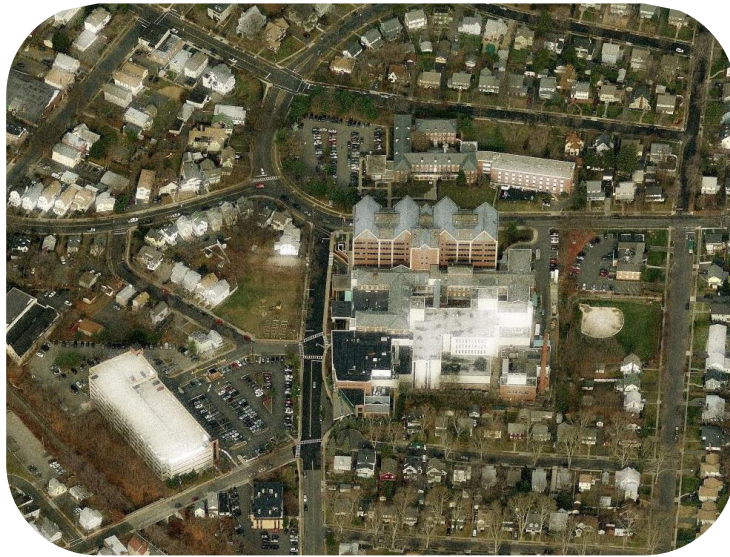


HUMC/Mountainside Hospital Redevelopment Plan



Date: May 2016

Prepared for:
Montclair Township
Glen Ridge Borough

Prepared by:



Public Hearing Date:
Council Meeting TBD

(Please leave blank for double-sided printing)

Redevelopment Plan **For the HUMC/Mountainside Hospital Redevelopment & Rehabilitation Area**

Prepared by:

Montclair Planning Board	Glen Ridge Planning Board
John Wynn, Chair	Robyn Fields, Mayor's Designee
Jason DeSalvo, Vice Chair	Michael J. Rohal
Martin Schwartz, Mayor's Designee	Ann Marie Morrow
Rich McMahon, Councilor	Timothy Hegarty
Carole Willis	Rick Mason
Craig Brandon	Mary Murphy
Stephen Rooney	Ruby A. Siegel
Keith Brodock	Ravi R. Mehrotra
Anthony Ianuale	Robert Morrow
Carmel Loughman (Alt. #1)	Thomas R. Borger (Alt. #1)
Timothy Barr (Alt. #2)	Anthony Turiano (Alt. #2)

Special Thanks to:

Janice Talley, PP/AICP, Montclair Township Planner
 Graham Petto, AICP, Montclair Township Assistant Planner
 Michael Rohal, PE, Glen Ridge Borough Administrator
 Michael Zichelli, AICP/PP, Glen Ridge Borough Planner
 Smith Maran Architecture + Interiors, Montclair Township Architect

Consultants:

H2M Associates, Inc.	VHB
119 Cherry Hill Road, Suite 110	1 Gateway Center, 15th Floor
Parsippany, NJ 07054	Newark, New Jersey 07102

Adopted: _____

The original of this report was signed and sealed in accordance with N.J.S.A. 45:14A-12

 Jessica L. Giorgianni, AICP, NJ PP # 33L100604300

Contents

1.0	Introduction & Background.....6
1.1	Overview.....6
1.2	Statutory Basis for the Redevelopment Plan.....6
1.3	HUMC/Mountainside Hospital: The Need for Change 9
1.4	The Planning Process.....10
2.0	Existing Conditions.....12
2.1	A Hospital “Campus”.....12
2.2	Existing Land Use.....12
2.3	Existing Zoning.....16
2.4	Existing Circulation.....17
2.5	Existing Parking.....18
3.0	Redevelopment Vision19
4.0	Land Use Development Regulations and Guidelines.....21
4.1	Plan Definitions:.....21
4.2	Redevelopment Sub-Zones.....22
4.3	Requirements for Area A: MOB Site23
4.4	Requirements for Area B: Campus Parking.....26
4.5	Permitted Uses.....27
5.0	Building Design and Architecture Guidelines.....31
5.1	Contextual Considerations, Use of Design Precedents.....31
5.2	Building “In the Round”31
5.3	Massing Considerations.....32
5.4	Entry32
5.5	Windows and Fenestration.....33
5.6	Exterior Materials.....33
5.7	HVAC and Rooftop Screening.....33
5.8	Precedent Imagery: Examples of Design Strategies.....34
6.0	Required Parking.....38
6.1	MOB Site.....38
6.2	Existing Hospital Parking.....38

6.3	ADA Parking.....38
6.4	Bike Parking.....39
6.5	Valet Parking Plan.....39
6.6	Remote Parking.....39
6.7	Compact Parking Spaces.....40
6.8	On-Street Parking.....40
6.9	Emergency Vehicle Parking.....40
6.10	Parking and Driveway Design.....40
6.11	Loading / Refuse / Service Areas.....41
6.12	Parking lot landscaping and screening.....41
7.0	General Site Design42
7.1	Lot mergers.....42
7.2	Landscape Buffer Areas.....42
7.3	Interior site landscaping.....43
7.4	Existing Trees.....43
7.5	Pedestrian circulation.....45
7.6	Site Lighting.....45
7.7	Fences.....46
7.8	Wireless & Telecommunications.....46
7.9	Utilities.....46
8.0	Streetscape & Open Space47
8.1	Street Trees.....47
8.2	Sidewalks.....47
8.3	Streetscape Lighting.....48
8.4	Streetscape furnishings.....48
8.5	George Street Open Space.....48
8.6	Plaza Space.....49
8.7	Future Rail Trail Connectivity.....49
9.0	Street and Intersection Design50
9.1	Complete Streets.....50
9.2	Circulation, connectivity, all users.....50
9.3	Traffic Impact Analysis.....51
9.4	Intersection Improvements.....51
9.5	North-bound turn around.....52
9.6	Street Re-naming.....52
10.0	Signs & Wayfinding.....52

10.1	Comprehensive Wayfinding Plan.....	52
10.2	Building Signage.....	53
10.3	Freestanding Building Identification Signs.....	54
10.4	Vehicular wayfinding.....	54
10.5	Pedestrian wayfinding.....	55
10.6	Other Permitted Sign Types.....	56
11.0	Sustainability	58
12.0	Plan Consistency Review	58
12.1	Relationship to Local Planning Objectives.....	58
12.2	Relationship to Other Plans.....	59
13.0	Plan Implementation.....	59
13.1	Outline of Proposed Actions.....	59
13.2	Zoning Amendments.....	59
13.3	Properties to be Acquired.....	60
13.4	Relocation.....	60
13.5	Infrastructure	60
13.6	Other Actions.....	60
13.7	Designation of Redeveloper and Redeveloper Agreements.....	61
13.8	Non-Discrimination Provisions.....	62
13.9	Adverse Influences	62
13.10	Affordable Housing Requirements	62
13.11	Site Plan & Subdivision Review and Approval...	63
13.12	Requests for Deviations & Design Exceptions...	64
13.13	Procedures for Amending the Plan	64
13.14	Duration of the Plan	64
13.15	Completion of Redevelopment	65
13.16	Severability.....	65

Appendix A: VHB Traffic & Parking Analysis,
Jan. 2016

Appendix B: Montclair Township
Referenced Ordinances

1.0 Introduction & Background

1.1 Overview

This Redevelopment Plan has been prepared for the Hackensack University Medical Center/Mountainside Hospital Redevelopment Plan Area (“Plan Area”). The plan area contains 21 tax lots totaling approximately 8.5 acres, with portions located in both Montclair Township and Glen Ridge Borough within Essex County, New Jersey. The preparation of this Redevelopment Plan is the result of a joint effort between the two municipalities. The Redevelopment Plan Area includes 17 properties that were designated by the municipalities as “areas in need of redevelopment” and 3 properties that were “areas in need of rehabilitation.” All but one property is owned or leased by HUMC/Mountainside Hospital or one of its affiliates. This Redevelopment Plan provides the regulations and guidelines that shall be used by both municipalities to implement the redevelopment of the Plan Area.

1.2 Statutory Basis for the Redevelopment Plan

In accordance with the statutory requirements of the Local Redevelopment and Housing Law (LRHL) pursuant to N.J.S.A. 40A:12A-1 et seq., the Governing Bodies of each municipality directed their respective Planning Boards to determine whether the Study Area (Figure 1) would meet the criteria to be designated an Area in Need of Redevelopment and/or an Area in Need of Rehabilitation¹.

Glen Ridge and Montclair jointly retained H2M Associates, Inc. to conduct the Area in Need of Redevelopment Investigation. After study and analysis, H2M prepared a written report entitled the “HUMC/Mountainside Hospital Study Area -- Area in Need of Redevelopment and Area in Need of Rehabilitation Preliminary Investigation Report,” dated April 2015.

A joint public hearing of the Glen Ridge Borough and Montclair Township Planning Boards was held on May 18, 2015. Based on their review of the before mentioned report and the testimony presented during the public hearing, the Montclair Planning Board recommended that 16 of the 19 Study Area properties located in Montclair be designated an Area in Need of Redevelopment and the remaining 3 be designated an Area in Need of Rehabilitation; and the Glen Ridge Planning Board recommended that the 2 Study Area properties located in Glen Ridge be designated an Area in Need of Redevelopment².

The Governing Bodies of each municipality adopted Resolutions endorsing the findings of their Planning Boards, thereby officially designating the Study Area properties as an Area in Need of Redevelopment and/or an Area in Need of Rehabilitation.³ A summary table of the designations is presented below.

¹ Glen Ridge Borough Council Resolutions dated July 14, 2014 and April 27, 2015; and Montclair Township Council Resolutions dated July 22, 2014 (R-14-107) and March 10, 2015 (R015-056)

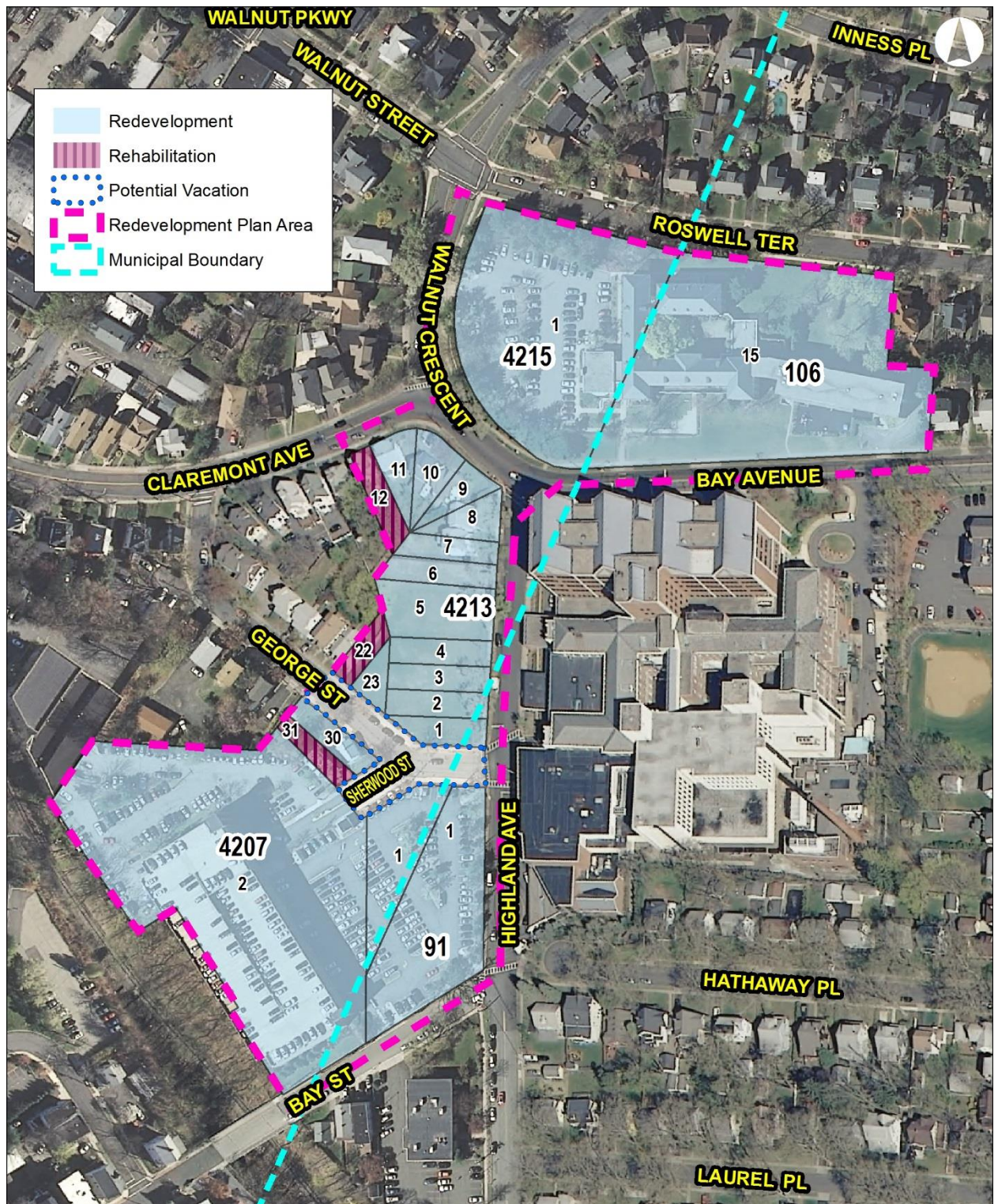
² Glen Ridge Planning Board Resolution dated May 20, 2015; and Montclair Township Planning Board Resolution, dated July 13, 2015

