

19970404
RECEIVED BY
OFFICE OF CITY CLERK
APPLICATION FOR DRIVEWAY CUTS AND OPENINGS
CITY OF CAMBRIDGE

97 JUN 25 PM 4:20
CITY OF CAMBRIDGE

CAMBRIDGE MA 02142
97 APR 25 AM 7 39

RECEIVED

JUN 16 2 47 PM '97



INSTRUCTIONS:

In order to obtain permission for a driveway cut or opening you must first get approval from the Department of Inspectional Services on the zoning requirements for off-street parking, including the cooperation of your immediate abuttors.

To receive a review from Inspectional Services you must fill out Part I of the application. Be sure to draw your plot plan on Drawing 1, choosing the lot that represents your lot's position, i.e. corner or interior. You must also include a sketch of the proposed driveway, including dimensions, on Drawing 2. You may then calculate the cost of the driveway by using the formula based on your choice of surfaces. You must also include a signed abuttor sheet for each of your abuttors: back yard, one on either side and the abuttor directly across the street.

Once you have gathered this information on the application, it should be submitted to:

**Zoning Officer
Inspectional Services
831 Massachusetts Avenue
Cambridge, MA 02139**

If the application is approved by Inspectional Services, it will then be sent on to Traffic and Parking, the Historical Commission and the Department of Public Works. If approved by Public Works, the application and backup will be sent to the City Council for their approval. Once the City Council approves, the driveway curb cut can be installed. However, the full cost of the cut must be paid to Public Works before the work will start.

If, however, Inspectional Services denies your application you may then appeal to the Zoning Board of Appeals.

DATE:

4 / 17 / 97

PART I:

Address of proposed curb cut or off-street parking facility:	1493 CAMBRIDGE ST / CAMBRIDGE HOSPITAL
Frontage:	Block and Lot:
Setback (distance from building to sidewalk):	45'
Distance from proposed driveway to surrounding structures and property line:	EXISTING CUTS TO BE RELOCATED & ENLARGED FROM 14' TO 20'
Dimensions of proposed driveway:	(AS PER ATTACHED PLANS)
Location of any trees, sign posts, fire hydrants, utility poles, etc., in direct vicinity of proposed driveway:	EXISTING TREES AND RELOCATED BUS STOP

- ☒ Plot plan is included EXISTING CONDITIONS DRAWING C-0
- ☒ Sketch of driveway with cost estimate is included CURB CUT LAYOUT DRAWING & GRADING PLAN C-2
COST ESTIMATE INCLUDED IN "REACH" PROJECT BUDGET.
- ☐ All abuttor's forms are included MID-CAMBRIDGE NEIGHBORHOOD ASSOCIATION (CAC) CHECKPOINT REPORT

DRAWING 1:

PLEASE INDICATE LOCATION OF HOUSE AND DRIVEWAY.
BE SURE TO GIVE DIMENSIONS OF LOT.

300
JAC
MON

10' 49" x 11' 1"

0' 11" x 11' 1"

CORNER LOT

INTERIOR LOT

CORNER LOT



City of Cambridge

Consent Communication #55

IN CITY COUNCIL

August 4, 1997

ORDERED: That the Commissioner of Public Works be authorized to construct curb cuts over sidewalks in front of estates upon the streets as hereinafter named, the expense thereof to be charged to the appropriation for Public Works Department, Paving (Edgestones and Sidewalks). The entire cost of material and labor furnished to be repaid to the City by the owners of abutting estates.

Alan Burne for The Cambridge Hospital 1493 Cambridge Street

In City Council August 4, 1997

Adopted by the affirmative vote of nine members.

Attest:- D. Margaret Drury, City Clerk.

A true copy;

A handwritten signature in black ink, reading "D. Margaret Drury". The signature is written in a cursive style with a large, looping "D" and "y".

ATTEST:-

D. Margaret Drury
City Clerk



RECEIVED BY
OFFICE OF CITY CLERK

97 JUN -3 AM 10 39

CAMBRIDGE MA.

OFFICE OF THE CITY CLERK

CITY OF CAMBRIDGE

(617) 349-4260

FAX (617) 349-4307

tty/TDD (617) 492-0235

D. MARGARET DRURY
CITY CLERK

DONNA P. LOPEZ
DEPUTY CITY CLERK

May 1, 1997

Dear Neighborhood Representative:

This office is in receipt of a copy of a petition from Alan Burne for The Cambridge Hospital requesting *that existing curb cuts be relocated and enlarged, reduction of existing curb cuts and the re-design of the loading dock curb opening at the premises numbered 1493 Cambridge Street, Cambridge, Massachusetts.*

The City Council has directed that all curb cut petitions be submitted to the appropriate Neighborhood Associations for the locality where the curb cut would be made, so that the association may have an opportunity for review, prior to action by the City Council.

Please indicate by return mail your approval or disapproval of the petition within twenty one days from the date of this letter. If the response is "disapproval" please state reasons. Be sure to sign the form and include a daytime phone number. I have enclosed a self-addressed stamped envelope to facilitate your reply.

As soon as this office has received both the completed application and your neighborhood association response, I will place the petition on the agenda for the next City Council meeting. If I do not receive a response from your neighborhood organization by twenty one days from the date of this letter, I will place the petition on the agenda for the next City Council meeting.

If your neighborhood association cannot complete its review by twenty one days from today, you may extend the reply time another seven days by requesting an extension by letter to me with a copy to the petitioner. However, I urge you to make every effort to complete your review as soon as possible.

Thank you for your cooperation.

Sincerely yours,

D. Margaret Drury
D. Margaret Drury
City Clerk

Name of Neighborhood Association: Karen Larson - Inman Square Improvement Association

hereby ☒ approve ☐ disapprove of said driveway petition.

Comments: *all changes at the hospital have gone through a thorough approval process*

Signature of authorized association representative *Karen Larson*

Daytime telephone no. *491 4025*

cc: Petitioner
CITY HALL, 795 MASSACHUSETTS AVENUE CAMBRIDGE, MASSACHUSETTS 02139



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CITY OF CAMBRIDGE

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RECEIVED BY
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97 MAY 22 AM 11:37
CAMBRIDGE MA.

D. MARGARET DRURY
CITY CLERK

DONNA P. LOPEZ
DEPUTY CITY CLERK

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Thank you for your cooperation.

Sincerely yours,

D. Margaret Drury
D. Margaret Drury
City Clerk

Name of Neighborhood Association: John Pitkin - MidCambridge Neighborhood

hereby ☒ approve ☐ disapprove of said driveway petition.

Comments: _____

Signature of authorized association representative *John Pitkin*

Daytime telephone no. 491 8171

cc: Petitioner
CITY HALL, 795 MASSACHUSETTS AVENUE CAMBRIDGE, MASSACHUSETTS 02139



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D. Margaret Drury
City Clerk

Name of Neighborhood Association: Karen Larson - Inman Square Improvement Association

hereby _____ approve _____ disapprove of said driveway petition.

