AGENDA FOR THE
ENGLEWOOD CITY COUNCIL
STUDY SESSION
MONDAY, NOVEMBER 1, 2010
6:00 P.M.

I. **Transportation Advisory Committee/Low Speed Vehicles**
City Council will discuss the low speed vehicles with the Transportation Advisory Committee.

II. **2010 DRCOG Traffic Signal System**
Public Works Director Rick Kahm and Traffic Engineer Ladd Vostry will discuss the 2010 DRCOG Traffic Signal System.

III. **CDOT Amendment to Senate Bill #8**
Public Works Director Rick Kahm and Traffic Engineer Ladd Vostry will discuss the CDOT Amendment to Senate Bill #8 (Traffic Signal Maintenance Systems).

IV. **Medical District Small Area Plan**
Community Development Director Alan White will discuss the Medical District Small Area Plan.

V. **City Manager's Choice**
Parks & Recreation Director Jerrell Black will discuss a contribution for the continuation of the Fun Festival.

VI. **City Attorney's Choice**

Please Note: If you have a disability and need auxiliary aids or services, please notify the City of Englewood, 303-762-2407, at least 48 hours in advance of when services are needed. Thank you.

MEMORANDUM

TO: City Council

FROM: David Anderson, Chairperson
for the Englewood Transportation Advisory Committee

DATE: October 28, 2010

SUBJECT: MEETING WITH CITY COUNCIL ON NOVEMBER 1ST REGARDING GOLF CARS, LOW POWERED SCOOTERS, TOY VEHICLES AND SEGWAYS

Over the last several months, members of the Englewood Transportation Advisory Committee (ETAC) have taken considerable time in determining the feasibility of allowing low speed vehicles on the streets of Englewood.

With the assistance of Nancy Reid and Sgt. Mike O'Connor, we have prepared the attached recommendations for City Council's consideration. Sgt. O'Connor and Assistant City Attorney Reid have contributed a great deal of time and effort in drafting changes to our City Code and Model Traffic Code to accommodate these vehicles on City streets and to streamline the law enforcement of all low powered vehicles in the City of Englewood. State law was considered while drafting these recommendations.

We look forward to discussing this issue with City Council at Study Session on November 1st.

/lw

Attach.

c: Nancy Reid
Sgt. O'Connor

ETAC Recommendations

CDOT allows and regulates Golf Cars, Low Powered Scooters, Toy Vehicles and Electric Personal Assisted Mobility Devices (Seqways) outside of municipalities. Municipalities are permitted to regulate them within a municipality. See 42-4-109.5 thru 42-4-109.6 C.R.S. and 42-4-111 C.R.S.

Drivers using Golf Cars, Low Powered Scooters, Toy Vehicles and Electric Personal Assisted Mobility Devices (Segway) on a roadway where such vehicles are permitted, are required to follow all traffic rules and official traffic control devices. (42-109-5 C.R.S.)

I. OPERATION OF A GOLF CAR WITHIN THE CITY.

A Golf Car must meet the definition stated in 42-1-102 C.R.S. (See page 5)

We would not permit gasoline powered golf cars.

ALLOWED ROUTES

1. Golf cars shall be allowed on city roadways with maximum speeds up to 30 mph.

2. Golf cars shall be prohibited on sidewalks and pedestrian or bicycle pathways

3. Golf cars shall **not** be permitted continuous travel on the following roadways within the City.

+ Evans
+ Dartmouth
+ Hwy 285
+ Logan
+ Broadway
+ Downing
+ Santa Fe Dr.
+ University
+ Federal
+ Belleview

Nor on Sections of...

+ Navajo, from Quincy to Oxford
+ Windermere, from Oxford to Kenyon.

4. With the exception of Santa Fe Dr., golf cars may cross the roadways listed in #3, or roadways with a speed limit of greater than 30 mph if they do so at a marked intersection.

REQUIRED EQUIPMENT FOR GOLF CARS.

1. Head lamps.
2. Front and rear turn signals.
3. Tail lamps.
4. Stop lamps.
5. Reflex reflectors; one red on each side as far to rear as practicable and one red on the rear.
6. An exterior mirror mounted on the driver's side of the vehicle or an interior mirror.
7. A windshield, or driver must be wearing state approved safety goggles.
8. Seat belts (type one or two) at all seat positions. Wearing seat belts is recommended but not required.
9. Parking brake.
10. Display slow-moving vehicle emblem per Model Traffic Code, Sec. 234.
11. Display Englewood Golf Car Permit sticker on the rear.

DRIVER PERMIT

1. Golf car driver shall have in his or her possession a current driver's license or minor driver's license and proof of insurance.

2. Driver shall possess insurance ($100,000 single injury, $300,000 all injuries). *

GOLF CAR VEHICLE PERMIT

The Golf Car shall be inspected for safety and required equipment by the Englewood Police Department every three years and issued a permit sticker. The vehicle owner must show proof of current driver's license and complying insurance at the time of permitting and at all times when operating the golf car on the City's roadways.

Fees for the inspection and City permit shall be set by Council resolution.

II. OPERATION OF LOW-POWER SCOOTERS (UNDER 50 c.c. GASOLINE POWERED OR 4,476 WATTS ELECTRIC POWERED) WITHIN THE CITY.

BACKGROUND

Low power scooters are not motorcycles or motor vehicles as defined in state statute except for purposes of driver's licenses, insurance and DUI, etc.

In 2009, Colorado amended the Statute relating to certain bicycles and low speed or motorized bicycles. In that amendment, a new term for a newer type of powered bicycle called an "electrical assisted bicycle" (under 750 watts) was added. These "electrical assisted bicycles" are considered bicycles and not "Motor Vehicles" for purposes of the State Statutes and this proposed ordinance. The Act also deleted the terms "motor driven cycle", "motor scooter" and "motor bicycle" and "motorized bicycle" and replaced them with a new term "low power scooter" which lumps these types of motorized bicycles together.

ALLOWED ROUTES

Low-Power Scooters shall be allowed on all roadways in the City.

This is a change in the current requirement that these low-power scooters be allowed only on streets with a speed limit of 30 mph or less.

REQUIRED EQUIPMENT

The required safety equipment and permitting (instead of a license) are regulated by the State. (See 42-4-204 and 42-4-220 C.R.S.) The only additional requirements the City would have would be:

1. Driver shall have and possess a current driver's license or minor driver's license.

2. Driver shall possess insurance ($100,000 single injury, $300,000 all injuries). *
3. The scooter shall have a current, three year DMV registration affixed as required.
4. The scooter shall have a windshield or the driver must wear state approved safety goggles.
5. The scooter and driver must comply with all other state and local traffic regulations, such as 42-4-1502 (4.5) (a) C.R.S. – when driver or passenger is under 18 years of age, a helmet is required.

DRIVER PERMIT

The State requires a valid driver's license or learner's permit.

VEHICLE PERMIT

Three year permit through the state DMV.

III. TOY VEHICLES.

Toy Vehicles are not designed for or intended for use on public roadways, streets or highways because of the danger to the public. Therefore, we recommend that they not be permitted on public roadways or sidewalks in the City of Englewood. In all other respects they will be governed by the "Model Traffic Code".

IV. PERSONAL ASSISTED MOBILITY DEVICES.

(Segway) *

V. DEFINITIONS.

(*new language in italics*)

BICYCLE – means a vehicle propelled solely by human power applied to pedals upon which any person may ride having two tandem wheels or two parallel wheels and one forward wheel, all of which are more than fourteen inches in diameter. 42-1-102 C.R.S.

BIKE PATH OR PEDESTRIAN PATH - *means that part of a roadway or separate path designed for or reserved for the exclusive use of pedestrians, bicycles or human powered vehicles.*

ELECTRICAL ASSISTED BICYCLE – means a vehicle having two tandem wheels or two parallel wheels and one forward wheel, fully operable pedals, an electric motor not exceeding seven hundred fifty watts of power, and a top motor-powered speed of twenty miles per hour, *for purposes of this ordinance, this shall be considered a bicycle, not a low power scooter.* 42-1-102 C.R.S.