³ Glen Ridge Council Resolution dated May 26, 2015 (No. 82-15), and Montclair Township Resolution dated July 21, 2015 (R-15-117)

Table 1: Study Area Properties

Block	Lot	Location	Existing Use	Designation
Glen Ridge Borough				
91	1	HIGHLAND AVENUE	Surface Parking	Redevelopment
106	15	311 BAY AVENUE	Nursing School	Redevelopment
Montclair Township				
4207	1	BAY STREET	Surface Parking	Redevelopment
4207	2	SHERWOOD STREET	Deck & Surface Parking	Redevelopment
4207	30	34 SHERWOOD STREET	Dwelling	Redevelopment
4207	31	32 SHERWOOD STREET	Dwelling	<i>Rehabilitation</i>
4213	1	2 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	2	4 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	3	6 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	4	8 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	5	12 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	6	14 WALNUT CRESCENT	Vacant Land	Redevelopment
4213	7	16 WALNUT CRESCENT	Dwelling	Redevelopment
4213	8	18 WALNUT CRESCENT	Dwelling	Redevelopment
4213	9	20 WALNUT CRESCENT	Dwelling	Redevelopment
4213	10	22 WALNUT CRESCENT	Dwelling	Redevelopment
4213	11	8 CLAREMONT AVENUE	Dwelling	Redevelopment
4213	12	12 CLAREMONT AVENUE	Dwelling	<i>Rehabilitation</i>
4213	22	4 GEORGE STREET	Dwelling	<i>Rehabilitation</i>
4213	23	2 GEORGE STREET	Vacant Land	Redevelopment
4215	1	WALNUT CRS.& ROSWELL	Nursing School	Redevelopment

Figure 1: Study Area Map



1.3 HUMC/Mountainside Hospital: The Need for Change

Opening its doors in 1891, the Hospital's history in Glen Ridge and Montclair spans more than 120 years.

Today, seismic shifts occurring in the healthcare industry are requiring health care entities to evolve and adapt in order to keep pace with the changing environment. A number of factors, in combination, are contributing to the current shift in the way health care is provided, including, but not limited to, recent changes in health laws (Affordable Care Act) and insurance, steadily rising health care costs, the closing of major acute care facilities throughout the region, and the need to care for the aging baby boomer population.

A transformation in care delivery is needed to ensure health care entities can deliver the breadth and quality of healthcare services the community expects and deserves. Two of the most critical issues facing the Montclair and Glen Ridge area are: 1) the deficit of primary care physicians in the hospital service area and 2) the lack of Class A office space needed to attract those physicians.

In the future, hospitals and physicians must transform themselves into comprehensive care enterprises in order to be adequately paid in the new era of population health management. Leading healthcare organizations are making significant investments to create integrated delivery networks encompassing primary care, acute care and post-acute care. A primary care-led clinical workforce is a crucial element for successful population health management.

Class A office space is needed to attract and retain the best physicians and medical professionals in a rapidly-evolving, highly-competitive healthcare environment. Class A office space represents the newest and highest quality buildings in their market. They possess high-quality building infrastructure, are well located, have good access, and are professionally managed. As a result, they attract the highest quality tenants.

The development of a Medical Office Building ("MOB") on the HUMC/Mountainside Hospital (the "Hospital") Campus will enable the Hospital to enhance the scope and quality of comprehensive care services provided, while bringing additional economic and quality of life benefits to their people.

The Hospital provides an inherently beneficial service and critically important function to the region. For it to survive (and thrive!) as a local institution, HUMC/Mountainside Hospital needs to be able to evolve its offerings and keep pace with the ever-changing medical needs of health care providers and patients.

1.4 The Planning Process

Having officially designated the “HUMC/Mountainside Hospital Redevelopment and Rehabilitation Area,” Glen Ridge and Montclair jointly retained the Consulting team of H2M Associates and VHB (“H2M-VHB Team”) to prepare this Redevelopment Plan. Montclair’s Architectural Consultant, Smith Maran Architecture + Interiors, also assisted in the planning process, and guided the team on architectural design.

The H2M-VHB Team worked closely with the Planning Staff and municipal representatives of both communities to prepare a Plan that would work effectively in each town.

1.4.1 *Public Outreach & Stakeholder Involvement*

The planning process was initially informed by comments and concerns heard by the Team at public meetings held during the Area In Need of Redevelopment Study/Preliminary Investigation phase. This included a community meeting held within the HUMC/Mountainside Hospital Auditorium and a Joint Glen Ridge-Montclair Public Hearing. Both meetings had several dozen attendees.

As part of the preparation of the Redevelopment Plan, Glen Ridge and Montclair continued to provide opportunities for community engagement. This Plan is largely built on the comments, feedback, and ideas heard by the Team during the following meetings and events:

- Montclair 4th Ward Public Meeting, 11/30/15
- Glen Ridge Public Meeting, 12/15/15
- Laurel Place Residents Meeting, 12/15/15
- George Street Residents Meeting, 4/8/16
- Roswell Terrace Residents Meetings, multiple dates
- Glen Ridge Historic Preservation Commission Meeting, multiple
- Glen Ridge Planning Board Meetings, multiple
- Montclair Economic Development Committee Meeting, multiple
- Montclair Redevelopment Committee Meetings, multiple
- Montclair Planning Board Meetings, multiple
- Combined Glen Ridge / Montclair Planning Board Public Meeting, 2/29/16, 5/11/16

At these meetings, residents and stakeholders gave voice to a number of issues they experience in the area currently, or believe will result from new development. Specific issues raised during these meetings included:

- Hospital encroachment into the surrounding residential neighborhoods
- Loss of housing stock
- Visual impact of new development on surrounding residents
- Exacerbation of existing problems with illegal on-street parking and parking shortages
- Emergency Room parking deficiencies
- Safe circulation for pedestrians
- Exacerbation of problems at poorly operating intersections
- Illegal traffic movements made by trucks and ambulances
- Street names confusion (due to names changing when crossing town boundaries)
- Poor wayfinding of hospital facilities around the campus
- No space for Hospital Staff to take breaks, eat lunch, etc.
- Ensuring new development generates tax revenues for both municipalities
- Quality of life impacts, including noise and litter
- Architectural compatibility of any new development

1.4.2 *Property Owner Meetings*

HUMC/Mountainside Hospital and its affiliates own or lease all but one property in the Redevelopment/Rehabilitation Area. As the major land holder, the Hospital was an important stakeholder and engaged participant throughout the planning process.

The Team met with the Hospital and its representatives on numerous occasions to discuss the Hospital's redevelopment needs and objectives. The Hospital's development consultants provided the Team with conceptual plans to illustrate their preferred building size, parking locations, and street improvements, for example. In preparing multiple concept iterations, the Hospital's consultants sought to respond to various concerns voiced by the Community and relayed by the Project Team. The Hospital's concepts were useful tools in determining, for example, where parking could be located to accommodate the entire campus needs, where open space may be appropriate, where driveways should be located, and other such site design issues. While the concepts allowed for an important exchange of dialogue as to multiple design alternatives, they are not part of this Redevelopment Plan.

2.0 Existing Conditions

2.1 A Hospital “Campus”

The Redevelopment Plan Area encompasses properties located generally to the north, west and southwest of the existing HUMC/Mountainside Hospital building. While the Hospital itself is located outside of the Plan Area, it featured prominently in the discussions leading up to the Plan. The Redevelopment Area properties function as part of, and serve the needs of, the overall HUMC/Mountainside Hospital “campus.” The Plan area, for example, accommodates nearly all of the Campus’s parking supply, and carries the bulk of vehicle and pedestrian traffic along its circulation network. As such, any redevelopment taking place in the Plan Area, must carefully consider the needs, issues and opportunities of the entire campus, while also recognizing that the existing Hospital building and other HUMC/Mounainside-owned properties located outside of the Plan Area have operated, and will continue to operate, under pre-existing zoning and land use approvals.

2.2 Existing Land Use

Properties in the Redevelopment Plan Area include:

- **Block 4215 (M), Block 106 (GR)** - Former School of Nursing to the north of the Hospital
- **Block 4213 (M)** - Residential lots and vacant land to the west of the Hospital
- **Block 4207 (M), Block 91 (GR)** - Main parking area/parking garage to the southwest

All but one (1) of the properties in the Plan Area are owned or leased by the Hospital or one of its affiliates. The two-family home located on Block 4207, Lot 31 (32 Sherwood Street) is privately owned. Land Uses are shown in the map below.

The municipal boundary between the Borough of Glen Ridge and the Township of Montclair cuts through the Study area. The boundary line exists so that the former school of nursing school property and the Hospital’s surface parking lot off George Street are split between the two municipalities. All other study area properties are located within Montclair Township. The main HUMC/Mountainside hospital facility, which is located outside of the Study Area, is located fully within the Borough of Glen Ridge.

The context surrounding the HUMC/Mountainside Hospital Campus is unique, particularly when considering the “setting” of today’s newer hospitals. Rather than being situated off a major highway, near a research facility, in a university campus, or in a large city, the Hospital campus is surrounded largely by residential neighborhoods. Intimately scaled, tree lined streets of well-maintained homes surround the campus both in Montclair and Glen Ridge.

- a. The buildings surround a large courtyard and occupy a 26,000 sf footprint of the site. While the building footprint is larger, it has less square feet for medical office space than a new single medical office building. Given its large footprint, the existing building could not be retained and still provide the required number of parking spaces.
- b. The interior spaces were sized for student dorm rooms and faculty academic offices; they provide an inefficient layout not conducive for medical offices.
- c. There is only one (1) small obsolete passenger elevator for all of the buildings, which is inadequately sized for handicapped individuals.
- d. There is no centralized HVAC system and no airflow system. The heating for the building is generated at Mountainside Hospital and piped beneath Bay Avenue, then distributed by old steam radiators and heating convectors. The air conditioning is primarily provided by individual window units. The cooling convection units leak and have been dismantled.
- e. Due to its age, condition and obsolete design, a significant investment would be needed to gut, convert, and re-use the 1920/1950 Nursing School buildings for modern, energy efficient, and functional medical offices.

The Hospital has informed Glen Ridge and Montclair that it believes the investment needed to renovate or repurpose the existing buildings would far exceed the construction of a new, more efficient medical office building, and could make the site unaffordable to the physicians that will be its occupants.