Comments: _____

Signature of authorized association representative _____

Daytime telephone no. _____

cc: Petitioner
CITY HALL, 795 MASSACHUSETTS AVENUE CAMBRIDGE, MASSACHUSETTS 02139



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D. Margaret Drury
City Clerk

Name of Neighborhood Association: John Pitkin - MidCambridge Neighborhood

hereby _____ approve _____ disapprove of said driveway petition.

Comments: _____

Signature of authorized association representative _____

Daytime telephone no. _____

cc: Petitioner
CITY HALL, 795 MASSACHUSETTS AVENUE CAMBRIDGE, MASSACHUSETTS 02139

REACH Project

The Cambridge Hospital, Macht 5
1493 Cambridge Street
Cambridge, MA 02139

MEMORANDUM

dated 17 April 1997

TO: City of Cambridge
Inspectional Services
Traffic and Parking
Public Works

FROM: Alan R. Burne, AIA
Gibane



RE: Description of Curb Cut Relating to the REACH Project at Cambridge Hospital

I attach this short explanation to the application for Driveway Cuts at The Cambridge Hospital as a part of the REACH renovation and expansion project. We are currently constructing its first phase - the relocation of various utilities along with certain interior and exterior renovations necessary to prepare the facility for the construction of its new parking garage and ambulatory addition.

The scope of this application, involves no increase in the number of curb openings on the Hospital site, and consists of:

- . the relocation, and widening from 14 to 20 feet each, of the existing curb cuts at the Cahill Building entrance driveway westerly along Cambridge Street to create the new ambulance (only) drive which will serve the renovated Emergency Department;
- . the reduction of the existing curb opening at the rear (Line Street side) of the Cahill Building to a new, and smaller, 40' opening;
- . and, the re-design of the existing loading dock curb opening (also Line Street) while not changing its width or location.

I have not included the prescribed abutters' forms with this application and request the acceptance of the so-called "check-point" report of the Mid-Cambridge Neighborhood Association's CAC as representing the approval of our planning efforts that have been mutually undertaken over the last several years. I also represent that we have worked with our Somerville neighbors concurrently, and have received their approval with this plan through the Mayor's Office and Somerville's Traffic and Parking Department.

If I can be of any further assistance, or provide any additional information, please call me at 498-1503. Thank you.

cc: Al Vellucci
Ken Downey

Doug Butler
Harm Brouwer

ccut497

March , 1997
MCNA135.WCC

CHECKPOINT REPORT
FOR
DESIGN DEVELOPMENT PHASE

THE CAMBRIDGE HOSPITAL
FACILITY MASTER PLAN PROJECT

PREPARED
by
THE COMMUNITY ADVISORY COMMITTEE

March, 1997
MCNA135.WCC

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1.0 INTRODUCTION

The Hospital and its design team Payette Associates have provided the Community Advisory Committee (CAC) with a Design Development Review submission dated 17 July 1996.

Checkpoint Reports issued by the CAC to date are as follows:

Masterplan Checkpoint Report dated July 21, 1994.

Checkpoint Report for Traffic and Parking dated March 17, 1994.

Checkpoint Report for Schematic Design Phase dated May 31, 1995.

This Current Checkpoint report builds on the past reports and documents the current state of the design and agreements with the Hospital on the Facility Master Plan Project and the Birth Center at 10 Camelia Avenue. It is intended that this is the final checkpoint report for the project. Future activities will be monitoring the completion of outstanding commitments, construction impact mitigation, and traffic and parking.

The design development was presented to the CAC over a period of time commencing with the redesign of the ambulatory care building starting in July 1995 through September 1996. Also in this time frame, the Birth Center at 10 Camelia Avenue was redesigned. The CAC did not perform any reviews of the Masterplan and Schematic Design phases of the redesign effort. The review was continued at the beginning of the Design Development phase.

Five significant events developed since the Checkpoint Report for Schematic Design was issued that required a major effort by all parties in order for progress to continue on the design of the Hospital expansion consistent with meeting the requirements of the MOU:

1. As a result of the competitive nature of the health care industry, the Hospital embarked on a restructuring that makes it a public commission. On July 31, 1996 the Legislature passed Chapter 147, H6004, An Act Establishing the Cambridge Public Health Commission. The Commission is the successor to the City of Cambridge Department of Health and Hospitals. The Cambridge Hospital Community Health Network, which is part of the new Commission, includes the Cambridge Hospital, Neville Manor Nursing Home, all neighborhood health centers, and the Cambridge Hospital Professional Services Corporation. In addition, the Somerville Hospital has merged with the Cambridge Hospital. This restructuring and reorganization does not affect the Hospital's obligations to comply with the Memorandum of Understanding and any other agreements associated with checkpoint reports, construction mitigation, traffic and parking, and meetings.

2. In July of 1995 the Hospital embarked on a major redesign of the ambulatory care building and the renovations to the existing Main, Cahill and Macht Buildings. The goal of

this redesign effort was to contain the cost of the project to about \$55,000,000, including offsite costs.

3. The Hospital redesigned the Birth Center at 10 Camelia Avenue during the early part of 1996 as a cost-saving measure. The new estimated cost is about \$920,000, exclusive of the purchase price for the house of \$400,000. Construction is planned to begin in early 1997. There have been two meetings between the CAC and the Hospital and one meeting between the Hospital and the Mid-Cambridge Neighborhood Conservation District Commission (MCNCDC) relating to the new design of the Birth Center.

4. The Construction Impact Subcommittee became very active beginning in June of 1996. Several new members were added and a new chairperson appointed. The committee has complete the Construction Mitigation Goals and Enforcement Procedures, and these have been approved by the CAC and dated September 12, 1996. This document is required by the MOU. The requirements have been incorporated into the construction bidding document as either specifications or general conditions. The Hospital will prepare a Construction Impact Mitigation Plan (CIMP) which will contain the General Conditions, Specifications, Site Utilization Plans, and the on-site Management Plan and Organization.

5. On September 9, 1996 the MCNCDC gave the Hospital approval of the design and location of the oxygen tank and the emergency diesels. This will allow the Hospital to proceed with the site preparation contracts. In addition, the MCNCDC approved the design of the Birth Center, which will allow the Hospital to obtain the building permits and begin construction after a contract is placed for the work. Project approval by the MCNCDC was given on December 5, 1996 with the after a review of the facade design, materials, colors, and addition architectural detail above the loading dock area. There is to be continued reiview of the final materials and color selection at the time these items are purchased.

