is always an alternative to get people to maintain their weight. Part of what we do in nursing is once a month we ask everybody to get weighed. To get weighed once a month tells us you know if they say the food tastes terrible but I go into the room and they've got pies and pasta all of this stuff brought in from home then I know they are eating because they just gained six pounds this month. We have to find out what the truth is and it's okay if the family wants to bring food in it's not an issue. My mother was in an assisted living at one point and I went in one day and there was 100 people in the facility. We went into the bistro and they had a kitchen so we made homemade pasta, we had tomatoes and we squashed the tomatoes. All the ladies that came in smelled the tomatoes and the garlic and we made our own sauce. They were humming and singing and having a ball. Then that Thursday we had a big Italian feast. We had wine at the tables everybody loved it. That is the kind of chefs I hope we can get for this building.

Ms. Murray – There are no more questions. Do I have a motion to open to the public?

Mr. Schilp makes a motion seconded by Mr. Duffy to open to the public for this witness.

All in favor – YES.

Ms. Murray – Seeing none do I have a motion to close?

Mr. Schilp makes a motion seconded by Mr. Duffy to close to the public for this witness.

All in favor – YES.

Mr. Alampi asks for a five minute break to speak to his client. Break was granted by the Chair.

Ms. Murray – We are coming back to order from a short consultation break.

Mr. Alampi – Madame Chair we had a little pow wow outside and sometimes the answer is easier than you think. The architect is going to be recalled to put on the record that instead of trying to convert the elevators and demolishing the cinderblock and masonry walls inside the building and rebuilding them. The problem was the cavity wasn't large enough no matter how we tried to configure it and the expense and all that. We are going to leave the elevators in place and build a new 3500 pound full size elevator on the outside of the building by building a masonry 8 story shaft. With that I call Mr. Carballo.

Mr. Alampi – Jose could you just show the Board on the primary sheet if you have a red marker just show and explain about building a new masonry shaft that hosts the full size elevator.

Mr. Carballo – The understanding of this is one of the things that was on everybody's mind so we are taking this corner here. It's sheet 4 of 11 so that corner right behind the single elevator we are going to create a new 3500 pound which is a stretcher size elevator I think that solves the problem of the stretcher elevator we have easy access to it through here. If it is something that the Board would like this is what we are going to do.

Mr. Alampi – As an architect do you see any difficulty with doing that type of construction on your plan?

Mr. Carballo – No as a matter of fact you have masonry walls in the building do you already have two masonry walls, so we basically have to create a shaft for the elevator. It should be a simple solution to this problem that we are worried about.

Mr. Alampi – What elevation would it be on north or south.

Mr. Carballo – This would be on the north elevation.

Mr. Alampi – Is that facing the Parkway?

Mr. Carballo – That is facing the Parkway.

Mr. Alampi – That's where you would build this elevator shaft?

Mr. Carballo – That's what we're doing.

Mr. Alampi – If there are no further questions Madame Chair we'll show that on the next revision.

Mr. Duffy – My question is there is a walkway here so that walkway is going to have to change now because when phase 2 goes in this is your doorway. You have to extend the walkway out this way you know what I'm saying?

Mr. Carballo – Absolutely you're right. The building will not be any less safe than what we have the exits will be maintained.

Mr. Schilp – I want to thank you guys I really appreciate you working with us.

Mr. Carballo – This always a collaboration otherwise it doesn't work.

Mr. Duffy makes a motion seconded by Mr. Schilp to open to the public for this witness.

All in favor – YES.

Ms. Murray – Does anyone wish to speak? Seeing none.

Mr. Schilp makes a motion seconded by Mr. Duffy to open to the public for this witness.

All in favor – YES.

Mr. Alampi – My next witness will be Bahman Izaenehr our civil engineer. You need to be sworn and Board approved.

Mr. Pellino swears in Mr. Izaenehr he states his name spells his last and gives his address as Development Engineering 165 Polifly Road Suite 209, Hackensack, NJ.

Mr. Alampi gives the Board Mr. Izaenehr's qualifications to establish hi expertise in the field of Civil Engineering. He has been licensed since 1990 and has testified in front of many zoning and planning boards over the years. The Board accepts Mr. Izaenehr as an expert witness.

Mr. Alampi – You prepared a site plan for this project how many sheets is your exhibit?

Mr. Izaenehr – Six pages.