ELECTRIC PERSONAL ASSISTIVE MOBILITY DEVICE or EPAMD – means a self-balancing, non tandem two-wheeled device, designed to transport only one person, that is powered solely by an electric propulsion system

producing an average power output of no more than seven hundred fifty watts. 42-1-102 C.R.S. (AKA *Segway)*

GOLF CAR - means a self-propelled vehicle not designed primarily for operation on roadways and that has:

A designed speed of less than twenty miles per hour;

At least three wheels in contact with the ground;

An empty weight of not more than one thousand three hundred pounds;

A carrying capacity of not more than four persons. 42-1-102 C.R.S.

LOW POWER SCOOTER – means a self-propelled vehicle designed primarily for use on the roadways with not more than three wheels in contact with the ground, no manual clutch, and either of the following:

1. A cylinder capacity not exceeding fifty cubic centimeters if powered by internal combustion; or

2. A wattage not exceeding four thousand, four hundred seventy-six if powered by electricity.

A Low Power Scooter shall not include a toy vehicle, bicycle, electrical assisted bicycle, wheelchair, or any device designed to assist mobility-impaired people who use pedestrian right-of-way. 42-1-102 C.R.S.

MINOR DRIVER'S LICENSE – means the license issued to a person who is at least sixteen years of age but who has not yet attained the age of twenty-one years. 42-1-102 C.R.S.

MOTORCYCLE – means a motor vehicle that uses handlebars to steer and that is designed to travel on not more than three wheels in contact with the ground; except that the term does not include a farm tractor or low-power scooter. 42-1-102 C.R.S.

MOTOR VEHICLE- means any self-propelled vehicle that is designed primarily for travel on the public highways and that is generally and commonly used to transport persons and property over the public highways or a low-speed electric vehicle; except that the term does not include low-power scooters, wheelchairs, or vehicles moved solely by human power. For the purposes of sections 42-2-127, 42-2-127.7, 42-2-128, 42-2-`138, 42-2-206, 42-4-13-1, and 42-4-13-1.1 "motor vehicle" includes a low-power scooter. (*licenses, insurance, DUI, etc. 42-1-102 C.R.S.*

ROADWAY - means that portion of a highway improved, designed, or ordinarily used for vehicular travel, exclusive of the sidewalk, berm or shoulder eve though such sidewalk, berm or shoulder is used by persons riding bicycles or other human powered vehicles and exclusive of that portion of a highway designed for exclusive use as a bicycle path or reserved for the exclusive use of bicycles, human-powered vehicles, or pedestrians. In the event that a highway includes

two or more separate roadways, "roadway" refers to any such roadway separately but not to all such roadways collectively. 42-1-201 C.R.S.

SIDEWALK – means that portion of a street between the curb lines or the lateral lines of a roadway and the adjacent property lines intended for the use of pedestrians. 42-1-102 C.R.S.

TOY VEHICLE – (a) means any vehicle, that has wheels and is not designed for use on public highways or off road use. (b) Toy vehicle includes, but is not limited to, gas-powered or electric-powered vehicles commonly known as mini bikes "pocket" bikes, kamikaze boards, go-peds and stand-up scooters. 42-1-102 C.R.S.

WHEEL CHAIR – means a motorized or nonmotorized wheeled device designed for use by a person with a physical disability. 42-1-102 C.R.S.

* At the last meeting of ETAC there was not a quorum, so no decision could be made on theses issues; however, those present made the suggestion that the State minimums for insurance ($50,000 aggregate) might be sufficient.

Although the State has authorized a local authority to regulate or prohibit the use of a EPAMD consistent with State requirements (42-4-111(cc) C.R.S.). Those Committee Members present suggested a Segway have the same requirements as the State, i.e.:

(1) No driver's license required because it is not a "motor vehicle".

(2) An operator shall have all the rights and duties of the operator of any other "Vehicle" including bicycle, etc. under Title 42 Article 4 C.R.S.

(3) An EPAMD shall **not** be operated on:

a) A limited access highway;

b) A bike or pedestrian path;

c) At a speed greater than 12 ½ MPH.

NOTE: This Section (3) does not address sidewalks, or other types of roadways. 42-4-117 (1) through (3).

MEMORANDUM

TO: City Council

THROUGH: Gary Sears, City Manager

THROUGH: Rick Kahm, Director of Public Works

FROM: Ladd Vostry, Traffic Engineer

DATE: October 28, 2010

SUBJECT: 2010 MISCELLANEOUS EQUIPMENT PURCHASE

Denver Regional Council of Governments (DRCOG) conducts traffic operations programs, such as the Miscellaneous Equipment Purchase (MEP) program, to assist local agencies in improving the efficiency of traffic signals, relieving congestion, and reducing air pollution. **Public Works staff will attend the November 1, 2010, Study Session** to discuss this topic.

Every year, local governments are invited to submit applications for miscellaneous traffic signal equipment to DRCOG, who administers the MEP program. These requests must be consistent with requirements of the Traffic Signal Improvement Program (TSSIP), adopted in 2007.

All applications are reviewed and scored by DRCOG based on previously set criteria. **In the FY10 MEP program, we were awarded up to $14,000 towards the purchase of traffic signal equipment, including traffic signal controllers (ASC/3) for the S.H. 285 intersections between Inca St. and Downing St. (5 locations), and uninterruptable power supply (UPS) for the S.H. 285 and Downing intersection.**

Since no match is required, there are no financial obligations for the City other than providing funds up front for equipment purchases which will later be reimbursed to the City. Adequate funds are available in the Transportation System Upgrade PIF account and will be credited back to this account with reimbursement of federal funds by DRCOG. Equipment installation is not eligible for funding through the MEP program and will be completed by City forces.

For your information, over the years, staff has applied for, and received, over $400,000 in federal funds for miscellaneous traffic equipment from DRCOG.

Staff will bring a recommendation to adopt a Bill for an Ordinance to enter into an Intergovernmental Agreement (IGA) with DRCOG for FY10 MEP at the November 15th Council meeting.

/lw

MEMORANDUM

TO: City Council

THROUGH: Gary Sears, City Manager

THROUGH: Rick Kahm, Director of Public Works ✓

FROM: Ladd Vostry, Traffic Engineer ✓

DATE: October 28, 2010

SUBJECT: SENATE BILL 8 CONTRACT – TRAFFIC SIGNAL MAINTENANCE CONTRACT AMENDMENT #1

Public Works staff will attend the November 1, 2010, Study Session to discuss amendment to the existing Senate Bill 8 contract regarding maintenance of traffic control devices on state highways. Earlier this year, Council adopted a Bill for an Ordinance to enter into a contract with the Colorado Department of Transportation (CDOT) for Traffic Signal Maintenance functions, Ordinance No.3, Series of 2009/2010. However, CDOT has not yet executed the contract because of an omission of some required Contract Management System (CMS) language.

Amendment #1 to the Traffic Signal Maintenance Contract adds required Contract Management System (CMS) language to the original contract. The CDOT Controller's Office, following orders from the State Controller, is requiring this amendment to be simultaneously routed with the original contract for execution by CDOT.

This "housekeeping" issue does not trigger any Contract changes; the total City reimbursement amount remains unchanged at $ 67,416.24 per year with no changes in the Contract scope of work.

We are attaching a copy of our original memorandum dated December 1, 2009 which gives a brief history, scope of work and rate schedule.

With Council's concurrence, staff will present our recommendations for approval of a Bill for an Ordinance entering into an agreement with CDOT, which includes Amendment #1 for Senate Bill 8 Traffic Signal Maintenance Contract at the November 15th Council meeting.

/lw

Attach.

MEMORANDUM

TO:	City Council
THROUGH:	Gary Sears, City Manager
THROUGH:	Rick Kahm, Director of Public Works
FROM:	Ladd Vostry, Traffic Engineer
DATE:	December 1, 2009
SUBJECT:	SENATE BILL 8 CONTRACT – TRAFFIC CONTROL DEVICES MAINTENANCE ON STATE HIGHWAYS

Public Works staff will attend the December 7, 2009, Study Session to discuss the updated Senate Bill 8 contract, which relates to maintenance of traffic control devices on state highways. Following is a brief history along with the new proposed scope of services and rates schedule (copies attached).