2.2.2 Block 4207 (M), Block 91 (GR) - Parking Garage Site

The site is developed with a multi-level parking deck, surface parking areas and a small brick attendant's booth at the gated entrance to the property. The majority of the site is located in Montclair Township, with the easterly portion of the surface parking lot adjacent to Highland Avenue in Glen Ridge Borough. Access to the parking area is from George Street, and then a turn onto Sherwood Street. Sherwood Street essentially functions as a driveway into the parking area.

The deck was constructed in 1984 with 4 levels, and an expansion of an additional 1.5 levels took place in 1998. The parking deck and surface parking (except for the doctor's lot) are available for employees and visitors. Visitors pay hourly rates, and daily rates are available to those entering or leaving more than once daily. The Hospital's parking facilities are managed by a private parking operator, National Parking. As discussed further below (and in the Area In Need of Redevelopment Study), the parking areas are very heavily utilized.



A vacant dwelling owned by the Hospital is located at the corner of George Street and Sherwood Street. This dwelling would be razed as part of the Redevelopment Plan. A privately-owned, two-family residence is located on Sherwood Street, and faces the parking attendant booth.



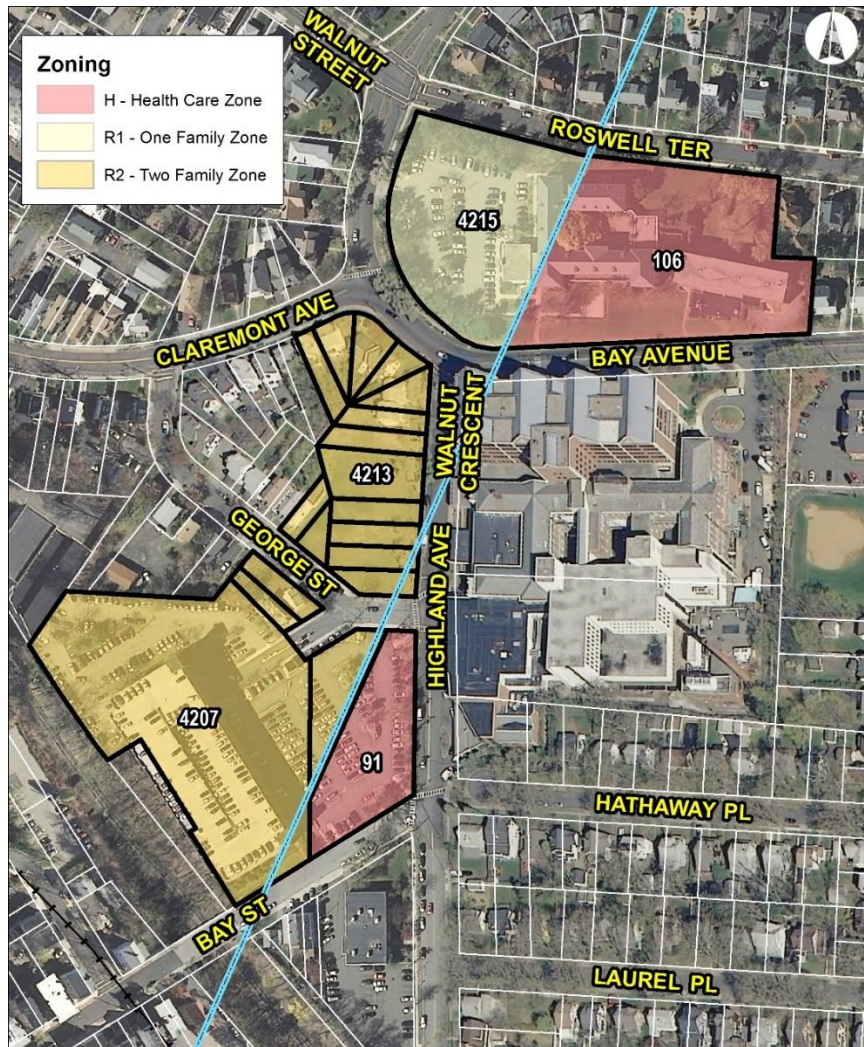
2.2.3 Block 4213 (M) – Residential and Vacant Land

Directly to the west of the hospital on the other side of Highland Ave., there are a number of vacant lots and seven (7) residences owned by the Hospital or one of its affiliates. In the past, the homes were rented to students in the medical residency program, newly arriving staff and management personnel. They are being razed to create a cohesive area for development on Block 4213, directly facing the Hospital.

2.3 Existing Zoning

As the Redevelopment Plan Area crosses municipal boundaries, it has historically been subject to the zoning regulations of two municipalities. The properties in the Plan Area located in Glen Ridge are within the Borough's Health Care Zone (H); while the properties located in Montclair are subject to the One-Family Zone (R1) or the Two-Family Zone (R2). The existing area zoning is shown in the map below.

Figure 3: Existing Zoning



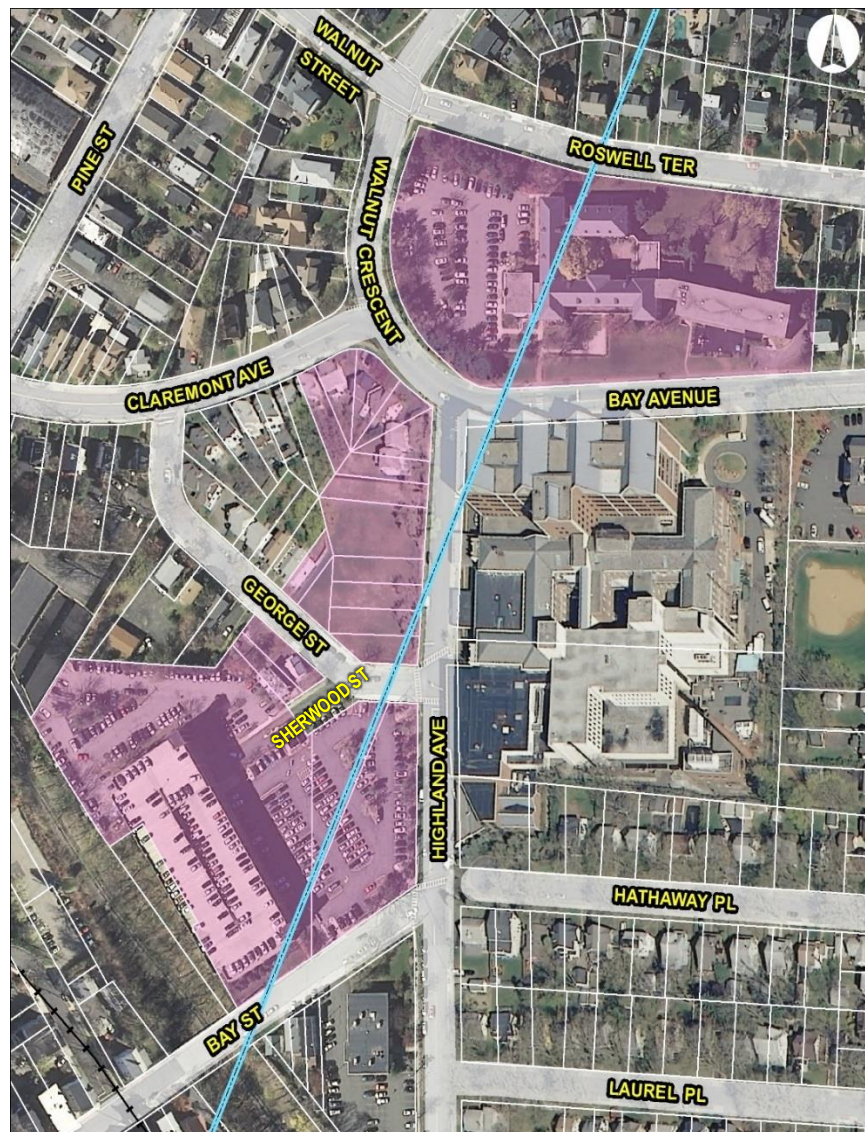
The Glen Ridge H-Health Care Zone permits hospital and related accessory uses, ambulatory care centers, outpatient care facilities, parking garages and parking lots (only south of Bay Avenue), laboratories, medical office buildings (only south of Bay Avenue), and a host of other uses. The R1 and R2 Districts within Montclair, however, limit permitted uses to single and two-family residential and some municipal uses. As a result, the Nursing School property and Parking Garage site have existed as long-standing, legal, non-conforming uses in Montclair. The 2015 Draft Montclair Master Plan expresses the need to create a “Hospital and Medical Office Zone” in this area and clarify zoning regulations as it pertains to healthcare services.

2.4 Existing Circulation

As can be seen in the figure below, the Redevelopment Plan Area is traversed by numerous intersecting streets, forming a complicated street network. The unusual street geometry created by Highland Avenue, Walnut Crescent, Claremont Avenue, Bay Avenue, George Street, and Bay Street consistently results in traffic build-ups between Glen Ridge and Montclair, to/from nearby major highways (GSP and I-280), and to/from HUMC/Mountainside Hospital, a major regional destination.

The heavy traffic, confusing street geometry, uncontrolled intersections, insufficient Hospital wayfinding signage, high pedestrian activity, and added ambulance traffic contribute to unsafe conditions and poor Levels-of-Service in the area. The availability and convenience of parking in the area is also an issue contributing to poor circulation conditions.

Figure 4: Existing Circulation



In addition to vehicular traffic, the Plan Area also accommodates significant pedestrian traffic. Staff and visitors to the Hospital (and previously, to the School of Nursing), must navigate the walk between the parking garage site and their destination buildings, covering distances of several hundred feet.

Therefore, the street network is included within the Plan boundary, as any redevelopment or new development within the Plan Area must include substantial improvements to the circulation networks for vehicles and pedestrians. Circulation improvements could include street re-alignments, street vacations/closures, signalization, new wayfinding signage, enhanced pedestrian conditions, and others. A traffic analysis was conducted as part of this Redevelopment Plan and is included in Appendix A. It evaluates the impact of various improvements on travel conditions, including adding traffic signals at the Walnut Crescent/Bay Avenue and Walnut Crescent/Claremont Avenue intersections.

2.5 Existing Parking

A parking analysis conducted as part of the redevelopment plan preparation (See Appendix A) concluded that under existing conditions, the hospital campus is at near capacity with regards to parking.

At the time of Plan preparation, there were approximately **1,045 parking spaces** on the HUMC/Mountainside Hospital campus. They are divided into a number of facilities, listed in the table below with their designation and parking capacity.

Capacities	
Facility	Existing Spaces
Parking Garage	680
Emergency Lot (in front of Garage)	39
Side Surface Lot (side of Garage)	114
Physician Lot	107
Radiation Oncology	12
Valet (at Former Nursing School)	93
Total	1,045

The Hospital also uses an off-site surface parking area on Sherman Street in Montclair, known as the Sherman Street Lot, for valet parking. This lot is approximately 800 feet from the nearest HUMC/Mountainside building entrance (Harries Pavilion). The lot is not formerly striped; however, the Hospital maintains that it currently serves 44 valet spaces.

As per the parking analysis conducted and summarized in the table below, site-wide utilization for the Hospital reaches a peak of 83.35% between 12:15Pm and 12:30PM. (Note that the off-site Sherman Street Lot and dedicated Radiation Oncology spaces were left out of the analysis.) The high utilization under current conditions means that any new use or development in the zone would have to rely on additional sources of parking.

Peak Utilization by Facility	
Garage, Emergency Lot, and Side Lot	83.19%
Physicians Lot	91.59%
Valet Lot	75.27%
All Parking Facilities	83.35%

In addition to adding capacity, the Redevelopment Plan presents an opportunity to remedy a number of issues with regards to parking. For one, emergency room users, sometimes arriving in a state of panic, are not able to park their vehicle close to the ER. As a result, vehicles are often temporarily left parked on the ER entrance ramp or on Highland Avenue, which is reserved for ambulance parking only. Another issue is the use of on-street parking by hospital visitors. The perception of unavailable parking, or the inconvenience of parking far away, leads some hospital visitors to park on the nearby residential streets, particularly George Street. A third issue relates to visitors being able to navigate to appropriate places to park, as there is insufficient wayfinding signage for the area. This Redevelopment Plan offers a number of recommendations aimed at resolving these issues.