Mr. Alampi – We are going to log that as A3. In conjunction with the Engineering Site Plan did you provide other reports such as a traffic report? Not a study but a traffic report and a turning template things of that nature.

Mr. Izaenehr – Yes besides the six drawings site plan set we submitted a copy of the statement as well as a drainage report.

Mr. Alampi – Those documents were provided with the earlier filing back in August I believe. August 29<sup>th</sup> of this year correct?

Mr. Izaenehr - Yes.

Mr. Alampi – With the revision that was made to the plans now with even further revisions you submitted revisions to your plans can you tell us what your revision date is?

Mr. Izaenehr – I submitted the first revision of the plans back on October 28<sup>th</sup>, 2020. The last revision is revision number 2 is dated December 3<sup>rd</sup>, 2020.

Mr. Alampi – Did you have to revise your traffic report?

Mr. Izaenehr - Yes we also revised the traffic report because there was a reduction in the number of rooms I believe.

Mr. Alampi – By eliminating the adult daycare it reduced the traffic and so you modified your zoning chart also.

Mr. Izaenehr - Yes.

Mr. Alampi – You also provided a circulation plan where you show various size vehicles fire trucks garbage trucks and delivery trucks using the software showing how they would enter the site circulate around the site and how they would not be blocked by any parking spaces and they could get in and out.

Mr. Izaenehr - That's correct.

Mr. Pellino – Page six of the site plan?

Mr. Alampi – Yes.

Mr. Izaenehr – Page six was not part of the original set but it was part of their revision number 1 and then there was a comment about the height of the canopy which still could accommodate up to about 17 and a half 18 feet fire trucks. We modified the truck path on the last revision so both pathways are manageable depending on the size of the fire truck. One of the commissioners had made a comment that some of the fire trucks are probably higher than the height of that existing carport.

Mr. Alampi – So on your six page exhibit that was filed on December 10<sup>th</sup>, 2020 when you show the revisions you actually say what you did in the revision. For example I go to the third page the site plan and I look at your revision 2 on the plan dated December 3<sup>rd</sup> 2020 revise 8 story building, revise the landscape, revise the courtyard, revise the trash enclosure and added the covered walkway. You can understand clearly what you were doing with each of these exhibits.

Mr. Izaenehr – That's correct.

Mr. Alampi – You did the same thing when you did the overhang you elevated it a little higher in case there was any issue with the fire truck.

Mr. Izaenehr - No I did not.

Mr. Alampi – What did you do?

Mr. Izaenehr – The first revision we passed the fire truck through the carport. Then there was a comment that some of the fire trucks may be higher than the ceiling of that canopy so what we did was lead the trucks to the north of that canopy closer to the Parkway. The fire trucks have options if they are low enough they could go underneath the canopy. If they were 20 feet high they could drive past the canopy and go to the north of the canopy and still they can use that area to fight fires. If I may, this is an existing hotel building so I am pretty sure it's been safe all these years. If it wasn't then of course they would have received some recommendation from the fire department.

Mr. Alampi – Let me ask you some questions and you can answer. Let's go to the site plan first page you have various notes that deal with the minimum lot area, lot width etc. highlight for us only where there are any deviations or variance for example the maximum lot coverage permitted is 30% correct.

Mr. Izaenehr – Correct. That is what the zone permits 30% and again not coverage I'm pretty sure it is different from building coverage. That includes the parking areas whatever is covered with asphalt and concrete. The zone calls for 30%, existing is over 80% and we have reduced it by taking away the asphalt that they used for parking surface and increasing the landscaping area even though we are still erecting a brand new tower because that tower goes 100% on the existing parking lot.

Mr. Alampi – So I understand your position even though a new building is going up it's going up where there is already impervious coverage.

Mr. Izaenehr – That's correct.

Mr. Alampi – Nonetheless you've reduced the lot coverage overall by 7%.

Mr. Izaenehr – That's right.

Mr. Alampi – The other variance has to do with the concept of parking vehicles in the front yard setback.

Mr. Izaenehr - Yes zoning does not allow parking in the front yard. That is an existing condition but we are still improving that.

Mr. Alampi – That existing condition applies to this site and all hotels and all office buildings they have parking all around on all four sides correct.

Mr. Izaenehr - Yes.

Mr. Alampi – You are actually improving it by slightly reducing the amount of coverage in the front yard setback correct.