Staff received a request from the Colorado Department of Transportation (CDOT) to renegotiate the Senate Bill 8 maintenance contract currently in place with the City. CDOT representatives indicated that they have been mandated by the State controller's office to update all Senate Bill 8 agreements to a 5-year cycle.

Senate Bill 8 (enacted by the General Assembly of the State of Colorado in 1974) provided for the transfer of responsibility for all traffic control devices (traffic signals, signs and pavement markings) in the state highway system within local jurisdictions to the Colorado Department of Transportation (CDOT). However, CDOT does not have the necessary personnel and equipment levels to perform this obligation. As a result, the City entered, over time, into numerous contracts with CDOT for reimbursement of costs associated with highway maintenance services (operation, maintenance, and control of such devices) that the City provides on state highways within Englewood city limits. The City is currently providing all needed resources to satisfactorily perform operation and maintenance services in a manner consistent with current public safety standards on state highways, and in conformance with applicable portions of the Manual on Uniform Traffic Control Devices (MUTCD).

Our current contract with CDOT, originally adopted in 1986, included maintenance services on S.H.285, Broadway (S.H.75 from S.H.285 to south City limits), Belleview and Federal (both S.H.88), and Santa Fe (S.H.85). This contract has been modified several times to reflect changes in the contract's scope of work, namely removing traffic control devices on Santa Fe, Federal and Broadway from the list of maintenance locations.

In the recent past, staff met with CDOT representatives on several occasions to renegotiate the scope of maintenance services as well as the new reimbursement rates schedule. The new proposed contract, which has been agreed upon by CDOT, includes maintenance services on S.H.285 (including traffic signals, signage and pavement markings) and on Belleview (including traffic signals only). The scope of work and the locations of services are described in detail in Exhibit A. The new negotiated rates schedule is based on the City's historical maintenance data. The agreed upon rates are $340 per traffic signal per month (the existing rate is $219.74 per traffic signal per month), and $281.53 per mile per month to maintain signs and pavement markings (the existing rate is $151 per mile per month). Based on the new proposed maintenance services (including the fifteen (15) traffic signals and 1.84 miles of signage/pavement markings), the new Senate Bill 8 Contract total comes to $67,416.24 per year (see Exhibit C). (Exhibit B is non-existent.)

With Council's concurrence, staff will present the new IGA concerning the Senate Bill 8 Contract with CDOT at the December 21st Council meeting.

/lw

Attach.

Exhibit A

State Highway Traffic Signal Listing

- The City shall maintain the traffic signals and associated stop bars and crosswalks at the locations listed below.
- Any reconstruction, modification, or improvement initiated by the City or performed as a result of a City project shall be included in the maintenance provided by the City.
- Any reconstruction, modification, or improvement initiated by the State or performed as a result of a State project shall be paid for separately by the State.
- The City shall perform inspections of each location, in all directions, and submit documentation to CDOT by April 10th and October 10th for each year of this contract. Inspection shall include, but not limited to:
    - Each signal lens is operating and visible
    - Signal Timing is operating as programmed
    - Controller and Cabinet are clean and in good repair
    - Communication to signal is connected and operating
    - Vehicle detection is operating properly
    - All luminaries attached to the signal are operating

- Any defects found during inspections listed above at these intersections shall be remedied within reasonable timeframe per standard industry practice. Defects and remediation shall be documented and kept on file at the City and available for CDOT upon request. Any defects not remedied shall incur a price reduction to the next month's compensation of $340.00 per signal.

- The City shall perform an annual inspection which shall include: the visual inspection of signal caissons, bolts, bolt tightening, steel, welds, attachment hardware, back-up power testing and signal conflict monitor testing. Documentation on this inspection shall be submitted to CDOT by October 10th of each year of this contract. Any deficiencies found in bolt tightening and attachment hardware shall be corrected by the City immediately. Structural defects requiring pole or mast arm replacement shall be the responsibility of CDOT. Any deficiencies of this nature shall be documented and brought to the attention of the CDOT project manager for correction by CDOT. Other minor structural defects shall be the responsibility of the City.

TRAFFIC SIGNALS MAINTAINED BY THE CITY OF ENGLEWOOD

1. SH 285 and Inca St.
2. SH 285 and Galapago St.
3. SH 285 and Elati St.
4. SH 285 and Cherokee St.
5. SH 285 and Broadway (north)
6. SH 285 and Broadway (south)
7. SH 285 and Sherman St.
8. SH 285 and Logan St.
9. SH 285 and Clarkson St.
10. SH 285 and Downing St.
11. SH 285 and Gilpin St.
12. SH 88 (Belleview) and Clarkson St.
13. SH 88 (Belleview) and Logan St.
14. SH 88 (Belleview) and Broadway
15. SH 88 (Belleview) and Pirates Cove (1250W.)

State Highway Signs and Markings

- The City shall maintain signs and markings at the locations listed below.
- The City shall maintain all roadway markings.
- The City shall maintain all regulatory and warning signs that can be mounted on Unistrut, Telespar posts, all delineator posts, and all guide signs installed and owned by the City.
- The State shall maintain all regulatory and warning signs too large to be mounted on Unistrut posts, all guide signs not installed and owned by the City, and all other signs not maintained by the City.
- Intersection right-of-way control signs at City roadways intersecting State highways shall be maintained by the agency maintaining the intersected State highway.
- Intersection right-of-way control signs at State highway exit ramps intersecting City roadways shall be maintained by the City.
- Either agency making changes to signs or markings at the locations listed below shall provide notification of the changes to the other agency. Notification of changes to regulatory signing shall be made in writing.
- The City shall perform yearly pavement marking inspections and sign inspections, and submit documentation to CDOT by October 10th. Pavement marking inspection shall include, but not limited to:

  - Physical appearance
  - Percent of marking in place

- Sign Inspections shall include:
  - Physical condition of the signs using the night time inspections
  - Condition of post (damaged, plumb)
  - Fastening hardware checked for tightness

- *Any signs failing the visual inspections shall be listed as defective and shall be replaced within one* month of discovery with associated documentation to CDOT. Any defective signs not remedied shall incur a price reduction to the next month's compensation.
  - Class I Signs - $100.00 per sign deduction
  - Class II Signs - $200.00 per sign deduction
  - Class III Signs - $500.00 per sign deduction

State Hwy	Street Name	From	To	Length (miles)
285	Hampden/Jefferson	Jason	Gilpin	1.84
			Total miles	1.84

EXHIBIT C

Traffic Control Device Rate Schedule

1.84 Miles of signs and markings at $281.53 per mile per month	$ 518.02
15 Signals at $340/month	$ 5,100.00
Maximum monthly billing	**$ 5,618.02**
Total Maximum Annual Cost	**$67,416.24**

M E M O R A N D U M

DATE: October 21, 2010

TO: Englewood City Council

THRU: Gary Sears, Englewood City Manager
Alan White, Community Development Director

FROM: John Voboril

SUBJECT: Review of October 5th Planning and Zoning Commission Public Hearing on Downtown and Medical District Small Area Plan Amendments to Goals and Objectives

The Englewood Planning and Zoning Commission held a public hearing on the proposed amendments to the goals and objectives found in the Englewood Downtown and Medical District Small Area Plan. The proposed amendments resulted from the Medical District Phase II Stakeholders Meetings held in April of 2010. All stakeholder meeting attendees were mailed a notice of the public hearing time and date, as well as a copy of the proposed amendments.

A total of 13 citizens gave testimony at the public hearing on their concerns relating to sub-area 2 goals and objectives. There was no testimony given for sub-areas 3 and 5 goals and objectives. A brief categorization and description of citizen testimony concerning sub-area 2 goals and objectives follows below:

Testimony from Citizens Who did not Participate in Stakeholder Meetings

Seven citizens who testified had not previously participated in the April stakeholder meetings. They were made aware of the public hearing by a citizen letter that had been posted on their door. The letter addressed the goals and objectives concerning the 3400 blocks of Grant and Logan Streets that identify these blocks as areas of change. The letter apparently was distributed to residences throughout the entire sub-area 2 boundaries. The seven citizens chiefly had concerns about the meaning of the amended goals and objectives, and what the intentions of the Planning and Zoning Commission were with regard to potential regulation or imminent redevelopment. (Community Development staff has answered these questions and concerns in personal letters to these citizens, dated October 20th.)