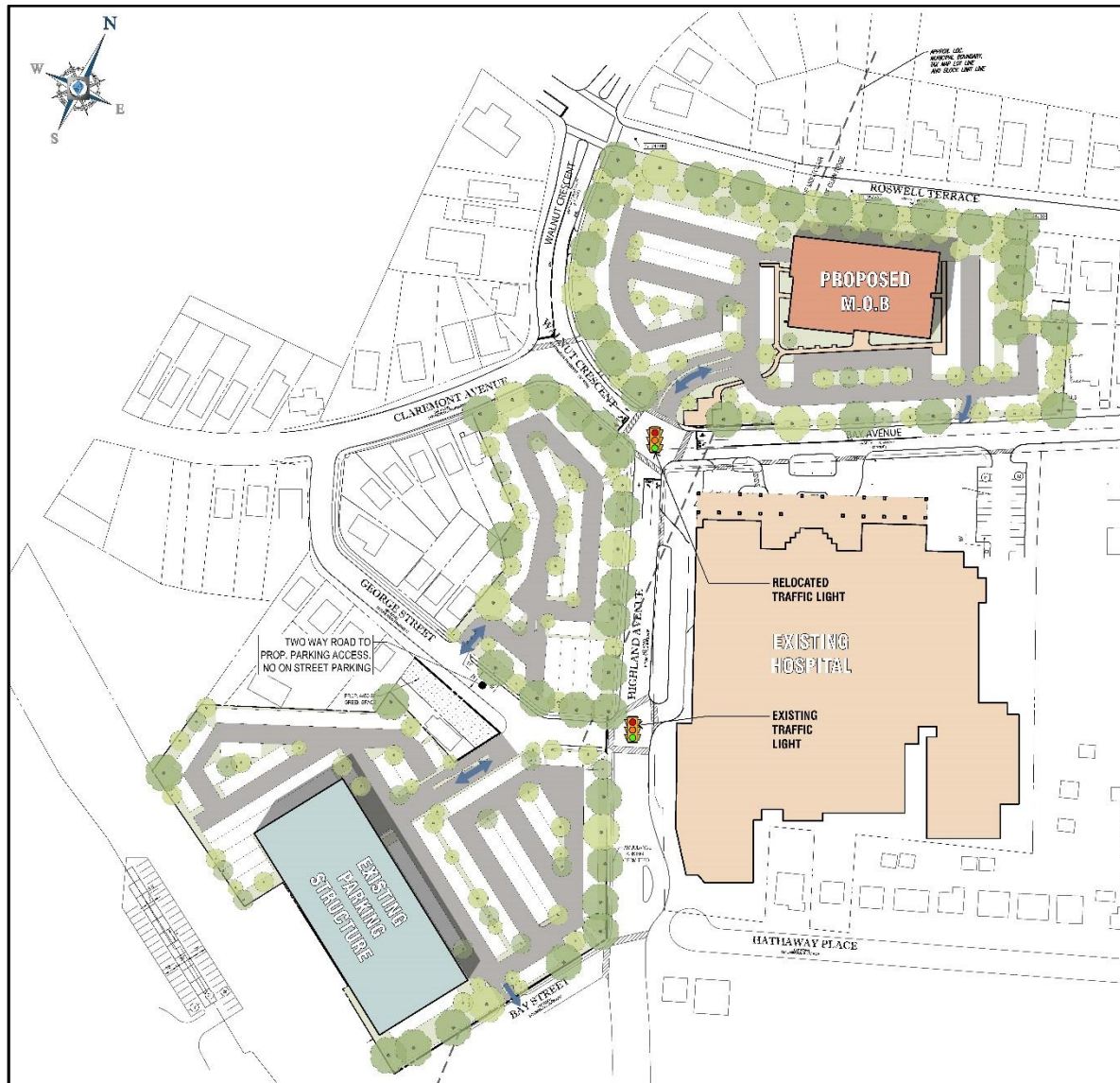
3.0 Redevelopment Vision

The Redevelopment of the HUMC/Mountainside Hospital Study Area shall:

- Enable HUMC/Mountainside Hospital to provide valuable health care services to the citizens of Montclair and Glen Ridge for generations to come.
- Balance the salient needs of existing and proposed medical facilities with the protective needs of the surrounding community.
- Be respectful of all surrounding areas, enabling the Hospital and surrounding neighborhoods to coexist, as they have for generations
- Strive to mitigate potential nuisance impacts, for example, traffic generated by the variety of hospital uses at all times of the day/night, ambulance entrances and delivery drives, multiple sources of noise, viewshed and aesthetic concerns, and others.
- Achieve a high level of design appropriate for a state-of-the-art medical facility.
- Improve circulation for motorists, pedestrians and bicyclists.
- Provide adequate parking without sacrificing urban design, which enhances the aesthetic environment and provides a pleasant atmosphere within the community.
- Be fiscally sound for Glen Ridge and Montclair

The Figure below illustrates a potential development concept for the HUMC/Mountainside Hospital Redevelopment Area. The concept was prepared to provide pictorial representation, for ease of understanding, of how the Plan requirements on the following pages can be implemented. The concept is not a regulatory drawing, and the site plan ultimately approved by the Reviewing Boards may vary from this conceptual drawing.

Figure 5: Conceptual Plan for Redevelopment



4.0 Land Use Development Regulations and Guidelines

This Plan is a new “planning and zoning document” to be used by both Montclair Township and Glen Ridge Borough. It contains one set of objectives, standards and development requirements for both municipalities, and strives to remove obstacles normally present in a multi-jurisdiction regulatory and development environment.

Development of the Plan Area shall be governed by this Redevelopment Plan. In instances where conformance with specific Montclair Township Ordinances is also required, such ordinances shall only include those referenced ordinances in effect as of the date of the adoption of this Redevelopment Plan, a copy of which ordinances is annexed hereto as Appendix B.

The following sets forth the standards for land uses, building design and site design in the Redevelopment Area.

4.1 Plan Definitions:

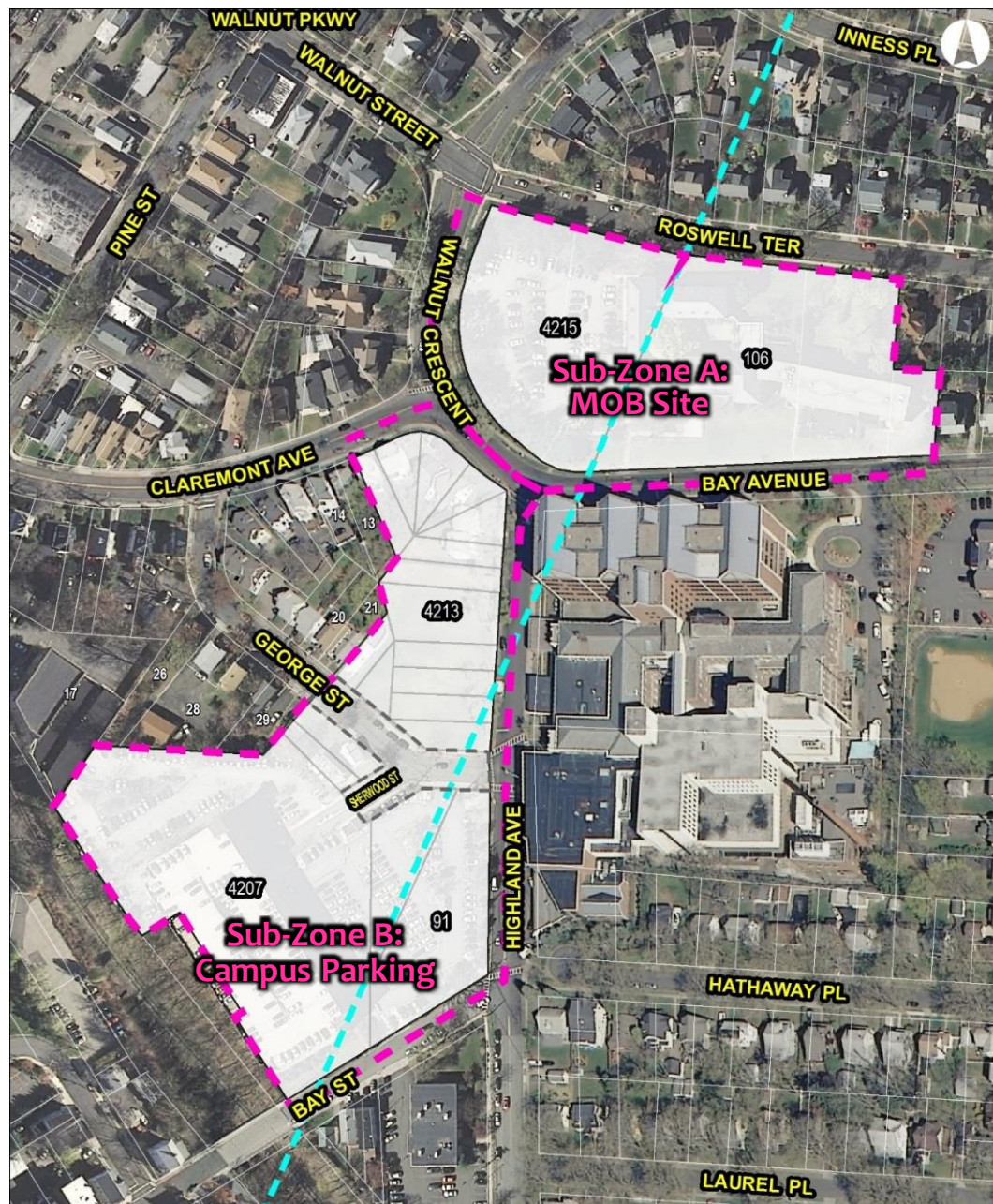
- a. Building Height – The vertical distance measured from the finished first floor to the highest point of the top surface of the structural beams supporting a flat roof, or to the mid-point of a sloping roof, excluding a parapet and mechanical equipment.
- b. Building Elevation Relative to Sea Level – The vertical distance above a referenced datum, using North American Vertical Datum of 1988 (NAVD 88), measured to the absolute highest point of a building.
- c. Medical Office - The office of medical practitioners, including but not limited to medical doctors, dentists, chiropractors, podiatrists, psychologists and licensed therapists.
- d. Medical or Dental Lab – Facilities and offices for performing diagnostic or medical tests (such as blood test urinalysis, CT Scan, X-ray, or other diagnostic test); and performing analysis of such tests.
- e. Outpatient Surgical Facility – A facility where surgical and medical procedures are performed (including medical procedures such as colonoscopies and mammograms) on patients who are not admitted for an overnight stay.
- f. Shall – Shall is used when a redeveloper is required to comply with a specific regulation, without deviation.
- g. Should -- Should is used when a redeveloper is encouraged to comply, but is not required to do so. If the exact recommendation cannot be met, the reviewing Board(s) will entertain a modification that meets the underlying spirit and intent of the guideline and/or the Plan, generally.

4.2 Redevelopment Sub-Zones

This Redevelopment Plan establishes two (2) sub-zones for the HUMC/Mountainside Hospital Redevelopment Plan Area, as follows.

Redevelopment Sub-Zone	Montclair	Glen Ridge
• Area A: MOB Site	Block 4215, Lot 1	Block 106, Lot 15
• Area B: Campus Parking	Block 4213, Lots 1-12, 22, 23; Block 4207, Lots 1, 2, 30, 31	Block 91, Lot 1

Figure 6: Redevelopment Sub-Zones Map



4.3 Requirements for Area A: MOB Site

4.3.1 *Purpose.*

The Area A/MOB Site shall be developed with a state-of-the-art medical office building (“MOB”) for the purpose of delivering primary and specialty healthcare services. The building and site shall be designed to fit within the context of the Hospital campus and simultaneously respect its adjoining neighbors; create a welcoming experience for patients and staff; provide safe circulation within the site and easy connectivity to the wider hospital campus; provide adequate buffering from adjoining residential neighbors; and provide vegetation and natural features to welcome, and reduce the stress of, arriving patients.