Mr. Izaenehr – That's correct. What we decided to do even though we don't believe Pehle Avenue would ever be widened the County has already made reservation. So what we decided was to go beyond that line and in order to do that we had to push the parking closer to the building. Also we created a landscape buffer between the sidewalk and the parking area.

Mr. Alampi – Tell us what sheet you show the landscaping.

Mr. Izaenehr - On drawing number three. There was a resident here at the last meeting so we basically put his comments and we provided shade trees and between the shade trees will be bushes. We are also use a lot of planting area flowering beds and also there was a suggestion here by our consultant to

do some gardening. This property has a lot of spaces available either for flower beds or vegetable gardens. There are several areas on the south side and all around the existing building the new building and the pool building. We have the areas shown as grass or seasonal flower areas. In the back depending on the sun exposure we have that triangular area on the northeast corner could also be used for gardening. On the northwestern corner behind the existing restaurant that could also be used for gardening. So this is how we improved the landscaping that exists there today. We took advantage of relocating the parking in the front further back and therefore creating a nice size area for planting shade trees and bushes so we can create some privacy and buffer for the residential homes across the street. We got rid of one row of parking in the front so it's not as much impervious area as it used to be. If you look at the zoning chart table there are 276 parking spaces and we have reduced them by almost 100.

Mr. Alampi – You've reduced the parking by 104 spaces some people get concerned because that's less parking instead of more but we did that to reduce impervious coverage a massive impervious area and creating a lot more buffer and landscaping is that correct.

Mr. Izaenehr – Correct.

Mr. Alampi – At the same time given the type of use that this is and the number of beds anticipated 372 actually exceeds the demand of 156.

Mr. Izaenehr – That's correct township ordinance requires 1 space for every 2 beds.

Mr. Alampi – I see every three beds on your plan.

Mr. Izaenehr – It says half a space per bed or one space plus employees so there is a component there.

Mr. Paparozzi – It's .5 per bed or 1 per three whichever is greater.

Mr. Izaenehr – In this case half a space per bed is greater. Thank you.

Mr. Alampi – This is a situation because the conversion from the hotel which is a high rise residential building to assisted care actually reduces the parking demand as recognized by the ITE manual correct.

Mr. Izaenehr – That's correct.

Mr. Alampi – if I understand correctly the lot coverage remains as a bulk variance request and the parking in the front yard remains as a variance.

Mr. Izaenehr – Plus the use.

Mr. Alampi – I didn't get there yet. That is for the next witness. You are not giving an opinion on the use are you?

Mr. Izaenehr - I would love to if it helps.

Mr. Alampi – Converting this building and building a new tower and converting to assisted living do you feel that all the details of your plan have addressed the engineering demands on the site?

Mr. Izaenehr – I believe so.

Mr. Alampi – Have there been issues of drainage and such and your developments have been improvements on the plan in the parking lot are you adding any inlets or anything to improve the drainage?

Mr. Izaenehr – Yes as a result of this project we examined every single inlet at the site and we had a crew there and that's basically the result of the work I cracked 3 of my toes. They dropped the inlet cover on my right shoe and I was not wearing a steel toe.

Mr. Alampi – What was the condition of the catch basins were some of them clogged?

Mr. Izaenehr – They were all full even with the condition of the basins we still had no drainage issues. I visited the site ten times and I visited on two occasions after a heavy rain and we saw some minor puddling which your engineer had mentioned in his report but we will be fixing that. Those are the areas that will be regraded and also we are relocating inlets and also installing new inlets to address the existing drainage. Overall this sight has had an excellent drainage system.

Mr. Alampi – You do agree with Mr. Kurus's report that there was one area that is ponding.

Mr. Izaenehr – That's correct yes.

Mr. Alampi – And you can address that?

Mr. Izaenehr – Yes. We addressed them in our plans and we will also address them during construction.

Mr. Alampi – When we talk about the east property line is that where the large buffer will separate the homes from the parking area is that the east side?

Mr. Izaenehr – Yes that is the east side.

Mr. Alampi – How wide of a buffer is that going to be?

Mr. Izaenehr – We are not changing that buffer area but it is approximately 50 to 60 feet wide and it will remain as it is today.

Mr. Alampi – Could you describe the vegetation there is it just grass?

Mr. Izaenehr – It has a lot of trees actually. We are showing on our plan as an existing tree area.