RJ Scheck - 3447 S. Grant Street

Asked whether Swedish Medical Center was actively looking to buy property in the 3400 block of Grant and Logan Streets. Asked whether disclosure of a potential rezoning would have a negative impact on selling to a prospective home buyer, and whether his property would be revalued and reassessed due to a rezoning.

Charles Smith – 3355 S. Pennsylvania Street

Concerned that family property may be affected negatively from zoning changes to the west, east, and south of the property. Concerns include the possibility of being surrounded on three sides by redeveloped areas of apartment buildings and office buildings up to 60 feet tall that would negatively impact the viability of the single family residential area along the 3300 blocks of Logan and Pennsylvania Streets. Also concerned about the effect zoning reforms would have on the family property value and property tax assessments.

Paul Douden – 999 E Panama Drive

Owner of 3244 S. Grant Street concerned that the City intended to force out landlords of single family residences. Was confused about the intentions of opposing policies for areas of stability and areas of change and where these policies would be applied. Preferred down-zoning in order to prevent higher density development. Mentioned that his property at 3244 S. Grant Street was a non-conforming lot size that was preventing him from refinancing.

Constance Crawford – 3451 S Grant Street

New renter of single family residence concerned that Swedish Medical Center has imminent plans to expand in the 3400 blocks of Grant and Logan Streets, and will force her to move.

Mathew Machetta – 3450 S. Grant Street

Concerned that Swedish Medical Center or a commercial developer has imminent plans to redevelop the 3400 blocks of Grant and Logan Streets.

Don Kent – 3248 S. Sherman Street

Concerned that City Council intends to pass an ordinance making it illegal to rent a single family residence and demanded a written response from City Council.

Jim Christensen – 3263, 3269, 3277 S. Lincoln Street

Concerned about losing development rights, as well as inappropriate development size. Was not sure about what the Planning and Zoning Commission was trying to do.

Testimony from Citizens Who did Participate in Stakeholder Meetings

Maureen White – 3271 S. Grant Street

Against any more apartment buildings or hospital-related development being built anywhere in sub-area 2. Favors down-zoning entire sub-area to single family residential zone district.

Gerald Tindall – 3221 S. Grant Street

Disappointed that City Council does not support down-zoning to a single family residential zone district. Concerned about encroachment on neighborhood by Swedish Medical Center.

Lisa Warren – 3396 S. Logan Street

Favors down-zoning entire sub-area to a single family residential zone district. Concerned about encroachment of tall buildings or parking structures in the 3400 blocks of Grant and Logan Streets.

Cynthia Searfoss – 3297 S. Downing Street

Attended as representative of an acquaintance. Concerned that a cultural rift is dividing the community, and that citizens feel they have no voice and are losing property value.

Linda Cohn -3396 S. Grant Street

Does not support the call for down-zoning. Not in interest of City to create non-conforming properties. Believes City has made a good faith effort to engage citizens in the planning process.

Patrick Neil – 3407 S. Logan Street

Supports the amendments to the goals and objectives and the approach being taken by the Planning and Zoning Commission.

ANALYSIS

The Englewood Downtown and Medical District Small Area Plan is a policy document containing goal and objective statements that were crafted to represent the values and desires of stakeholders, the Englewood Planning and Zoning Commission, and the Englewood City Council. The goals and objectives essentially divide portions of the Medical District into areas of stability and areas of change. The goals and objectives are meant to serve as a guide to the Planning and Zoning Commission in developing zoning reform solutions for both areas of change and areas of stability. The goals and objectives are not laws and do not automatically change current zoning regulations.

The Englewood Downtown and Medical District Small Area Plan Phase II process has produced some shared values as well as disagreements in sub-area 2. Sub-area 2 stakeholders desire zoning reforms that will help protect the residential areas north of Girard Avenue, such

as reductions in height, and removing over night in-patient hospital use from the table of allowed uses. However, a small group of stakeholders are concerned that continuing to allow hospital use in the 3400 blocks of Grant and Logan Streets could eventually have negative effects on the residential areas north of Girard, and want to prevent Swedish from moving any closer. They also want to reduce the possibility of introducing incompatible uses into the residential area north of Girard through down-zoning.

Planning and Zoning Commission members, along with a few stakeholders, hold the position that because the 3400 blocks of Grant and Logan Street are sandwiched between Downtown and the Swedish campus, it is a logical place to encourage redevelopment. The Planning and Zoning Commission disagrees with the call for down-zoning to a single family residential zone district north of Girard Avenue because it would take away significant property rights from current owners and would create a significant number of non-conforming uses. Instead od down-zoning, the Planning and Zoning Commission favor reforming the existing zoning to prevent inappropriate development that is out of scale with the existing neighborhood, but that continue to allow appropriately-sized infill redevelopment to occur according to the will and decisions of property owners. The amended goals and objectives reflect this approach. A majority of City Council members supported the position of the Planning and Zoning Commission at the July 26th Council Study Session.

A number of citizens who testified were concerned about what potential impacts to their property values or property tax assessments might be caused by zoning reforms in and around sub-area 2. The Community Development Department responded to these citizens through personal letters dated October 20th:

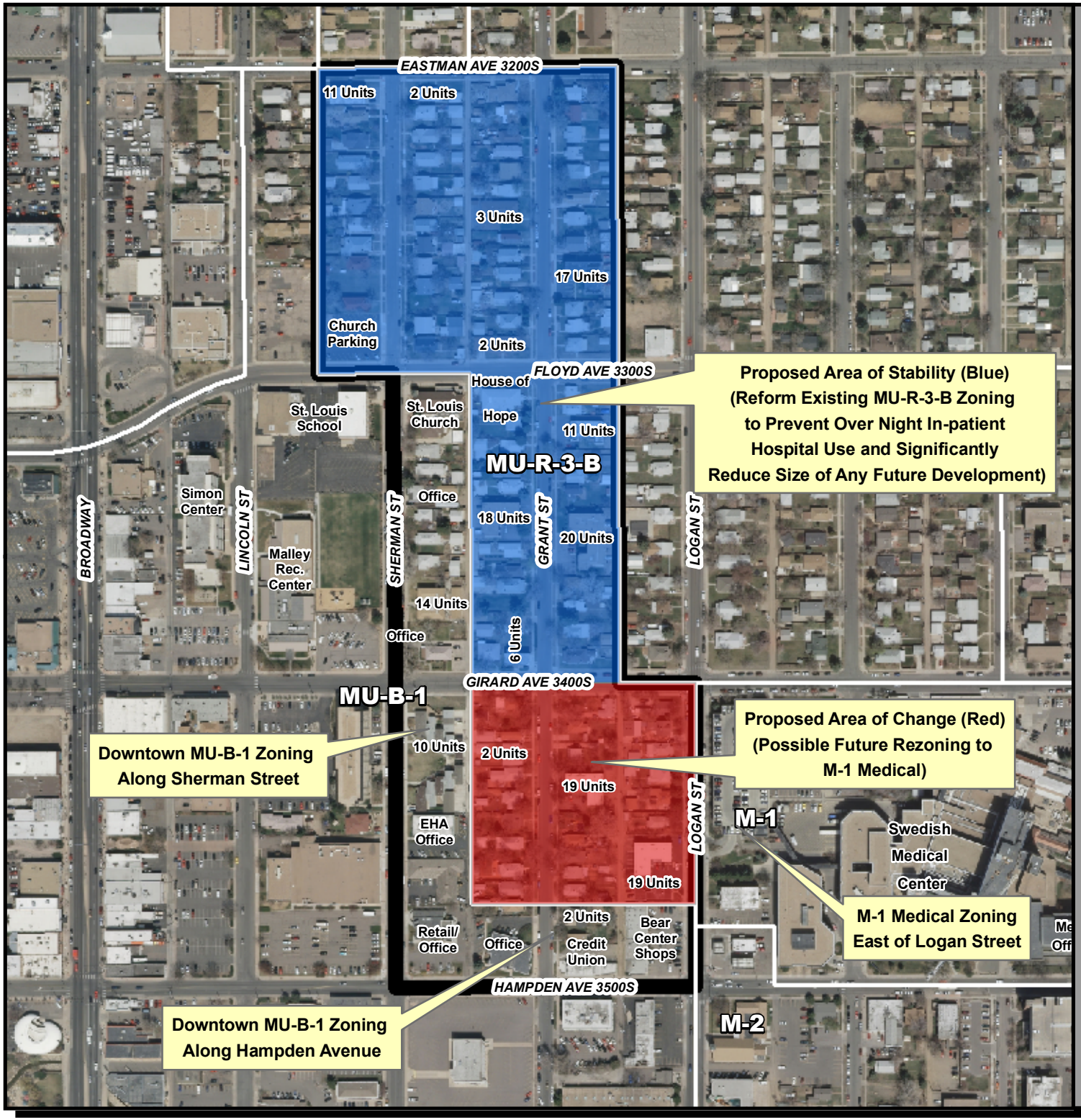
> The Arapahoe County Assessor does not revalue or reassess properties based on zoning classifications. The Assessor values and assesses property solely on the current use of the structure based on a selection of sales of similar homes in the area over the last few years. The 2009 rezoning of portions of the hospital area between Logan Street and Lafayette Street south of Girard Avenue did not result in increased valuations or property tax assessments for single family residential properties located within the new M-1 and M-2 Medical Zone Districts, nor for single family properties located in adjacent areas. The Englewood Planning and Zoning Commission intentions for zoning reforms to the areas west and east of your property are intended to place additional limits on development. The possibility that these reforms will contribute to property gentrification with large increases in property value and taxes or major losses of property value is highly unlikely to occur.