4.3.2 *Principal Uses*

- Medical Office
- Medical or Dental Lab
- Ambulatory surgical facilities
- Outpatient physical rehabilitation center
- A building containing one or more of the above uses

4.3.3 *Accessory Uses*

- Uses customarily incidental to the permitted uses, such as medical or dental laboratory, medical testing, and prescription pharmacy
- Underground parking structures
- Surface parking
- Valet parking stands
- Outdoor plaza / open space
- Rooftop solar panels
- Green roof systems on top of a building

4.3.4 *Prohibited Uses*

Any use that is not expressly listed as a permitted use is prohibited. In particular, the following uses are not expressly permitted by this Plan. Any of the below uses would require further analysis of parking needs and availability, and a redevelopment plan amendment process.

- Dialysis Centers
- Hospital or hospital expansion
- Nursing facility
- Urgent Care Facility
- Substance abuse treatment center
- Overnight medical care

4.3.5 Development Requirements

Tract area:

The Area A/MOB Site shall encompass the entirety of Block 106, Lot 15 in Glen Ridge and Block 4215, Lot 1 in Montclair, a total of approximately 3.6 acres.

Min. Building Setbacks

From Bay Ave. / Walnut Cr.:	25 feet
From Roswell Terrace:	40 feet
From side yard:	40 feet

Max. Building Height:

3 stories, 45 feet.

Roof structures housing mechanical or electrical equipment shall be appropriately screened and are excluded from the height calculation, provided the total floor area of such structures do not exceed one third of the floor area immediately below and provided the height of the roof structure equipment does not exceed ten feet.

Development Intensity (for entire Area A tract):

Max. Building area (GFA):	62,500 square feet
Max. Building coverage:	20%
Max. Impervious coverage:	75%

Min. Landscape Buffer / Parking setback:

From Roswell Terrace property line:	40 feet
From Walnut Crescent property line	15 feet
From Bay Avenue property line:	10 feet
From residential property line:	10 feet

Figure 7: Area A Development Requirements



The figure above is for illustrative purposes. In the case of a discrepancy between the figure and the development requirements in Section o, Section o shall govern.

4.3.6 *MOB Site Access / Driveways*

- a. Ingress and egress for all areas accommodating parking required for the Medical Office Building, as provided for anywhere within the entire Redevelopment Plan Area, will have gate-controlled access that is to be managed by the property owner or owner's entity.
- b. The primary site ingress/egress is to be a new driveway at the intersection of Bay Avenue, Walnut Crescent and Highland Avenue into the MOB Site that is controlled by a new traffic signal (See Section 9.3).
- c. At the primary site ingress, the driveway shall be of a minimum length to accommodate the stacking of at least 6 vehicles between the gate and the property line.
- d. The development shall not cause any degradation to the existing Level of Service (LOS) at all approaches, and preferably, should result in improvements to existing LOS.

4.3.7 *Patient Drop-Off*

- a. The drop-off area at the primary entrance to the MOB building shall accommodate two (2) travel lanes, each a minimum of ten (10) feet in width.
- b. A canopied roof should be considered over the front entrance area of the medical office building to protect visitors using the drop-off area. The canopy may extend into the required front setback area.

4.3.8 *Property Address*

It is recommended that a new address for the site be requested from the Post Office. The MOB address should be different from the Hospital's address. However, to avoid public confusion, a Montclair address is preferred since the Hospital has a Montclair address.

4.3.9 *Hours of Operation*

Hours of operation shall not be between 10PM and 7AM.

4.4 **Requirements for Area B: Campus Parking**

4.4.1 *Purpose*

The Area B/Campus Parking Area will serve the parking and circulation needs of the HUMC/Mountainside Hospital, as well as a portion of the parking required for the Area A/MOB site. Area B shall be designed with adequate parking facilities without sacrificing urban design or the aesthetic environment as described here and elsewhere in this Plan. This Plan contemplates that the Hospital may implement a second phase of redevelopment for Area B at some point in the future, which could include an addition/expansion of the parking garage, hospital building expansion or new medical office, for example. At such time, this

Redevelopment Plan would need to be amended to assess those uses and the ability of the site to accommodate additional development intensity.

4.5 Permitted Uses

- Uses permitted in Area A
- Parking garage, except not on Montclair Block 4213
- Surface parking
- Outdoor plaza / open space / community garden
- Residential uses in existence at the time of the adoption of this Plan are permitted as existing non-conforming uses

4.5.1 Accessory Uses

- Solar panels
- Green roof systems on top of a building / parking garage

4.5.2 Development requirements

Tract area:	Area B/Campus Parking shall encompass the following, as indicated on the Redevelopment Subzones Map (Figure 6): all lots within Montclair Blocks 4213 and 4207 contained within the Redevelopment Plan Area; Glen Ridge Block 91; and the vacated right-of-ways associated with a portion of George Street and all of Sherwood Street.
Min. building setback	
From Bay St. and Highland Ave.	20 feet
From residential properties	40 feet
From non-residential properties	20 feet
From public property or rail ROW	0 feet
Max. Building height:	6 stories, or 70 feet, excluding screened roof structures housing mechanical or electrical equipment, provided the total floor area of such structures does not exceed one third of the floor area immediately below and provided the height of the screened roof structure equipment does not exceed ten feet.

Development Intensity (for entire Area B tract, excluding George Street if maintained as a public right-of-way):

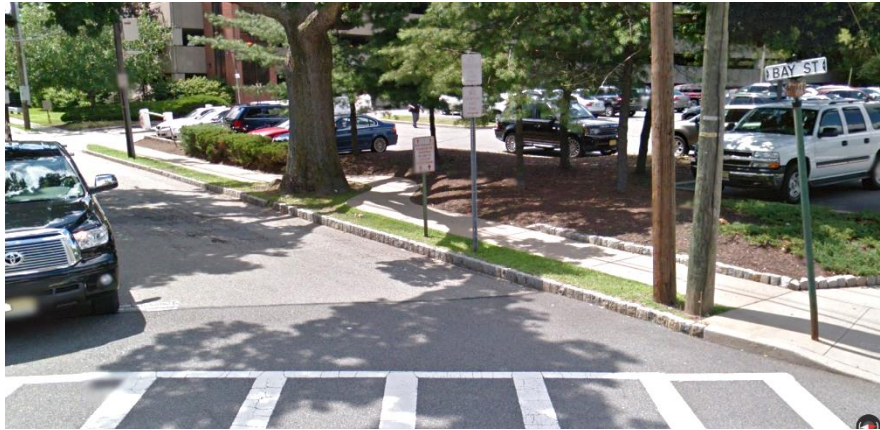
Max. Impervious coverage:	75%
---------------------------	-----

Min. Landscape Buffer / Parking setback:

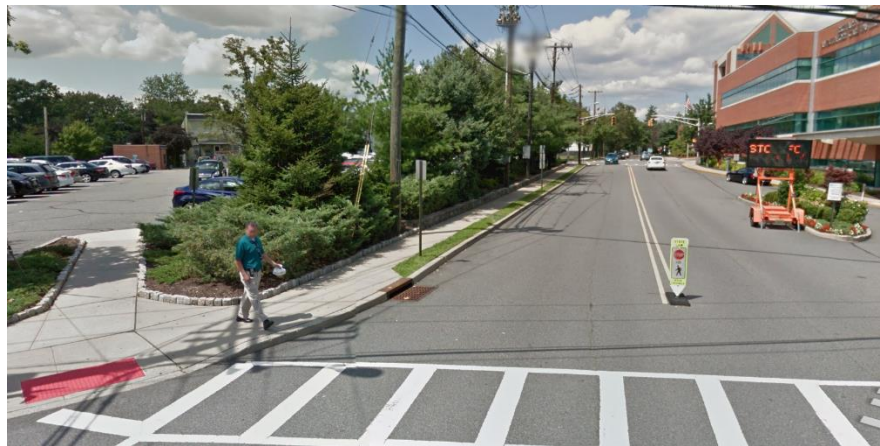
From Bay Street	Maintain previously approved.* See existing buffer area photo below.
From Highland Avenue	5 feet, except that the setback must average at least 7.5 feet along the length of Highland Avenue from the intersection of Bay Street to the intersection of Walnut Crescent/Bay Ave.
From Claremont Ave.	Starting at the westerly side property line that adjoins adjacent Lot 13 within Block 4213, the setback shall be equal to the distance of the setback on adjacent Lot 13, as measured from that dwelling's porch to the Claremont Ave. ROW line. The landscaped buffer may taper down to a minimum of 15 feet at the easterly side line of original Lot 11 within Block 4213 (essentially, the mid-point of the ROW line, where Claremont Ave. meets Walnut Crescent.)
From Walnut Crescent (from intersections with Claremont Ave. and Highland Ave.)	15 feet
From any residential property line within Montclair Block 4213	10 feet
From any residential property line within Montclair Block 4207	Maintain previously approved*, or 10 feet for new parking areas
From non-residential property line within Montclair Block 4207	Maintain previously approved*, or 10 feet for new parking areas.

** Per the Montclair Township Zoning Board of Adjustment 1984 Site Plan approval for the construction of the Parking Garage*

Figure 9: Existing Landscape Buffers along Bay Street and Highland Avenue



Existing Bay Street Landscape Buffer Area, looking southwest from Highland Ave.



Existing Highland Ave Landscape Buffer Area, looking north from Bay Street

4.5.3 Site Access

- a. Site access shall be from a point or points that will create the least impact to through-traffic on surrounding high-volume streets and to residential uses. No access shall be from Claremont Avenue.
- b. At the time of site plan approval, the reviewing Boards shall determine whether changes to the existing George Street and Sherwood Street configurations are warranted to improve ingress and egress conditions and to minimize traffic impacts to surrounding residential uses. For the portion of George Street within Area B, changes could include, for example, conversion from one-way to two-way travel, the recommendation of new access easements, partial closures, and/or the allowance of a resident on-street parking permit program. Any such changes would need to be addressed in a traffic impact report, a required submission item for site plan review.
- c. Where site access is controlled by a security gate, the gate shall be set back a minimum distance from a right-of-way to allow for the stacking of at least two (2) vehicles.

- d. The egress-only drive at Bay Street in existence at the time of the adoption of this Redevelopment Plan shall be permitted to continue.

5.0 Building Design and Architecture Guidelines

The development of new commercial buildings within the redevelopment area should enhance the character of the hospital zone by respecting the adjacent residential neighborhoods and the general character of both the Township of Montclair and the Borough of Glen Ridge. These design standards prioritize the integration of local design character but also anticipate the development team and its designer will deliver a building or group of buildings that is distinctive and purposefully not the product of “design by committee.” In other words, in addition to requiring designers to respond directly to the character of an existing architectural context, these design standards support the creative contribution of the professional designer, who is tasked here with going beyond mere stylistic imitation to articulate a respectful 21st century design vision with its own internal logic and integrity.

All development within the Plan Area is subject to the following standards and guidelines. Deviations may be requested through a design waiver process and are not subject to the positive and negative criteria associated with the granting of variances.

5.1 Contextual Considerations, Use of Design Precedents

The plan area overlaps two municipalities and borders multiple neighborhoods and uses. The periods of construction, scale, materials, design, and condition of buildings adjacent to the site vary widely. Due to the variety of adjacent architectural context, all new buildings shall follow the design example, in order of priority, of the following architectural precedents:

- a. Buildings of comparable size that were built in Glen Ridge during the Period of Significance (approximately 1870-1930) whether these buildings survive into the present or not. Examples include the Mill buildings and Sherman Avenue School.
- b. Existing structures to be removed / demolished on the same site that fall within the Glen Ridge Period of Significance (approximately 1870-1930).
- c. Directly adjacent hospital structures.
- d. Other contemporary buildings of the same or similar scale and use, where the applicant shall demonstrate the relevance of buildings selected in this category as appropriate for the surrounding context.

