

General Notes:

- Existing topography and boundary information provided by Harris & Smariga, dated 12/2006.
- Grid coordinates are per the Washington Suburban Sanitary Commission (WSSC) datum.
- The subject Property is located within WSSC Grid 219 NW 09.
- This project lies within the Great Seneca Science Corridor Master Plan (May 4, 2010).
- Zoning: LSC Life Sciences Center
- Soils information from Map 19 US Soil Survey Montgomery County 2007.
- A portion of the property lies within the Piney Branch SPA.
- This property lies within the Watts Branch and Muddy Branch Watersheds.
- The subject property is water and sewer category one, according to the Montgomery County Ten Year Comprehensive Water and Sewer Plan.
- No Historical Features exist on or adjacent to the subject property.

PROJECT DATA TABLE FOR LSC ZONE

Development Standards	Required / Permitted	Previously Approved Preliminary Plan # 119882330 & Site Plans #819770150, #1999024(A-G), #19870610, #2004008A, #19851250		Project Total
		Built	Un-built	
Gross Tract Area (SF)	1,705,963 SF / 39.16 AC			
Road Dedication (100 ft Blackwell ROW)	9,790 SF / 0.22 AC			
Net Lot Area (SF) =	1,696,173 SF / 38.94 AC			
Maximum Density (FAR): **	1.5 FAR			0.67 FAR
Existing Square Footage		523,480 SF / 0.31 FAR	103,430 SF / 0.06 FAR	506,946 SF / 0.30 FAR
Proposed Square Footage				1,133,856 SF ¹
Total:		523,480 SF / 0.31 FAR	103,430 SF / 0.06 FAR	506,946 SF / 0.30 FAR
Public Use Space (%):*	20%			20%
Maximum Building Height (FT):**	150'			150' max
Parking:* 1 sp/1000 GFA, 1 sp/resident doctor, 1 space/3 employees, & adequate for visiting doctors	3,790 sp	2,072 sp		3,800 sp ²

* Montgomery County Zoning Ordinance
 ** Great Seneca Science Corridor Master Plan
¹ The method by which to meet the Public Use Space shall be determined at the time of Site Plan.
² Previously Approved spaces: 2,062
 Constructed spaces: 2,072
 Spaces removed: 1,222 (per this application)
 Remaining spaces: 850 (per this application)
 Structured & Surface spaces: 2,950 (per this application)
 Total Proposed Spaces: 3,800 (per this application)³
³ Original Preliminary Plan:
 523,480 sf Built
 103,430 sf Un-Built
 626,910 sf Total - Original Preliminary Plan
 For this Application:
 141,724 sf Original Approval Square Footage to be demolished and re-built in new buildings
 381,756 sf Original Approval Square Footage to Remain
 103,430 sf Original Approval Un-Built Square Footage
 506,946 sf Proposed Square Footage per this Application
 1,133,856 sf Total - Proposed
⁴ Final parking count to be determined at the time of Site Plan.

The building footprints shown on the preliminary plan are illustrative. Final building locations will be determined during the Site Plan process. Please refer to the zoning data table for development standards, such as set backs, building restriction lines and lot coverage for each lot. Other limitations for the site development may also be included in the conditions of the Planning Board's approval.



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NO.	DATE	REVISION	BY	DATE
4	04/23/2013	JDC		
3	10/10/2011	TDP		
3	10/10/2011	TDP		
2	08/05/2011	TDP		
1	03/24/2011	TDP		

DESIGNED: JDC
 CHECKED: STP/JDC

MISS UTILITY NOTE
 INFORMATION CONCERNING EXISTING UNDERGROUND UTILITIES WAS OBTAINED FROM AVAILABLE RECORDS. THE CONTRACTOR MUST DETERMINE THE EXACT LOCATION AND ELEVATION OF ALL EXISTING UTILITIES AND UTILITIES ORIGINATING BY ENGINE TEST PITS BY HAND, WELL IN ADVANCE OF THE START OF EXCAVATION. CONTACT MISS UTILITY AT 1-800-261-7777. 48 HOURS PRIOR TO THE START OF EXCAVATION. IF CLEARANCES ARE LESS THAN SHOWN ON THIS PLAN OR TWELVE (12) INCHES, WHICHEVER IS LESS, CONTACT THE ENGINEER AND THE UTILITY COMPANY BEFORE PROCEEDING WITH CONSTRUCTION. CLEARANCES LESS THAN NOTED MAY REQUIRE REVISIONS TO THIS PLAN.

APPLICANT:
Adventist HealthCare
 1801 RESEARCH BLVD., SUITE 400
 ROCKVILLE, MD 20850
 C/O: LARRY WALKER
 THE WALKER GROUP
 301.654.0005

MAP: 28 GRID: E3, E4, F3, F4
 ZONING CATEGORY: LSC
 219 NW 9, 10, 220 NW 9, 10
 SITE DATUM: NAD 83
 HORIZONTAL: NAD 83
 VERTICAL: NAVD 83

PROFESSIONAL CERTIFICATION
 I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND.
 LICENSE NO. 36866 EXPIRATION DATE: 6/26/12

PRELIMINARY PLAN #120110160
(Amendment to Preliminary Plan # 119882330)

PARCEL 5
SHADY GROVE ADVENTIST HOSPITAL CAMPUS
 GAITHERSBURG (9th) ELECTION DISTRICT
 MONTGOMERY COUNTY, MARYLAND

LS
 SHEET 2 OF 2
 PROJECT NO. 1640-05-00



ideas that work

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Robert G. Brewer, Jr.

September 16, 2013

Ms. Monet L. Lea
Engineer III
Montgomery County Department of Transportation
100 Edison Park Drive
Gaithersburg, Maryland 20878

Re: Shady Grove Adventist Hospital Campus
Preliminary Plan #120110160

Dear Ms. Lea:

As counsel for the applicant, this letter is in response to your comments e-mailed to Patrick Butler and Ed Axler with the Maryland-National Capital Park and Planning Commission ("M-NCPPC") on August 5, 2013. The specific comments addressed here within pertain to the private roads designation, the proposed right-of-way widths, and the proposed alignments as shown on the Shady Grove Adventist Hospital Campus Preliminary Plan #120110160 ("Campus").

As you are aware, the Shady Grove Adventist Hospital Campus Preliminary Plan was filed in December, 2010, and had a Development Review Committee meeting on May 2, 2011. MCDOT provided comments on May 2, 2011 from Greg Leck, to which the applicant's team responded with a response letter and new plans on September 16, 2011 (see copy of letter enclosed). On June 21, 2011, prior to the resubmission of the plans, applicant team members met with M-NCPPC Staff and DOT Staff including Arthur Holmes, Al Roshdieh, Edgar Gonzalez, Greg Leck, Sam Farhadi, Bruce Johnston, and Bob Simpson, to discuss the deviations from the Great Seneca Science Corridor Master Plan of the proposed roadways. The revised Preliminary Plan submitted was deemed acceptable and in conformance with the master plan requirements by MCDOT Staff, and as such, the reviewing agencies did not provide additional comments. In late fall of 2011, MCDOT Staff stated that the only outstanding items were agreements from the adjoining property owners to permit the public access easement for the private roadways on their properties.

The primary impetus for private roads within the Campus is to retain ownership for maintenance purposes in order to sustain the functionality of the roads at all times as needed for the Hospital, especially, if there is a large snow or weather event. This private road proposal was accepted by the M-NCPPC Staff when the revised plans were submitted in response to the Development Review Committee comments.

Since the date of submission of the applicant's proposal, the Planning Board and Staff have acknowledged the viability of private road designations elsewhere. This is evident in a number of recently approved sector plans (i.e., the White Flint Sector Plan, the Wheaton CBD and Vicinity Sector Plan, and the Long Branch Sector Plan), which discuss the creation of private streets. The proposal for private roads through the Campus is therefore consistent with recent M-NCPPC and County Council precedents. In addition, the Planning Board has approved other projects which provided private streets when the applicant has proffered the following conditions of approval:

Prior to approval to the first site plan for any Property approved pursuant to Preliminary Plan No. _____, the Applicant must provide for review by Staff, a public use and access easement to Montgomery County in trust for the public, in a recordable form containing provisions to address the following:

- a) Entitlement for open and unobstructed public use of the easement for all customary vehicular, pedestrian and bicycle access, as well as loading. The easement granted to the public must be volumetric, in order to accommodate uses below and above the street easement area;*
- b) Entitlement for the private streets to accommodate public utility easements;*
- c) Obligation for the Applicant to construct the streets pursuant to comparable MCDOT structural construction standards, at the Applicant's expense;*
- d) Obligation for the Applicant to maintain and repair the streets in acceptable conditions for all access and loading purposes, at its expense;*
- e) Obligation for the Applicant to keep the streets free of snow, litter and other obstructions and hazards at all reasonable times, at its expense;*
- f) Obligation to install traffic control devices within the easement area, based on prevailing standards, at the County's request, and at the Applicant's expense;*
- g) Obligation for the Applicant to designate a suitable organization with responsibility for implementing Conditions "d" and "e";*
- h) Entitlement for the Applicant or its designee to close private streets for normal maintenance and repair at reasonable times and upon reasonable prior notice to the public. Closure must follow MCDOT Protocol.*

Given MNCPPC's acceptance of private roads and the applicant's willingness to accept conditions of approval similar to those quoted above, this should suffice for approval by MDOT.

Ms. Monet L. Lea
September 16, 2013
Page 3

The Preliminary Plan proposes road alignments which meet the functional requirements of the Campus while meeting the Master Plan's desired traffic movements. The proposed road alignment deviations minimize the requirements of the Hospital to raze and relocate existing hospital buildings and facilities which, after significant review, meet the Hospital's needs now and for the future. The master planned road, B-8 [previously noted as B-16], enters the Campus at the main hospital entrance and bifurcates the main portion of the Campus by crossing the service area serving the Hospital and Rehabilitation Hospital. A north-south road at this location would compromise a necessary operational connection between the Hospital and the Rehabilitation Hospital, which Adventist HealthCare would like to improve in the future by adding a second story enclosed bridge connecting the two hospitals. This area also contains substantial internal Medical Center pedestrian and vehicular traffic, including recovering patients and families unfamiliar with the Campus. It would be highly undesirable to compromise this internal circulation by introducing a roadway for through traffic to Medical Center Drive at the main Hospital entrance.

This is why the applicant proposes an alternative connection, private street B-16 from Medical Center Drive, past private street B-15 north to Blackwell Road, which facilitates traffic movement through the site (see Exhibit A enclosed). The location of proposed Roadway B-16 separates through traffic from the vehicular movements to the service area. The service area allows for service and delivery truck turning movements and delivery distribution. MNCPPC Staff have accepted this alternative alignment represented by B-16, and we were informed some time ago that MCDOT had approved it also.

The proposed public access easements containing the required cross-sections match the widths of the master planned proposed rights-of-way. The improvements within the public access easements will be consistent with the Master Plan, the LSC Design Guidelines, and the Context Sensitive Road Code. The Master Plan proposes specific cross-sections for each road, e.g. Standard No. 2005.01, as noted on Exhibit A. Each private road will meet the specific cross-section. There is one exception, which is the southern portion of the proposed roadway B-16 located between the service road and Medical Center Drive. The proposed width of B-16 is 50 feet, which minimizes any impacts to the existing Rehabilitation Hospital and the programed expansion of the Hospital. It also provides traffic calming by decreasing any potential conflicts between the Hospital's patients and staff and the expected through traffic.

We trust that these responses fully address your inquiries. Please let me know if you have any further questions. Thank you very much.

Very Truly Yours,



Robert G. Brewer, Jr.

cc: Mr. Larry Walker
Mr. James Chapman
Mr. Chris Kabatt

MONTGOMERY COUNTY CODE
Chapter 50

- (5) for an addition to an existing one-family dwelling, a porch, deck, fence, or accessory structures associated with an existing one-family dwelling located on part of a previously platted lot, recorded by deed before June 1, 1958.
- (c) (1) Words and phrases used in this subsection have the meanings indicated in Section 8-30.
- (2) Except as provided in this subsection and Article IV of Chapter 8, the Department of Permitting Services may issue a building permit only if the Planning Board has made a timely determination of the adequacy of public facilities to serve the proposed development under this Chapter. However, the Department may issue a building permit for any proposed development that is:
 - (A) exclusively residential on a lot or parcel recorded before July 25, 1989, or otherwise recorded in conformance with a preliminary plan of subdivision approved before that date; or
 - (B) otherwise exempt from the requirement for determining adequacy of public facilities before a preliminary plan of subdivision is approved.
- (3) (A) A determination of adequate public facilities made under this Chapter is timely and remains valid:
 - (i) for 12 years after the preliminary plan is approved for any plan approved on or after July 25, 1989, but before October 19, 1999;
 - (ii) for no less than 5 and no more than 12 years after the preliminary plan is approved, as determined by the Planning Board at the time of approval, for any plan approved on or after October 19, 1999, but before August 1, 2007;
 - (iii) for no less than 7 and no more than 12 years after the preliminary plan is approved, as determined by the Planning Board at the time of approval, for any plan approved on or after April 1, 2009, but before April 1, 2015; and
 - (iv) for no less than 5 and no more than 10 years after the preliminary plan is approved, as determined by the Board at the time of approval, for any plan approved on or after August 1, 2007, and before April 1, 2009, or on or after April 1, 2015.

MONTGOMERY COUNTY CODE
Chapter 50

§ 50-20

- (B) If an applicant requests a validity period that is longer than the minimum specified in this paragraph, the applicant must submit a development schedule or phasing plan for completion of the project to the Board for its approval. At a minimum, the proposed development schedule or phasing plan must show the minimum percentage of the project that the applicant expects to complete in the first 5 or 7 years, as appropriate, after the preliminary plan is approved. To allow a validity period longer than the minimum specified in this paragraph, the Board must find that the extended validity period would promote the public interest. The Board may condition a validity period longer than the minimum specified in this paragraph on adherence to the proposed development schedule or phasing plan, and may impose other transportation improvement or mitigation conditions if those conditions are needed to assure adequate levels of transportation service during the validity period.
- (3A) A determination of adequate public facilities made under this Chapter is timely and remains valid:
- (i) For 10 years after the date of the conveyance of land to the County, or possession of building space by the county for an arts or entertainment use, under a preliminary plan for an optional method of development project approved under Section 59-C-6.2356.
 - (ii) The Board must grant an application to extend the validity period established under this paragraph for an additional 5 years if:
 - a. at least 20% of the approved development, excluding the arts or entertainment use, either separately or in combination:
 - 1. has been built;
 - 2. is under construction;
 - 3. is subject to building permits that have been issued;
 - 4. is subject to a valid lease; or
 - 5. has had a site plan approved under Section 59-D-3; or

MONTGOMERY COUNTY CODE
Chapter 50

§50-34

- (3) Interior road or street access, whether private or proposed to be dedicated, shall be shown.
- (f) *Wells and septic systems.* Before submission to the Department of Permitting Services, all preliminary subdivision plans for lots in areas where individual wells, and septic systems would be installed must show, in addition to the usual data, the following items:
- (1) The proposed location of water wells for each lot. Where there are existing wells on the property or on adjoining lots within one hundred (100) feet, they shall also be shown.
 - (2) A circular area with radius of one hundred (100) feet around each well to denote clear space in which no final sewage system is to be located.
 - (3) The "usable area" for sewage disposal, which shall be situated beyond the one hundred-foot radius and downgrade from the proposed house location and shall all be in virgin soil.
 - (4) Any existing sewage disposal systems on the property or on adjoining lots within one hundred (100) feet.
 - (5) Swamps, rock outcrops and floodplains, when the same exist.
 - (6) A ten-foot zone surrounding the water service line to buildings, free and clear of any sewer lines, systems or part thereof.
- (g) *Staging schedule.* The applicant or his agent must submit with the written application a recording and construction schedule which must indicate those portions of the area covered by the preliminary plan for which record plats and building permits will be sought and obtained during each of the succeeding years, up to the validity period of the APFO approval required by Sec. 50-35(k). Where a project is proposed to be built out in phases cumulatively exceeding three years, the applicant must submit a phasing schedule for approval by the Board as part of the preliminary plan. The preliminary plan establishes the validity period for the entire project.

When applicable, the phasing schedule should specifically identify the timing for the completion of construction and conveyance to unit owners of such things as common open areas and recreational facilities. In addition, the phasing schedule should indicate the timing for the provision of moderate priced dwelling units, and infrastructure improvements associated with each phase. Such a phasing schedule must be designed to have as little dependence on features (other than community-wide facilities) to be provided in subsequent phases and have minimal impact during construction on phases already built and occupied.

For projects that require site plan review, the applicant may submit the final phasing schedule, detailing the information required in this section, provided the implementation of the phasing schedule does not exceed the validity period established in the preliminary plan.