NEXT STEP

The Englewood Planning and Zoning Commission has forwarded the Englewood Downtown and Medical District Small Area Plan amendments to goals and objectives with a favorable recommendation for approval by resolution. Because the Englewood Downtown and Medical District Small Area Plan amendments to goals and objectives are to be approved by resolution, a public hearing before City Council is not required. However, it is optional, if Council feels that it would be helpful.

Att: Proposed Areas of Change and Areas of Stability for Sub-area 2 Map
Medical District Small Area Plan Amendments to Goals and Objectives
October 5th Public Hearing Minutes
October 5th Public Hearing Findings of Fact
Letter from Citizen Posted on Doors in Sub-area 2

C: Gary Sears
Mike Flaherty
Dan Brotzman
Alan White
File



City of Englewood, Colorado

Englewood Medical District Small Area Plan Phase II: Proposed Areas of Change and Areas of Stability for Sub-Area 2

- Proposed Area Of Change
- Proposed Area of Stability
- Sub-area 2 Boundary
- Current Zoning Boundaries

October 2010

N

0 150 300 450

Feet

PROPOSED AMENDMENTS TO SMALL AREA PLAN GOALS AND OBJECTIVES (Edits Underlined)

Medical Sub-area 2 Goal A

Strengthen and stabilize the neighborhood character of the existing residential portions of sub-area 2 through revitalization strategies.

Obj. 2A-1 Reduce the number of single-unit rental homes through conversion to home ownership.

Obj. 2A-2 Expand and concentrate programs/loans/grants for revitalizing older homes.

Obj. 2A-3 Strengthen enforcement of codes concerning yard maintenance, junk, and outside storage.

Obj. 2A-4 Discourage hospital expansion in the residential portion of sub-area 2.

Obj. 2A-5 Explore the potential for revitalizing existing multi-unit buildings.

Obj. 2A-6 Consider zoning reforms to protect portions of sub-area 2 currently zoned MU-R-3-B along Grant Street and the 3200 block of Sherman Street that prevent high density medical and residential development.

Obj. 2A-7 Consider removing non-conforming status for existing apartment buildings in order to encourage remodeling, maintenance, and condo conversions.

Medical Sub-area 2 Goal B

Encourage change in existing commercially-zoned areas of sub-area 2 along the Old Hampden corridor, as well as the 3400 block of Grant and Logan Streets.

Obj. 2B-1 Encourage the development of new mixed-use projects including medical facilities, offices, housing, and small-scale commercial uses along the Old Hampden corridor.

Obj. 2B-2 Consider designating the 3400 blocks of Grant and Logan Streets as an area of change for future medical and high density residential uses.

Medical Sub-area 3 Goal A

Strengthen and stabilize the neighborhood character of the existing residential portions of sub-area 3 through revitalization strategies and limited reinvestment strategies.

Obj. 3A-1 Reduce the number of single unit rentals homes through conversion to home ownership.

Obj. 3A-2 Expand and concentrate programs/loans/grants for revitalizing older homes.

Obj. 3A-3 Strengthen enforcement of codes concerning yard maintenance, junk, and outside storage.

Obj. 3A-4 Discourage further over night in-patient hospital expansion beyond current hospital-owned properties north of Girard Avenue.

Obj. 3A-5 Encourage replacement of sub-standard rental properties with various types of compact housing and small medical clinics and offices that are compatible with the existing neighborhood scale and character through consideration of the following zoning reforms:

- Scale down height along the edges of sub-area 3 adjacent to single family zoned areas.
- Explore ways to eliminate or minimize the impacts of parking garages through regulations pertaining to limits on location and height in order to protect neighboring single family residences.
- Favor small office buildings over large office buildings.
- Keep front and rear setbacks, landscaping, and parking regulations compatible with current standards.
- Remove over night inpatient hospital facility from table of allowed land uses.
- Increase number of residential units per land area and relax side setbacks for small lots.
- Remove non-conforming status for existing multi-unit apartment buildings in order to encourage remodeling, maintenance, and condo conversions.

Obj. 3A-6 Explore ~~the~~ potential strategies and programs for revitalizing existing multi-unit buildings.

Medical Sub-area 5 Goal A

Strengthen and stabilize the neighborhood character of the existing residential portions of sub-area 5 through revitalization strategies and limited reinvestment strategies.

Obj. 5A-1 Reduce the number of single unit rentals homes through conversion to home ownership.

Obj. 5A-2 Expand and concentrate programs/loans/grants for revitalizing older homes.

Obj. 5A-3 Strengthen enforcement of codes concerning yard maintenance, junk, and outside storage.

Obj. 5A-4 Encourage replacement of sub-standard rental properties with various types of compact housing and small medical clinics and offices that are compatible with the existing neighborhood scale and character through consideration of the following zoning reforms:

- Increase number of residential units per land area.
- Add small-scale pedestrian-oriented office and retail as allowed uses.
- Limit building height to 3 to 4 stories.
- Keep front and rear setbacks, landscaping, and parking regulations compatible with current standards.

CITY OF ENGLEWOOD PLANNING AND ZONING COMMISSION
REGULAR MEETING
October 5, 2010

I. CALL TO ORDER

The regular meeting of the City Planning and Zoning Commission was called to order at 7:04 p.m. in the Council Chambers of the Englewood Civic Center, Chair Knoth presiding.

Present: Bleile, Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder
Kinton (alternate) (exited at 8:55)

Absent: King

Staff: Alan White, Community Development Director
John Voboril, Planner
Nancy Reid, Assistant City Attorney

II. APPROVAL OF MINUTES

September 21, 2010

Welker moved:
Krieger seconded: TO APPROVE THE SEPTEMBER 21, 2010 MINUTES

Chair Knoth asked if there were any modifications or corrections.

There were none.

AYES: Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder
NAYS: None
ABSTAIN: Bleile
ABSENT: King

Motion carried.

III. PUBLIC HEARING

Case #2010-01, Amendments to the Englewood Downtown and Medical District Small Area Plan

Krieger moved:
Fish seconded: TO OPEN THE PUBLIC HEARING ON CASE #2010-01

AYES:	Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder, Bleile
NAYS:	None
ABSTAIN:	None
ABSENT:	King

Motion carried.