2.0 EXECUTIVE SUMMARY

The Community Advisory Committee working with the Hospital and its design team Payette Associates, Inc. has since July 1993 defined the major issues affecting the Hospital interface with the neighborhood. The Memorandum of Understanding specifies the fourth point of review by the CAC as the Checkpoint Report for Design Development and defines the items to be covered by that review.

This Checkpoint Report for Design Development has continued to evolve from the Masterplan and Schematic Design checkpoint reports and has been expanded as required by events to date. The Table of Contents are identical to the Schematic Design report. Recommendations continue to be in **Bold Face**. Recommendations from the Schematic Design report that were not acted on by the Hospital are identified as prior agreements and are separated from any new recommendations. These prior agreements are also in **Bold Face**

The following are the general areas of agreement between the CAC and Hospital:

The Hospital will meet all zoning ordinances for the new addition and the Birth Center.

The massing of the Ambulatory Care Building, the height, exterior design, materials and colors.

The design and location of the new entrance to the Hospital on Camelia Avenue.

The entrance to the underground parking garage from Camelia Avenue.

The underground parking garage sized for 221 cars.

Hospital-owned houses on Camelia Avenue will be maintained to preserve their exterior residential character.

Camelia Avenue will be landscaped in the style of a residential street.

The house at 10 Camelia Avenue will be converted to a Birth Center operated by the Cambridge Midwives. The size of the addition and exterior treatment have been agreed to by the CAC with the exception of the exterior color.

The emergency ambulance entrance will be located on Cambridge Street at the site of the existing front entrance.

The loading dock will remain in its current location with improvements to hold three receiving bays and one waste bay. "City-sized trucks" will serve the loading dock, thus eliminating the larger tractor-trailer vehicles, except infrequent instances when tractor trailer trucks are necessary.

The oxygen tank will be moved away from the homes on Line Street. The new location is at the east end of Cahill House.

The design of the fence along Line Street including the extent and height.

The design for landscaping the overall site.

The outstanding issues as of January 1997 are the design of site signage and lighting, the noise assessment for the ambulatory care building, and the noise recommendations to be included in the construction documents.

The CAC adopted Interim Design Criteria dated January 18, 1994, and the Hospital is acting to carry out these criteria.

Initial site preparation and demolition work began in December 1996.

3.0 MEMORANDUM OF UNDERSTANDING

The Memorandum of Understanding, dated May 14, 1993, and signed by the City Manager, CEO of the Hospital, and the President of the Mid-Cambridge Neighborhood Association, is the basis for this checkpoint report and defines the topics to be covered. The content of the Schematic Design Checkpoint is described on page 18 of that document and is as follows:

- Overall Massing and New Design of the Addition
- Landscaping and Perimeter Improvements
- Building Materials
- Traffic and Parking Impacts
- Materials Management
- Various Environmental Impacts

Over time issues have developed within the above general topics; the most significant are:

- Architectural treatment of the building, materials of construction, and color
- Design of the Camelia Avenue entrance and the underground garage
- Design of the emergency ambulance entrance on Cambridge Street
- Design of the loading dock on Line Street
- Relocation of the oxygen tank, and the truck access for unloading oxygen
- Landscape design for the overall site and the design of fences along Line Street.
- Site signage and lighting
- Design of the Birth Center at 10 Camelia Avenue
- Control of noise from the Birth Center and the ambulatory care building

The MOU provides the basis for the establishment of the Design Development checkpoint review by the Design Review Subcommittee and Community Advisory Committee as follows:

c. CAC Summary Reports - At certain checkpoints identified below, the CAC will issue certain summary reports (hereinafter "Summary Reports") which will have the same full force as this Agreement and which will be binding on the parties. Summary Reports will consist of a summary of decisions or agreements reached which affect the design, construction, and operation of the Project. Formal CAC approval of Summary Reports will be required and will consist of, together with any other formal action by CAC, the approval of both co-chairs plus the majority vote approval of the remaining CAC members. CAC chairpersons will be responsible for transmitting approved Summary Reports to all parties to this Agreement and for providing a written statement to the effect that such reports have received CAC approval and are being transmitted to the parties.

8.2 Checkpoints for Design and Construction Review

5) Completion of Design Development - Prior to its acceptance of a final design, the Hospital will make a full and detailed report to the CAC describing how, and to what extent, each recommendation from prior Checkpoints has been incorporated into the Project design. The Hospital agrees to accept a final design only after the Design Team has fully considered and reasonably incorporated recommendations arising from this and all prior Checkpoints. The CAC will review the final design and may issue a report if any new or unmet criteria still need incorporation into the final design.

4.0 DISCUSSION OF MOU TOPICS

4.1 OVERALL MASSING AND DESIGN OF THE NEW BUILDING

4.11 Camelia Avenue Entrance

Under the proposed new design, the Hospital's main entrances would be on Camelia Avenue for pedestrian and vehicular traffic. The Main Building entrance on Cambridge Street will be closed to walk-in traffic and will be designed as an emergency ambulance entrance. The Cahill House vehicular entrance on Cambridge Street will be eliminated. This design is shown on the Composite Site Plan dated 8 September 1996 (Appendix A).

The new design also includes an entrance to the 221 car underground parking garage on Camelia Avenue. This is a reduction of 19 spaces from the Schematic Design phase and is consistent with the downsizing of the ambulatory care building.

The community concern about the headlight glare and the visual impact to the abutters on Cambridge Street has been addressed in the Schematic Design. The layout is shown on the Composite Site Plan (Appendix A). The garage will be entered from the end of Camelia Avenue via a curved ramp to cut off headlight glare on adjacent properties.

The design of the Camelia Avenue entrance has changed since the Schematic Design Phase. The new design was review and approved by the Design Review Subcommittee and the CAC. This design is shown on the figures in Appendix B

4.12 Massing and Floor Area Ratio

The presentation by the Hospital and the Design Team at public meetings in July and August 1995 provided information on the new design for the Ambulatory Care Building. The building has been significantly reduced in size and height. The set-back along Line Street has been increased. The proposed window wells along Line Street have been eliminated. The large mechanical room on the roof has been eliminated and the mechanical equipment has been moved behind the existing Main Building. There has been about a 25

percent reduction in the Floor Area Ratio. With these significant changes, the massing of the building is more in keeping with a residential neighborhood and meets the intent of the MOU in this regard. Both the Design Review Subcommittee and the CAC finds the massing of the new design acceptable.

The current Floor Area Ratio calculations are in Appendix C, Project FAR Area Calculations dated October 23, 1996 and for the Birth Center, Comparison of Original Design and Redesign dated August 26, 1996.

The current proposed Floor Area Ratio (FAR) of 1.75 meets City of Cambridge zoning ordinances. The site now includes the original hospital site, 8 and 10 Camelia Avenue, and the portion of Camelia Avenue in front of these two houses. The gross floor area for the site is 322,266 square feet. All but 15,936 square feet of the gross floor area ratio is being used. This remaining amount is not available for future construction based on the terms of the Amendment to the Memorandum of Understanding dated March 30, 1995.