- (h) *Staging schedule for land containing an arts or entertainment use as a public use space.* If a phasing plan for a preliminary plan of subdivision includes land or building space that the County has accepted for an arts or entertainment use under Section 59-C-6.2356, approval of a site plan under Section 59-D-3 for the phase containing that land or building space validates all remaining phases of the preliminary plan and the project plan for the purpose of Section 59-D-2.7(b).
- (i) *Increase of density.* A preliminary subdivision plan for a property in a receiving area which proposes to increase the density of the property by a utilization of development rights shall indicate, in addition to the number of lots permitted by the base density, the number of development rights to be conveyed to the receiving property, the total density, in dwelling units, of the proposed subdivision, the number of moderately priced dwelling units to be provided in accordance with the provisions of Chapter 25A, and the density recommended by the approved and adopted general, master, sector or functional plan.
- (j) *Development rights.* Such a preliminary subdivision plan must include at least two-thirds of the number of development rights permitted to be transferred to the property under the provisions of the appropriate general, master, sector or functional plan. However, upon a finding by the Planning Board that for environmental reasons it would be desirable to permit a lower density, the two-thirds requirement may be waived.
- (k) A preliminary subdivision plan application for a subdivision to be located in a transportation management district, as designated under Chapter 42A, Article II, must contain a draft traffic mitigation agreement that meets the requirements of that article unless one has previously been submitted at the time of project plan submittal under the optional method of development. (Mont. Co. Code 1965, § 104-23; Ord. No. 8-73, § 1; Ord. No. 9-23, § 1; Ord. No. 9-68, § 1; Ord. No. 9-69, § 1; Ord. No. 11-18, § 1; Ord. No. 11-23, § 1; Ord. No. 12-16, § 1; Ord. No. 12-19, § 4; Ord. No. 12-60, §§ 1, 3; Ord. No. 13-36, § 1; Ord. No. 13-51, § 1; Ord. No. 13-91, § 4; Ord. No. 13-113, § 1; Ord. No. 14-37, § 1; Ord. No. 14-50, § 1; Ord. No. 15-89, § 1; Ord. No. 16-26, § 1.)

Editor's note—Section 50-34 is quoted in Cinque v. Montgomery County Planning Board, 173 Md. App. 349, 918 A.2d 1254 (2007). Sections 50-34 to 50-36 [formerly §104-23 through §104-25] are quoted in Gruver-Cooley Jade Corporation v. Perlis, 252 Md. 684, 251 A.2d 589 (1969).

For preliminary plans and record plats approved prior to the effective date of this ordinance, which remain valid, the validity period and procedural requirements and limitations for plan extensions are as established under this ordinance.



ATTORNEYS

March 24, 2011

BY HAND DELIVERY

Ms. Rose Krasnow
Ms. Catherine Conlon
Regulatory Coordination Division
Maryland-National Capital Park & Planning Commission
8787 Georgia Avenue
Silver Spring, Maryland 20910

**Re: Preliminary Plan of Subdivision No. 120110160
(Amendment to Preliminary Plan No. 119882330)
Shady Grove Adventist Hospital Campus
Shady Grove Life Sciences Center, Rockville, MD
Statement of Justification**

Dear Ms. Krasnow and Ms. Conlon:

We are submitting this Preliminary Plan of Subdivision Application No. 120110160 (Amendment to Preliminary Plan of Subdivision No. 119882330) (the "Application") for consideration by the Montgomery County Planning Board ("Planning Board") on behalf of the Applicant Adventist HealthCare (AHC), the owner of Parcel 5 located in the Shady Grove Life Sciences Center (SGLSC) in Rockville, Maryland (the "Property"). Parcel 5 is comprised of the following properties, which were consolidated by minor subdivision and shown on Plat No. 23125:

- Shady Grove Adventist Hospital (the "Hospital") (Parcel 1A), 9901 Medical Center Drive;
- Adventist Behavioral Health Rockville (Parcels 3A and 3B), 14901 Broschart Road;
- Broschart Building (Parcel K), 14915 Broschart Road; and
- Adventist Rehabilitation Hospital of Maryland (Part of Parcel 1A), 9909 Medical Center Drive.



I. Property Information

The Property consists of approximately 39.16 acres (1,705,963 square feet) and is located west of the intersection of Medical Center Drive and Medical Center Way in Rockville, Maryland. The Property is located in the Life Sciences Center (LSC) Zone. Currently, the Property is improved with a 523,480 square foot suburban healthcare facilities' campus, which includes a number of outpatient services, structured parking garages, surface parking lots and open space.

II. Prior Preliminary Plan Approval for the Property

The Property comprises a significant portion of twenty-four lots in the SGLSC created by Montgomery County, which are all subject to Preliminary Plan of Subdivision No. 119882330 (the "Original Preliminary Plan"). The Planning Board approved the Original Preliminary Plan on March 15, 1990, which limited development on the twenty-four lots to a total of 1,671,454 square feet. In the subdivision process, Montgomery County apportioned allowable densities among the lots in unequal portions (ranging from 0.06 to 0.45 floor area ratio (FAR)) with an overall base density of 0.3 FAR.

According to most recent SGLSC Development Summary dated December 6, 2010, the parcels comprising the Property have assigned floor area ratios (FAR) that range between 0.21 and 0.45. Specifically, the Shady Grove Adventist Hospital (Parcel 1A) property still retains 103,430 square feet of development capacity. Because Parcels 1A, 3A, 3B and K were consolidated by minor subdivision into Parcel 5, the remaining development capacity for Parcel 1A can be used by former Parcels 3A, 3B and K.

The Project's request for an APF determination and proposed staging schedule are further discussed in Section VI of this Statement.

III. Overview of the Project

Through this Application, the Applicant seeks to improve the existing Property with approximately 506,946 additional square feet of healthcare



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 3

facilities development¹ (the "Project"). The Project principally consists of the following elements:

- (a) Addition of an 210,380 square foot tower to the existing Hospital;
- (b) Addition of a 50,000 square foot wing to the Hospital to accommodate the conversion of semi-private rooms to private rooms;
- (c) Removal of 7,650 square feet of temporary trailers;
- (d) Addition of a 56,100 square foot wing to the Rehabilitation Hospital to accommodate the conversion of semi-private rooms to private rooms;
- (e) Demolition of the existing 107,814 square foot Adventist Behavioral Health Rockville building and its replacement with a newly constructed 209,790 square foot facility;
- (f) Demolition of the existing 26,260 square foot Broschart Building;
- (g) Addition of a 46,750 square foot Cancer Center building;
- (h) Addition of a 60,780 square foot Oncology Services building;
- (i) Addition of an 93,500 square foot Diagnostic and Outpatient Services building;
- (j) Addition of an 74,800 square foot Health, Wellness and Prevention Center; and
- (k) Construction of new structured parking garages to support the additional development on the Property.

Principal access to the Project will be provided from Medical Center Drive. Regional access to the Project will be provided from I-270, Shady Grove Road, Darnestown Road (MD Rt. 28), Great Seneca Highway (MD Rt. 119), and

¹ The Project will also utilize the 103,430 square feet of remaining development capacity under the Original Preliminary Plan.



Key West Avenue. AHC will contribute towards local intersection improvements, which will assist in the circulation of vehicular traffic through the Project. Construction of Blackwell Road between Broschart Road and Medical Center Drive (by the County or by Johns Hopkins University in collaboration with AHC), as well as the construction of internal streets that connect Broschart Road and Blackwell Road, will also facilitate improved circulation and access.

Sidewalks are located on both sides of Medical Center Drive, Medical Center Way, Broschart Road and Blackwell Road, providing a connected network to Montgomery County Ride-On bus stops and a proposed Corridor Cities Transitway station on Broschart Road near Blackwell Road on the northwest portion of the Property.

The Project complies with the relevant provisions of the Great Seneca Science Corridor Master Plan ("Master Plan") and the Great Seneca Science Corridor Urban Design Guidelines ("Design Guidelines"). The Project also complies with the LSC Zone development standards set forth in the Montgomery County Zoning Ordinance ("Zoning Ordinance") as described in Section IV of this Statement, as well as all of the requirements set forth in Chapter 50 of the Montgomery County Code ("Subdivision Regulations").

The Applicant has been working directly with the community surrounding the Project. AHC hosted its pre-submission outreach meeting in the Maryland Room of 1801 Research Boulevard in Rockville, Maryland on the evening of December 7, 2010, at which nine community participants attended. To date, we believe the community is supportive of the Project.

IV. Project's Conformance to the Zoning Ordinance

The Project complies with the purpose and development standards of the LSC Zone as set forth in Section 59-C-5.1 *et seq.*

1. Section 59-C-5.31 establishes a maximum building height of 200 feet.
 - o Although the Zoning Ordinance permits a building height of 200 feet for the Property, the Project's building height will not exceed 150 feet because the Master Plan and Design Guidelines



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 5

recommend between 110 foot and 150 foot building height maximums for the Property.

2. Section 59-C-5.32 requires that the Project provide a minimum 20% public use space, which can be provided in part or entirely off-site on a separate lot or parcel in the same zone.
 - o The Project will provide 20% public use space. The method(s) of providing the required public use space will be determined at the time of site plan.
3. Section 59-C-5.321 explains that at least 40% of the total proposed non-residential gross floor area must be comprised of life science uses except for hospitals and a hospital's accessory uses.
 - o The Project's proposed non-residential gross floor area is entirely comprised of hospital and hospital accessory uses. Therefore, the Project is exempt from this requirement.
4. Section 59-C-5.475 sets for the requirements for off-street parking.
 - o The Project's parking will satisfy at least the minimum off-street parking requirements set forth in Article 59-E of the Zoning Ordinance. Wells & Associates will conduct a parking demand study, which will help determine the appropriate number of parking spaces for the Property. AHC will then engage in a dialogue with Planning Department Staff, in which a distinct parking proposal will be generated. This proposal will be later addressed at the time of site plan. The Property currently proposes 3,800 parking spaces, which exceeds the required number of parking spaces.
5. Section 59-C-5.476(a) sets forth the procedure for application and approval of site plans in the LSC Zone. It explains that the site plan:
 - o must be consistent with the recommendations of the applicable master or sector plan, including general design principles recommended by the applicable master or sector plan and design guidelines adopted by the Planning Board



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 6

to implement the applicable master or sector plan. As part of its site plan, the applicant must submit for approval comprehensive design standards that address building types and facades, except when the site plan is proposed for amendment through a limited plan amendment, a consent agenda amendment, or a Director level amendment.

- AHC will submit a site plan for the Project, which will be consistent with the recommendations for the Property contained in the Master Plan and Design Guidelines. As part of its site plan, AHC will submit for approval comprehensive design standards that address building types and facades.

V. Project's Conformance to the Master Plan and Design Guidelines

A. Project's Conformance to the Master Plan

The Project is subject to the Great Seneca Science Corridor Master Plan ("Master Plan"). This Master Plan amends other master plans that affect the Property, including the 1990 Shady Grove Study Area Master Plan and the 1985 Gaithersburg Vicinity Master Plan and should be read in context with revisions to the Planning Board's July 2009 Master Plan Draft adopted by the Montgomery County Council on May 4, 2010.

The Master Plan divides the Life Sciences Center into five districts and classifies the Property as part of the 230 acre, mixed-use and transit-oriented LSC Central District. The Master Plan describes the LSC Central District as a "single-purpose destination for workers, students, and hospital visitors...[which] should continue to focus on medical and biotech uses, [but also] introduce other uses including retail and a limited amount of housing (approximately 30 percent of FAR)." The Project will provide research and development space for knowledge-based workers, which will complement the mixed-use vision of the LSC Central District.



The Master Plan proposes that the Property retain its LSC zoning. Specifically, the Master Plan includes the following recommendations that affect the Property:

Adventist HealthCare (AHC),...as [one of] the district's largest property owners, will play a significant role in achieving the land use vision. Population growth, combined with demographic shifts and aging baby boomers, is fueling demand for additional capacity at the Shady Grove Adventist Hospital. To meet these needs, the 48-acre facility will continue to evolve, including centers of cardiac and vascular services, oncology, and women's and children's services.

AHC intends to develop medical offices, diagnostic and outpatient treatment facilities, and convenience retail. Accompanying these physical improvements will be structured parking, landscaped open spaces, and other public amenities...This Plan supports an expanded, first class medical center...

- Amend the LSC Zone to allow mixed uses and increased density and height;
- Allow a maximum of 1.0 FAR for properties in LSC Central District but a maximum of 1.5 FAR for properties located in the core of the LSC Zone, including AHC;
- Require the submission of a Concept Plan prior to approval of any future individual development projects for AHC to address the Master Plan's guidelines, including the location of the CCT, the highest densities and height at transit, the mix of uses, creation of a local street network, and provision of open spaces;
- Locate the highest density and tallest buildings (150 feet) adjacent to the transit station to form an identifiable center. Future developments should be well-integrated with each other;
 - The Master Plan illustrates that the maximum recommended building height for the Properties ranges between 110 and 150



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 8

feet. Specifically, the Master Plan illustrates a 110 foot building height maximum for the Hospital.

- Create an identifiable LSC Loop along Medical Center Drive that connects pedestrians to other transit centers, the network of natural pathways along the stream buffers, and the open spaces;
- Design Broschart Road as an urban street, lined with buildings and activating street-level uses. The east side of Broschart Road is shared by AHC and Johns Hopkins University (JHU), and both property owners have opportunities to create a lively street edge that takes full advantage of transit station proximity;
- Design Blackwell Road between the AHC and JHU properties with a building edge and improved connections;
- Provide at least 15% of the net tract area as public use space;
- Include the following public open spaces:
 - LSC Loop;
 - Urban square at the CCT station;
 - Urban promenade to connect between buildings and public spaces.
- Locate a CCT Station along Broschart Road near Blackwell Drive in the vicinity of AHC and JHU;
- Extend Blackwell Road between Medical Center Drive and Broschart Road; and,
- Create additional streets to encourage an urban building form and to improve access and circulation for pedestrians and vehicles.

The Project facilitates the goals for the Property set forth in the Master Plan. The Project increases the total density on the Property from approximately 0.37 FAR to 0.67 FAR, which is less than the maximum permitted 1.5 FAR. The Project also proposes increased building heights of up to 150 feet, as compared to the existing buildings on the Property which range between approximately 15 and 60 feet. The Project will also provide 20% of the



net tract area as public use space, in accordance with the 20% public use space requirement contained in the LSC Zone. Moreover, AHC is submitting a Concept Plan with this Application to address the Master Plan's guidelines, including the location of the CCT, the highest densities and height at transit, the mix of uses, creation of a local street network, and provision of open spaces.

AHC will improve the streetscape along the northern portion of Medical Center Drive that adjoins the Property and along the eastern portion of Broschart Road that adjoins the Property, which will encourage pedestrian connections between local modes of transit. Specifically, Medical Center Drive and Broschart Road maintain direct access to Montgomery County Ride On buses, which connect pedestrians to other transit centers.

AHC will also reserve an area located in the northwest portion of the Property for the dedication of a future CCT station. The proposed location of the CCT station may ultimately be improved with high density convenience retail to support the users of the CCT station. AHC anticipates the submission of a future preliminary plan amendment, which will accomplish the dedication and request any additional density needed to support the retail needs of the proposed CCT station.

Once Blackwell Road between Medical Center Drive and Broschart Road is extended, AHC will construct internal streets that connect Broschart Road and Blackwell Road within the Property to improve access and circulation for pedestrians and vehicles.

B. Project's Conformance to the Design Guidelines

In June, 2010, the Planning Department published the Great Seneca Science Corridor Urban Design Guidelines ("Design Guidelines"), which is intended to implement the recommendations contained in the Master Plan.

The Design Guidelines contains specific recommendations for the LSC Central District and for the Property:

- Design Broschart Road as an urban street, lined with buildings and activating street-level uses;



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 10

- Create an identifiable LSC Loop along Medical Center Drive that connects pedestrians to other transit centers, natural pathways, and open spaces;
- Establish a CCT station on Broschart Road near Blackwell Road;
- Establish a linear park south of Blackwell Road;
- Create a tree-lined boulevard on Broschart Road and Medical Center Drive;
- Create block lengths no longer than 800 feet. An average of 400 to 500 foot long blocks is desirable;
- Integrate LSC Loop;
- Create pedestrian connections through Adventist Hospital campus;
- Concentrate tallest buildings along Broschart Road;
- Design buildings to allow the evolution of advanced research, science, and technology industries;
- Consolidate and conceal delivery areas to minimize impact on streetscape and building frontage;
- Expansion of Adventist Hospital should create entrances on Broschart Road and the future road between Broschart Road and Medical Center Drive;
- Create a mixed-use retail center at the CCT station and on the block north of Blackwell Road;
- Consider relocating existing stormwater ponds to create a central landscape and/or water amenity in common space between buildings;
- Where possible, use native plant species;



- Design public spaces to accommodate a variety of civic activities and community life;
- Transit Plaza should be about ¼ acre in size and needs to balance green space and landscaping with hardscaped plaza to accommodate pedestrian activity;
- Linear park should be designed for passive recreation with benches and trees for shade, and as an entry feature to the Adventist Hospital.