Mr. John Voboril, Planner, was sworn in. He provided background information on the Englewood Medical and Downtown Small Area Plan process to date. Community Development staff kicked off the small area planning process for the Englewood Downtown and Medical District in the fall of 2006. A number of stakeholder meetings were scheduled and 5,000 invitations were mailed out to all business, property owners and residents within the medical district and downtown district boundaries as well as one block beyond these boundaries. Three hundred people registered as stakeholders and out of those 150 actually attended the meetings. From the feedback gathered from the stakeholders staff developed a vision, goals and objectives that were then put together in the Small Area Plan document. This document was then taken to a public hearing before the Planning and Zoning Commission and was forwarded with a favorable recommendation to City Council. City Council adopted the document by Resolution in the spring of 2007.

The second step in the planning process was then to turn to looking at new medical zone district regulations for the areas identified as areas of change in the Small Area Plan process. Staff analyzed the existing zoning for major deficiencies and then began to develop new concepts for new zones in the areas. Those concepts were then brought back to the Planning Commission for a series of study sessions where the Commission helped to refine those concepts. Next, staff went back out to the stakeholders and held another meeting to present the concepts. Staff received a very favorable reaction to the concepts from the attendees. Staff then began to codify the language of the concepts into real regulations that could then be included in the Unified Development Code. A public hearing was then held on the regulations as well as the proposed area for rezoning. Those also were met with a favorable recommendation from the Planning Commission to the City Council. City Council also held a public hearing and first and second readings and voted to approve the two Ordinances; the first to amend the Code with the new medical district regulations and the second to rezone the area that was designated as an area of change. Today those areas have been rezoned to M-1 and M-2 medical.

At the conclusion of that process the Planning Commission realized there were a number of outstanding issues that had not been resolved. These include the following:

1. In areas of stability overnight in-patient hospital use is still an allowed use in the areas north of Girard.
2. The 3400 block of Logan and Grant Streets should be reconsidered as an area of change due to the fact that this area is just to the west of the Swedish campus

and is between the campus and the downtown area and therefore would make a logical area of change.

3. Sub-area 5 stakeholders should be reengaged concerning the possibility of increasing development options due to the area's proximity to the highway.

Community Development Staff, in response to these issues, put together a Phase II stakeholder process for these unresolved issues. Focus was on Sub-areas 2, 3 and 5. 1,673 invitations were sent out to all residents, business and property owners within these three sub-areas as well as one block beyond the borders. One hundred and seven people registered for the meetings and 55 people actually attended the meetings.

At the first meeting staff showed the stakeholders the existing conditions and talked about the new medical zoning district regulations. They were asked to take some time to consider whether these new zoning regulations were something they felt would be a good fit for their areas. They came back two weeks later and provided their input to staff. The vast majority of stakeholder comments was that no, these medical district regulations are not really appropriate for these areas. The one exception to that was there were a few stakeholders in the 3400 blocks of Grant and Logan Streets that did express support for the new medical district regulations for these blocks. At the same time, there also were a number of stakeholders that were living north of Girard in Sub-area 2 that were opposed to the new medical district regulations for the 3400 blocks of Grant and Logan Street. For the second half of the meeting staff said since the stakeholders were not interested in becoming areas of change and being rezoned to medical district regulations, would stakeholders then be in favor of reforming the existing zoning so stakeholders would be better protected from unwanted hospitals uses or large, dense uses coming into your area? By and large they were very supportive of that in both Sub-areas 2 and 3. Residents in Sub-area 5 are not affected by hospital use, but they wanted some additional redevelopment opportunities they currently do not have such as small offices, retail uses, or adding more residential units per land area.

Staff then took the stakeholder feedback and developed draft goals and objectives and presented them to the stakeholders at the third meeting. A visual preference survey was also conducted at this meeting where staff showed different sizes of development and asked them if that particular picture was an appropriate scale for your neighborhood or not. This exercise gave staff a good idea of what the stakeholders felt was an appropriate scale to use in future study sessions to figure out what these zoning regulations ought to be.

Planning Commission was asked to consider a request from several sub-area 2 stakeholders to down-zone the entire sub-area from a mixed use multi-unit residential and office district to a single-unit residential district. Planning Commission did not favor this option.

Mr. Voboril reviewed the proposed amendments, concluded his presentation with suggested Findings of Fact, and answered questions from the Commission.

Mr. Welker said you indicated stakeholder correspondence was sent to the people in the medical district, including the management of Swedish and Craig Hospitals. Is that true?

Mr. Voboril said yes. Letters were sent to the hospitals inviting them to participate in the meetings and members from Craig hospital did attend the stakeholder meetings.

Chair Knoth said as a clarification, the amendments are not for zoning changes, they are just for guidelines. Mr. Voboril said yes, these are changes to the Small Area Plan document that was approved in 2007. It is a policy document giving staff official guidance of how we should conduct study sessions to look at zoning regulations. These are not laws, they are goals and objectives. Chair Knoth asked if someone came in to do a project tomorrow what regulations would apply. Mr. Voboril said if a project came in tomorrow they would have to follow the existing regulations in those areas as the Commission and staff has not done any actual zoning work. Staff will hopefully be moving forward with these regulations toward the end of the year if time allows. After analyzing the issues and holding study sessions with the Planning Commission staff will probably want to call back the stakeholders to show them the proposed changes and then go forward with the formal process to change the zoning regulations in these areas.

Chair Knoth asked if there were any further questions for Mr. Voboril. There were not. Chair Knoth thanked Mr. Voboril for his presentation.

The following persons spoke during the public hearing:

1. R.J. Scheck
2. Charles Smith
3. Maureen White
4. Gerald Tindall
5. Paul Douden
6. Cynthia Searfoss
7. Lisa Warren
8. Linda Cohn
9. Constance Crawford
10. Don Kent
11. Matthew Machetta
12. Patrick Neil
13. Jim Christensen

Bleile moved:
Roth seconded: TO CONTINUE THE PUBLIC HEARING ON CASE #2010-01 TO A LATER DATE.

AYES: Bleile
NAYS: Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder

ABSTAIN: None
ABSENT: King

Motion failed.

Brick moved:
Fish seconded: TO CLOSE THE PUBLIC HEARING ON CASE #2010-01

AYES: Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder
NAYS: Bleile
ABSTAIN: None
ABSENT: King

Motion carried.

Krieger moved:
Welker seconded: CASE #2010-01 *AMENDMENTS TO THE ENGLEWOOD DOWNTOWN AND MEDICAL DISTRICT SMALL AREA PLAN, BE RECOMMENDED FOR APPROVAL TO CITY COUNCIL WITH A FAVORABLE RECOMMENDATION FOR ADOPTION.*

Mr. Welker said he wanted to let everyone in the audience know all the Commissioners are citizens of the City of Englewood; we don't all live in your neighborhood, but live in other neighborhoods in the City and have similar concerns. He stated he is the senior member of the Commission having been on it since 1995. The Commission has been through a lot of issues where changes have upset people in the City and most of it is under the guise of that we are somehow threatening your livelihood, devaluing your property, etc. The Commission's goal is not to do any of that and doesn't believe it is Council's either. We are trying to deal with things that will keep the City viable and allow the businesses, like Swedish, that are thriving to continue, but put some limits on them. These are goals, not laws or ordinances. He extended an invitation to all to attend Planning and Zoning meetings and become involved in the process. He noted the Commission is scheduled to meet twice a month. He assured the audience the Commission does care and this is not the end of this discussion; it is not going to force something down your throats. Please convey that statement to the other people that you represent or that you know of that have concerns. We are here to try to work out solutions that will be good for the City in the long run; 20 to 40 years ahead.