Modifications to 10 Camelia Avenue for access/egress and other internal alterations will increase the gross floor area by 1360 square feet for a total of 4,225 square feet. The current estimates for the Ambulatory Care Facility and additions to the Main Building are 66,897 gross square feet.

The Hospital has stated that the Ambulatory Care Building, additions to the Main Building, and the Birth Center will meet all current zoning requirements.

The Hospital will prepare, at each design phase, an update of the floor area ratio calculations.

There are no outstanding issues regarding the massing and floor area ratio for the project.

4.13 Emergency Ambulance Entrance

VHB performed additional intersection studies and reported the results in a letter dated October 5, 1996. A portion of these studies addressed the location of the MBTA bus stop on Cambridge Street in front of the Hospital. The VHB recommendation was to locate the bus stop on the east side of the Highland Avenue traffic light. The CAC agrees with this recommendation.

The design of the emergency ambulance entrance and the bus stop is shown in on the figures in Appendix D. The CAC agrees with this design.

In the Schematic Design Report the Hospital agreed to the following CAC recommendations for Section 4.13.

The Hospital will prepare design information that describes signage and an operational plan that help in preventing regular automobile traffic from using the emergency entrance on Cambridge Street.

The Hospital will prepare drawings for the total approach to signs around the Hospital that address the concerns about visual impacts.

The Hospital will convene a panel of EMT drivers and ER staff to meet with the Design Review Subcommittee to review and comment on the plan before the design continues beyond the Design Development Phase.

4.14 Zoning Issues

The Hospital will meet all zoning ordinances for the new addition and the Birth Center.

The Hospital stated in a letter dated February 5, 1995 that zoning required a total of 294 onsite parking spaces. The CAC believes that this analysis did not include 8 and 10 Camelia Avenue.

The CAC is concerned that a large portion of the buildings on the site are more orientated towards ambulatory care (clinics) than the traditional bedded in patient facility and the zoning based estimate of parking requirements should address this issue.

In the Schematic Design Report the Hospital agreed to the following CAC recommendations Section 4.14:

The Hospital will revise the zoning analysis for parking needs to include the 8 and 10 Camelia Avenue buildings and show the basis for the number of parking spaces required for each building.

The Hospital will show the applicability of Section 6.31.3 of the zoning ordinance.

The Hospital will also show its interpretation of Section 6.36.3.d.1 wording of "or facility." Does this include office space?

4.15 Line Street

In the Design Development phase the exterior design of the Ambulatory Care Building has been completely developed. The height of the building is about 30 feet and the set back from the property line is 41'-6". The elevation of the building along Line Street is shown in Appendix E. The CAC agrees with the exterior design of Ambulatory Care Building including the window arrangements and materials of construction. The CAC also agrees with the design and height of fences along Line Street. The fence design is shown in Appendix E, I.6.2, Site Details

The question of color of the materials of construction along Line Street and for the total building has been resolved through a series of meetings with the Mid-Cambridge Neighborhood Conservation District Commission. The CAC expects to be advised and to participate in the later mockups that will be used to select the final colors for materials.

The Hospital agrees that all existing agreements with Line Street neighbors concerning access to the Hospital grounds and buildings from Line Street will remain in effect as long as desired by the Line Street residents.

The second cluster of issues that relate to Line Street is listed in the Interim Master List of Design Criteria under the Perimeter Group. Items 18, 19, and 22 refer to the way in which the expansion project will improve the Line Street edge of the Hospital campus.

1. Item 18. Limit Tree Removal in Coordination with Landscaping Plan.
The landscaping master plan indicates the planned degree of tree removal and this has been agreed to by the CAC.
2. Item 19. Provide Visual and Acoustic Buffers for Abutters to Parking.
The Line Street parking lot will be screened with planting material. No acoustic buffers are planned. This has been agreed to by the CAC.
3. Item 22. Create a Front Yard Along Line Street.
The fencing and landscaping plan resolve this design criteria.

A prior design concern is the effect of wind on the Line Street houses opposite the new Ambulatory Care building. The new design no longer has the large mechanical enclosure on the roof, and therefore the concern has been eliminated.

There are no outstanding issues regarding the Line Street visual or landscaping design.

4.16 Birth Center

In the Checkpoint Report for the Schematic Design Phase, the Hospital was proceeding with the design of the Birth Center which will be located in 10 Camelia Avenue. An initial approval of the design was obtained from the Mid-Cambridge Neighborhood Conservation District Commission. The Hospital obtained bids for the project which were well above the estimate of \$1,100,000. The Hospital proceeded to redesign the Birth Center in order to reduce the costs.

The original design of the Birth Center had an Floor Area Ratio (FAR) of 4,684 gross square feet (GSF). The new design has a FAR of 4,225 GSF. The major portion of this reduction is the elimination of the use of the basement for clinical space. The basement will now be used for mechanical equipment and storage. Another significant change is the elimination of the porches on the rear of the house, an architectural feature not well

received by the CAC and the Leonard Street neighbors.

The current design of the Birth Center is shown in Appendix F, Site Plan, Floor Plans, and Elevations

The Masterplan Checkpoint Report and the Amendment to the MOU contain the following criteria for 10 Camelia Avenue.

Masterplan Checkpoint Report

"Hospital-owned houses on Camelia Avenue will be maintained so as to preserve their exterior residential character."

"Camelia Avenue will be landscaped in the style of a residential street."

Amendment to the MOU (Future Growth Agreement)

"4.7 Preserve the residential buildings located at 8 and 10 Camelia Avenue, which are owned by the Hospital, by not significantly altering the exterior of these buildings, with the exception of the least intrusive alterations that are practicable given the requirements of applicable laws such as The American with Disabilities Act, and any reconstruction resulting from a fire or other casualty."

The CAC has reviewed the design prepared to date. The CAC believes that in a broad sense the design of the Birth Center complies with the intent of the above agreements.

The Hospital has said that the Birth Center meets all requirements of zoning ordinances.

The CAC and the Leonard Street residents developed the following list of issues which have been addressed by the Hospital as follows:

There was an extensive prior discussion about the location of the main entrance to the house. Reducing noise to the abutting neighbors is the major concern for this design feature. The new design has the main entrance located at the front of the house. This issue is resolved.

The final color of the house has not been decided by the design team. Historical patterns suggest the use of dark colors. The color of 10 Camelia Avenue should be developed with 8 Camelia Avenue for an overall approach to the street. In 1996, 6 Camelia Avenue was painted and this current color scheme should be considered in the exterior color schemes of 8 and 10 Camelia Avenue.

The new side location of the HVAC equipment was discussed, and the design team will develop specific noise criteria for the equipment which will be included in the purchase

specifications for the equipment.