The Project conforms to the recommendations for the LSC Central District and for the Property contained in the Design Guidelines. As previously discussed, AHC will improve the streetscape along the northern portion of Medical Center Drive that adjoins the Property and along the eastern portion of Broschart Road that adjoins the Property, which will encourage pedestrian connections between local modes of transit. Specifically, Medical Center Drive and Broschart Road maintain direct access to Montgomery County Ride On buses, which connect pedestrians to other transit centers. AHC will also reserve an area located in the northwest portion of the Property for dedication of a future CCT station. Once Blackwell Road between Medical Center Drive and Broschart Road is extended, AHC will construct internal streets that connect Broschart Road and Blackwell Road within the Property to improve access and circulation for pedestrians and vehicles. These road improvements will permit entrances on Broschart Road to the Property.

The Design Guidelines also recommends between 110 foot and 150 foot building height maximums for the Property. The Project currently proposes building heights ranging between 32 feet and 94 feet, with an average building height of 63 feet. However, as previously noted, the proposed location of the CCT station may ultimately be improved with high density convenience retail to support the users of the CCT station, which could be up to 150 feet in height.

The Design Guidelines also suggests that Medical Center Drive become a tree-lined boulevard and, as an arterial Street, maintain a 10 foot setback from the right-of-way. The portion of Medical Center Drive that adjoins the Property is well landscaped and tree-lined. The Project is also setback at least 10 feet from Medical Center Drive.



AHC will also ensure that its public open spaces, including the linear park recommended along the northeastern boundary of the Property and the transit plaza for the proposed future CCT station, will accommodate pedestrian activity and provide recreational amenities such as benches and shade trees.

VI. Adequate Public Facilities and Staging Schedule

As part of this application, the Applicant is required to demonstrate that public facilities are adequate to accommodate the Project. There are currently adequate public facilities (APF) in place to address the impacts of the proposed subdivision.

The original APF finding for the Original Preliminary Plan remained valid until July 25, 2001 and was extended under Section 50-20(c)(9) of the Subdivision Regulations in response to a prior extension request until July 25, 2007. On September 26, 2007, the Planning Board approved a request for an additional extension of the APF validity period until July 25, 2013 to allow for the utilization of "pipeline square footage." Additionally, on March 31, 2009, the County Council adopted Ordinance No. 16-35 (effective April 1, 2009), which automatically extended the validity period for APF determinations by two years. Most recently, on March 15, 2011, the County Council approved Subdivision Regulation Amendment 11-01, which automatically extended the validity period for APF determinations by an additional two years. Therefore, the APF validity period for the Property is still valid and expires on July 25, 2017 for up to 700,850 square feet of space, of which 103,430 square feet remains undeveloped.

The Applicant requests a new, 12 year APF determination for the Project in connection with this Application. Pursuant to Section 50-20(c)(3)(A)(iii) of the Subdivision Regulations (as recently amended by Subdivision Regulation Amendment 11-01), the Planning Board can make an APF determination for "no less than 7 and no more than 12 years after the preliminary plan is approved, as determined by the Board at the time of approval, for any plan approved on or after April 1, 2009 and before April 1, 2013." In accordance with Sections 50-20(c)(3)(B) and 50-34(g) of the Subdivision Regulations, the Applicant is requesting a validity period that is longer than the minimum specified in the Subdivision Regulations.



The Applicant believes that the following staging schedule promotes the public interest for a variety of reasons. The staging schedule allows the Applicant to construct the various components of the Project in coordination with the requisite licensure, financing, certificate of need, and patient demand issues germane to the development of a large healthcare facilities campus. The staging schedule also permits the Applicant to appropriately accommodate the timeframes of delivery of major infrastructure improvements including the extension of Blackwell Road between Medical Center Drive and Broschart Road and construction of internal streets that connect Broschart Road and Blackwell Road within the Property. The staging schedule is listed as follows for the construction of a total of 506,946 square feet of new development:

- Phase I (Years 1-3): Construction of approximately 175,000 to 210,000 square feet of development, which includes the 103,430 square feet of existing development capacity for the Property under the Original Preliminary Plan;
- Phase II (Years 4-6): Construction of approximately 125,000 to 150,000 square feet of development;
- Phase III (Years 7-10): Construction of approximately 100,000 to 125,000 square feet of development;
- Phase IV (Years 11-12): Construction of approximately 100,000 to 125,000 square feet of development.

Pursuant to Section 50-20(c)(3)(B) of the Subdivision Regulations, the Applicant expects to complete Phase I during the first three years after the Application is approved. However, the Applicant requires some flexibility with respect to the overall order of the various phases and therefore, respectfully requests that the phases are ultimately subject to the Applicant's determination. The above referenced phases will be defined in greater detail at the time of site plan.

VII. Traffic Analysis

As part of this Application, AHC needs to demonstrate adequate public facilities for the net difference between the square footage of the existing (and



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 14

approved) development on the Property (626,910 square feet) and the square footage of the proposed development (1,133,856 square feet). Accordingly, the Applicant is submitting a traffic study prepared by Wells + Associates, Inc., which addresses the traffic impact of the Project's net increase in square footage.

The study concludes that six local intersections would operate beyond the congestion standard during the weekday AM and PM peak hours. In addition, the Project will meet the 35% Policy Area Mobility Review (PAMR) trip mitigation requirement for projects located in the R&D Village Policy Area. As shown in the traffic study, the new development on the Property will generate an additional 863 net primary vehicle trips during the AM peak hour and an additional 896 net primary vehicle trips during the PM peak hour. The 35% trip mitigation requirement equates to 314 trips (896 trips X 35% = reduction of 314 trips). The Project proposes to make a contribution to the study intersections or another Capital Improvement Project if desired by the County in the amount of \$3,548,200 (314 trips X \$11,300 per trip) to satisfy both LATR and PAMR.

VIII. Natural Resources Inventory/Forest Stand Delineation and Forest Conservation Plan

The Property is exempt from the requirements of Article II of Chapter 22A (Forest Conservation Law) of the Montgomery County Code, including a Natural Resources Inventory/Forest Stand Delineation (NRI/FSD) and a Forest Conservation Plan. Specifically, the Property was granted a Forest Conservation Exemption, and subsequently an NRI/FSD exemption, under Section 22A-5(k)(2-3)(B) and Section 22A-5(t) of the Forest Conservation Law, which state as follows:

The requirements of Article II do not apply to:

(k) any lot covered by a preliminary plan of subdivision or site plan that did not receive a sediment control permit before July 1, 1991, and for which the preliminary plan of subdivision or site plan:



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 15

(2) was approved or extended between July 1, 1984 and July 1, 1991, and

(3) the construction will not result in the cutting, clearing, or grading of:

(B) any forest on property located in a special protection area which must submit a water quality plan.

(t) a modification to existing developed property if:

(1) no more than 5000 square feet of forest will be cleared;

(2) the modification does not affect any forest in a stream buffer or located on property in a special protection area which must submit a water quality plan; and

(3) the modification does not require approval of a new subdivision plan.

The Planning Department accepted the Applicant's Forest Conservation Exemption Request No. 42011108E on March 23, 2011.

IX. Stormwater Management

AHC submitted a Stormwater Management Concept ("Concept") to the Montgomery County Department of Permitting Services (DPS) on December 21, 2010, which is currently under review. As shown in the Concept, the Project will provide for stormwater to be stored and treated on site for water quantity control and quality improvement. Bio-swales, bio-retentions, green roofs and pervious pavement will complement the existing onsite infiltration trenches for water quality control. An offsite regional wet pond at the University of Maryland Gudelsky facility will also offer water quality improvement and quantity control during larger storm events. The Project will meet or exceed the required water quality treatment and water quantity



control needs through use of Environmental Site Design (ESD) to the maximum extent possible.

X. Sediment and Erosion Control

A Sediment and Erosion Control Plan will be prepared and submitted to DPS for approval prior to commencement of construction on the Property. The limit of disturbance (LOD) drains into multiple existing stormwater facilities, which will be equipped with silt fence to contain/trap sediment runoff prior to entering the facilities. In addition, all existing infiltration trenches will be inspected and maintained if necessary at the end of construction to insure performance as designed. All building construction will also be surrounded with silt fence and be equipped with filter sump pumps and sediment bags to ensure containment of sediment prior to runoff. There will only be one phase of sediment control for construction on the Property with three separate stabilized construction entrances.

XI. Existing and Proposed Utilities

All existing dry and wet utilities are located on or adjacent to the Property. To obtain additional service for the proposed development, individual requests will need to be completed or analyzed separately for each utility. Wet utilities include storm drain, water and sewer. Dry utilities include electric, gas, and communications.

Currently, stormwater is safely conveyed via onsite storm drain to two offsite culverts crossing under Medical Center Drive and Broschart Road, which are connected to two onsite control structures. Relocation of the existing onsite storm drain and pretreatment devices will be necessary for construction of the proposed improvements on the Property. Additional storm drain will be necessary to safely convey runoff from the proposed buildings, parking garages and reconfigured parking lots at the north end of the Property.



Water service is currently provided via an eight inch onsite waterline connected to the public mainline in Medical Center Drive, which runs northwest across the Property to a public mainline on existing Broschart Road. Water is also provided via a twelve inch public water mainline, which loops through the entire Property along Medical Center Drive and Broschart Road. Relocation of the eight inch waterline and six inch waterline serving the Hospital and fire hydrants will be necessary for construction of the Diagnostic Outpatient Services building, future Hospital extension and Health, Wellness and Prevention Center building and parking garage. In addition, all proposed building structures will need one proposed onsite water house connection to a public mainline for service and exterior fire hydrants for fire protection.

Sewer service is currently provided by two onsite eight inch sewer lines. One of the sewer lines is located in a public easement that bisects the site from the location of the future Blackwell Road between Broschart Road and Medical Center Drive. Relocation of the existing sewer system and public easement will be required in order to accommodate the Project. All other proposed buildings will be sewer serviced via house connections to a new onsite sewer line, and via a sewer service connection to the existing public sewer system. It should also be noted that given the elevation of the newly proposed buildings, a pressure sewer house connection may be necessary for service.

Dry utilities, including electric, gas, and communications, will be designed by others. An existing seventy foot easement currently crosses the site from Broschart Road to Medical Center Drive. The dry utilities in this easement currently serve the existing buildings on the Property. Relocation of this easement will be required to accommodate existing and proposed dry utilities. The proposed easement location has been relocated by shifting the entire easement fifty four feet north of its current location. Although the new easement retains the same alignment as the existing easement, the easement will go beyond the property boundary, and will be located under a future proposed road that will connect to Medical Center Drive across the Shady Grove Nursing and Rehabilitation Center property.

XII. Conclusion

As demonstrated by the contents of this Application, the Project satisfies the requirements of the Subdivision Regulations and complies with all of the



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 18

Zoning Ordinance requirements governing development in the LSC zone. In addition, the Project is consistent with the general recommendations of the Master Plan and Design Guidelines. We look forward to working with Technical Staff on this exciting Preliminary Plan Application and ultimately in presenting the Project to the Planning Board. Thank you in advance for your continued cooperation regarding this matter.

XIII. Application Components

As part of this Application, AHC is submitting the following items, in addition to this Statement of Justification:

1. Complete application form;
2. Complete fee schedule and worksheet;
3. \$ 82,041.90 final filing fee (\$20,697.98 paid at time of initial filing);
4. Copy of approved Preliminary Plan of Subdivision No. 119882330;
5. Preliminary plan drawing;
6. Applicant's certificate of compliance;
7. Notice list;
8. Draft application notice letter;
9. Pre-submission community meeting information;
 - a. Community meeting affidavit,
 - b. Copy of invitation letter,
 - c. Typed list of invitees,
 - d. Typed list of meeting attendees,
 - e. Sign-in sheets from community meeting,
 - f. Copy of meeting minutes.
10. Meeting minutes from October 25, 2010 Pre-Submission M-NCPCC Meeting;
11. Verification of site posting;



ATTORNEYS

Ms. Rose Krasnow
Ms. Cathy Conlon
March 24, 2011
Page 19

- a. Sign posting affidavit,
 - b. Plan drawing showing the location of posted sign,
 - c. Date stamped photographs showing the posted sign.
- 12. Concept Plan;
 - 13. Forest Conservation Exemption Request Letter;
 - 14. Preliminary Stormwater Management Concept Plan and completed application;
 - 15. Storm Drainage Plan;
 - 16. WSSC Preliminary Plan Sheet;
 - 17. Tentative Street Profiles;
 - 18. Sight Distance Evaluation Certification;
 - 19. Existing Record Plat;
 - 20. Traffic study prepared by Wells & Associates, LLC; and
 - 21. CD with PDF images of preliminary plan drawing.

Very truly yours,

Robert G. Brewer, Jr.

April B. Mackoff

cc: Larry Walker
Tim Duffy
Stephen Tawes
Theresa Polizzi
Marty Wells
Chris Kabatt

The LSC Districts

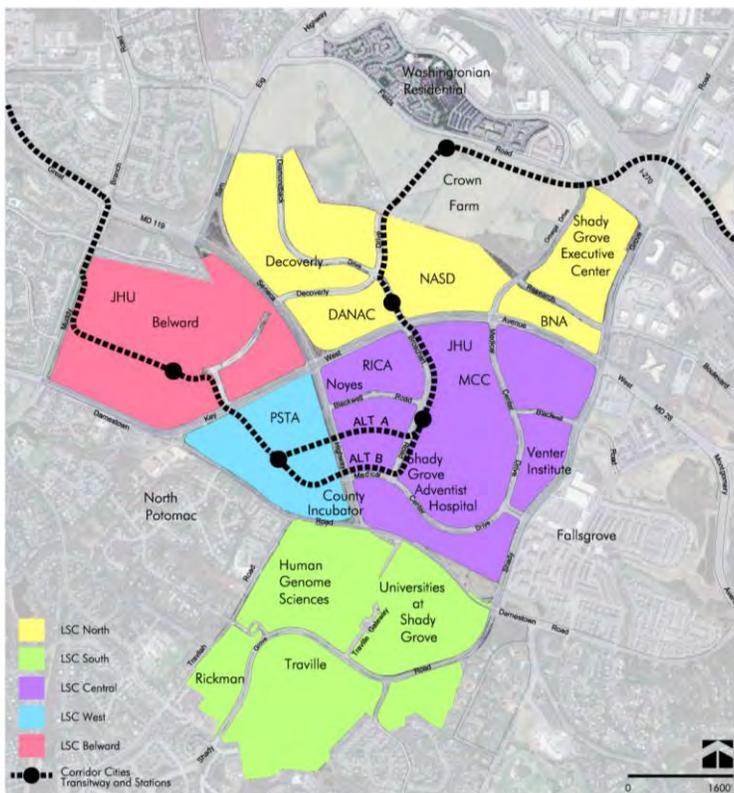
The Plan’s land use, zoning, circulation, and design recommendations for the LSC districts focus density at the proposed CCT stations to fulfill the Plan’s vision of connected centers.

table 2 life sciences center: existing and proposed development

	existing	existing and approved	1990 Master Plan	proposed 2010 Plan
commercial (sf)	6,940,000	10,700,000	13,000,000	17,500,000*
dwelling units	3,300	3,300	3,800	9,000
jobs	21,200	30,550	38,000	52,500
jobs-housing ratio	6.4	9.2	10.0	5.8

*Although zoning would allow up to 20 million square feet of development, the staging plan limits development to 17.5 million square feet.

The largest property owners (20 acres or more) at the proposed CCT stations—JHU’s Belward and MCC sites, Shady Grove Adventist HealthCare, DANAC, and the future developers of LSC West (the PSTA site)—will be required to submit concept plans that demonstrate how their site will achieve the Plan’s vision—highest densities and heights at the stations, mixed uses, a local street network, neighborhood buffers, the LSC Loop, historic properties, and open spaces.



LSC Central: A Medical and Biotech Center

This 230-acre district includes Shady Grove Adventist Hospital, several medical office buildings, the Johns Hopkins University-Montgomery County Campus (JHU-MCC), the Regional Institute for Children and Adolescents (RICA) and Noyes Institute facilities, and some County social service uses. This area also includes the Key West Corporate Center and biotech companies such as the J. Craig Venter Institute, BioReliance, and Otsuka.