New buildings may incorporate characteristics from one or more of these categories.

5.2 Building “In the Round”

Façade design and finish materials should be considered in three dimensions, particularly as buildings turn corners. Materials and/or details should be extended around building corners and extensions in order to avoid a “pasted-on” appearance. All building facades adjacent to or visible from a public street, walkway or open space should exhibit the same or similar degree of architectural detailing as the building’s primary, street-facing façade. Material

changes should occur at a logical transition point, related to changes in building program, dimensional architectural massing or detailing, rather than form an arbitrary pattern on a flat façade.

5.3 Massing Considerations

New buildings in the plan area shall be articulated in a manner that differentiates between how the building meets the ground, how intermediate (i.e. “middle”) floors are grouped, and how the top is resolved.

Base Articulation – The base of the building shall be more richly detailed and articulated to connect the building the ground plane and the scale of the pedestrian. The articulation of the base shall be consistent on all sides of the building with a primary or secondary entry. It is recommended that a water table or similar change in materials or wall thickness be considered to address changes in grade.

Middle Articulation – The middle of buildings should be distinguished from the base and top by horizontal reveals, belt courses, cornices and / or other changes in depth, material, and fenestration pattern.

Top Articulation – The top of the building should be expressed through the use of a coping, cornice, decorative parapet, shading device or roof overhang, applied in a material, method and proportion consistent with the architectural style of the building. If the building has a flat roof, the articulation of the top may include portions of the top floor façade. If the building has a mansard or pitched roof, articulation may be integrated with the roof and facade elements.

Bay Rhythm - Any façade facing a public street shall have a change in articulation through the use of a regular or alternating bay rhythm by way of any combination of the following: (i) changes in materials, (ii) material finishes and patterns, (iii) structural bay expression (for example: engaged piers or pilasters), (iv) fenestration and/or (v) changes in the depth of the façade plane of at least 3 feet, as required by the reviewing board(s).

5.4 Entry

The primary entry of the building shall face a public right of way and the established front yard of the site. The primary building entry shall be easily discernable on the principal façade of the building through the use of distinctive architectural features and appropriate lighting. Signage shall not be considered as a substitute for a properly designed entry.

The pedestrian approach to the building entry from both the public right of way and parking associated with the building shall be clearly delineated, appropriately lit and accessible. The primary building entry shall have an exterior sheltered area of appropriate size and scale to accommodate the anticipated use of the building. Sheltered areas may take the form of a portico, loggia, porte cochere, or structured canopy and may project into the front yard setback.

5.5 Windows and Fenestration

All windows and glazing shall be demonstrably responsive to the context. Windows in general shall be square or rectangular and proportioned similar to adjacent structures. Curtain wall or strip windows shall be limited to facades facing the existing hospital and areas of secondary entrance.

5.6 Exterior Materials

Exterior materials shall be consistent with the context. Primary permitted facade materials are brick, stone and pre-cast masonry. Stucco and metal accents may be included as secondary or accent materials. No more than three (3) basic materials with a variety of textures and accents should be used on each façade. Applicants shall use a mixture of materials that primarily echoes the materials of the existing hospital context.

Where the integration of a traditional roof silhouette or element is proposed – for example: parapet, mansard or pitched roof – such features should be consistent with the context in both material and color, as well as demonstrably influenced by the formal composition and detailing of similar elements built during the Borough of Glen Ridge Period of Significance.

Where visible from the public right of way, security gates, access panels and garage window grilles should be enlivened with artwork, decorative tiling or ornamental metalwork where possible.

The following materials are not allowed within the Plan Area:

- a. Exterior Insulation Finish Systems (EIFS), exposed concrete masonry units, and bare or stained wood.
- b. Faux treatments that mimic common materials, including imitation brick or stone facing, vinyl or asphalt siding, and sheet metal siding.
- c. Materials that age rapidly and are difficult to maintain, such as paint over shop-finished metal.

5.7 HVAC and Rooftop Screening

- a. PTAC (Packaged Terminal Air Conditioners, through-the-wall air conditioning units), if used, shall be placed within a logical portion of a window framing unit and designed as integral to the window framing and definition, and shall be of a material and/or color to blend into the surrounding framing. Logos, brand names and lettering over one inch in height are not permitted on the exterior of PTAC units.
- b. Any rooftop mechanical equipment that may be visible from a public street shall be screened from view in a manner consistent with the architectural design and materials of the building.

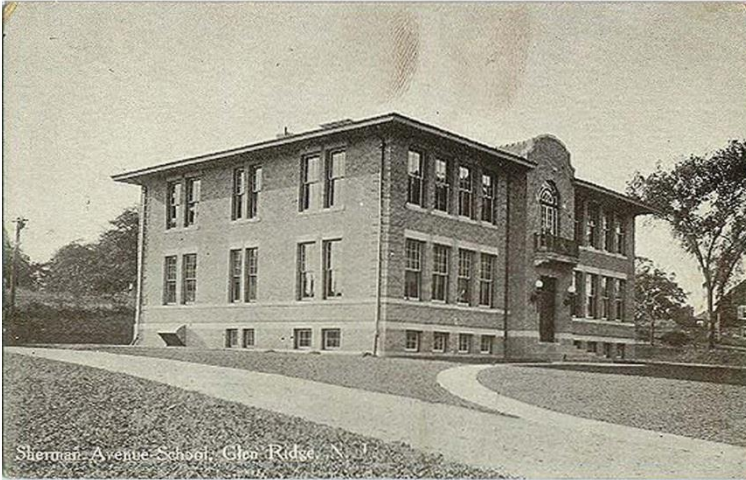
5.8 Precedent Imagery: Examples of Design Strategies

The following images of buildings provide examples of strategies that can be used to design a proposed medical office building in the redevelopment area that satisfies the design guidelines.

A variety of design strategies are depicted that show how a 21st century structure can thoughtfully respond to a context that includes both traditional and contemporary buildings. In some cases, traditional roof profiles, masonry walls, and clear structural bay rhythms are incorporated into the building design. In other cases, these elements are interpreted through a modern lens in order to achieve a scale and character in sympathy with, but not literally imitating, the built context. Several of the design examples depict how a combination of window composition strategies – from punched openings to strip windows to curtain wall – can be used to create facades that are coherent and related but pliable enough to echo the distinct architectural character of neighboring properties. In many instances, steps in the building footprint and changes in material and/or window type are used to helpfully highlight the building entry point, in addition to a structured entrance canopy, providing orientation while breaking down the overall scale of the structure.

Captions call out interesting or important aspects of the building examples, but are not comprehensive in their analysis.

Image Precedent Examples



1. Sherman Avenue School
Glen Ridge, NJ, c. 1910
(demolished)

Traditional

Symmetrical composition with central, figural entrance; beltcourses, heavy sills and headers, and a deep eave unify the overall form; bay rhythm is established with groupings of windows in pairs and four's.



2. Oakes Mills
Bloomfield, NJ, c. 1927
(demolished)

Traditional

Simple, bold masonry volumes; repetitive, regularly spaced multi-lite openings; low-pitched roofs with skylight monitors.



3. Medical Office Building

Transitional

Traditional base-middle-top composition with varying roof heights; distinctive entry roof; masonry piers and beltcourses paired with traditional punched openings and modern curtain wall.



4. Medical Office Building

Transitional

Straightforward base-middle-top composition rendered in masonry and glass; brick pilasters establish a clear bay rhythm; traditional punched openings and modern curtain wall are paired with distinctive brise-soleil and canopy elements.



5. Medical Office Building

Interpretive Modern

Simple base-middle-top composition rendered in masonry and glass; the mass is broken into three volumes; a striking entrance canopy unifies the composition, providing orientation and human scale.



6. Medical Office Building

Interpretive Modern

Traditional pitched roof silhouette and masonry volumes are paired with more minimal metal banding, fully glazed surfaces and glass corner entry.



7. Medical Office Building

Modern

Cubic volumes and planes; careful integration of both traditional and modern materials and detailing emphasizes craft and human scale.



8. Medical Office Building

Modern

Contrasting masonry and glass volumes with differences in height and proportion produce clear volumetric "bays;" the clarity of the composition enables effective signage and an unmistakable covered entrance area.



9. Medical Office Building

Modern

Contrasting masonry and glass volumes share the same height; a distinctive roofline is highlighted by an oversized corner trellis, providing orientation; entry canopy integrated with curtain wall echoes treatment of punched openings.

6.0 Required Parking

- a. The redeveloper shall provide a comprehensive parking plan that addresses the proposed MOB development and existing Hospital needs. The comprehensive parking plan shall, at a minimum, include the locations of: all parking for employees, patients, and general visitors; parking restricted to valet, compact spaces, ambulances, and other restricted parking; locations for deliveries and loading; and bicycle parking areas.
- b. The redeveloper and hospital shall prepare a new parking study five (5) years after the issuance of the Certificate of Occupancy for the MOB, and every five (5) years thereafter, and shall submit such studies to Montclair and Glen Ridge for administrative review.
- c. Any new development within the campus must be able to provide dedicated parking for those new uses, above and beyond the existing parking supply.

6.1 MOB Site

- a. Medical Office Parking Min.: **5.0 spaces per 1,000 square feet** of gross floor area (GFA).
- b. Parking shall be dedicated parking for MOB-use only; Parking for the hospital and emergency services should not use MOB parking.
- c. A minimum of 50% of the required MOB parking shall be located on the MOB site. The remaining required parking can be located within Area B/Campus Parking, a maximum distance of 500 feet from the principal MOB entrance.
- d. Parking shall have gate-controlled access that requires validation from within the MOB to deter others from using MOB parking areas.

6.2 Existing Hospital Parking

Parking for the existing Hospital building shall be provided at a minimum of **1.5 spaces per 1,000 square feet** of gross floor area (GFA). The parking ratio is based on the existing Hospital building, as of the time of the adoption of this Redevelopment Plan, having a gross floor area of 700,000 square feet and a net floor area of 456,000 square feet (as per Glen Ridge Tax Assessor).

6.3 ADA Parking

- a. Adequate parking facilities for accessibility to people with mobility impairments shall be provided as required for medical uses by the Americans with Disabilities Act (ADA).
- b. Accessible parking spaces shall be dispersed, but located nearest to accessible entrances, for any building(s) with multiple accessible entrances.
- c. Accessible parking in a parking structure may be provided on one level adjacent to the shortest route to the accessible building entrance(s).
- d. The minimum width of the accessible route shall conform to ADA requirements.

- e. Accessible parking size, design, access aisles, maximum slope, van accessibility and identification signage shall be provided in accordance with ADA requirements.

6.4 Bike Parking

- a. A designated area within the MOB Site shall be provided for bicycle parking. The area can be permitted inside the building or outside in a protected area. Parking shall be provided in such a way that allows for a bicycle to be properly secured, via a bicycle rack or locker.
- b. Bicycle parking is encouraged on Hospital property, in areas close to building entrances.
- c. Bicycle parking facilities shall, at a minimum, provide a stationary object to which the bicyclist can lock the bicycle frame and both wheels with a user provided U-shaped lock or cable and lock.
- d. Bicycle lockers and other high security bicycle parking facilities for use by staff are preferred to encourage non-motorized travel and to promote a healthier, active lifestyle.

6.5 Valet Parking Plan

- a. A valet parking plan shall be submitted with any application for development within the redevelopment zone. The valet parking plan shall show all delineated locations of valet parking, number of valet spaces, locations of valet stands for vehicle drop-off and pick-up, queuing areas for customer valet waiting, the valet service hours of operation and a valet staffing plan.
- b. The valet parking plan shall entail how valet parking spaces are to be utilized during non-valet operation periods.
- c. Valet parking spaces may be designed in tandem or other stacked parking configurations that meet the approval of the Reviewing Board(s) or Board Engineers(s).
- d. Parking areas that are striped for valet parking shall be posted "valet parking only."
- e. Valet operations may not make use of any on-street parking at any time.
- f. If valet parking is used to increase the parking yield to conform to the required number of spaces, then valet parking shall not be discontinued unless the parking area is restriped according to the standards of this Plan and additional parking is provided to bring the use of the site into conformance with minimum parking requirements.