Acentech Incorporated did an ambient noise survey at five locations around the site. The results of the survey are reported in a letter to Ms. Suzy Kennedy of Warner + Associates, Inc. from Frank N. Iacovino dated May 17, 1995.

Acentech presented an analysis of the noise and vibration for the new design, and their recommendations are documented in Appendix G, Acentech letter to Thomas Hess from Douglas H. Sturz dated 21 August, 1996

A presentation was made on the results of the noise assessment, and this assessment was in terms of known sound levels.

The Hospital agrees to measure, assess, and fix any noise from the heating and ventilation system that exceed design limits and is brought to their attention by the neighbors.

The lighting of the house and parking lot will be designed not to affect the neighbors.

The treatment of windows for exterior noise control and shine will consist of special storm windows and interior shades.

At the March 20, 1996 meeting of the MCNCDC, the commission approved the use and massing of 10 Camelia Avenue as a Birth Center based on the initial design. On September 9, 1996 the MCNCDC gave initial approval of the new design.

The CAC does not object to the use of 10 Camelia Avenue as a Birth Center. The CAC is supportive of the Leonard Avenue neighbors' positions on the above issues.

In the Schematic Design Report the Hospital agreed to the following CAC recommendations Section 4.16:

The Hospital will carry out all of the noise reduction measures described in Appendix C which are the current Acentech recommendation for noise reduction.

The Hospital will develop a color scheme for the house along with 8 Camelia Avenue that is a street scheme concept.

The Hospital will specify a maximum noise rated for the air cooled condensing units on the south side of the house. The noise rating for the compressors should not be greater than 74 dbA for each unit.

The CAC recommends the following for Section 4.16

Use the current recommendations in Appendix G for noise and vibration.

4.2 LANDSCAPING AND PERIMETER IMPROVEMENTS

At the meeting on September 30, 1996 there was a detailed review of the landscaping plan for the site. This meeting was well attended by the Design Review Committee and the Community Advisory Committee. The design was described on drawings L.2.1 through L.2.4. This design was considered responsive to many prior comments concerning the approach to the street scape on Cambridge, Line and Camelia Avenue. The design also indicated the screening for the Line Street parking lot.

Most of the comments from the community were related to selection of species and the appearance that the site was overplanted.

The MOU and the CAC Design Criteria require that an adequate budget be available for landscaping and perimeter improvements. The Hospital estimates that the current day cost of landscaping will be about \$205,000. The Hospital commits to funding the design of landscaping based on the agreed design; the design will not be revised as a means of reducing costs.

In the event that the area designated for snow storage is not accessible or adequate, the Hospital will contract with the City for removal of snow from the site as a means of limiting impacts on the abutters.

At the conclusion of the meeting there was agreement on the site landscaping,

This perimeter should then be maintained under the direction of the Perimeter Oversight Committee.

The CAC recommends the following for Section 4.2

The Hospital will prepare a snow removal plan and present this to the CAC for review. The plan shall describe the methods of removal and on-site storage or removal from the site. The areas to be included in the plan shall include the following;

Camelia Avenue

The ambulance entrance on Cambridge Street

The loading dock area on Line Street

Access to the oxygen tank and the parking area behind Cahill in Line Street

4.3 BUILDING MATERIALS

During Design Development, the initial design presented by the design team was based on the use of curtain wall and masonry. The masonry was proposed to be jumbo block and a cool gray color. In addition, the wall along Line Street was flat and had large expanses of windows. The CAC

requested that the design team evaluate a warmer color scheme, add detail to the Line Street elevation, and evaluate the sizes of the windows. The design team performed the window study and returned with a much improved design which was agreed to by the CAC. The brick size was reduced to standard height brick. A new color was proposed which was warmer than the prior cool gray jumbo brick.

The CAC was unable to agree on colors of materials. The focus was on the color of the brick, and views ranged from duplicating the Macht Center brick of basic red to acceptance of the colors proposed by the Hospital. It was decided that since consensus could not be obtained, the CAC would participate in the MCNCDC meetings and accept the results of that review.

At the MCNCDC meetings, the CAC stated that they did not want the color scheme to make an architectural statement, that the colors should blend with the residential neighborhood. There was concern about the colors proposed for the infill on Cambridge Street since there was no visual connection with the Ambulatory Care Building.

The Design Team indicated that the modification to the Main Building facade on the first floor for the new ambulance entrances would incorporate colors that related the infill at higher elevations. This was accepted by the MCNCDC.

The Hospital did propose a color scheme for all materials and this was approved by the MCNCDC with the stipulation that final selection based on a mockup would involve both the participation of the CAC and the MCNCDC. This approach is acceptable to the CAC.

The CAC recommends the following for Section 4.3

The Hospital will provide the CAC with a letter describing the basic color schemes and color drawings of these schemes as presented to the MCNCDC

4.4 TRAFFIC AND PARKING IMPACTS

The CAC issued the Checkpoint Report for Traffic and Parking dated March 17, 1995. This report contains some 66 recommendations on traffic and parking. The following is part of the Executive Summary that states the concepts and goals for reducing traffic and parking impacts.

The Hospital will at a minimum provides an on-site supply of parking spaces to meet the needs of patients, visitors, physicians, certain other classes of employee, and members of car pools.

It is the goal of the Hospital to provide a combination of on-site and off-site parking that meets all of its demands so that the neighborhood street supply can be free of demand from Hospital operations.

The Hospital will start programs for reducing traffic to the Hospital and improving intersections in the area around the hospital.

The Hospital has agreed to provide a 221-car underground garage as part of its on-site parking supply. In addition the intersections of Camelia Avenue, and Highland and Cambridge Street will be designed to be operated by an integrated set of traffic signals.

The monitoring of off-site traffic and parking activities will be monitored by the Hospital Parking Management District Committee.

The Hospital has prepared a Progress Report on Traffic and Parking Improvements that will over time address all of the recommendations in the traffic and parking checkpoint report. The progress, status and completion of the recommendations are reviewed quarterly by the HPMD Committee. To date about 20 of the recommendations have been completed by the Hospital and approved by the HPMD Committee.

4.5 MATERIALS MANAGEMENT

Materials management discussions at this phase are limited to the activities and information that impact the design of the loading dock. A preliminary study (90%) Materials Management/ Handling and Vertical Transportation Planning Review dated March 28, 1994 by Lerch Bates Hospital Group, Inc. has been provided to the CAC by the Hospital. Section Two of this report applies specifically to the design of the loading dock.

A review of this report was done and comments transmitted to the Hospital by letter dated May 25, 1994. The review addressed the issues of the survey of truck traffic at the dock, sizing of the dock and comments on the calculations relating to the dock design.