Today, LSC Central is a single-purpose destination for workers, students, and hospital visitors. While it should continue to focus on medical and biotech uses, other uses should be introduced, including retail and a limited amount of housing (approximately 30 percent of permitted floor area ratio). The Plan recommends a CCT station on Broschart Road near Blackwell Road, and those streets should be enlivened with activating uses. Future development, in its design and use, should be carefully planned to take advantage of transit and contribute to creating a vibrant LSC hub.

Adventist HealthCare (AHC) and JHU, as the district's largest property owners, will play a significant role in achieving the land use vision. Population growth, combined with demographic shifts and aging baby boomers, is fueling demand for additional capacity at the Shady Grove Adventist Hospital. To meet these needs, the 48-acre facility will continue to evolve, including centers of cardiac and vascular services, oncology, and women's and children's services.

AHC intends to develop medical offices, diagnostic and outpatient treatment facilities, and convenience retail. Accompanying these physical improvements will be structured parking, landscaped open spaces, and other public amenities. Under the current zoning, AHC would not be able to expand its facilities substantially. This Plan supports an expanded, first-class medical center and recommends zoning changes to accommodate future growth.

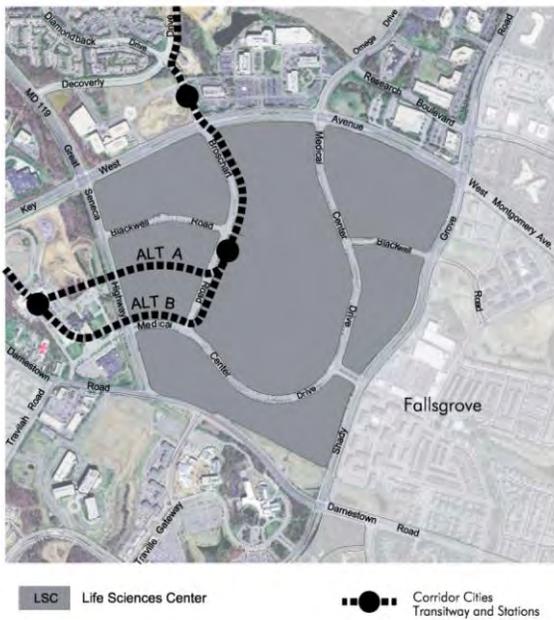
Most of the land in LSC Central is zoned LSC. To implement the vision of a mixed-use, transit oriented center, this Plan recommends modifying the LSC Zone to permit more uses, density, and height. The revised zone would allow housing and the Plan recommends that up to 30 percent of the floor area ratio (FAR) in LSC Central could be residential. LSC Central properties zoned R-200, O-M, and R&D are recommended for rezoning to the revised LSC Zone. One zone for all LSC Central properties will enhance development or redevelopment possibilities, provide consistent land use options and development standards, and improve design cohesiveness.

The LSC Zone allows for a transfer of density from one LSC-zoned property to another LSC-zoned property. This provision would allow a transfer of density from Belward to LSC Central, but it is completely voluntary and could only occur at the property owners' initiative. With a transfer of density, if there is an offsetting reduction in FAR on Belward, the density and height in LSC Central could be increased by 0.5 FAR and by 50 feet above what the Plan allows for this district.

The Plan envisions redeveloping portions of the block surrounded by Broschart Road, Medical Center Drive, Great Seneca Highway, and Blackwell Road. Currently, this area is developed with low-density, low-scale uses. With a transit station along Broschart Road, portions of this block could redevelop to higher densities with a mix of housing, retail, and employment uses. The Plan recommends rezoning the RICA and Noyes facilities (from R-200 to LSC) to accommodate redevelopment consistent with the vision for LSC Central if these uses are relocated.

A fire station is needed in this area and the selected location is the northwest corner of Shady Grove Road and Darnestown Road. The 1990 *Shady Grove Study Area Master Plan* identified this intersection for a possible grade-separated interchange, which is being removed by this Plan.

map 12 LSC Central: Proposed Zoning



map 13 LSC Central: Urban Form



Recommendations

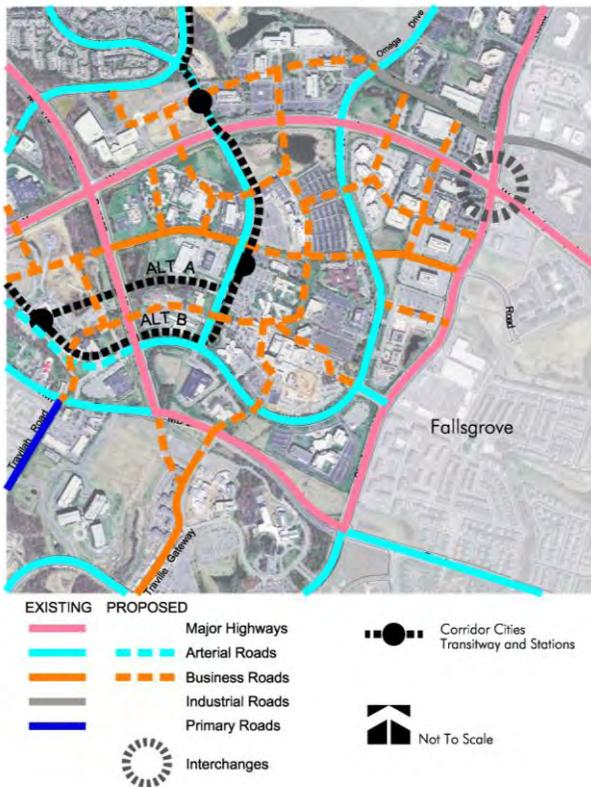
Land Use and Zoning

- Amend the LSC Zone to allow mixed uses and increased density and height.
- Amend the LSC zoning standards to reflect current technology and allow future flexibility.
- Allow a maximum of 1.0 FAR for properties in LSC Central.
- Allow a maximum of 1.5 FAR for properties in the center of the district (bounded by Key West Avenue, Medical Center Drive, and Broschart Road): AHC, JHU, and 9707, 9711, and 9715 Medical Center Drive.
- Allow a maximum of 30 percent of permitted FAR to be used for housing.
- Rezone the RICA and Noyes properties from the R-200 Zone to the LSC Zone.
- Rezone the R&D and O-M parcels to the LSC Zone.
- Require submission of a Concept Plan prior to approval of any future individual development projects for AHC and JHU to address the Plan’s guidelines, including the location of the CCT, the highest densities and height at transit, the mix of uses, creation of a local street network, and provision of open spaces.
- Accommodate a fire station on the northwest corner of Shady Grove Road and Darnestown Road.

Urban Form and Open Spaces

- Locate the highest density and tallest buildings (150 feet) adjacent to the transit station to form an identifiable center. Future developments should be well-integrated with each other.
- Create an identifiable LSC Loop along Medical Center Drive that connects pedestrians to other transit centers, the network of natural pathways along the stream buffers, and the open spaces.
- Design Broschart Road as an urban street, lined with buildings and activating street-level uses. The east side of Broschart Road is shared by AHC and JHU, and both property owners have opportunities to create a lively street edge that takes full advantage of transit station proximity.
- Design Blackwell Road between the AHC and JHU properties with a building edge and improved connections.
- Provide at least 15 percent of the net tract area as public use space.
- Include the following public open spaces:
 - LSC Loop
 - stream buffers
 - urban square at the CCT station
 - urban promenade to connect between buildings and public spaces.

map 14 LSC Central: Mobility



Mobility

- Locate a CCT Station along Broschart Road near Blackwell Drive in the vicinity of AHC and JHU.
- Extend Blackwell Road between Medical Center Drive and Broschart Road.
- Create additional streets to encourage an urban building form and to improve access and circulation for pedestrians and vehicles.
- Widen Key West Avenue (MD 28) to 8 lanes divided.
- Construct an interchange at Key West Avenue (MD 28) and Shady Grove Road.



DRAWING LEGEND

- PROPOSED BUILDING OR ADDITION
- EXISTING BUILDING

BUILDING HEIGHT RANGE:
3 STORIES / 42 FT - 15 STORIES / 150 FT

FAR RANGE:
1.29 - 1.50

SHADY GROVE ADVENTIST
MEDICAL CENTER
CONCEPT PLAN
09.09.2011

LEO A DAILY
PLANNING ARCHITECTURE ENGINEERING INTERIORS
1201 Connecticut Avenue, NW, 10th Floor
Washington, DC 20036
202-861-6600



BUILDING LEGEND

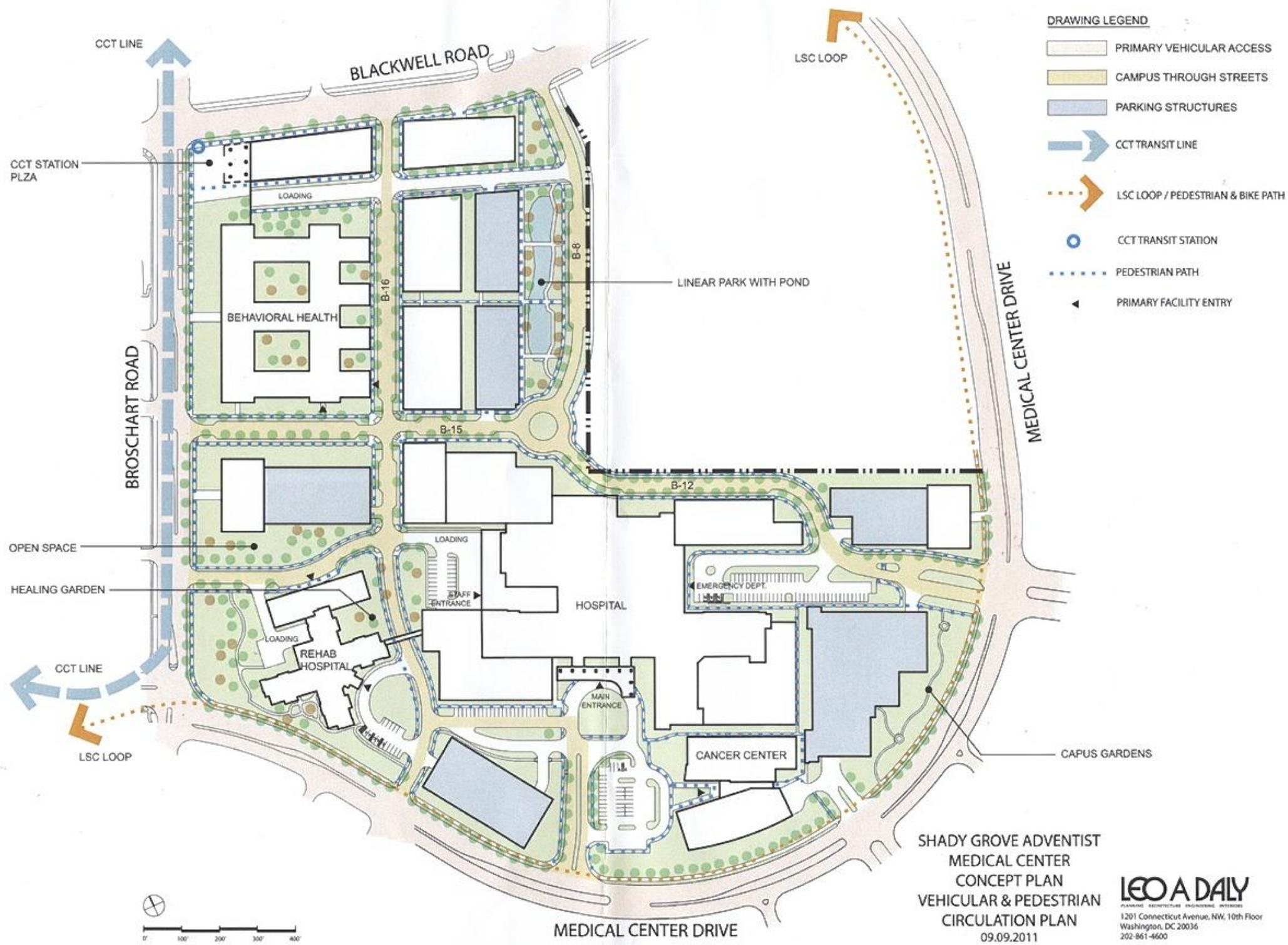
- A** HOSPITAL
- B** REHABILITATION HOSPITAL
- C** BEHAVIORAL HEALTH
- D** CANCER CARE CENTER
- E** PARKING STRUCTURE
- F** HOSPITAL ADDITION
- G** REHAB HOSPITAL ADDITION
- H** ONCOLOGY SERVICES
- I** HEALTH, WELLNESS & PREVENTION
- K** DIAGNOSTIC & OUTPATIENT SERVICES
- L** CLINICAL SERVICES
- M** MIXED-USED HIGH-RISE

BUILDING HEIGHT RANGE:
 3 STORIES / 42 FT - 15 STORIES / 150 FT

FAR RANGE:
 1.29 - 1.50

SHADY GROVE ADVENTIST
 MEDICAL CENTER
 CONCEPT PLAN
 AERIAL PERSPECTIVE
 09.09.2011

LEO A DALY
PLANNING ARCHITECTURE ENGINEERING INTERIORS
 1201 Connecticut Avenue, NW, 10th Floor
 Washington, DC 20036
 202-861-4600



- DRAWING LEGEND**
- PRIMARY VEHICULAR ACCESS
 - CAMPUS THROUGH STREETS
 - PARKING STRUCTURES
 - CCT TRANSIT LINE
 - LSC LOOP / PEDESTRIAN & BIKE PATH
 - CCT TRANSIT STATION
 - PEDESTRIAN PATH
 - PRIMARY FACILITY ENTRY

CCT STATION PLZA

OPEN SPACE

HEALING GARDEN

CCT LINE

LSC LOOP

BROSCHART ROAD

BLACKWELL ROAD

LSC LOOP

MEDICAL CENTER DRIVE

LOADING

BEHAVIORAL HEALTH

B-16

B-8

LINEAR PARK WITH POND

B-15

B-12

LOADING

STAFF ENTRANCE

HOSPITAL

EMERGENCY DEPT.

LOADING

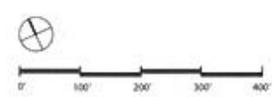
REHAB HOSPITAL

MAIN ENTRANCE

CANCER CENTER

CAPUS GARDENS

MEDICAL CENTER DRIVE



SHADY GROVE ADVENTIST
 MEDICAL CENTER
 CONCEPT PLAN
 VEHICULAR & PEDESTRIAN
 CIRCULATION PLAN
 09.09.2011

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SHADY GROVE ADVENTIST
 MEDICAL CENTER
 CONCEPT PLAN
 OPEN SPACE PLAN
 09.09.2011

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DRAWING LEGEND

-  MAIN FACILITY ENTRIES
-  EXISTING BUILDING

BROSCHART BUILDING (OFFICE)

BEHAVIORAL HEALTH

SURFACE PARKING

BROSCHART ROAD

REHABILITATION HOSPITAL

HOSPITAL

PARKING STRUCTURE

MEDICAL CENTER DRIVE

MEDICAL CENTER DRIVE



SHADY GROVE ADVENTIST
 MEDICAL CENTER
 EXISTING CONDITIONS PLAN
 09.09.2011

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MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

December 9, 2011

Mr. Robert G. Brewer, Jr.
Ms. April B. Mackoff
Lerch, Early & Brewer, Chartered.
Suite 460, Bethesda Metro Center
Bethesda, MD 20814-5367

Re: Adventist Health Care Preliminary Plan of Subdivision No. 119882330
Forest Conservation Plan Exemption No. 42011108E
Request for Reconsideration of Forest Conservation Plan Exemption

Dear Mr. Brewer and Ms. Mackoff:

I am writing in response to your November 28, 2011 letter in which you asked staff to reconsider its decision to revoke the Forest Conservation Plan Exemption No. 42011108E. Although we appreciate Adventist's desire to avoid having to file a forest conservation plan in this case, and we regret having to revoke the previously approved exemption, after carefully considering your letter we stand by our decision to require the filing of a forest conservation plan in this case.

As you noted in your letter, our understanding that a forest conservation plan is required in this case is based on the fact that Adventist's plan will result in a subdivision of land, an issue that staff and the Planning Board recently dealt with in reviewing plans for the Johns Hopkins University Medical Center. In that case, we examined the same kinds of issues on the Hopkins site, which is adjacent to Shady Grove Adventist Hospital. In this review, Staff determined that the dedication of road right-of-way required a change in a lot line on a recorded lot or parcel of land (see letter, attached). The dedication results in both a change in lot line and a division of an existing lot, which fall under the definitions of resubdivision and subdivision, and which disqualify Shady Grove Adventist Hospital from receiving an exemption under Section 22A-5(t) of the Montgomery County Code.