Ms. Krieger said to the best of our knowledge, there is no huge plan here. Swedish isn't planning on buying up the whole neighborhood that anyone knows about. There aren't any developers that are sitting there ready to snap up your property. Development could be small offices, multi-family, it could be anything. There is no hidden agenda here. From where the Commission stands, especially the two blocks of Logan and Grant, when you

look at a map of the City it's completely encased by everything else. That is why from the Commission's standpoint and from a developer's standpoint it looks like a good place eventually to fill in. That doesn't mean it's going to happen tomorrow. No one can force you to sell your house as witnessed by the woman who did live in the center of Swedish Hospital. In order to have huge development a number of people have to sell. As you have all seen tonight, there are a number of differing viewpoints. Some people are afraid their property values are going to go down, others think they will go up, some owners want the ability to rent their property and others like their neighbors that are invested and want more homeowners. There's a whole range of goals out there. The Commissions job is to try to sort out all of that and figure out what is best for the City in the long run, not in the short run.

Mr. Fish said he felt Staff has done a good job of communicating. He said that is one point he must disagree with the public on. He said he wanted it on the record that he believes the process of communicating to the community and the feedback the community has given us has been an outstanding process and doesn't think it can really be improved. There have been multiple meetings with the public. Everyone has had a chance multiple times to speak. As Mr. Welker, said this process is not finished; there is still time to participate. He said he appreciated everyone that attended tonight's meeting.

Ms. Krieger noted what the City envisions and what actually happens can be completely different things as evidenced by the old Comprehensive Plan. If people love their neighborhood, invest in their houses, and want it to be residential it will stay that way regardless of what vision the City has.

Mr. Bleile said he has many things he would like to say and would like to continue this even if it's not from a public perspective. He said he has a page and a half of things, both rebuttals from the public and he is not necessarily sold on some of the additions. He said he does agree that the process the Planning and Zoning Commission and Community Development has done to reach out to this small medical area community has been outstanding. He said he doesn't know how many city governments anybody else has participated in, but this particular City has held numerous public hearings on this side of the fence. There have been numerous community events, flyers sent out, and the Commission has been working on this for years. He quoted a comment he made at an earlier meeting this year saying he was very disappointed that the Commission has had this much progress on the plan and nobody has come forward...zero, not one in 4 years had come forward to this Commission to go on record in front of us. We have asked and reached out and it has been an outstanding effort. He said maybe that is because he sees the work that has transpired from Community Development and maybe you, the public, do not. There has been a tremendous effort to put this information out there. He said the members of this Commission is not here because we are paid by Swedish, we don't have any more vested an interest that Swedish expands versus one of you wanting to sell your house for development. We are here to protect not only your interest. The person sitting behind you isn't going to have the same vested interest as the person sitting in front of you. The

Commission cannot make decisions that are going to be perfect for everybody; you all know that. We put on our citizens hats quite often in meetings. As a Commission we have the duty to not just you guys here tonight, but the 21,000 other citizens that are not here speaking. We have to balance the needs of all the citizens, businesses, #1 employer, etc. What we decide is not final, this goes to City Council and the public gets to go through the process all over again. This is by no means the last step nor is it the first step, it is just a step. This is how government works.

Chair Knoth said he believes the Commission has tried to soften the edges and tried to cut down heights, not allow hospital use in other parts of town where we don't want it and that is what is stated in these goals and guidelines. It's not completely down zoning into a single family situation, but said he didn't think that is what we want to see in this area.

Mr. Roth addressed the down zoning issue. He said the problem with down zoning is it makes many properties, such as apartments, in the area non-conforming, which limits the owner's ability to do improvements on those properties.

Mr. Fish said down zoning could create a situation in which the commercial properties would then begin to deteriorate. We don't know if it would actually happen, but that is certainly a likely possibility if they can no longer function as commercial properties. That is not in the best interest of the area.

Mr. Welker stated we cannot take the commercial properties right to exist away either because they are property owners just like you are. The Commission must do what we believe is best for the future. Single-family housing is always acceptable as an existing use within higher zoned districts. The Commission is not taking away your right to have a house in those districts ever as long as it is there now, but we are not going to allow a car dealership to move in. There are certain areas where things are appropriate.

Mr. Bleile said he wanted to address more of the public, but they have been leaving. It's frustrating that folks that got up and spoke to us and expected input have left. Knowing that they were going to trickle out I wanted to have an opportunity to actually speak to everyone that was here. Ms. Krieger said that is a problem we always have. Mr. Welker said they can always listen to the minutes.

AYES:	Roth, Welker, Krieger, Knoth, Fish, Brick, Calonder, Bleile
NAYS:	None
ABSTAIN:	None
ABSENT:	King

Mr. Brick said he voted yes on the Amendments because they are consistent with the following Objectives in Roadmap Englewood: 2003 Englewood Comprehensive Plan:

1. Section 5 Housing, Goal 2 Objective 2-3: Upgrade or replace substandard residential units.
2. Section 7 Business and Employment, Goal 1 Objective 1-2: Actively engage in attracting new businesses to the City.
3. Section 7 Business and Employment, Goal 3 Objective 3-3: Recognize the complementary effects between the physical appearance of both commercial districts and the surrounding residential areas.
4. Section 7 Business and Employment, Goal 5 Objective 5-2: Increase the value and appeal of Englewood's retail and industrial corridors in order to stimulate economic growth.

Ms. Krieger said she was voting yes too because she agreed with Mr. Brick.

Mr. Roth voted yes and also agreed with Mr. Brick.

Motion carried.

IV. PUBLIC FORUM

Charles Smith shared concerns about staff not being introduced at the start of the meeting and asked what Swedish Hospital's role was in the Small Area Plan.

Cynthia Searfoss said many people left tonight frustrated and angry before the Commission was allowed to talk to the audience. The guidelines for holding a public hearing were discussed.

Paul Douden also shared concerns about staff not being introduced. Several Commissioners noted Mr. Voboril did introduce himself at the beginning of his testimony.

V. DIRECTOR'S CHOICE

Director White did not have any matters to bring before the Commission.

VI. STAFF'S CHOICE

Director White stated the next meeting will be on October 19th, a study session regarding the medical marijuana amendments.

VII. ATTORNEY'S CHOICE

Ms. Reid stated for the public that is still here, when you make a decision in the quasi-legislative roll, you have to have facts and something on which to base your decision, which is what Mr. Brick explained. There have been a number of meetings with the residents of the medical district and that is the time that staff allowed for give and take. It needs to be

understood that the Commission can only make a decision based upon what is provided in the public hearing. The purpose of the stakeholder meetings is to allow everyone in the area to give input to staff before the issue gets to the Commission.

VIII. COMMISSIONER'S CHOICE

Mr. Brick said he appreciated Ms. Reid's clarification.

Mr. Welker said he's not sure it's a problem that can easily be fixed. He said he believes all the Commissioners would like to have a better dialogue and better communication with ourselves, with Council, with Staff and the citizens; we do the best we can. He said he felt like Staff and the Commission has tried to get public input.

Mr. Brick said he feels we have been successful too. There were probably 20 to 30 people here; that usually does not happen.

Mr. Welker said the problem is those people leave here feeling they were unheard.

Ms. Krieger said and the Commission is actually thrilled to have them attend.

The meeting adjourned at 9:35 p.m.

_____

Barbara Krecklow, Recording Secretary

CITY OF ENGLEWOOD PLANNING AND ZONING COMMISSION

IN THE MATTER OF CASE #2010-01, FINDINGS OF FACT, CONCLUSIONS AND RECOMMENDATIONS RELATING TO AMENDMENTS TO THE ENGLEWOOD DOWNTOWN AND MEDICAL DISTRICT SMALL AREA PLAN	)	**FINDINGS OF FACT AND CONCLUSIONS OF THE CITY PLANNING AND ZONING COMMISSION**
INITIATED BY: COMMUNITY DEVELOPMENT DEPARTMENT 1000 ENGLEWOOD PARKWAY ENGLEWOOD, CO 80110	)	

Commission Members Present: Krieger, Calonder, Fish, Knoth, Roth, Welker, Kinton, Brick, Bleile

Commission Members Absent: King

This matter was heard before the City Planning and Zoning Commission on October 5, 2010 in the City Council Chambers of the Englewood Civic Center.

Testimony was received from staff and the public. The Commission received notice of Public Hearing, the Staff Report, and a copy of the proposed amendments to the Englewood Downtown and Medical District Small Area Plan which were incorporated into and made a part of the record of the Public Hearing.