Mr. Alampi – Okay.

Mr. Izaenehr – We are not really touching that area except we will be maintaining it regrowing the grass and cutting the grass and trimming the trees but that is the only side we are really not touching.

Mr. Alampi – Along the Garden State Parkway and the ramp to the Parkway you have the minimal amount of planting because there is no reason to have that much landscaping at the Parkway right.

Mr. Izaenehr – No. Actually they are increasing their landscaping area on the west side.

Mr. Alampi – Lastly on Pehle Avenue you are adding landscaping in front of the parking spaces correct.

Mr. Izaenehr – That is correct. One reason we decided to plant the trees beginning at the property line is that in case the County ever decides to widen that roadway they won't have to cut the trees. The trees will become mature and provide a nice shade and privacy.

Mr. Alampi – We received a letter from Bergen County Planning Division that we do have to file an application with them correct

Mr. Izaenehr – That's correct.

Mr. Alampi – We have not filed the application because we were waiting for these revisions that you completed just two weeks ago along with the architectural plans correct.

Mr. Izaenehr – That's correct.

Mr. Alampi – And now we are going to make one more revision on the details of the new elevator to be constructed correct.

Mr. Izaenehr – That's correct and some of the walkways have to be changed.

Mr. Alampi – When that is all finalized in the next few weeks we will then file the application with the County Planning Division.

Mr. Izaenehr – That's correct.

Mr. Alampi – I have nothing further for this witness.

Mr. Izaenehr – I just want to bring something up about parking. As you know hotel has an almost daily turnaround in terms of the parking. People come in check out check in check out it is much much busy. These are basically residents who will be there may be as little as a month or as long as a couple of years so the turnaround is measured in months not days. I just wanted to bring that up so the parking is not an issue at all. We have a lot of parking and I don't believe we need that many parking spaces 176 to be exact. So even though your code requires.

Mr. Paparozzi – You don't have a parking variance.

Mr. Izaenehr – No we don't.

Mr. Schilp – You do have to make a change sir in the number. When we talked about the 20% in the phase 2 we went up to 326 which means you need a 163 spots.

Mr. Alampi – Luckily we have 176.

Mr. Schilp – Oh yeah no I understand but this way we it would never just change the calculation so that. It's good I have no problems with it.

Ms. Murray – I am going to start with Mr. Kurus.

Mr. Kurus – There was just a little bit of a discrepancy between the architect's testimony for that east side buffer and yours. He had shown in his rendering maybe some additional plantings to thicken it up where as your saying to leave it as is. Is there a way to maybe see which trees are okay which need to be trimmed and if you can throw in some more to thicken it up the way he is describing it and incorporate that into the final version of it?

Mr. Izaenehr – Sure we can do that by all means. We want to make sure they remain healthy.

Mr. Kurus – The ones that are good stay and if there is room to add then you add.

Mr. Izaenehr – Sure of course.

Mr. Kurus – That was really all I had.

Ms. Murray – He addressed everything in your letter your satisfied.

Mr. Kurus – He either addressed or said he will address in the final.

Mr. Izaenehr – We have worked with Neglia Engineering for years so if we have a problem I am pretty sure we can resolve all outstanding issues if there are any.

Ms. Murray – I'm going to Gary next.

Mr. Paparozzi – Just one quick note Madame Chair Mr. Alampi did not bring up the fact that the engineer did eliminate the parking space variance where 9 by 20 was required for the new spaces and the old plan had 9 by 18. The engineer revised it to 9 by 20.

Ms. Murray asks the Board if they have any other comments for tis witness and none have any further questions.

Mr. Paparozzi – The car chargers in the southeast corner are you going to leave that.

Mr. Izaenehr – Yes.

Mr. Schilp makes a motion seconded by Mr. Duffy to open to the public for this witness.

All in favor – YES.

Ms. Murray – Seeing none.

Mr. Schilp makes a motion seconded by Mr. Duffy to close to the public for this witness.

All in favor – YES.

Mr. Alampi – Our next witness is Kathryn Gregory our Planning Consultant.

Mr. Pellino swears in Ms. Gregory she states her name spells her last and gives her address as 96 Linwood Plaza #350 Fort Lee, NJ.

Mr. Alampi questions Ms. Gregory to present her credentials and qualify her as an expert in the field of Planning. She is a licensed Planner and has given testimony extensively throughout New Jersey.