We are sympathetic to Adventist's desire to avoid the additional costs involved in forest conservation mitigation. However, we note that if it were not for the unusual private road arrangement that Adventist proposes for this project, there would be no debate about whether the property was being subdivided. Moreover, while our position that a forest conservation plan is required in this case is based on our technical reading of the law, given the significant intensification of the use of this property the need for forest planting will help mitigate the impact of this project.

To reduce the impact of the costs, Staff offers to Shady Grove Adventist Hospital the same option granted to Johns Hopkins University – that satisfaction of the planting requirements may be phased over the Site Plan anticipated for implementation of this Preliminary Plan. As presented in Exhibit C of your letter, this Plan envisions 14 separate Site Plans to implement this Preliminary Plan. Assuming the \$319,928 cost estimated by your consultant to be correct, this would add \$22,852 to each phase of your project, plus the \$16,056 estimated cost for the Preliminary FCP preparation. We hope that phasing the requirements will make it easier for Shady Grove to budget the costs over the life of the project.

Mr. Robert G. Brewer, Jr.
Ms. April B. Mackoff
Lerch, Early & Brewer, Chartered
December 9, 2011
Page Two

We recognize the important contribution that the expansion of Shady Grove Adventist Hospital will make to the future of Montgomery County's economic development and the health and well-being of its citizens. We believe that the Forest Conservation program of Montgomery County will likewise contribute to the health and well-being of the people who live here.

Please do not hesitate to contact us if you need any more information or clarification.

Sincerely,



Rollin Stanley
Planning Director

RS/PB/cm
(Area 2)

cc: Mark Pfefferle
Cathy Conlon
David Lieb
Larry Walker
William Robertson



ATTORNEYS

November 28, 2011

Mr. Steve Findley
Area 3 Division
Maryland-National Capital Park and Planning Commission
8787 Georgia Avenue
Silver Spring, MD 20910

Re: Adventist HealthCare Preliminary Plan of Subdivision No. 119882330
Forest Conservation Plan Exemption No. 42011108E
Request for Reconsideration of Forest Conservation Plan Exemption

Dear Mr. Findley:

On behalf of our client, Adventist HealthCare, this letter is in regard to Forest Conservation Plan Exemption No. 42011108E ("FCE") dated March 23, 2011 for pending Preliminary Plan of Subdivision Application No. 119882330 ("Preliminary Plan") for the Shady Grove Adventist Medical Center Campus property located in the Shady Grove Life Sciences Center in Rockville, Maryland (the "Property"). Specifically, this letter requests that Technical Staff reconsider its proposed revocation of the FCE, and uphold the FCE so that Adventist HealthCare's Preliminary Plan can proceed expeditiously to a hearing before the Planning Board.

Adventist HealthCare greatly appreciates the Maryland-National Capital Park and Planning Commission Technical Staff's diligent review of the Property's Preliminary Plan to date. We believe that Adventist HealthCare and M-NCPPC Technical Staff have reached a consensus on all outstanding issues and concerns regarding the Preliminary Plan except for one issue: Technical Staff's proposed revocation of the FCE. Specifically, Technical Staff argues that the Preliminary Plan's proposed dedication of perimeter rights-of-way to comply with the Great Seneca Science Corridor Master Plan's ("Master Plan") recommendations for the Property creates a subdivision, which negates the Property's exemption from submitting a forest conservation plan under Sections 22A-5(k) and 22A-5(t) of the Forest Conservation Law.¹ Adventist HealthCare disagrees with Staff's categorization of the Preliminary Plan's dedication of perimeter rights-of-way as a subdivision and submits that the FCE should be upheld for the reasons set forth below in this letter.

¹ As further explained in the FCE and in subsequent sections of this letter, the Preliminary Plan's 103,420 square feet of remaining development capacity under an existing preliminary plan is exempt under Section 22A-5(k) of the Forest Conservation Law. The Preliminary Plan's remaining 506,946 square feet of new development is exempt under Section 22A-5(t) of the Forest Conservation Law.



ATTORNEYS

Mr. Steve Findley
November 28, 2011
Page 2

Adventist HealthCare Specifically Negotiated with Technical Staff over Seven Months Ago that the Preliminary Plan is Exempt from the Forest Conservation Law under Sections 22A-5(k) and 22A-5(t).

Adventist HealthCare specifically negotiated with Technical Staff over seven months ago that the Preliminary Plan is exempt from the Forest Conservation Law under Sections 22A-5(k) and 22A-5(t). Until a few weeks ago, Adventist HealthCare believed that this issue was resolved.

On January 6, 2011, Adventist HealthCare submitted its initial forest conservation exemption request for the Preliminary Plan under Section 22A-5(k)(2-3) of the Forest Conservation Law.² At this time, Adventist HealthCare believed that the Preliminary Plan was entirely exempt under Section 22A-5(k)(2-3) of the Forest Conservation Law because the Preliminary Plan (1) amends an existing and approved preliminary plan, which was approved between July 1, 1984 and July 1, 1991, (2) the proposed development will not result in the cutting, clearing, or grading of any forest on property located in a special protection area which must submit a water quality plan and (3) the proposed development of the Property does not require resubdivision.

On February 1, 2011, Adventist HealthCare received a letter from Technical Staff regarding the initial exemption request, which requested additional information and clarification to confirm the exemption request. Adventist HealthCare promptly responded

² The relevant provisions of Section 22A-5(k)(2-3) of the Forest Conservation Law are as follows:

The requirements of Article II do not apply to:

(k) any lot covered by a preliminary plan of subdivision or site plan that did not receive a sediment control permit before July 1, 1991, and for which the preliminary plan of subdivision or site plan:

(2) was approved or extended between July 1, 1984 and July 1, 1991, and

(3) the construction will not result in the cutting, clearing, or grading of:

(B) any forest on property located in a special protection area which must submit a water quality plan.

A preliminary plan of subdivision or site plan approved before July 1, 1991, that is revised after that date at the initiative of the applicant and which results in the cutting of more than 5,000 additional square feet of forest is not exempt. Development or redevelopment of a property which requires resubdivision is not exempt.

Mr. Steve Findley
November 28, 2011
Page 3

to this letter by requesting a meeting with Technical Staff to discuss the Preliminary Plan's exemption request, which occurred on February 24, 2011.

During the February 24, 2011 meeting, Technical Staff advised our team that it interpreted the scope of Section 22A-5(k) to be limited to the remaining development capacity under an existing and approved preliminary plan; new development associated with the additional capacity made available under the Master Plan could not be exempt under Section 22A-5(k). Therefore, Technical Staff limited the Preliminary Plan's exemption request under Section 22A-5(k) to the 103,420 square feet of remaining development capacity under an existing and approved preliminary plan. Technical Staff agreed, however, that our Preliminary Plan's proposed 506,946 square feet of new development should be exempt under Section 22A-5(t) of the Forest Conservation Law.³

Adventist HealthCare team members and Technical Staff then engaged in a dialogue to interpret the relevant language included in Section 22A-5(k) [*Development or redevelopment of a property which requires resubdivision is not exempt,*] and Section 22A-5(t)(3) [*the modification does not require approval of a new subdivision plan*] with respect to whether the Preliminary Plan creates a new subdivision. Please note that the Preliminary Plan submitted to Technical Staff in advance of the February 24, 2011 meeting proposed dedication of perimeter rights-of-way to comply with recommendations for the Property contained in the Master Plan. The proposed dedications are extremely similar to the proposed dedications of rights-of-way, which are included in the most recently submitted Preliminary Plan.

Technical Staff agreed that the recordation of plats of dedication for perimeter master-planned rights-of-way would not remove the Preliminary Plan from an exemption under Sections 22A-5(k) and 22A-5(t) because the Preliminary Plan does not actually subdivide the properties into multiple lots. In fact, Technical Staff even recommended that Adventist HealthCare should subsequently record new plats that reflect the dedications of master-planned rights-of-way, which contain a note indicating that the recordation of the

³ Section 22A-5(t) of the Forest Conservation Law states as follows:

The requirements of Article II do not apply to:

A modification to existing developed property if:

- (1) No more than 5,000 square feet of forest will be cleared;
- (2) The modification does not affect any forest in a stream buffer or located on property in a special protection area which must submit a water quality plan; and
- (3) The modification does not require approval of a new subdivision plan.

Mr. Steve Findley
November 28, 2011
Page 4

plats would not subject the Preliminary Plan to the forest conservation law requirements. In accordance with this discussion, Adventist HealthCare promptly resubmitted a forest conservation exemption request, which requested that the Preliminary Plan receive an exemption from the Forest Conservation Law under both Sections 22A-5(k) and 22A-5(t).

On March 23, 2011, Adventist Healthcare received the FCE, which exempts the Preliminary Plan from the Forest Conservation Law under both Sections 22A-5(k) and 22A-5(t). A copy of the FCE is attached to this letter as Exhibit A for your reference.

On November 2, 2011, Adventist HealthCare team members received your e-mail, which states as follows:

The Preliminary Plan for SGAH is showing an area labeled "future row dedication" along Blackwell Road at the northern end of the property. It is my understanding that the ROW dedication will actually occur as part of the Preliminary Plan. This would mean that a subdivision is taking place as part of the Preliminary Plan, which would negate the Forest Conservation Exemption granted several months ago. This is consistent with the approach taken on the Johns Hopkins University Montgomery Medical Center plan which will be going to the Planning Board on November 10...

Adventist HealthCare had not received any follow-up correspondence from Technical Staff with respect to the FCE since obtaining the FCE on March 23, 2011, more than seven months ago. Moreover, the Preliminary Plan that Adventist HealthCare submitted to Technical Staff prior to the issuance of the FCE showed future right-of-way dedications on perimeter roads including Blackwell Road, which Technical Staff determined did not constitute a subdivision. Adventist HealthCare attempted to resolve this issue during a meeting with Technical Staff on November 7, 2011, at which Technical Staff articulated that the Preliminary Plan is no longer exempt from the Forest Conservation Law under Sections 22A-5(k) and 22A-5(t). To support this assertion, Technical Staff relied heavily on precedent created by the recently approved Hopkins Montgomery County Medical Center Preliminary Plan. This letter responds to the discussion that occurred during the November 7, 2011 meeting.

The Preliminary Plan Satisfies the Criteria for an Exemption Under Sections 22A-5(k) and 22A-5(t) of the Forest Conservation Law.

As noted in the FCE, the Preliminary Plan satisfies the criteria for an exemption under Sections 22A-5(k) and 22A-5(t) of the Forest Conservation Law. Adventist



Mr. Steve Findley
November 28, 2011
Page 5

HealthCare believes that Technical Staff's willingness to revoke the FCE is limited to its interpretation of the following language contained in the two claimed exemptions to the Forest Conservation Law:

- a. Section 22A-5(k) [*Development or redevelopment of a property which requires resubdivision is not exempt,*]; and
- b. Section 22A-5(t)(3) [*the modification does not require approval of a new subdivision plan*].

Dedication of master-planned perimeter roads through the recordation of plats of dedication does not create a subdivision or resubdivision. Section 50-1 of the Subdivision Regulations (Chapter 50 of the Montgomery County Code) defines the terms "subdivision" and "resubdivision" as follows:

Subdivision: The division or assemblage of a lot, tract or parcel of land into one (1) or more lots, plots, sites, tracts, parcels or other divisions for the purpose, whether immediate or future, of sale or building development and, when appropriate to the context, relating to the process of subdividing or to the land or area subdivided; provided, that the definition of subdivision shall not include a bona fide division or partition of exclusively agricultural land not for development purposes. A resubdivision is a subdivision.

Resubdivision: A change in any lot line of a recorded lot or parcel of land. Resubdivision includes the assembly of recorded lots or parts of lots. A resubdivision is a subdivision.

The pending Preliminary Plan does not divide the Property into lots or parcels, or assemble the Property with other lots or parcels. The Preliminary Plan only relocates the lot lines of the Property to effectuate the dedication of master-planned perimeter rights-of-way, which are required by the Master Plan for the Property – this is not a subdivision! Although Technical Staff has embraced a plain language and narrow reading of the definitions of subdivision and resubdivision, the Preliminary Plan's required dedication of master-planned perimeter rights-of-way does not implicate the practical interpretation and true spirit of the terms subdivision and resubdivision. Because the dedication of master-planned perimeter rights-of-way through the recordation of plats of dedication does not create a subdivision or resubdivision, the Preliminary Plan must remain exempt under Sections 22A-5(k) and 22A-5(t) of the Forest Conservation Law.



ATTORNEYS

Mr. Steve Findley
November 28, 2011
Page 6

The Preliminary Plan is Distinguishable from the Hopkins Montgomery County Medical Center Preliminary Plan.

The Preliminary Plan is distinguishable from the Hopkins Montgomery County Campus Preliminary Plan No. 119861153 ("MCC Preliminary Plan"). As you are aware, Technical Staff required the MCC Preliminary Plan to satisfy the Forest Conservation Law because it determined that the MCC Preliminary Plan created a subdivision. Adventist HealthCare concurs that the MCC Preliminary Plan created a subdivision because the MCC Preliminary Plan divided Hopkins' property into multiple parcels by creating an outlot referred to as Outlot A. According to the MCC Preliminary Plan, Outlot A is an 0.11 acre parcel, which is a distinct and separate lot from the remaining 31.82 acres referred to as Parcel B in the Preliminary Plan. In contrast to Adventist HealthCare's required dedication of perimeter master-planned rights-of-way, the MCC Preliminary Plan's creation of an outlot implicates the practical interpretation and true spirit of the terms subdivision and resubdivision.

Adventist HealthCare Reasonably Relied on the FCE and will Suffer a Significant Financial Detriment if Technical Staff Revokes the FCE.

Adventist HealthCare reasonably relied on the FCE, which Technical Staff issued more than seven months ago, and will suffer a significant financial detriment if Technical Staff revokes the FCE. Once Adventist HealthCare received the FCE on March 23, 2011, it never budgeted having to satisfy the Forest Conservation Law's requirements into its overall budget for future campus redevelopment plans. During the past seven months, Adventist HealthCare had no reason to suspect that Technical Staff would threaten to revoke the FCE. The FCE contains two provisions in regard to revocation of the FCE: "any changes from the approved exemption request may constitute grounds to rescind or amend any approval actions taken and to take enforcement actions..." and "if there are any subsequent modifications planned to the approved plan, a separate amendment must be submitted to M-NCPPC for review and approval prior to those activities occurring." The relatively minor design related changes that Adventist HealthCare made to the Preliminary Plan subsequent to Technical Staff's issuance of the FCE do not constitute grounds to rescind the FCE, and the Planning Board has not yet approved the Preliminary Plan. The Preliminary Plan has always proposed to dedicate perimeter rights-of-way to comply with the recommendations for the Property contained in the Master Plan. Thus, Adventist HealthCare reasonably relied on the FCE, which Technical Staff lacks adequate grounds to rescind.



ATTORNEYS

Mr. Steve Findley
November 28, 2011
Page 7

Adventist HealthCare will suffer a significant financial detriment if Technical Staff revokes the FCE. After Adventist HealthCare's November 7, 2011 meeting with Technical Staff, Loiederman Soltesz Associates prepared two cost estimates in regard to the cost of complying with the forest conservation law for the Preliminary Plan and for future site plan application submissions. These estimates are attached to this letter as follows:

1. Exhibit B: Summary of Costs to Satisfy Forest Conservation Law Requirements for Preliminary Plan Submission; and
2. Exhibit C: Summary of Costs to Satisfy Forest Conservation Law Requirements for Site Plan Submissions.

As shown on Exhibit B, the cost of complying with the Forest Conservation Law's requirements for the Preliminary Plan is approximately \$16,306.40. As shown on Exhibit C, the cost of complying with the Forest Conservation Law's requirements for future site plan application submissions is approximately \$319,928.

Together, the total cost of complying with the Forest Conservation Law's requirements for the Preliminary Plan and future site plan application submissions is approximately ~~\$336,234.40~~. This is an excessive and unnecessary cost that Adventist HealthCare did not reasonably anticipate in its overall budget for future campus redevelopment plans. Principles of fairness and equity require that Technical Staff uphold the FCE so that Adventist HealthCare's Preliminary Plan can (a) proceed expeditiously to a hearing before the Planning Board and (b) remain within Adventist Healthcare's allotted budget for future campus redevelopment.

Conclusion

In summary, we submit that the Preliminary Plan must remain exempt from the Forest Conservation Law under Sections 22A-5(k) and 22A-5(t) because the Preliminary Plan's dedication of perimeter rights-of-way to comply with Master Plan recommendations for the Property does not constitute a subdivision. We sincerely hope that after reviewing this letter, M-NCPPC Technical Staff will agree with our assessment that the Preliminary Plan should remain exempt from the Forest Conservation Law. Adventist HealthCare anticipated an early December, 2011 Planning Board hearing date for the Preliminary Plan and any additional delay as a result of this issue is unacceptable. We are willing to discuss this issue further if you believe that is necessary or appropriate.