The Hospital did an additional study of loading dock deliveries, and this information is reported in a memorandum from G.P. Mickle to J.J. Devaney dated July 21, 1995. This new study provides a better sample of the deliveries at the current loading dock during five days. Deliveries perday average 11, less than 2 deliveries per hour.

Revised calculations were submitted by Lerch Bates Hospital Group, Inc. in a letter from Barbara English-Turos to Barry Shiel dated June 1, 1994. The new calculations are based on a worst case scenario of an arrival rate of five trucks per hour and did not consider the survey data. Lerch Bates did not draw conclusions from the calculations other than to show "proper management and scheduling of personnel for the receiving functions are vital for the smooth and expeditious movement of incoming trucks to alleviate truck queuing." No conclusion was stated that showed that the number of docks is adequate.

4.51 Loading Dock on Line Street

The Schematic Design data, page 1C-5, says "zoning requires a minimum of four dock bays for the Hospital."

The proposed loading dock consists of four bays: three for delivery and shipping and one for waste shipping. The waste dock will be dual purpose and will handle the dumpster and the other waste shipping requirements. The dumpster will be inside the dock area and not exposed to the environment. The design of the loading dock is shown in Appendix H, Loading Dock, July 1996.

One bay will be designed for tractor trailers to allow delivery of new equipment or shipping of equipment for removal or repair.

The design includes overhead doors that will be closed when the dock is not in operation.

Each dock will have a drain inside the door for cleaning. An off-site bulk handling and storage facility will be provided that will reduce truck size and space requirements at the Hospital.

Truck size will be limited to a maximum size of 38 feet long city-size trucks, except for infrequent deliveries requiring semi-trailers.

A pull-off lane is proposed to be constructed parallel to Line Street to allow trucks to pull off the street and back into the dock bays without blocking Line Street traffic.

The Hospital will provide a loading dock manager at a work post with visual contact of the loading dock and Line Street.

The Hospital will limit loading dock hours of operation to specific times of the day. Time limits of 8:00 a.m. through 4:00 p.m. are proposed.

The Hospital will design the loading dock doors for quiet operation.

The Hospital will landscape and screen the loading dock area to minimize visual impacts.

The CAC agrees with the design of the loading dock and the access/egress of the area. This design should eliminate many of the current problems that are experienced by the existing facility.

4.52 Oxygen Tank

The oxygen tank will be increased in size from 1,500 gallons to 3,000 gallons. The proposed tank will be horizontally mounted to reduce visual impact. The oxygen tank will be moved to the east end of Cahill House. Delivery truck access to the tank will be from

the parking area behind Cahill House. The new location places the oxygen tank away from neighbors on Line Street, and screening is provided to shield it from Cambridge Street. The design of the oxygen tank is shown in Appendix H, A.1, Composite Site Plan.

The CAC agrees with the design location and screening of the oxygen tank.

In the Schematic Design Report the Hospital agreed to the following CAC recommendations Section 4.5:

The Hospital will develop a plan for operation of the loading dock to insure that it is operated as designed for minimum impact on the residential neighborhood.

The Hospital will review the City of Cambridge noise ordinances to decide if these set limits on hours of operations for the loading dock.

4.6 VARIOUS ENVIRONMENTAL IMPACTS

The Schematic Design data contains very little new information related to environmental impacts beyond that provided in the Payette Associates letter dated 15 March, 1994 for the Masterplan phase. That letter summarized the environmental impacts of the Hospital project about air and noise pollution. This summary is limited and not quantified at this time due to the early phase of the project.

The issue of air pollution due to increased automobile traffic in the vicinity of the hospital was analyzed by in the Vanasse Hangen Brustlin, Inc (VHB) Traffic and Parking Study. It was summarized in the CAC Checkpoint Report for Traffic and Parking dated March 17, 1995. VHB projects that CO levels will decline due to future regulatory mandated improvements in automobile emission systems and more rigorous auto inspections. The conclusion is that the Hospital project does not appear to increase public health risks due to traffic emissions. This topic is completed and considered closed.

The Schematic Design data, page 1A-1, states that exhaust discharge from the garage will be taken mechanically to the roof. No other details are provided in this phase. The CAC is concerned that this roof level discharge of the exhaust from the garage will downwash due to wind passing over the roof. The design needs to address this concern.

The Hospital has stated the existing boilers are adequate for the new addition, and the increased use will result in increased releases to the environment.

Control of noise from the mechanical systems will be part of the design of these systems. The Hospital will use a consultant to recommend desirable noise limits below legally required levels. The Schematic Design data, page 1A-1, does not acknowledge this goal and only states that "Acoustical control of mechanical systems will comply with code requirements."

The CAC recommends the following for Section 4.6

The Hospital will estimate the volume of air and CO concentrations at the point of discharge of the garage ventilation system. The discharge will meet the Clean Air Act or other regulatory requirements.

The Hospital will describe the location of the discharge, the projected noise level for the garage ventilation system, the methods that will be used to reduce noise from this discharge, and projected day and nighttime noise levels.

The Hospital will estimate the expected maximum composition of the discharge from the existing boilers and demonstrate that the boilers comply with the Clean Air Act.

The noise consultant will propose goals that the mechanical systems will meet which are below the legally established limits. The noise consultant will recommend equipment requirements for noise limits that will be used in the specifications for the equipment.

The Hospital will have a noise consultant define a program for performance and acceptance measurements of the completed mechanical systems.

5.0 FUTURE GROWTH OF HOSPITAL ON THE CAMBRIDGE STREET CAMPUS

The growth agreement is an amendment to the Memorandum of Understanding with Exhibits A through F and was executed on March 30, 1995. The amendment increases the site size to include 8 and 10 Camelia Avenue and the discontinuance of a portion of Camelia Avenue as public way. It also defines the term of the agreement at 50 years. Exhibit B is the Planning Statement that contains the details of the agreement and covers the size of the project, design requirements, strategic planning, plans to preserve the residential character of the neighborhood, and the restrictive covenants.

This enforceable agreement between the MCNA, Hospital, and City provides significant protection to the neighborhood against future growth by the Hospital in Mid-Cambridge. Neighbors on Leonard Avenue sponsored a zoning petition approved by City Council in March, 1995. The zoning petition changed the houses on the north side of Cambridge Street between Camelia Avenue and the Youville Hospital and 6 Camelia Avenue from C-2 to C-1. These combined activities provide a significant basis for the preservation of the residential character of the neighborhood around the Hospital.

A deed covenant was executed on March 18 1996, which describes the limitations on the use of the site as indicated in the amendment to the Memorandum of Understanding. The covenant is attached as Appendix I.