6.6 Remote Parking

- a. If parking for patients or visitors is located further than 1,000 feet from a public Hospital entrance, such parking shall be programmed as valet-parking only, and shall count towards the total allowable valet parking as a percentage of total parking.
- b. The HUMC/Mountainside Hospital owns a parking area off-site, known as the Sherman Street Lot. Given its configuration and distance from the campus, all Sherman Street lot spaces shall be valet parking only.

6.7 Compact Parking Spaces

- a. The grading requirements for compact spaces shall be provided in accordance with Section 281-9 of the Montclair Township Ordinance in effect at the time of the adoption of this Plan.
- b. All compact spaces shall be signed indicating their use only for compact vehicles.
- c. The presence of compact spaces does not authorize the parking of vehicles such that they encroach into public rights-of-way, drive aisles, driveways or abutting properties.

6.8 On-Street Parking

On-street parking shall not be used to meet the minimum required parking.

6.9 Emergency Vehicle Parking

- a. Where ambulances are to be parked in designated lots, those areas shall be depicted on the site plan.
- b. Staging for ambulances shall be permitted in designated areas on Highland Avenue between Bay Avenue and Bay Street. Ambulance staging areas shall be depicted on the site plan.

6.10 Parking and Driveway Design

The grading of parking areas and driveways shall be designed to meet the requirements of Section 281-9 of the Montclair Township Ordinance in effect at the time of the adoption of this Plan.

6.10.1 *Parking Dimensions and Design Requirements*

- a. Area A standard parking spaces: 9 feet by 18 feet
- b. Area B standard parking spaces: 8.5 feet by 18 feet
- c. Compact parking spaces: 8 feet by 17 feet, including a 1-foot overhang
- d. Parking garages spaces: 8.5 feet by 18 feet
- e. Valet parking spaces: 8 feet by 18 feet
- f. Parking spaces which do not meet required standards may not be counted towards meeting the minimum parking requirements.
- g. All parking spaces shall be at a 90-degree angle, unless otherwise approved by the reviewing Board(s).
- h. All parking aisle widths shall be at least 24 feet for two-way travel, except that those adjacent to compact parking spaces shall have a minimum aisle width of 22 feet.

6.10.2 *Parking Allowances*

- a. Up to 30% of the required parking may be reserved for compact space parking, if the reviewing Board(s) approve of their location.
- b. Up to 30% of the required parking may be provided through valet parking, so long as a valet parking plan is provided in accordance with this Redevelopment Plan.

6.11 **Loading / Refuse / Service Areas**

- a. The location and design of off-street loading/trash/service areas shall be depicted on site plans and subject to the approval of the reviewing Board(s).
- b. Loading areas shall be provided on-site. Loading and service areas should be located away from public street frontages and should have operable doors or gates so that they may be closed when not in use.
- c. Trash and recycling should be located within the building interior or screened from view of public streets using fencing and/or landscaped buffers.
- d. Medical waste shall be handled in accordance with applicable law.
- e. Scheduling of trash and loading times should be controlled to minimize the negative impacts on the local community.

6.12 **Parking lot landscaping and screening**

Parking lot landscaping and screening shall be provided in accordance with Site Design Standards in Section 7.0.

7.0 General Site Design

The following Design Requirements apply to the Redevelopment Plan Area. However, where the Reviewing Board(s) or Municipalities have determined that existing improvements have deteriorated or need improving, the applicant/owner/redeveloper may be required to make related site improvements as part of site plan approval.

7.1 Lot mergers

Within each tax block, the existing, adjacent lots under common ownership shall be merged to create a single tax lot, except for Block 4207, Lots 1 and 2, and Block 91, Lot 1, and that furthermore, no lot shall be merged across a municipal boundary.

7.2 Landscape Buffer Areas

- a. Landscape buffer areas shall be measured as the area between the property line and site development (buildings, parking areas, etc.). Landscape buffer treatments, however, may extend into the right-of-way/up to the sidewalk.
- b. Parking may not be located within the minimum landscaped buffer areas, provided, however, that vehicle overhangs shall be allowed within with the required landscape buffer area.
- c. Landscape buffers shall consist of any combination of deciduous trees, conifers, shrubs, hedgerows, ornamental grasses, berms, low-height masonry walls, and or fences where appropriate. Landscape buffers shall be of sufficient size, height, and opaqueness to continuously screen the site from adjacent properties.
- d. Fences and walls may be used for decoration and to supplement required landscaping buffering to achieve a higher degree of visual blocking. Within the required landscape buffer adjacent to any residential property, however, a six (6) foot-tall solid fence shall be required along any residential side or rear yard, and a four (4)-foot-tall solid fence shall be required along any residential front yard.
- e. Parking lots and on-site circulation areas shall be effectively screened from all streets and sidewalks.
- f. The existing low-height wall along the easterly side of Walnut Crescent shall be maintained; if possible, a similar wall or landscape feature, such as a berm, should be constructed along the southerly side of Claremont Ave/Walnut Crescent.
- g. Landscape buffers shall be continuous except for where driveways access the street.
- h. Buffer areas may, but do not necessarily have to be, designed to achieve stormwater management benefits through the use of rain gardens or bioswales.



7.3 Interior site landscaping

7.3.1 *Parking lot interior*

- a. Landscaped areas shall be provided within the interior of parking lots, such as within islands or bioswales, and shall be landscaped with grass, shrubbery, flowering plants, ornamental grasses, and shade trees.
- b. The end of each parking aisle shall be landscaped.
- c. The height of opaque landscaping within the parking interior shall not exceed 3 to 4 feet in height so as not to obstruct sight lines.
- d. Interior landscaping shall amount to at least 5% of the paved area.
- e. Shade trees shall be provided throughout the parking area, except where they would conflict with site lighting.

7.3.2 *Buildings and entrances*

- a. Landscaping such as hedges and flowering plants should be installed around the base of buildings, including parking garages, to soften their appearance, whenever site work will be conducted at the base of existing or proposed buildings in the Plan Area.
- b. Landscaping shall be particularly visible at entranceways.

7.4 Existing Trees

- a. The developer shall make every effort to save existing trees. Special emphasis shall be made to retain the existing, mature trees along Roswell Terrace and Walnut Crescent, which have particular cultural and historic value to the neighborhood.
- b. Any tree removal and tree planting conducted within the Redevelopment Plan area shall be in accordance with Montclair Township tree requirements at § 281-8.2 Landscaping and street trees and § 281 Trees.

Appropriate Landscaping Treatments for the Site Interior



7.5 Pedestrian circulation

Walkways and sidewalks should be provided between parking areas and buildings to enable safe pedestrian navigation throughout the Plan Area.

7.6 Site Lighting

The lighting within the HUMC/Mountainside Hospital Redevelopment Plan area shall balance the lighting needs for the safety and security of the Hospital's employees, physicians, patients and visitors with the contextual nighttime characteristics of the surrounding residential neighborhoods.

7.6.1 General

- a. All parking areas and walkways thereto and appurtenant passageways, building entrances, loading areas and driveways shall be adequately illuminated during the hours of operation which occur after sunset.
- b. As part of the required lighting plan, applicants shall be required to submit a master inventory that accounts for all exterior lighting fixtures within the Plan Area. This shall include fixture types, counts, locations, mounting methods, heights, light source types and the light intensity in footcandles.
- c. Any adjacent residential zone or use shall be shielded from the glare of illumination from site lighting and automobile headlights.
- d. Full cut-off light fixtures for all exterior light sources and fully shielded light sources for interior, non-climate controlled spaces such as parking structures, shall be used wherever new fixtures are installed.
- e. Automatic control systems should be considered to eliminate excessive light during non-active hours of site operation. This applies to the MOB site and other campus parking areas that may be closed during typical evening hours of operation (i.e. valet areas, etc.).
- f. New freestanding lights within parking lots shall be protected to avoid being damaged by vehicles. New freestanding lights at the perimeter of parking lots shall be aligned with the parking stall striping and located a minimum of 2 1/2 feet to the edge of curb. The exposed concrete light foundation shall not exceed two inches above grade or six inches above grade if located within a lawn area.
- g. Decorative and architectural lighting is an appropriate use.
- h. All lighting should take advantage of highly focused, lower lumen LED fixtures utilizing timers in order to avoid dusk to dawn use and to maximize energy efficiency.

7.6.2 *Height of fixtures*

Any new pole-mounted lighting shall be provided by fixtures with a mounting height not more than 15 feet, as measured from grade to the centerline of the light source, except that the maximum height of light fixtures in the parking areas on Block 4207, original Lots 1 and 2 in Montclair and Block 91 in Glen Ridge shall be 18 feet, or the height of fixtures in existence at the time of the adoption of this Redevelopment Plan, whichever is less.

7.6.3 *Intensity*

- a. Min. average for public realm: 0.5 fc
- b. Max. average for public realm: 3.0 fc
- c. Min within parking garage: 1.0 fc
- d. Max. along property line: 0.3 fc, except for an average of 6 fc along driveways

7.6.4 *Lighting Style*

Decorative lighting is appropriate. The style of any light or light standard shall be consistent with the architectural style of the principal building and the predominantly residential character of the surrounding area.

7.7 **Fences**

Fences are only permitted within buffer areas and along interior property lines, such as to provide additional screening between the Plan Area and adjoining properties. The types and heights of fences permitted shall be governed by Montclair Township Ordinance 347-27.

7.8 **Wireless & Telecommunications**

The installation and operation of wireless telecommunications facilities in the HUMC/Mountainside Hospital Redevelopment Plan Area shall be subject to the requirements set forth in Montclair Ordinance Section 347-17.1.

7.9 **Utilities**

In the past, residents surrounding the Hospital and former Nursing School and dormitory have experienced sewer back-ups. The last reported incident occurred in 2001 with the Bay Avenue sewer backup. Research into the matter revealed this back-up was not caused by a surcharge due to excessive flow but rather a piece of slate that was lodged in the sewer pipe. There have been no reports of sewage overflow since that 2001 event.

Borough of Glen Ridge records show that there is no hospital connection to the George Street sanitary sewer line. As part of the development of the ambulatory pavilion project, the hospital agreed to abandoned their onsite laundry to reduce flow. The hospital also has an agreement with the Borough to clean the Bay Avenue sewer line on a quarterly basis. In addition, the Borough lined the Bay Avenue manholes & rebuilt the manhole benches in 2012.

- a. As part of the site plan process, the developer shall measure the existing flow & confirm the slope of the sanitary sewer pipes. The reviewing Engineers shall then determine if the system can handle the projected flow.
- b. If there is insufficient capacity, there are several options to consider including relining the sewer pipes or connecting downstream to a larger capacity pipe.

8.0 Streetscape & Open Space

Public realm improvements and furnishings within the Plan Area are intended to create a pedestrian-friendly environment, provide an attractive gateway into the HUMC/Mountainside Hospital campus, improve pedestrian connectivity and provide open space amenities that add to a welcoming experience for Hospital staff and visitors. However, where the Reviewing Board(s) or Municipalities have determined that existing streetscape and open space features have deteriorated or need improvement, the applicant/owner/redeveloper may be required to make related site improvements at the time of site plan approval.

8.1 Street Trees

- a. Street trees shall be planted along the streets within or adjacent to the Plan Area in accordance with Montclair's Street Tree requirements set forth in Ordinance 281-8.2C and 281-8.2E in effect as of the date of adoption of this Redevelopment Plan. Shade trees should be planted to create a traditional allee (a line of trees along both sides of the street) that is appropriate given the surrounding residential character.
- b. Where street trees are not currently provided, they shall be placed at regular intervals on all streets within the Redevelopment Plan Area and shall be planted at approximately 40 feet on center. Exceptions to the 40-foot spacing are allowed for curb cuts to parking areas, lobby entrances and utility facilities located within the sidewalk area.
- c. The genus-species of trees shall be consistent with the existing foliage to harmonize the natural setting in the campus area. Tree types and location shall be subject to approval by the Planning Board.
- d. Trees shall not be planted in a way that would negatively impact pedestrian circulation and visibility.