Mr. Steve Findley
November 28, 2011
Page 8

If M-NCPPC Technical Staff remains unwilling to uphold the FCE, Adventist HealthCare will then have no choice but to respectfully request that M-NCPPC Technical Staff issue a written decision on the Preliminary Plan. Even if M-NCPPC Technical Staff's written decision on the Preliminary Plan is a denial, we intend to present the Preliminary Plan before the Planning Board as soon as possible where we will advocate that the Planning Board should reinstate and the uphold the FCE.

We look forward to an expeditious resolution of this matter and the conclusion of M-NCPPC Technical Staff's review of the Preliminary Plan. We respectfully request a response to this letter no later than the close of business on December 7, 2011. Thank you very much.

Very truly yours,



Robert G. Brewer, Jr.



April B. Mackoff

Attachments.

cc: Rollin Stanley
Cathy Conlon
Mark Pfefferle
Patrick Butler
Larry Walker
Howard Vogel
Steve Tawes
Theresa Polizzi

Exhibit A



MONTGOMERY COUNTY PLANNING DEPARTMENT
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

March 23, 2011

Larry Walker, The Walker Group
For: Adventist Health Care, Inc.
1801 Research Boulevard
Suite 400
Rockville, MD 20850

RE: Forest Conservation Plan Exemption
Plan number 42011108E
Shady Grove Adventist Hospital

Dear Mr. Walker:

A request to be exempt from submitting a forest conservation plan was submitted to the Planning Department for the above mentioned plan. The request covers an application to develop 610,376 square feet on the Shady Grove Adventist Hospital campus in the Life Sciences Center in Gaithersburg, Maryland. Based on the information submitted on March 11, 2011, the exemption request is confirmed.

Preliminary Plan of Subdivision #19882330 approved 626,910 square feet of office/commercial space. To date, 523,480 square feet of the 626,910 square feet has already been approved for exemption and constructed. Therefore 103,430 square feet of previously approved development capacity remains unbuilt and qualifies for forest conservation exemption under Section 22A-5(k) of the Forest Conservation Law. Forest conservation plan exemption Section 22A-5(k) applies to:

“Any lot covered by a preliminary plan of subdivision or site plan that did not receive a sediment control permit before July 1, 1991, and for which the preliminary plan of subdivision or site plan:

- (1) was approved before July 1, 1984, and has less than 40,000 square feet of forest cover; or
- (2) was approved or extended between July 1, 1984 and July 1, 1991, and
- (3) the construction will not result in the cutting, clearing or grading of:
 - (A) any forest in a stream buffer, or
 - (B) any forest on property located in a special protection area which must submit a water quality plan.”

The first 103,430 square feet qualifies for an exemption from submitting a forest conservation plan because it meets the requirements of 22A-5(k) 1 through 3.

After subtracting the 103,430 square feet of development granted exemption under Section 22A-5(k) from the 610,376 square feet of development covered by this exemption request, there remains 506,946 square feet that is considered new development. Based on our review, the request to exempt 506,946 square feet of new development is confirmed under Section 22A-5(t) of the Forest Conservation Law. Exemption under Section 22A-5(t) applies to:

"A modification to existing developed property if:

- (1) no more than 5000 square feet of forest will be cleared;
- (2) the modification does not affect any forest in a stream buffer or located on property in a special protection area which must submit a water quality plan; and
- (3) the modification does not require approval of a new subdivision plan."

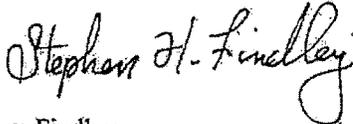
The proposed development application meets the requirements of 22A-5(t) 1 through 3 including the requirement that a new subdivision is not required.

In summary, this letter confirms exemptions for 103,430 square feet of development under Section 22A-5(k) and 506,946 square feet of development under Section 22A-5(t) of the Forest Conservation Law, for a total of 610,376 square feet of development that is exempt from the requirement to submit a Forest Conservation Plan.

Please note that the Specimen Tree identified as T-17 is mis-labeled as a willow oak (*Quercus phellos*) on Sheet 4 of the Existing Conditions Plan. It is correctly listed as a pin oak (*Quercus palustris*) in the Significant and Specimen Tree List on Sheet 1 of the Existing Conditions Plan. Please make certain that the tree is correctly labeled on subsequent plans where the tree is shown.

Any changes from the approved exemption request may constitute grounds to rescind or amend any approval actions taken and to take appropriate enforcement actions. If there are any subsequent modifications planned to the approved plan, a separate amendment must be submitted to M-NCPPC for review and approval prior to those activities occurring. If you have any questions regarding these actions, please feel free to contact me at 301-495-4727 or steve.findley@montgomeryplanning.org.

Sincerely,



Steve Findley
Environmental Planner Coordinator, Area 2

CC: NRI/FSD #42011108E
Marion Bundens, Loiederman Soltesz Associates, Inc.

Exhibit B

Exhibit B: Summary of Costs to Satisfy Forest Conservation Law Requirements for Preliminary Plan Submission

Task	Associated Plan Submission	Plan Preparation Fees*	Submission Review Fees*	Grand Total*
NRI/FSD	Preliminary Plan # 20110160	\$500.00	\$720.00	
Preliminary FCP	Preliminary Plan # 20110160	\$2,750.00	\$12,336.40	
Sub-Totals*		\$3,250.00	\$13,056.40	
Grand Total *				\$16,306.40

* All fees, for LSA and MINCPPC are based upon the current rates as of July 1, 2011.

C

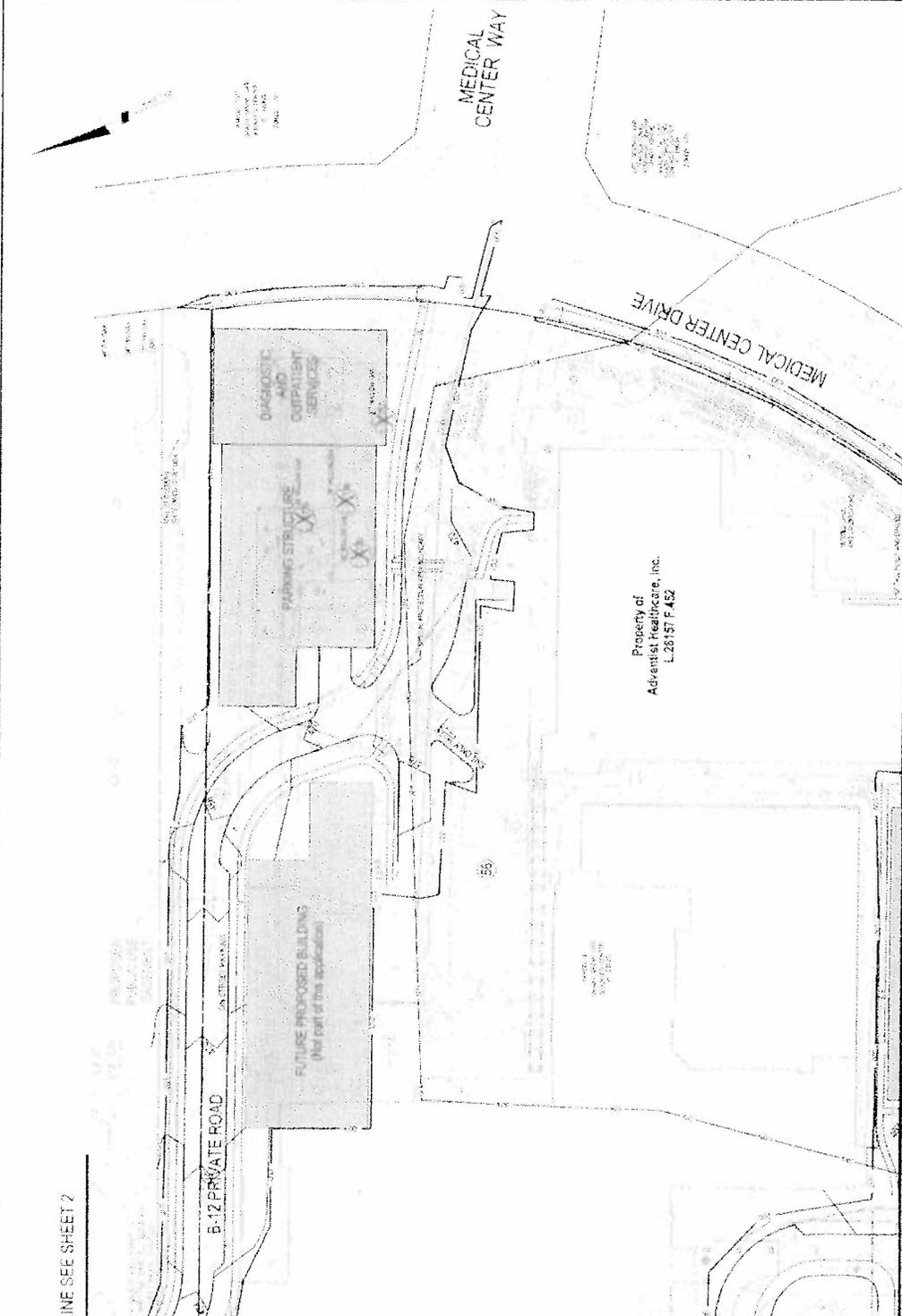
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Exhibit C

Exhibit C: Summary of Costs to Satisfy Forest Conservation Law Requirements for Site Plan Submissions

Task	Associated Plan Submission	Plan Preparation Fees*	Submission Review Fees* paid in full at PFCP	Off-Site Mitigation by Reforestation*	Grand Total*
Final FCP	Site Plan #1 - Parking Structure	\$3,250.00			
	Site Plan #2 - Rehabilitation Hospital Tower	\$3,250.00			
	Site Plan #3 - Behavioral Health	\$3,250.00			
	Site Plan #4 - MOB & Garage	\$3,250.00			
	Site Plan #5 - New Hospital Tower	\$3,250.00			
	Site Plan #6 - MOB & Garage	\$3,250.00			
	Site Plan #7 - Clinical Services & Garage	\$3,250.00			
	Site Plan #8 - Clinical Services & Garage	\$3,250.00			
	Site Plan #9 - Future New Hospital Tower	\$3,250.00			
	Site Plan #10 - Future MOB	\$3,250.00			
	Site Plan #11 - Future Clinical Services	\$3,250.00			
	Site Plan #12 - Future MOB	\$3,250.00			
	Site Plan #13 - Future New Hospital Tower	\$3,250.00			
	Site Plan #14 - Future MOB	\$3,250.00			
Off-Site Mitigation by Reforestation (approx. 6 acres):* Based upon current Fee-In-Lieu charge of \$1.05/sf				\$274,428.00	
Sub-Totals*		\$45,500.00	\$0.00	\$274,428.00	
Grand Total *					\$319,928.00

* All fees, for LSA, MINCPFC and Fee-In-Lieu, are based upon the current rates as of July 1, 2011.



LEGEND

Symbol	Description
(Symbol)	PROPOSED BUILDING
(Symbol)	EXISTING BUILDING
(Symbol)	PROPOSED PARKING
(Symbol)	EXISTING PARKING
(Symbol)	PROPOSED DRIVEWAY
(Symbol)	EXISTING DRIVEWAY
(Symbol)	PROPOSED SIDEWALK
(Symbol)	EXISTING SIDEWALK
(Symbol)	PROPOSED LANDSCAPE
(Symbol)	EXISTING LANDSCAPE
(Symbol)	PROPOSED UTILITY
(Symbol)	EXISTING UTILITY
(Symbol)	PROPOSED FENCE
(Symbol)	EXISTING FENCE
(Symbol)	PROPOSED SIGN
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(Symbol)	PROPOSED EGRESS
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(Symbol)	EXISTING RESTORATION
(Symbol)	PROPOSED PRESERVATION
(Symbol)	EXISTING PRESERVATION
(Symbol)	PROPOSED PROTECTION
(Symbol)	EXISTING PROTECTION

PRELIMINARY FOREST CONSERVATION PLAN

SHADY GROVE ADVENTIST HOSPITAL
 PATENTING AND PROTECTION RIGHTS
 HENNING COUNTY, MARYLAND

APPLICANT: **Adventist Healthcare**
 11000 WOODBURN ROAD, SUITE 100
 GREENBELT, MARYLAND 20814

PROJECT NO: 11000 WOODBURN ROAD, SUITE 100
 GREENBELT, MARYLAND 20814

DATE: 11/15/2011

SCALE: 1" = 100'

PROJECT LOCATION: 11000 WOODBURN ROAD, SUITE 100, GREENBELT, MARYLAND 20814

PROJECT DESCRIPTION: PRELIMINARY FOREST CONSERVATION PLAN

PROJECT OWNER: ADVENTIST HEALTHCARE

PROJECT MANAGER: [Name]

PROJECT ENGINEER: [Name]

PROJECT ARCHITECT: [Name]

PROJECT LANDSCAPE ARCHITECT: [Name]

PROJECT CIVIL ENGINEER: [Name]

PROJECT ELECTRICAL ENGINEER: [Name]

PROJECT MECHANICAL ENGINEER: [Name]

PROJECT PLUMBING ENGINEER: [Name]

PROJECT STRUCTURAL ENGINEER: [Name]

PROJECT ENVIRONMENTAL ENGINEER: [Name]

PROJECT GEOTECHNICAL ENGINEER: [Name]

PROJECT SURVEYING ENGINEER: [Name]

PROJECT ASBESTOS ABATEMENT ENGINEER: [Name]

PROJECT LEAD PAINT ABATEMENT ENGINEER: [Name]

PROJECT RADON ABATEMENT ENGINEER: [Name]

PROJECT AIR QUALITY ENGINEER: [Name]

PROJECT NOISE ENGINEER: [Name]

PROJECT VIBRATION ENGINEER: [Name]

PROJECT TRANSPORTATION ENGINEER: [Name]

PROJECT TRAFFIC ENGINEER: [Name]

PROJECT SIGNALING ENGINEER: [Name]

PROJECT LIGHTING ENGINEER: [Name]

PROJECT SECURITY ENGINEER: [Name]

PROJECT ACCESS ENGINEER: [Name]

PROJECT EGRESS ENGINEER: [Name]

PROJECT ESCAPE ENGINEER: [Name]

PROJECT EVACUATION ENGINEER: [Name]

PROJECT FIRE ENGINEER: [Name]

PROJECT ALARM ENGINEER: [Name]

PROJECT CAMERA ENGINEER: [Name]

PROJECT INTERCOM ENGINEER: [Name]

PROJECT VOIP ENGINEER: [Name]

PROJECT VIDEO ENGINEER: [Name]

PROJECT AUDIO ENGINEER: [Name]

PROJECT VISUAL ENGINEER: [Name]

PROJECT TACTILE ENGINEER: [Name]

PROJECT BRaille ENGINEER: [Name]

PROJECT SIGNAGE ENGINEER: [Name]

PROJECT MARKING ENGINEER: [Name]

PROJECT PAINTING ENGINEER: [Name]

PROJECT CLEANING ENGINEER: [Name]

PROJECT MAINTENANCE ENGINEER: [Name]

PROJECT REPAIR ENGINEER: [Name]

PROJECT REPLACEMENT ENGINEER: [Name]

PROJECT ADDITION ENGINEER: [Name]

PROJECT REMOVAL ENGINEER: [Name]

PROJECT DEMOLITION ENGINEER: [Name]

PROJECT CONSTRUCTION ENGINEER: [Name]

PROJECT RENOVATION ENGINEER: [Name]

PROJECT RESTORATION ENGINEER: [Name]

PROJECT PRESERVATION ENGINEER: [Name]

PROJECT PROTECTION ENGINEER: [Name]

Attachment L



DEPARTMENT OF ENVIRONMENTAL PROTECTION

Isiah Leggett
County Executive

Robert G. Hoyt
Director

February 2, 2012

Françoise Carrier, Chair
Montgomery County Planning Board
Maryland National Capital Park & Planning Commission
8787 Georgia Avenue
Silver Spring, Maryland 20910

RE: Shady Grove Medical Campus, DAIC 120110160, NRI/FSD application accepted on 1/18/2012

Dear Ms. Carrier:

The County Attorney's Office has advised me that Section 5-1607 of the Natural Resources Article, Maryland Code, applies to any application required under Chapter 22A of the Montgomery County Code submitted after October 1, 2009. Since the application for the above referenced request is required to comply with Chapter 22A based on a review by the Maryland National Capital Park & Planning Commission (MNCPPC) and was submitted after this date, I am providing the following recommendation pertaining to this request for a variance.