Ms. Murray – She has testified here before and yes we accept her.

Mr. Alampi – You know from reviewing the Towns ordinances that an assisted living is not a permitted use in this zone.

Ms. Gregory – That is correct.

Mr. Alampi – Just tell us what zone this is what's permitted and whether or not the conversion of this building and the construction of the second building would constitute good planning under New Jersey law.

Ms. Gregory – The property is located in CH1 zone which is Limited Commercial zone and assisted living is not a permitted use in this zone. Hotels and offices are permitted uses along with some others including medical clinics. The only reason I bring that up is that assisted living is interesting in the fact that it is a little bridge between residential and including some medical facilities within the assisted living. As Karen brought up earlier in talking about aging in place and not having somebody go to a nursing home. I think that is a point worth noting within the ordinance pertaining to the assisted living facility. In general we do need a use variance because it's not permitted. In order for this variance to be permitted we have to prove special reasons. What that means is that we either have to prove that the use is inherently beneficial or that the site is particularly suited to the use. What's interesting here is I would say that it is both but it is actually an inherently beneficial use and there is case law to that effect. You've probably heard this in the past but there is actually a case Sunrise Development vs the Zoning Board of Adjustment in the Borough of Madison. It was held that housing for the elderly is an inherently beneficial use of high priority. Assisted living facilities including those operated for profit are to be treated as inherently beneficial uses. Under the purview of inherently beneficial use the criteria changes a bit. We actually have something called the SICA test that we have to prove. That's a four part test the first of which is we have to identify that the public interests are safe. That would be housing for the elderly that's part one. Number two is to identify any detrimental effects that will ensue from the granting of the use variance. I would venture to say that there's no detrimental effects of granting a use variance in this instance. Number three is that we need to ask to impose reasonable conditions to reduce respective detrimental effects. I don't think there is any detrimental effects by proposing a use variance for the assisted living facility but obviously it was taken into consideration and the applicant has already modified the plans

based on the concerns of the Board and I'm sure that if there are any other concerns that they would obviously listen to the Board and improve the plan as necessary to try and mitigate any detrimental effects that might ensue from the granted variance. The last part of the SICA test is to weigh the positive and negative criteria and determine whether a balance of the granted variance would cause a substantial detriment to the public good. Before I get into both the positive and negative criteria while the positive criteria is presumptively met and are inherently beneficial we did have a couple of the bulk variances that we mentioned earlier. I just want to go through those shortly. The first of which is parking in the front yard which is not permitted but that is an existing condition and we are improving it. We are moving it from four feet back to twelve feet back so that is improving the existing conditions. The lot coverage permitted is 30% there was over 80% on the lot and we are proposing 72.7% so we are reducing the lot coverage and increasing the landscaping on the site so that is going to be a benefit. Then as brought up by your Planner the parking stall size 9 by 20 is what is required and 9 by 18 is what we were proposing but we would abdicate that that is typically a standard parking size for a residential use. Therefore that goes to less lot coverage if you have bigger spots you have more lot coverage but if you have smaller spots then you also have less lot coverage and more landscaping. With that said I do believe we need positive criteria for bulk variances too even though it is presumptive that we need it for the use. The reason I say that is I do believe for purpose A talked about the promotion of the public health safety and general welfare. I do believe that we promote purpose E which talks about providing adequate light air and space even though we are providing another building another 8 story building we are meeting all of the bulk requirements. The bulk requirements that we are not meeting are the ones that are existing on the site. I think that that's the value since we are reducing the lot coverage even though we are producing another 8 story building on the site we'll meet all those bulk requirements. I also believe that we covered purpose G which talks about providing sufficient space and appropriate locations for a variety of uses to meet the needs of New Jersey citizens. You get the Certificate of Need from the state so we are promoting purpose G to that effect. Lastly I would abdicate that we promote purpose I which is talking about promoting a visual requirement. I think that has a lot to do with providing some brand new architecture and adapting the existing building as well as providing increased landscaping and making the site look nicer than it does today. In terms of the negative criteria I don't believe there is any substantial detriment to the public good by allowing not only the use variance for the assisted living facility but also the bulk variances. We are serving a special needs population so that actually enhances the public good it doesn't detract from it. Like I stated earlier we also meet all the bulk requirements except for those that are already existing on site. To that effect we also I believe have no substantial detriment to the zone plan or zoning ordinance. As a matter of fact your master plan that I reviewed while it is silent specifically on assisted living facilities I do believe that we promote goal number 11 which is future development and redevelopment activity should result in the introduction of uses that afford a compatible transition in intensity to assure the ultimate full enjoyment of residential property. The reason that I say that is we are located next to single family residential neighborhood. This is a residential type facility a hotel is a more transient nature obviously so you have people coming and going. What you have here is you have permanent residents that are aging in place. On balance I do believe the benefits outweigh the detriments in this proposal and we hope to see that the Board sees fit to grant our variances this evening.