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Checked By _____

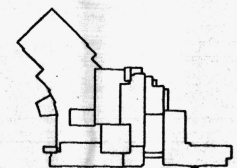
Approved By _____



*REACH
PROJECT*

THE CAMBRIDGE HOSPITAL
CAMBRIDGE, MASSACHUSETTS

Key Plan



Number	Date	Description
Revisions		

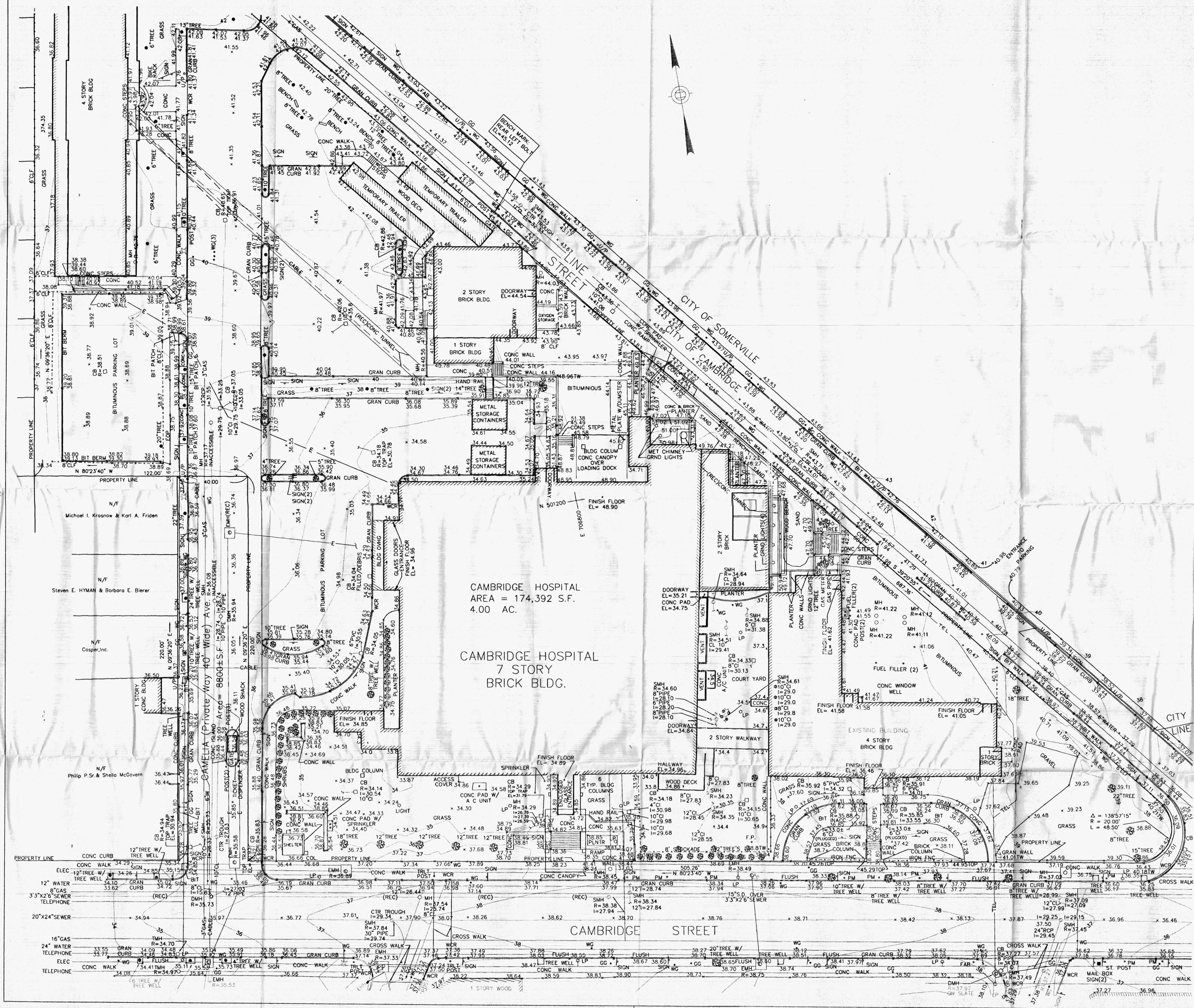
DESIGN DEVELOPMENT
NOT FOR CONSTRUCTION

EXISTING CONDITIONS

Drawing Scale
1" = 20'

Project Number	25400.0
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C-0



**PAYETTE
ASSOCIATES
ARCHITECTS
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Warner + Associates, Inc.
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ASSOCIATED ARCHITECT
Warner + Associates, Inc.
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STRUCTURAL ENGINEER
Zakosian Associates
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**PLUMBING, MECHANICAL &
ELECTRICAL ENGINEERS**
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Sullivan Partnership
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Brighton, Massachusetts 02135
Telephone 617 254-0016

LANDSCAPE ARCHITECTS
Carol R. Johnson Assoc., Inc.
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CIVIL ENGINEER
Bryant Associates
77 North Washington Street
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GEOTECHNICAL ENGINEER
Haley & Aldrich
58 Charles Street
Cambridge, Massachusetts 02141
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COMMUNICATIONS ENGINEER
Pyramid Design
125 Jeffrey Avenue
Holliston, Massachusetts 01746
Telephone 508 429-7500

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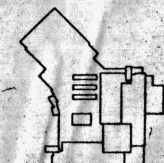
Approved By:



**REACH
PROJECT**

**THE CAMBRIDGE HOSPITAL
CAMBRIDGE, MASSACHUSETTS**

Key Plan



Number	Date	Description
Revisions		

**CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION
FOR PERMIT ONLY**
COMPOSITE
SITE PLAN
CURB CUT LAYOUT

Drawing Scale

1" = 20'