Section 22A-21(d) of the Forest Conservation Law states that a variance must not be granted if granting the request:

1. Will confer on the applicant a special privilege that would be denied to other applicants;
2. Is based on conditions or circumstances which are the result of the actions by the applicant;
3. Arises from a condition relating to land or building use, either permitted or nonconforming, on a neighboring property; or
4. Will violate State water quality standards or cause measurable degradation in water quality.

Applying the above conditions to the plan submitted by the applicant, I make the following findings as the result of my review:

1. The granting of a variance in this case would not confer a special privilege on this applicant that would be denied other applicants as long as the same criteria are applied in each case. Therefore, the variance can be granted under this condition.

2. Based on a discussion on March 19, 2010 between representatives of the County and the Maryland Department of Natural Resources Forest Service and the MNCPPC, the disturbance of trees, or other vegetation, is not interpreted as a condition or circumstance that is the direct result of the actions by the applicant. Therefore, the variance can be granted under this condition, as long as appropriate mitigation is provided for the resources disturbed.
3. The disturbance of trees, or other vegetation, by the applicant does not arise from a condition relating to land or building use, either permitted or nonconforming, on a neighboring property. Therefore, the variance can be granted under this condition.
4. The disturbance of trees, or other vegetation, by the applicant will not result in a violation of State water quality standards or cause measurable degradation in water quality. Therefore, the variance can be granted under this condition.

Therefore, I recommend that this applicant qualify for a variance conditioned upon mitigating for the loss of resources due to removal or disturbance to trees, and other vegetation, subject to the law. In the case of removal, the entire area of the critical root zone (CRZ) should be included in mitigation calculations regardless of the location of the CRZ (i.e., even that portion of the CRZ located on an adjacent property). When trees are disturbed, any area within the CRZ where the roots are severed, compacted, etc., such that the roots are not functioning as they were before the disturbance must be mitigated. Exceptions should not be allowed for trees in poor or hazardous condition because the loss of CRZ eliminates future potential of the area to support a tree or provide stormwater management. Tree protection techniques, such as trimming branches or installing temporary mulch mats to limit soil compaction during construction without permanently reducing the critical root zone, that are implemented according to industry standards are acceptable mitigation to limit disturbance. Techniques such as root pruning should be used to improve survival rates of impacted trees but they should not be considered mitigation for the permanent loss of critical root zone. Until other guidelines are developed, I recommend requiring mitigation based on the number of square feet of the critical root zone lost or disturbed. The mitigation can be met using any currently acceptable method under Chapter 22A of the Montgomery County Code.

If you have any questions, please do not hesitate to contact me directly.

Sincerely,


Laura Miller
County Arborist

cc: Robert Hoyt, Director
Walter Wilson, Associate County Attorney
Mark Pfefferle, Acting Chief

Attachment M



DEPARTMENT OF PERMITTING SERVICES

Isiah Leggett
County Executive

Carla Reid
Director

April 5, 2011

Mr. William Musico, PE
Loiederman Soltesz Associates, Inc.
2 Research Place, Suite 100
Rockville, Maryland 20850

Re: **Preliminary Water Quality Plan and Stormwater Management Concept for Shady Grove Adventist Hospital Expansion**
SM File #: 239312
Tract Size/Zone: 39.16 acres/Hospital
Watershed: Piney Branch/Watts Branch

SPECIAL PROTECTION AREA

Dear Mr. Musico:

Based on a review by the Department of Permitting Services, the Preliminary Water Quality Plan (PWQP) and Stormwater Management Concept for the above mentioned site are conditionally approved. This approval is for the elements of the Preliminary Water Quality Plan of which DPS has lead agency responsibility, and does not include limits on imperviousness or stream buffer encroachments.

Site Description: The proposal is for four new buildings and parking structures, and the expansion of existing buildings over the existing hospital site which will result in a slight reduction in impervious area. The site is on 39.16 acres at the northeast corner of the intersection of Broschart Road and Medical Center Drive. This site is located partially within Piney Branch Special Protection Area.

Stormwater Management: Stormwater management will be provided via a combination of on-site and off-site measures that includes bio-swales, porous pavement, micro biofilters, and green roofs before draining downstream to the Western and Guldelsky Regional Wet Ponds. All areas within the proposed limit of disturbance are to provide ESD to the MEP.

Sediment Control: Extra care must be taken during the sediment control phase to protect the existing stormwater management structures. Since the site already developed and the sediment control requirements will be required at the detailed plan review stage. The use of super silt fence will be the minimum requirement for sediment control.

William Musico

Performance Goals: The performance goals that were established at the pre-application meeting still apply. The performance goals are as follows:

1. Minimize storm flow run off increases.
2. Minimize sediment loading and land disturbances with an emphasis on immediate stabilization.

Monitoring: The monitoring must be in accordance with the BMP monitoring protocols which have been established by the Department of Permitting Services (DPS) and Department of Environmental Protection (DEP). Pre-construction monitoring is not required since the site is already developed. The construction and post construction monitoring requirements are described in the "Attachment to the Preliminary Water Quality Plan" memorandum by DEP dated March 22, 2011 and included with this Preliminary Water Quality Plan approval letter. Monitoring requirements may change based on the Final Water Quality Plan submittal.

Prior to the start of any monitoring activity, a meeting is to be held on site with DEP, DPS, and those responsible for conducting the monitoring to establish the monitoring parameters.

Conditions of Approval: The following are additional conditions which must be addressed in the submission of the Final Water Quality Plan. This list may not be all inclusive and may change based on available information at the time of the subsequent plan reviews:

1. Provide an inspection report for all of the existing on-site stormwater management structures before construction begins and after construction is complete. If it is determined that the structures were impacted by construction immediate maintenance will be required.
2. A detailed review of the stormwater management computations will occur at the time of detailed plan review.
3. Storage volume compensation is not recognized for runoff amounts greater than 2.6". Therefore, additional green roofs and other ESD measures are to be maximized at the Final Water Quality Plan stage. The areas outside of the SPA will be reexamined at that time also.
4. Provide a geotechnical report that addresses the feasibility of infiltration working in the areas of the proposed porous pavement. If infiltration is not feasible micro-biofilters or other form of ESD will be required for stormwater management.
5. Prior to permanent vegetative stabilization, all disturbed areas must be topsoiled per the latest Montgomery County Standards and Specifications for Topsoiling.

Any divergence from the information provided to this office; or additional information received during the development process; or a change in an applicable Executive Regulation may constitute grounds to rescind or amend any approval actions taken, and to reevaluate the site for additional or amended Water Quality Plan requirements.

April 5, 2011
Page 3

If you have any questions regarding these actions, please feel free to contact Leo Galanko at (240) 777-6242.

Sincerely,



Richard R. Brush, Manager
Water Resources Section
Division of Land Development Services

RRB:img:CN239312

cc: John Carter (MNCPPC)
R. Gauza (MCDEP)
L. Galanko
SM File # 239312

Qn: on-site 39.16 ac
Ql: on-site 39.16 ac.
Recharge provided



DEPARTMENT OF ENVIRONMENTAL PROTECTION

Isiah Leggett
County Executive

Robert G. Hoyt
Director

**Attachment to the Preliminary Water Quality Plan for
the Shady Grove Hospital Project
Description of BMP Monitoring Requirements**

SM # 239312
Date: March 21, 2011

The purpose of this attachment is to add specificity to the standard monitoring requirements and procedures contained in the Best Management (BMP) monitoring protocols. Some supplemental QA/QC, data analysis, reporting, submission and record keeping tasks will be explained. Careful coordination between the applicant, monitoring consultant, DEP and DPS is required to produce meaningful data and results.

Consistent methods must be used so results can be compared with other SPA BMP monitoring projects. Prior to initiation of monitoring, consultants must contact DEP and DPS to review monitoring locations, procedures, and requirements. Monitoring is to be completed according to DEP BMP Monitoring Protocols and/or methods and protocols approved by DEP. Some supplemental requirements are provided in this attachment. DEP BMP Monitoring protocols are available at the DEP website:

<http://www.montgomerycountymd.gov/content/dep/downloads/bmpprotocols.pdf>

Monitoring efforts and reports must employ scientific approaches in an attempt to determine effectiveness of BMPs and Environmental Site Design (ESD) at mitigating impacts associated with land development. Monitoring results and reports will demonstrate achievement of project performance goals. Thorough and careful analyses of data are required. Methods and assumptions should be detailed. Annual reports must adhere to the format and contain all required components in the order detailed in the SPA BMP Monitoring Report Checklist, also available online:

<http://www.montgomerycountymd.gov/content/dep/downloads/bmpchecklist.pdf>

Monitoring Requirements

Please note that there are outstanding requirements remaining from the Approval Letter for the Preliminary/Final Water Quality Plan for the Shady Grove Hospital project (SM#: 205477) dated March 29, 2004. **This monitoring must be satisfied, as further outlined in Requirements 2 and 3 below, prior to initiating any further site expansion activities.**

1. BMP monitoring reports must include a table with dates of all major construction activities which take place on the site (groundbreaking, clearing, grading, sediment

control construction, sediment control maintenance, BMP conversion, pond maintenance, etc.).

2. Pollutant removal efficiency must be determined for the two (2) sand filter BMP structures below the parking area. These structures have substantially different drainage areas and the data from the two structures will be compared to evaluate the impact of drainage area on sand filter performance. This monitoring will require the simultaneous collection of automated flow-weighted storm composite samples at the inflow and outflow points to each structure, and will likely require a minimum of four (4) automated samplers. Pollutants to be analyzed, required laboratory methods, and required detection limits are listed in Table 1.

The structures are to be monitored quarterly. Qualifying storm events will be one half (0.5) inch of rain or greater in a twenty-four hour period. All flow entering and leaving the structure during the event must be sampled. The storms should be preceded by a dry period of at least forty-eight (48) hours. Post-construction monitoring will be done quarterly in the first, third and fifth year after construction is complete and a post construction monitoring bond has been issued. Completion of construction is defined as the date the As-Built plans for the last BMP structure have been approved by DPS and the structure accepted by DPS for structural maintenance. **One year of successful post-construction BMP monitoring is required prior to initiating any further site expansion activities.**

Analysis will evaluate the impact of drainage area, whether pollutant removal efficiency changes over time, and compare removal efficiencies between the two monitored structures and with published results. Drainage area, percent imperviousness, percent and total area of driving surface, storm characteristics and water quality pre-treatment approaches are to be reported and considered in the analysis. Concentrations and storm event loadings will be calculated. The samples must be characterized for total rainfall, duration, intensity, and preceding dry period. Storm frequency (return interval) should be reported using storm frequency data from the NOAA Rockville 1 NE Maryland (18-7705) weather station:

http://hdsc.nws.noaa.gov/hdsc/pfds/orb/md_pfds.html

3. A rain gage must be installed and maintained on site. The rain gage must be installed on a portion of the property that will not be impacted by vegetative cover or other obstructions and according to DEP and manufacturer specifications. Rain data must be recorded in five-minute intervals in Eastern Standard Time (i.e., no daylight savings time adjustment). The same rain gage may be shared with the 9800 Medical Center Drive Property (SM#238926).
4. Additional stormwater management (SWM) BMP monitoring for flows, temperature and pollutant removal will be done post construction for up to 5 years on the site at representative BMPs. Not all BMPs will be monitored. If the BMPs are non-structural environmentally sensitive design facilities and cannot be monitored for pollutant removal

efficiency, monitoring will be done another way. Monitoring of one (1) or more of these environmentally sensitive design facilities will be required depending on the scope of development at the FWQP phase. Monitoring will be limited to those areas contained within the SPA. The post construction monitoring period is defined as when construction is complete, as-builts have been accepted and certified, the structure is accepted into the maintenance program, and a post construction monitoring bond has been issued.

5. Final monitoring requirements and locations for during construction and post construction monitoring will be set during Final Water Quality Plan Approval.

Note: The detection limits specified in Table 1 of this attachment supersede all requirements specified in the 2004 attachment.

Table 1. Pollutant parameters, lab methods and detection limits

Parameter	Method	Detection Limit
Nitrate	EPA 353.2	0.05 mg/L as N
Nitrite	EPA 353.2	0.02 mg/L as N
TKN	EPA 351.3	0.08 mg/L as N
Orthophosphorus	EPA 365.3	0.01 mg/L
Total Phosphorus	EPA 365.3	0.021 mg/L
Total Suspended Solids	EPA 160.2	1.0 mg/L
Total Cadmium	EPA 213.2	0.6 µg/L
Total Copper	EPA 220.2	1.2 µg/L
Total Lead	EPA 239.2	0.4 µg/L
Total Zinc	EPA 289.2	3.4 µg/L

A draft annual report on BMP monitoring is due to DEP no later than October 31st each year after the completion of construction. A final report is due annually no later than December 31. County code requires that reports be submitted quarterly. These quarterly reports must explain all monitoring completed during the quarter and must identify any problems encountered while collecting the data. A template is available online:

<http://www.montgomerycountymd.gov/dectmpl.asp?url=/content/dep/water/spadeveloper.asp>

BMP monitoring reports are to be delivered with data in an electronic format to Eric Naibert at Montgomery County DEP and also to Leo Galanko at Montgomery County DPS. All information submitted to DEP will be public information that DEP may freely copy and distribute.

Questions on the monitoring requirements and procedures may be directed to the following personnel:

Eric Naibert
 (240) 777-7769
Eric.Naibert@montgomerycountymd.gov

Leo Galanko
 (240) 777-6242
Leo.galanko@montgomerycounty.md.gov



DEPARTMENT OF TRANSPORTATION

Isiah Leggett
County Executive

January 6, 2014

Arthur Holmes, Jr.
Director

Mr. Patrick Butler, Senior Planner
Area 2 Planning Division
The Maryland-National Capital
Park & Planning Commission
8787 Georgia Avenue
Silver Spring, Maryland 20910-3760

RE: Preliminary Plan No. 120110160
Shady Grove Adventist Hospital

Patrick
Dear Mr. Butler:

We have completed our review of the revised preliminary plan dated July 4, 2013. An earlier version of this plan was reviewed by the Development Review Committee at its meeting on May 2, 2011. We recommend approval of the project subject to the following comments:

1. Necessary dedication for future construction of Blackwell Road in accordance with the Great Seneca Science Corridor Master Plan.
2. Dedicate necessary right-of-way for the Corridor Cities Transitway (CCT) in accordance with the Maryland Transit Administration (MTA) study.
3. The applicant has requested approval to design, construct, and maintain master planned roads B-8, B-12, B-15, and B-16 (which cross through the interior of the campus) as private roads. We believe any decision to substitute master planned roads with private streets must be vetted and approved through a public process – certainly by the Planning Board (if not the County Council).

From our review agency perspective, we do not oppose the applicant's request, provided the following conditions are satisfied:

- o Public easements must be granted for the roadways. These easements must be reviewed and approved by Planning Board, Departments of Transportation (MCDOT) and Permitting Services (MCDPS), and the Office of the County Attorney for connectivity and consistency with the Great Seneca Science Corridor Master Plan prior to acceptance of the easements. The format of the easement document is to be affirmed prior to approval of the record plat.

Division of Traffic Engineering and Operations

100 Edison Park Drive, 4th Floor • Gaithersburg, Maryland 20878
Main Office 240-777-2190 • TTY 240-777-6013 • FAX 240-777-2080
trafficops@montgomerycountymd.gov

Mr. Patrick Butler
Preliminary Plan No. 120110160
January 6, 2014
Page 2

- The design of the roads must follow or improve the corresponding Road Code standard for a similar public road, unless approved by MCDOT and the Planning Board at the subdivision review stage or otherwise specified in the Master Plan.
 - Installation of any public utilities must be permitted within such easements.
 - The roads will not be closed for any reason unless approved by MCDOT.
 - Approval from the Department of Fire and Rescue Services must be obtained for purpose of emergency vehicle access.
 - The public easements may be volumetric to accommodate uses above or below the designated easement area.
 - The County may require the applicants to install appropriate traffic control devices within the public easement, and the easements must grant the right to the County to construct and install such devices.
 - Maintenance and Liability Agreements will be required for each Easement area. These agreements must identify the applicants' responsibility to maintain all of the improvements within their Easement Area in good fashion and in accordance with applicable laws and regulations.
 - We recommend separate parcels be created for these roads to facilitate conversion to public use and maintenance at a future date – should it ever become desirable.
2. The applicants have coordinated with the property owners adjacent to master planned road B-8 to secure conceptual agreements to obtain the rights-of-way and easements needed to construct that roadway. These agreements will need to be finalized prior to approval of the record plat(s) for that roadway.
 3. We defer to the Planning Board for approval of the private common driveways and private streets (including the proposed privatization of master planned roads B-8, B-12, B-15, and B-16). The typical section, horizontal alignment, profile, and drainage characteristics of private common driveways and private streets, beyond the public right-of-way, shall be approved by the Planning Board during their review of the preliminary plan.
 4. Grant necessary slope and drainage easements. Slope easements are to be determined by study or set at the building restriction line.