After considering the statements of the witnesses, and reviewing the pertinent documents, the members of the City Planning and Zoning Commission made the following Findings and Conclusions.

FINDINGS OF FACT

1. **THAT** the Public Hearing on the Amendments to the Englewood Downtown and Medical District Small Area Plan was brought before the Planning Commission by the Department of Community Development, a department of the City of Englewood.

2. **THAT** notice of the Public Hearing was published in the *Englewood Herald* on September 17, 2010 and was on the City's website from September 9 through October 5, 2010.

3. **THAT** the Downtown and Medical District Small Area Plan process was initiated in response to desires of the Englewood Planning and Zoning Commission and the Englewood City Council to foster economic development within the City's historical Downtown and Medical Districts.

4. **THAT** residents, property owners, and business owners having personal interests within and one block beyond the study area boundaries were invited to participate as community stakeholders in the Englewood Downtown and Medical District Small Area Plan stakeholder planning process.

5. **THAT** three stakeholder meetings were held on April 1, 15, and 27, 2010 with neighborhood residents and property owners in order to gather information from stakeholders to be incorporated into a set of goals and objectives.

6. **THAT** study sessions were held with the Englewood Planning and Zoning Commission on May 4th, the Englewood City Council on July 26th, 2010, and the Englewood Planning and Zoning Commission on August 3rd, 2010 in order to establish policy directions and corresponding goals and objectives for future planning efforts regarding Medical District sub-areas 2, 3, and 5.

7. **THAT** the amended Englewood Downtown and Medical District Small Area Plan goals and objectives are consistent with the intent of the goals and objectives of Roadmap Englewood: 2003 Englewood Comprehensive Plan.

8. **THAT** the proposed Amendments to the Englewood Downtown and Medical District Small Area Plan should be adopted as guiding principles for the development of zoning reform strategies for Medical District sub-areas 2, 3, and 5.

CONCLUSIONS

1. **THAT** the Public Hearing on the amendments to the Englewood Downtown and Medical District Small Area Plan was brought before the Planning Commission by the Department of Community Development, a department of the City of Englewood.

2. **THAT** notice of the Public Hearing was published in the *Englewood Herald* on September 17, 2010 and was on the City's website from September 9 through October 5, 2010.

3. **THAT** all testimony received from staff members and the public has been made part of the record of the Public Hearing

4. **THAT** residents, property owners, and business owners having personal interests within and one block beyond the study area boundaries participated as community stakeholders.

5. **THAT** the proposed Amendments are consistent with the goals and objectives of Roadmap Englewood: 2003 Englewood Comprehensive Plan.

6. **THAT** the proposed Amendments should be adopted as part of the Englewood Downtown and Medical District Small Area Plan.

DECISION

THEREFORE, it is the decision of the City Planning and Zoning Commission that Case #2010-01 Amendments to the Englewood Downtown and Medical District Small Area Plan should be referred to the City Council with a favorable recommendation.

The decision was reached upon a vote on a motion made at the meeting of the City Planning and Zoning Commission on October 5, 2010, by Ms. Krieger, seconded by Mr. Welker, which motion states:

> CASE #2010-01 *AMENDMENTS TO THE ENGLEWOOD DOWNTOWN AND MEDICAL DISTRICT SMALL AREA PLAN, BE RECOMMENDED FOR APPROVAL TO CITY COUNCIL WITH A FAVORABLE RECOMMENDATION FOR ADOPTION.*

AYES:	Fish, Knoth, Roth, Welker, Calonder, Krieger, Brick, Bleile
NAYS:	None
ABSTAIN:	None
ABSENT:	King

Motion carried.

These Findings and Conclusions are effective as of the meeting on October 5, 2010.

BY ORDER OF THE CITY PLANNING & ZONING COMMISSION

_____

Chad Knoth, Chair

Letter Posted by Citizen on Doors in Sub-area 2 Barbara 303-783-689

Re: PUBLIC HEARING – 7PM, OCTOBER 5, 2010
At the Englewood Civic Center Council Chambers

SUBJECT: the Englewood Planning Commission will present proposed amendments to the Medical District Small Area Plan document and will allow residents to speak for or against these proposed amendments.

Dear Homeowner or Interested Resident,

You are receiving this notice because you live in the area identified by this commission as Sub-Area 2. It includes: the 3200, 3300 and 3400 blocks of Grant St., the west side of the 3400 block of Logan St., and the 3200 block of Sherman St, and the east sides of the 3300 and 3400 blocks.

Meetings for the "Downtown and Small Area Planning Process began in 2007 and although a lot of time and thought have been put into the process only a small number of residents have taken part. Last April several meetings were held and the purpose was to gather input from "stakeholders" (property owners and residents) as to whether any reforms should be made to current zoning regulations in the 3 sub areas. People who had attended previous meetings received notice by mail. Those of us who attended the April meetings have again received notice of this October 5th meeting and would like all Sub-Area 2 residents to be aware of this hearing and the decisions that are being made regarding our neighborhood.

At those meetings proposals for the 3400 blocks of Logan and Grant were discussed separately from the rest of the neighborhood. An owner of 2 homes in the 3400 block of Grant St. and the rest of us attending were opposed to these blocks being identified for medical or high density residential development. (We don't recall any general disagreements about this.) The Planning Commission and the City Council are now proposing "moving forward" with this. "None of the Sub-area 2 stakeholder meeting attendees lives in the 3400 blocks of Logan and Grant St." **If you live in either of these blocks and oppose or wish to know more about this –NOW is the time to do so.**

The following information concerning Sub-area 2 only, is a summary of the comments presented to the city council by the Commission at their Planning and Zoning Commission Study Session Meeting May 4, 2010.

Residents request for down-zoning from the existing mixed use single and multi-unit residential and limited office district zoning should not be considered because:

- our neighborhood has been zoned this way since 1955
- changing the zoning would require grandfathering in some existing non-conforming structures – such as apartment buildings with height no-longer allowed.
- no multi-unit residential buildings have been built since 1970's and no offices
- **It is in the City's interest to retain this zoning in our neighborhood to accommodate demand for new development in order to take development pressure off of the City's existing Single and Two Unit Residential Zone Districts.** In other words, they want to save other neighborhoods from this type of development.

The Commission also expressed willingness to: remove in-patient hospital use, the possibility of removing office use or capping the size of offices and height from 60 to 40 feet in order to match the existing multi-unit residential buildings.

After reviewing all comments, proposed amendments and recommendations only a minority of the City Council were open to explore a more-restrictive residential zoning. They agreed to support efforts to reform existing mixed use zoning.

Next Steps

At the October 5 meeting Planning and Zoning will make a recommendation based on in-put from interested residents and forward a recommendation to the City Council. "Council will be asked to formally declare their support for the amendments based on the public hearing testimony and recommendations at a City Council meeting by resolution. If the amendments are approved in their current form, they will serve as the principles to guide Planning and Zoning Commission efforts to reform zoning regulations in all three Medical District sub-areas.

As you review the proposed amendments, we hope that you will agree that wording such as "Discourage, Explore, Encourage and Consider" are weak and leave our neighborhood open to un-acceptable development under the present Zoning.

A handout given to attending stakeholders states that our neighborhood currently has 103 "Homes". 87 are single family. 5 have 2 to 3 units. 1 has 6 units. There are 9 with 11-20 units. 1 town home and 11 commercial use structures. In our opinion, the addition of any more multi-units or businesses will take away from the neighborhood atmosphere. That is why we suggested and still believe down-zoning should be an option. If you live in a block with 1 or more apartment houses, you've seen the issues parking brings. Businesses could bring more parking issues and who wants to live next door to a business?

Hopefully, as a resident or homeowner of Sub-area 2, you will want to provide feedback and have some say in the future of our neighborhood. Some proposals that were discussed at these meetings such as new construction set-backs and building heights are not mentioned in this notice but are being decided. These decisions should be based on wishes of the majority of residents not just a handful. Whether or not you wish to speak at this meeting your attendance is important. If you can't make the meeting, you can call Linda Olson the City Council representative for our District. Work # 303-762-2310 or Home office 303-789-4799. lolson@englewoodgov.org