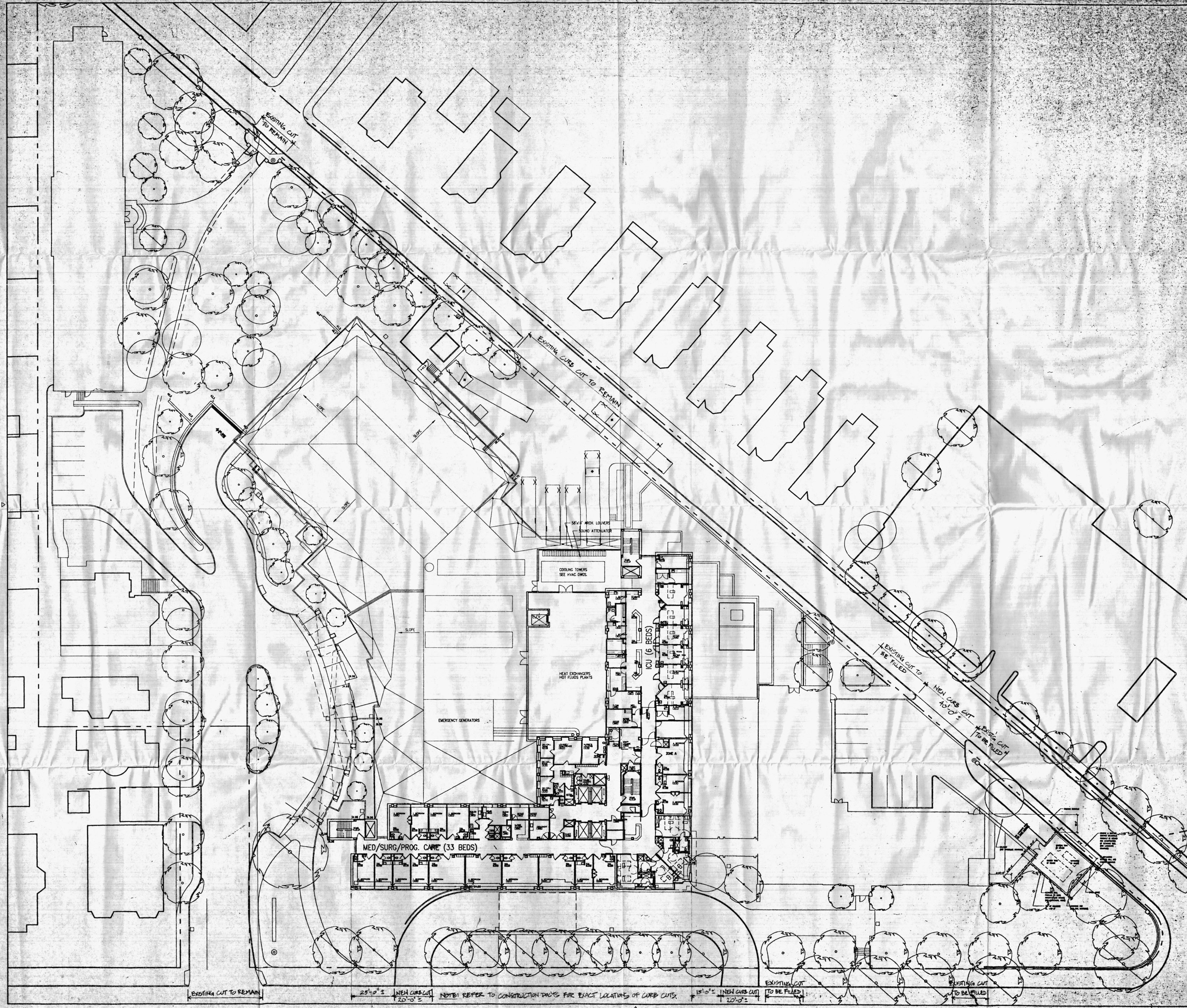
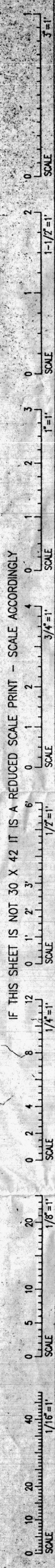
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25400.0

Date Issued

24 OCT. 1998

IF THIS SHEET IS NOT 30 X 42 IT IS A REDUCED SCALE PRINT - SCALE ACCORDINGLY



NOTE: REFER TO CONSTRUCTION DOCUMENTS FOR EXACT LOCATIONS OF CURB CUTS.

15'-0" ± NEW CURB CUT TO BE FILLED

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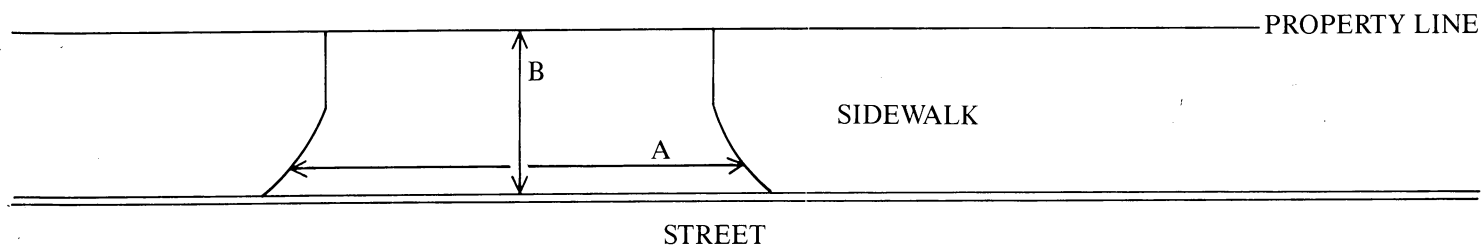
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DRAWING 2:

SKETCH OF PROPOSED DRIVEWAY WITH COST ESTIMATE

CITY OF CAMBRIDGE



A = _____ FT. ÷ 3 = _____ YARDS

B = _____ FT. ÷ 3 = _____ YARDS

A × B = _____ SQUARE YARDS

COST ESTIMATE:

BRICK: _____ SQUARE YARDS × \$70/SQUARE YARD = \$ _____

BRICK ON CONCRETE: _____ SQUARE YARDS × \$85/SQUARE YARD = \$ _____

CONCRETE: _____ SQUARE YARDS × \$40/SQUARE YARD = \$ _____

ASPHALT: _____ SQUARE FEET × 1 TON/40 SQUARE FEET × \$125/TON = \$ _____

[fee waived]

DEPARTMENT OF PUBLIC WORKS SCHEDULED DATE FOR CONSTRUCTION:

/ /

DEPARTMENT OF PUBLIC WORKS STATED FEE: \$ _____

The undersigned agrees to pay the stated fee for the driveway installation in full within two (2) weeks of the estimated starting date of construction before the Department of Public Works shall proceed with construction:

Owner's signature:

The Cambridge Hospital

Date: 4.17.97

Address:

1493 Cambridge St. *Chilham Building Co / program manager.*

Funds Received: \$ _____

Check Number: _____

APPLICATION FOR DRIVEWAY CUTS AND OPENINGS

CITY OF CAMBRIDGE

PART II: INSPECTIONAL SERVICES DEPARTMENT



Application approved



Application denied

Reason:

Signature:

Date: 5/30/97

Title:

ZONING

PART III: TRAFFIC AND PARKING DEPARTMENT



Application approved



Application denied

Reason:

Signature:

Date: 6.13.97

Title:

DEPT. TRAFFIC DIR.

PART IV: HISTORICAL COMMISSION



Application approved



Application denied

Reason:

Signature:

Date: 6.16.97

Title:

EXD CHC

PART V: PUBLIC WORKS DEPARTMENT



Application approved



Application denied

Reason:

Signature:

Date: 6/24/97

Title:

City Engineer

Consent Communications #55 *At-153*

An application has been received from Alan Burne for the Cambridge Hospital requesting a curb cut at the premises numbered 1493 Cambridge Street.

In City Council August 4, 1997

ORDER ADOPTED