Size storm drain easement(s) prior to record plat. No fences will be allowed within the storm drain easement(s) without a revocable permit from the Department of Permitting Services and a recorded Maintenance and Liability Agreement.

5. We completed our review of the consultant's October 4, 2013 storm drain capacity and impact analyses report. We agree that the proposed development will not exceed the capacity of the existing downstream public storm drain system.
6. Grade establishments for all new public streets (including master planned roads B-8, B-12, B-15, and B-16) and/or pedestrian paths must be approved prior to submission of the record plat.
7. The sight distance study has been accepted. A copy of the accepted Sight Distance Evaluation certification form is enclosed for the information and reference.
8. At site plan stage, delineate the location of the Corridor Cities Transitway (CCT) and right-of-way requirements along Broschart Road in accordance with the MTA study. Delineate pedestrian access from the site to the CCT station. Please include MCDOT representation in any future coordination efforts with the MTA.
9. Blackwell Road (LB-4) and Medical Center Drive (LB-1) have master planned bicycle facilities; confirm the type and locations of these facilities at the site plan stage. Provide bike route and way-finding signage throughout the campus. Signage should indicate bike sharing and bike parking locations.
10. Truck loading space requirements to be determined in accordance with the Executive Branch's "Off-Street Loading Space" policy.

On the site plan, delineate the location and dimensions of the proposed truck loading and/or dumpster spaces.
11. Provide on-site handicap access facilities, parking spaces, ramps, etc. in accordance with the Americans with Disabilities Act.
12. Where perpendicular parking spaces border a sidewalk, a two (2) foot vehicle overhang is assumed. The applicant should either provide a seven (7) foot wide sidewalk or wheelstops within those parking spaces.
13. For any parking facility containing more than fifty (50) parking spaces, the applicant needs to furnish bicycle parking facilities as required Section 59 E-2.3 of the Montgomery County Code. Accordingly, the applicant should provide either bike lockers or inverted "U" type bike racks.
14. The owner will be required to submit a recorded covenant for the operation and maintenance of private streets, storm drain systems, and/or open space areas prior to MCDPS approval of the record plat. The deed reference for this document is to be provided on the record plat.

15. Relocation of utilities along existing roads to accommodate the required roadway improvements shall be the responsibility of the applicant.
16. If the proposed development will alter any existing street lights, signing, and/or pavement markings, please contact Mr. Dan Sanayi of our Traffic Engineering Design and Operations Section at (240) 777-2190 for proper executing procedures. All costs associated with such relocations shall be the responsibility of the applicant.
17. If the proposed development will alter or impact any existing County maintained transportation system management component (i.e., traffic signals, signal poles, handboxes, surveillance cameras, etc.) or communication component (i.e., traffic signal interconnect, fiber optic lines, etc.), please contact Mr. Bruce Mangum of our Transportation Systems Engineering Team at (240) 777-2190 for proper executing procedures. All costs associated with such relocations shall be the responsibility of the applicant.
18. Trees in the County rights of way – spacing and species to be in accordance with the applicable MCDOT standards. Tree planning within the public right of way must be coordinated with Brett Linkletter, Chief of the Division of Highway Services, Tree Maintenance Section at (240) 777-7651.
17. At the site plan stage, submit the proposed Parking Demand Study and a DRAFT Traffic Mitigation Agreement for review. The trip reduction elements should be coordinated with Ms. Sandra Brecher, Chief of our Division of Transit Services/Commuter Services Section. Ms. Brecher may be contacted at 240-777-5800.

We believe the trip reduction measures in that Agreement should include:

- Minimize Parking: reduce the number of parking spaces below the minimum by making payments into the Ridesharing Account;
- Design parking facilities to promote use of alternative modes by carpool and vanpool parking, car sharing vehicle parking spaces, electric car charging stations;
- Design parking facilities to provide flexibility in use of parking;
- Design to promote use of transit: main entrances of buildings should be oriented to transit, design building frontages/lobbies to provide two-way visibility, where port-cocheres (covered entryways) are used, ensure height is adequate to accommodate transit buses, provide displays and communication of transit and other TDM information;
- Incorporate Planning for Other Modes: shuttles, parking arrangements, taxis, pedestrian/bike;
- Execute a Traffic Mitigation Agreement that includes but is not limited to the above elements;
- Pay all transportation management fees as required by law;
- Encourage Live Near Work opportunities within the site.

Mr. Patrick Butler
Preliminary Plan No. 120110160
January 6, 2014
Page 5

19. At or before the permit stage, please coordinate with Ms. Stacy Coletta of our Division of Transit Services to coordinate improvements to the RideOn bus facilities in the vicinity of this project. Ms. Coletta may be contacted at 240the777-5800.
20. The owner will be required to furnish this office with a recorded covenant whereby said owner agrees to pay a prorata share for the future construction of Blackwell Road, whether built as a Montgomery County project or by private developer under permit, prior to DPS approval of the record plat. The deed reference for this document is to be provided on the record plat.

We do not support allowing master planned roads B-8 or B-16 to connect with Blackwell Road - unless Blackwell Road has been completed and opened to traffic between Broschart Road and the existing section (west of Medical Center Drive) or is under permit and bond to do so.

21. Submit traffic signal warrant analysis at the intersection of Medical Center Way and Medical Center Drive prior to Site Plan or record plat, whichever comes first. If a signal is determined to be warranted, the applicant will be required to construct the signal at their cost. If the signal is not found to be warranted at this time, the applicant will need to install traffic signal conduit and handboxes on all legs of that intersection (as part of the right-of-way construction permit).
22. Permit and bond will be required as a prerequisite to DPS approval of the record plat. The permit will include, but not necessarily be limited to, the following improvements:
 - A. Construct an eight (8) foot wide shared use path along the property's site frontage on Medical Center Drive.
 - * **NOTE: the Public Utilities Easement is to be graded on a side slope not to exceed 4:1.**
 - B. Additional off-site road improvements may be required as a result of a review of the traffic impact study.
 - C. Permanent monuments and property line markers, as required by Section 50-24(e) of the Subdivision Regulations.
 - D. Erosion and sediment control measures as required by Section 50-35(j) and on-site stormwater management where applicable shall be provided by the Developer (at no cost to the County) at such locations deemed necessary by the Department of Permitting Services (DPS) and will comply with their specifications. Erosion and sediment control measures are to be built prior to construction of streets, houses and/or site grading and are to remain in operation (including maintenance) as long as deemed necessary by the DPS.

Mr. Patrick Butler
Preliminary Plan No. 120110160
January 6, 2014
Page 6

- E. Developer shall ensure final and proper completion and installation of all utility lines underground, for all new road construction.
- F. Developer shall provide street lights in accordance with the specifications, requirements, and standards prescribed by the MCDOT Division of Traffic Engineering and Operations.

Thank you for the opportunity to review this preliminary plan. If you have any questions or comments regarding this letter, please contact Monet L. Lea, our Development Review Area Engineer for this project at monet.lea@montgomerycountymd.gov or (240) 777-2197.

Sincerely,



Gregory M. Leck, Manager
Development Review Team

M:/correspondence/FY14/Traffic/Active/120110160, Shady Grove Adventist Hospital, MCDOT plan review comments ltr.doc

Enclosures

cc: Larry Walker Adventist Healthcare, Inc.
Amy Quant, P.E. Soltesz, Inc.
Christopher Kabatt, P.E. Wells + Associates, Inc.
Robert Brewer, Jr. Lerch, Early & Brewer
Rick Kiegel MDMTA
Glenn Kreger M-NCPPC Area 2
Ed Axler M-NCPPC Area 2
Preliminary Plan folder
Preliminary Plan letters notebook

cc-e: Clifford Royalty MCOCA
Atiq Panjshiri MCDPS RWPR
Sam Farhadi MCDPS RWPR
Henry Emery MCDPS RWPR
Andrew Bossi MCDOT DO
Charles Lattuca MCDOT DO
Brett Linkletter MCDOT DHS
Sandra Brecher MCDOT DTS
Dan Sanayi MCDOT DTEO
Fred Lees MCDOT DTEO
Bruce Mangum MCDOT DTEO
Kyle Liang MCDOT DTEO
Monet L. Lea MCDOT DTEO



MONTGOMERY COUNTY, MARYLAND
DEPARTMENT OF PUBLIC WORKS AND TRANSPORTATION
DEPARTMENT OF PERMITTING SERVICES

SIGHT DISTANCE EVALUATION **AMENDMENT # 119882330**

Facility/Subdivision Name: SHADY GROVE ADVENTIST HOSPITAL Preliminary Plan Number: 1-120110160
 Street Name: PROSCHAET ROAD Master Plan Road Classification: ARTERIAL
 Posted Speed Limit: NOPE mph
 Street/Driveway #1: SERVICE ROAD Street/Driveway #2: B-15 PRIVATE ROAD

Sight Distance (feet)	OK?	Sight Distance (feet)	OK?
Right <u>250 FT</u>	<input checked="" type="checkbox"/>	Right <u>750 FT</u>	<input checked="" type="checkbox"/>
Left <u>325 FT</u>	<input checked="" type="checkbox"/>	Left <u>600 FT</u>	<input checked="" type="checkbox"/>

Comments: sight distance to the right obstructed by vehicles
air bed.
Sight dist. to the left is to the intersection w/ MEDICAL CTR. DR.

GUIDELINES

Classification or Posted Speed (use higher value)	Required Sight Distance in Each Direction*
Tertiary - 25 mph	150'
Secondary - 30	200'
Business - 30	200'
Primary - 35	250'
Arterial - 40	325'
(45)	400'
Major - 50	475'
(55)	550'

Sight distance is measured from an eye height of 3.5' at a point on the centerline of the driveway (or side street) 6' back from the face of curb or edge of traveled way of the intersecting roadway where a point 2.75' above the road surface is visible. (See attached drawing)

*Source: AASHTO

ENGINEER/ SURVEYOR CERTIFICATE

I hereby certify that this information is accurate and was collected in accordance with these guidelines.

AT
 Signature
36060
 PLS/P.E. MD Reg. No.

Date 8/27/13



Montgomery County Review:

Approved *

Disapproved:

By: gubels

Date: 1/6/14

Form Reformatted: March, 2000

* APPLICANT TO CONTACT WITH MCDOT TRAFFIC ENGINEERING TO REQUEST APPROPRIATE PARKING RESTRICTIONS.



MONTGOMERY COUNTY, MARYLAND
DEPARTMENT OF PUBLIC WORKS AND TRANSPORTATION
DEPARTMENT OF PERMITTING SERVICES

SIGHT DISTANCE EVALUATION

AMENDMENT
119882330

Facility/Subdivision Name: SHADY GROVE ADVENTIST HOSPITAL Preliminary Plan Number: 1-120110160
Street Name: MEDICAL CENTER DRIVE Master Plan Road Classification: ARTERIAL
Posted Speed Limit: NOISE mph

Street/Driveway #1: (No. 4) Street/Driveway #2: (No. 5)
B-16 PRIVATE ROAD
Sight Distance (feet) OK? Right 450 FT ✓ Left 625 FT ✓
Sight Distance (feet) OK? Right 400 FT ✓ Left 850 FT ✓

Comments: Both sides are * partially obstructed by the on-site street parking

Comments: Sight distance to the * right is obstructed by the heavy street parking

GUIDELINES

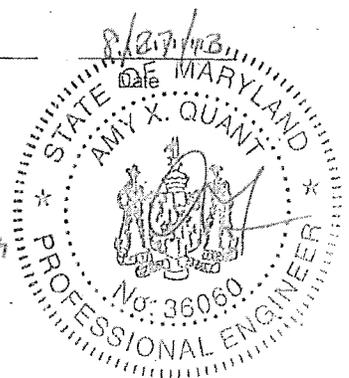
Classification or Posted Speed (use higher value)	Required Sight Distance in Each Direction*	Sight distance is measured from an eye height of 3.5' at a point on the centerline of the driveway (or side street) 6' back from the face of curb or edge of traveled way of the intersecting roadway where a point 2.75' above the road surface is visible. (See attached drawing)
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Primary - 35	250'	
Arterial - 40	325'	
(45)	400'	
Major - 50	475'	
(55)	550'	

*Source: AASHTO

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[Signature]
Signature
36060
PLS/P.E. MD Reg. No.



Montgomery County Review:

Approved *

Disapproved:

By: [Signature]

Date: 1/2/14

Form Reformatted: March, 2009

* APPLICANT TO CONTACT MCDOT TRAFFIC ENGINEERING TO REQUEST APPROPRIATE PARKING RESTRICTIONS



MONTGOMERY COUNTY, MARYLAND
 DEPARTMENT OF PUBLIC WORKS AND TRANSPORTATION
 DEPARTMENT OF PERMITTING SERVICES

SIGHT DISTANCE EVALUATION

**AMENDMENT
 # 119882330**

Facility/Subdivision Name: SHADY GROVE ADVENTIST HOSPITAL

Preliminary Plan Number: 1-120110160

Street Name: MEDICAL CENTER DRIVE

Master Plan Road Classification: ARTERIAL

Posted Speed Limit: NOICE mph

Street/Driveway #1 (No. 6)

Street/Driveway #2 (No. 7 B-12 PRIVATE ROAD)

Sight Distance (feet) OK?
 Right 575 FT ✓
 Left 480 FT ✓

Sight Distance (feet) OK?
 Right 350 FT ✓
 Left 500 FT ✓

Comments: Both sides providing the required sight distances

Comments: This driveway is controlled by a "4-way stop" therefore the sight distance is acceptable

GUIDELINES

Classification or Posted Speed (use higher value)	Required Sight Distance in Each Direction*
Tertiary - 25 mph	150'
Secondary - 30	200'
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Primary - 35	250'
Arterial - 40	325'
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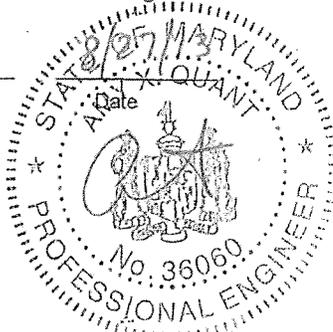
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*Source: AASHTO

ENGINEER/ SURVEYOR CERTIFICATE

I hereby certify that this information is accurate and was collected in accordance with these guidelines.

at
 Signature
36060
 PLS/P.E. MD Reg. No.



Montgomery County Review:

Approved
 Disapproved:

By: [Signature]
 Date: 1/6/14

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 March, 2000



MONTGOMERY COUNTY, MARYLAND
 DEPARTMENT OF PUBLIC WORKS AND TRANSPORTATION
 DEPARTMENT OF PERMITTING SERVICES

SIGHT DISTANCE EVALUATION

**AMENDMENT
 # 119882330**

Facility/Subdivision Name: SHADY GROVE ADVENTIST HOSPITAL Preliminary Plan Number: 1-120110160
 Street Name: BROSCHEART ROAD Master Plan Road Classification: ARTERIAL
 Posted Speed Limit: NONE mph
 Street/Driveway #1: (SOUTH OF BLACKWELL ROAD INT.) Street/Driveway #2: _____

Sight Distance (feet)	OK?	Sight Distance (feet)	OK?
Right <u>250 ft</u>	<input checked="" type="checkbox"/>	Right _____	<input type="checkbox"/>
Left <u>325 ft</u>	<input checked="" type="checkbox"/>	Left _____	<input type="checkbox"/>

Comments: Sight distance to the right is to the intersection with Blackwell Road
Left side is OK

GUIDELINES

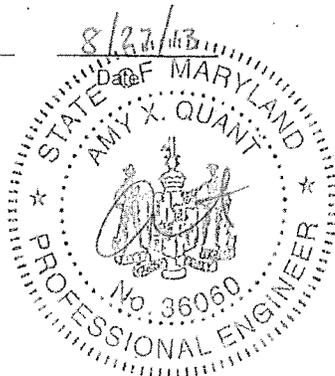
Classification or Posted Speed (use higher value)	Required Sight Distance in Each Direction*	Sight distance is measured from an eye height of 3.5' at a point on the centerline of the driveway (or side street) 6' back from the face of curb or edge of traveled way of the intersecting roadway where a point 2.75' above the road surface is visible. (See attached drawing)
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Arterial - 40	325'	
(45)	400'	
Major - 50	475'	
(55)	550'	

*Source: AASHTO

ENGINEER/ SURVEYOR CERTIFICATE

I hereby certify that this information is accurate and was collected in accordance with these guidelines.

AT
 Signature
36060
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Montgomery County Review:

Approved

Disapproved:

By: quibel

Date: 1/6/14

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 March, 2009