Mr. Alampi – Thank you miss Gregory. I have no further questions.

Ms. Murray – I'm going to start with Gary our Planner.

Mr. Paparozzi – I actually agree with the Planning testimony. The bulk variances are all preexisting so these D variances that Ms. Gregory alluded to are preexisting bulk variances that are in place now. The use that she also elaborated on the commissioners know that the hotel isn't working there and an apartment complex could bring a higher impact and more negativity to that section of Pehle Avenue and that section of the Township of Saddle Brook. With that being said I also believe that the positive criteria here outweighs any negative that the use variance requires that's all.

Mr. Schilp – Is this considered here something where you have to have so many low income housing in town?

Ms. Murray – Affordable housing.

Mr. Schilp – Does this in any way affect the town because you are renting an apartment and we're renting 200 and whatever apartments do a certain amount fall under that?

Mr. Alampi – Let me answer this. We don't have to put aside affordable housing units but this type of development will allow under the regulations for Saddle Brook to be given credit against the affordable housing. If I'm not confusing anybody we don't have to incorporate new or set aside affordable housing but assisted living especially the dementia patient care area gives you credits. I know that your Township attorney and I spoke today on an unrelated matter with the affordable housing Saddle Brook has recently settled its case and now they have prepared various ordinances. I didn't mention to him but I should have emphasized more if the Zoning Board approves this application Saddle Brook might be able to take advantage on paper of additional credits. You would not have to create affordable housing for this but you do get credit.

Mr. Schilp – That works out very well thank you. That's all I had.

Ms. Murray – I happen to agree with everything you said especially when you talk about the transition. I know that some neighbors that were here last month were concerned about a transition and the way you explained it I wish some of them were here that they could have understood the way you talked about the transition. If it was an apartment complex it would be much more intense use of the property. I only wish they were here to hear that because it might have eased their minds a bit.

Mr. Schilp makes a motion seconded by Mr. Duffy to open to the public for this witness.

All in favor – YES.

Ms. Murray – Seeing none.

Mr. Schilp makes a motion seconded by Mr. Tokosh to close to the public for this witness.

All in favor – YES.

Mr. Alampi – I am aware that you have only five members here this evening and the law requires us to secure five affirmative votes although I feel that we have come a long way on this application with some significant changes. Eliminating the adult daycare, the physical therapy, constructing a new elevator on the outside of the building and other amenities that we detailed. I don't wish to presume that we would take a vote. I think you would like to see those revisions on the plan before you take action anyway so I think that we will have those details. I think you want to see those revisions first unless you direct that the Board would take a vote on it and the revision would be provided before the next meeting before you memorialize the resolution. I leave it to you and your counsel how you want to proceed.

Mr. Pellino – Unless the Board feels otherwise I don't see any reason assuming the applicant is comfortable with going ahead to taking the vote and assuming it is an approval making it subject to the revisions. We'll leave it to the Board Engineer to determine if it meets the requests. I may suggest to the Board we take a roll call to see if anybody thinks he'd be better off waiting for another meeting we could have other Board Members have a chance to speak up. I think the flavor I'm getting is that the Board is favorably disposed to this project.

Ms. Murray – When is the meeting in January?

The meeting is January 11<sup>th</sup>.

Ms. Murray – I think we could go for a vote with contingencies that you will supply the plans with the recognized changes and adjustments subject to the engineer's review as we have done in the past with other applicants.

There is discussion with the applicant on how they would like to proceed. Whether or not they want a vote now or come back next month for a vote with possibly more Board Member present.

Mr. Tokosh – Has anyone calculated the amount of sewerage being generated.

Mr. Kurus – We asked for those calculations the net difference between the hotel and the assisted living is almost a wash. They had to supply those numbers as part of the application.

