DEVELOPMENT REVIEW COMMITTEE

Minutes of the Meeting of January 21, 2020

Members	<u>Present</u>	
	Larry McEwen, Co-chair	✓ _Amanda Yoder, Business Assn.
	John Landis, Co-Chair	TT&P
✓	Brad Flamm LUPZC	
	Brad Wells, LUPZC	✓ Jan Albaum, Streetscape Committee
✓	Patricia Cove, HDAC	Joyce Lenhardt, VP Physical
		✓ Laura Lucas, CHCA President

Others Attending

Ralph Hirshorn, owner 9509 Wheelpump Steve Bonitatibus, architect 9509 Wheelpump Cathy Brzozowski, Marketing Hospital Neil Sklaroff, attorney for the hospital Chris Heinly, representative L & H Sign Company Many neighbors of the Hospital Celeste Hardester, Development Review Facilitator Melissa Nash, recorder

The meeting was opened by Larry McEwen, co-chair, at 7:00pm with a brief overview of the process. 10 West Gravers, which was on the agenda, would not be seen at this meeting. The project will be reviewed at the February LUPZC meeting.

9509 Wheelpump Garage

- •Presentation: The architect, Steve Bonitatibus, presented the proposed detached 2 car garage. The project was refused due to steep slope interruption. The house fronts on Wheelpump and backs onto Stenton. The garage and driveway are on Stenton. The garage will cut into a small piece of an existing bank. It will be built on an existing parking pad and will use the existing driveway. It is a modest structure that, except for the slope, would not require a variance. The house was built in 1943 and is neo-Colonial. Materials will match those used on the house. There may be a reduction in impervious area. The ZBA hearing is schedules for May.
- •Committee Comments and Recommendations: The project should be seen by the LUPZC and the HDAC. These two committees will met together in February. A request was made for material samples and more photos of the existing conditions. A rendering of the house and garage was also requested.

8835 Germantown Avenue Chestnut Hill Hospital

•Presentation: Cathy Brzozowski, marketing director of the hospital, stated that the hospital wants to engage with the community and the hospital was not aware of this signage plan until seeing it announced in the *Local*. Tower Health developed this plan. The main purpose of the signage package is to ensure the safety of the people who use the hospital. She introduced Neil Sklaroff, attorney for the hospital and Chris Heinly of the sign design company continued the presentation. N

Sklaroff announced that they will seek a continuance for the scheduled ZBA hearing. Info packets were distributed. The proposed signs need a variance due to size and number. Interior signs are not regulated. On Germantown Avenue, signs for entrances to hospital and parking and the emergency entrance are desired as are two signs for the main entrance. N Sklaroff noted that two additional signs that are considered to be interior signs will be included as signs that need approval, if it is desired. A neighbor asked about the refusal, which includes 12 new signs plus 26 signs that need to be legalized. There are also 32 other signs. Joyce Lenhardt noted that 45 sq ft is allowed; 443 sq ft is noted on the refusal. N Sklaroff noted that this was probably a mistake. He also referred to the Philadelphia code 903 2.2E. L McEwen suggested that the project be returned to L&I to correct the calculations. The hospital stated that without the signage, the hospital would be unsafe. Chris Heinly stated the sign package needs to be modernized. Currently, people cannot find the hospital due to signs. The street signs are too close to the street. The signage package in general, matches the two main street signs. It is required that Emergency signs be illuminated. The Tower logos on signs will also be illuminated. It was suggested that Chestnut Hill residents could visit other Tower Hospitals to see the signs in action as they have similar sign packages. A neighbor asked if the logo needed to be illuminated. It was also suggested that the signs are attached to the ground on a solid base not on legs. The hospital noted that those signs are currently in the right of way. The new locations are 12' further into the site and should allow for better line of sight. The hospital also suggested that the community could google Tower Health for a list of other hospitals. It is also important that the sign lights are dimmable.

•Sign Overview: The main entrance and Emergency entrance signs are similar. Emergency needs to be lighted and visible. Canopy entrance signs include one on the area where the current signband is located. The current sign is not illuminated. The proposed sign band will be. The dimensions are noted as 21" x 60'. In addition there would be an illuminated wall sign on the tower, 9'-6" x 12'-0". At the entrance to the parking garage, there will be a letter sign with a large parking symbol. The dimensions would be 15' x 21.8'. (There are obvious discrepancies in the dimensions as shown in the packet.)

•Committee Comments: L McEwen questioned the lighting levels. It was noted that the lights are dimmable. The mass of the signs is too much. This is a residential area. It is too bright. The function of the signs was questioned – way finding vs branding. Jan Albaum suggested existing Tower signs need to be shown on a screen. Amanda Yoder asked where Penn Radiology went as it is not shown on the new signs. B Flamm noted that the light will impact those across the street. The levels need to be measured. C Heinly noted that only the letters are illuminated. It was noted that there is already a lot of light; what would the change be. L McEwen stated the number of lighted signs detracts from the necessary signs. Patricia Cove stated that Chestnut hill is a National Historic District that has guidelines to maintain its character. Three organizations support the community guidelines. Nothing in the presentation relates to or even alludes to the guidelines. There are many important historic buildings in this area. The hospital does not maintain the Norwood Avenue frontage and open space as promised. The existing signage was approved. This plan should address Norwood Avenue and the open space. J Lenhardt suggested ground lighted signs rather than internally lighted signs.

•Community Comments: A neighbor expressed concern with the sign band over the main entrance. Another expressed concern that landscaping promised in the past was not done or was poorly

maintained. It was argued that parking is not hard to find. Neighbors noted that the closed bottoms of the signs created places for lurking. Chris Linn noted that the logo sign on the tower was just branding. Lori Salgannicoff of the Historic District stated that this thriving hospital needs a guiding plan to bring all of this together as a part of the community. Another neighbor noted that this plan was not well thought out. It should have been taken to the community first. The brand can be easily seen on the Internet. A Yoder, who does not live in Chestnut Hill, noted that she had to take an employee to the hospital and found it difficult to find where she needed to be (10 years ago). A neighbor asked about illumination of the Women's Center sign. It is the same size and lighting as the office building (9'x5'). Another neighbor asked about the standardization of the sign. They are corporate standards. The same neighbor asked about the engineering behind the sizing of the signs. It was noted that the signage is not just for re-branding. It is also technical reasons. A neighbor noted that is important for pedestrians to see below signs. Signs going all the way to the ground are a problem. Other neighbor comments reiterated that there are other ways to direct people than this scheme, this seems over-branded. A neighbor commented that the HVAC equipment for the Emergency Room is excessively loud; sound-proofing was promised as was landscaping. The ER entrance is also being used as an exit is not supposed to be. The hospital has no credibility. A neighbor noted signs for entrances are acceptable but the tower sign is not. Another noted getting lost getting to the hospital and further asked about the impact of the lighting on wildlife in the area. A neighbor noted that the attorney for the near neighbors received a letter that stated that there are 26 signs that need to be improved.

•Committee Recommendations: L McEwen wrapped up the discussion. He noted that a better quality presentation was needed. The place of the hospital in the community needs to be stated. A clear recitation of the problems and how the signs address them is necessary. The project needs to be seen by LUPZC, HDAC and Streetscape. This can be accomplished at a single meeting on February 6 at 7pm.

Adjournment

• The meeting was adjourned at 9:45pm.