Mr. Schilp – I would like to make a motion that we approve this with a couple of stipulations. First that the revised plans are submitted and the daycare if they want to add one later that they have to come back to the Board. The start of the new building would have to start within two years of the first occupancy of phase 1.

Mr. Alampi – We don't have to have 100% capacity say 75% capacity.

Mr. Schilp – Right.

Mr. Alampi – Once we achieve that the clock would run two years to start construction of the new tower. That timing would make sense.

Mr. Pellino – The only question is what do we do if they don't do it.

Mr. Schilp – Then they have to come back before the Board.

Mr. Pellino – That's fine.

Ms. Murray – That the changes on the plan include the additional elevator.

Mr. Duffy – And the correction on the walkway.

Mr. Pellino – And compliance with Mr. Kurus's review letter.

Mr. Mazzer seconds the motion.

Mr. Pellino – Just so we're clear we are granting you a D1 Use Variance, we are granting 2 bulk variances and a site plan.

Roll Call - Mr. Duffy, Mr. Mazzer, Mr. Schilp, Mr. Tokosh, Ms. Murray – YES.

## **6. RESOLUTIONS**

A.) Approval for Carol Buchichio, 272 Oxford Avenue, Block 1410, Lot 1

B.) Approval for Giovanni Spinella, 306 Nedellec Drive, Block 1408, Lot 1

Mr. Mazzer makes a motion seconded by Mr. Schilp to approve the resolutions.

Roll Call - Mr. Duffy, Mr. Mazzer, Mr. Schilp, Mr. Tokosh, Ms. Murray – YES.

## **7. MINUTES**

Meeting of November 16, 2020 Regular Meeting

Mr. Schilp makes a motion seconded by Mr. Duffy to read and file the minutes.

Roll Call - Mr. Duffy, Mr. Mazzer, Mr. Schilp, Ms. Murray – YES, Mr. Tokosh abstains.

## **8. VOUCHERS**

Return of Unused Escrow, R&R Plaza, 336 President Street, Block 113, Lot 1 \$992.50  
Paparozzi Associates Inc., 11/19/20, RPM Hospitality Group, LLC, 129 Pehle Avenue, \$202.50  
Basile Birchwale & Pellino, 12/01/20, RPM Hospitality Group, LLC, 129 Pehle Avenue, \$250  
Basile Birchwale & Pellino, 12/01/20, RPM Hospitality Group, LLC, 129 Pehle Avenue, \$312.50  
Basile Birchwale & Pellino, 12/01/20, Rupinder Khalsa, 488 Steinway Rd, Block 702, Lot 10 \$187.50  
Basile Birchwale & Pellino, 12/01/20, Giovanni Spinella, 306 Nedellec Drive, Block 1408, Lot 1 \$250  
Neglia Engineering Assoc., 11/09/20, RPM Hospitality Group, 129 Pehle Ave, Blk 1311, Lot 36 \$1080  
Neglia Engineering Assoc., 11/09/20, Giovanni Spinella, 306 Nedellec Drive, Block 1408, Lot 1 \$135  
Neglia Engineering Assoc., 11/09/20, Midland Commons 2, Van Bussum Ave, Blk 402, Lots 1-5 \$90  
Neglia Engineering Assoc., 11/09/20, McDonald's Corp, 189 Route 46, Blk 123, Lots 1 & 1.01 \$270

Mr. Mazzer makes a motion seconded by Mr. Duffy to pay the vouchers. All in favor – YES.

Ms. Murray – We have to set up the reorg meeting in January and we have possible meeting dates for next year. We're going to go back to the first Monday of the month. The first Monday in January is not going to work so it's the 11<sup>th</sup> would be our first meeting. Do you want to have a reorg at 7:00 and a regular meeting at 7:30?

Mr. Schilp makes a motion seconded by Mr. Duffy to have the reorg meeting and the January meeting on the 11<sup>th</sup>. All in favor – YES.

## **9. OPEN AND CLOSE MEETING TO THE PUBLIC**

Mr. Duffy makes a motion seconded by Mr. Schilp to open to the public. All in favor – YES.

Mr. Duffy makes a motion seconded by Mr. Schilp to close to the public. All in favor – YES.

Mr. Schilp makes a motion to adjourn seconded by Mr. Mazzer. All in favor – YES.  
**10. ADJOURN**