8.2 Sidewalks

- a. The existing 4-foot-wide sidewalks surrounding Area A/MOB site (i.e., along Roswell Terrace, Walnut Crescent and Bay Avenue) and Area B, may remain so long as they are sufficient and in good condition and improved to meet minimum ADA requirements.
- b. New sidewalks elsewhere in the Plan Area shall be a minimum of 5 feet wide, except where they are constructed adjacent to existing sidewalks, they shall be of the same width as the sidewalks to which they connect.
- c. New sidewalks shall be of a concrete material that meets the approval of the reviewing Board(s).

8.3 Streetscape Lighting

- a. Street lighting of a type supplied by or approved by the utility and of a type and number approved by the Board shall be provided for all street intersections and along all streets within the Plan Area as deemed necessary for safety reasons. Wherever electric utility installations are required to be underground, the applicant shall provide for underground service for street lighting.
- b. Pedestrian-scale, decorative lighting (12 feet to 14 feet in height) shall be provided at regular intervals in an opposite arrangement on Bay Avenue, Highland Avenue, Walnut Crescent and in other locations as otherwise directed by the Reviewing Board(s). Where permitted by the Board(s), bollard lighting may be installed to enhance pedestrian lighting conditions.
- c. The lighting scheme shall be chosen to illuminate the sidewalks and walkways and promote a campus-style setting, sense of security, and unified look throughout the campus.
- d. Decorative lighting may contain features such as hanging plant baskets and/or banners indicating the hospital zone, where such features meet the approval of the reviewing Board(s).

8.4 Streetscape furnishings.

- a. Street furniture in the area, including benches/seating, public art, lighting, planters, and trash and recycling containers, should be appropriately placed but serve to also be visually appealing.
- b. The property owner shall be responsible for the maintenance of all street furniture, including raised planter landscaping and care, the emptying of garbage and any repairs necessary.

8.5 George Street Open Space

- a. An area for Public Open Space of at least 2,500 square feet shall be provided to serve as an amenity to, and a transition between the Hospital uses and the adjacent George Street residential area. Upon its demolition, the existing lot at 34 Sherwood Street should be considered a priority location for the Public Open Space, as it is proximately located for use by the neighborhood and it would serve as a buffer for the existing residence at 32 Sherwood Street.
- b. The Public Open Space area shall consist of a lawn area and attractive landscaping and may contain seating and other passive park features. The Hospital shall own and maintain said open space. Otherwise, the Hospital may enter into agreement with a neighborhood association or community group so that such organization or group may develop and maintain the Public Open Space for use as a community garden, for example.

- c. The Public Open Space area shall include landscaping, such as a blend of evergreen shrubbery and trees that creates a year-round visual screen between the George Street neighborhood and the hospital campus.

8.6 Plaza Space

- a. There shall be publicly accessible open space / plaza space for pedestrians to enjoy located, at a minimum, near the crosswalks that access the MOB site.
- b. Plaza space shall be landscaped and hardscaped to create an environment for MOB and Hospital patients, employees and visitors that is conducive for sitting, relaxing, and gathering. Shade, decorative paving, and landscaping shall be incorporated so that a comfortable setting can be created,
- c. Plaza space may include benches/seating, public art, bollard lighting, planters, trash and recycling containers and other features that improve the overall experience.
- d. The plaza space may include an informational or historical signage in the form of a plaque or landscape element to display the Hospital's 100+ year heritage at this location.
- e. Whether the plaza space or other area is chosen, the Hospital shall provide a designated smoking area that is convenient for staff and visitors to access, so as to minimize instances of staff and visitors smoking near surrounding residential properties. The designated area shall be shown on the site plan.

8.7 Future Rail Trail Connectivity

As a condition of any site plan approval, the site plan shall show the location of a potential connection / access easement area from the Sherman Street Lot (Montclair Block 4207, Lots 7 & 8), which is owned by the Hospital and utilized for hospital valet parking, that would allow access to the future "Ice & Iron Greenway." The easement shall be a minimum of 10 feet wide and in a location that is acceptable to the Hospital and the Township. According to the NJ Bike Walk Coalition (NJBWC), *"the Ice and Iron Greenway is a grassroots project with a mission to transform an unused rail corridor (the old Boonton Line, from Hoboken to Montclair's Pine Street), currently owned by Norfolk Southern Railroad, into an 11-mile greenway connecting the municipalities of Montclair, Glen Ridge, Bloomfield, Bellevue, Newark, Kearny, and Jersey City. The Boonton line was taken out of use by NJ Transit when Mid-town Direct train service was brought to Montclair in the early 2000's. Along its route, the Ice & Iron Greenway will connect parks, including Branchbrook Park, schools, hospitals and retail, in addition to providing an integral active transportation link enabling commuters to bypass some of New Jersey's most congested roadways. It will provide recreation for thousands living along this corridor, providing them access to exercise and the ability to walk or ride a bike to destinations in a car-free environment. It is hoped that commuters will be able to use the Greenway to ultimately reach Manhattan via Jersey City from points west in Essex County and from the towns along the corridor."*

Example treatments for Pedestrian Plaza Space



9.0 Street and Intersection Design

9.1 Complete Streets

Both Glen Ridge and Montclair have adopted policies by Resolution to support and reinforce their commitment to creating a comprehensive, integrated, connected street network that safely accommodates all road users of all abilities and for all trips. As such, any application within the Redevelopment Plan Area that results in a public street project shall ensure that such a project be designed and constructed as “complete streets” whenever feasible to do so in order to safely accommodate travel by pedestrians, bicyclists, public transit, and motorized vehicles and their passengers, with special priority given to pedestrian safety, and shall make affirmative statement to that project’s adherence in the site plan application.

9.2 Circulation, connectivity, all users

Efficient circulation through the Redevelopment Area shall be maintained at all times. All uses within the Redevelopment Area shall ensure their operations do not interfere with the safe and efficient operations of any public roadway within the Redevelopment Area.

- a. Speed limits shall be set at 20 miles per hour on Highland Avenue between Bay Street and Bay Avenue.

- b. Travel lanes shall be improved to no greater than 12 feet in width in order to promote safe vehicular speeds.
- c. Bicycle signage and striping is encouraged throughout the Plan Area, subject to approval by the Reviewing Board(s). Where separate bicycle facilities are not feasible or required, applicant shall consider the installation of sharrows and/or “share the road” or “bicycle may use full lane” signage.
- d. Where appropriate, traffic islands and landscaped medians should be used to define the circulation pattern and create traffic calming.
- e. Sidewalks shall be located along all streets and kept in good condition at all times to accommodate the safe travel of pedestrians and persons with limited mobility.

9.3 Traffic Impact Analysis

As part of any application for site plan approval, a Traffic Impact Analysis shall be submitted for review by the reviewing Boards’ Engineer. The Traffic Impact Analysis shall consider both vehicular and pedestrian traffic.

9.4 Intersection Improvements

- a. A signalized traffic device is required to be installed at the intersection of Bay Avenue/Walnut Crescent/Highland Avenue.
- b. The HUMC/Mountainside Hospital Traffic and Parking Analysis (Appendix A), indicates traffic and circulation issues may degrade at the intersection of Claremont Avenue and Walnut Crescent as a result of the project. This Redevelopment Plan requires that new development or redevelopment shall not result in any further degradation of Level of Service (LOS), beyond existing levels, at all approaches. The specifics of any improvements proposed by the Developer to meet this requirement shall be determined and reviewed as part of site plan approval.
- c. All new traffic signals within the Redevelopment shall be equipped with video detection technology and shall be actuated, as recommended by the traffic analysis in Appendix A.
- d. A timing plan shall be submitted as part of any traffic signal installation and/or improvement within the Redevelopment Area to each municipality and subject to the review and approval by the municipalities’ engineer.
- e. At each new traffic signal with a pedestrian crosswalk within the Redevelopment Area, pedestrian countdown times shall be installed. Pedestrian signals shall be audio-tactile push-button activated, placed at a height that is ADA accessible, 3’6” above the ground, and 16” in size with “hand/man” indicator and countdown timer.
- f. High visibility crosswalks shall be provided at each leg of new signalized intersections within the Redevelopment Area, and at non-signalized pedestrian crossing points, where appropriate. Crosswalk widths shall be at least 8’ in width. Where there is a pedestrian

crossing at an uncontrolled movement, a “stop for pedestrians” panel shall be placed at each approach at a location that is approximately 100 feet from the crosswalk.

- g. ADA Curb ramps shall be provided at each pedestrian crossing and adhere to the New Jersey Barrier Free Subcode at N.J.A.C. 5:23-7.1 – 5:23-7.31.

9.5 North-bound turn around

A submitted site plan shall demonstrate that wherever emergency vehicles are parked along the westerly side of Highland Avenue (southbound direction), there is a location for these vehicles to safely U-turn outside of the street cartway.

9.6 Street Re-naming

This Redevelopment Plan recommends that streets crossing municipal boundaries within the Redevelopment Area be re-named so as to be consistent on each side of the municipal boundary. The confusion of navigating the street network in this area is exacerbated by the changing street names, which impacts overall traffic conditions and safe use of the network.

10.0 Signs & Wayfinding

Unless otherwise provided for below, standards and requirements for signs shall conform to Article XVIII (Signs) of the Montclair Zoning Ordinance.

10.1 Comprehensive Wayfinding Plan

10.1.1 Purpose

Wayfinding signage is very important to first time and infrequent visitors. Wayfinding signs and visual cues are used to guide motorists and pedestrians into campus, to parking areas, and to specific buildings or their ultimate destination. Furthermore, signage design can influence people’s experience. The appropriate expression through form, color, typography and materials can help shape the user’s experience and perception of their journey.

10.1.2 General Requirements

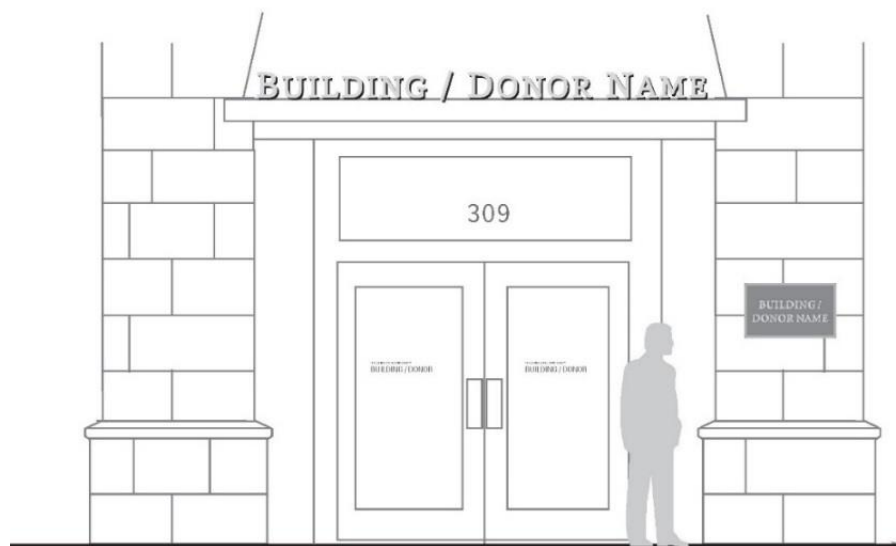
- a. A comprehensive wayfinding signage plan shall be submitted for approval. The plan shall identify the location and content of all existing signage, as well as each proposed sign type, and the design specifications for signage materials, structure, size, letter size, standard symbols, colors, and any accessories.
- b. Sign types within the signage package may include vehicular directional signs, pedestrian directional signs, freestanding building identification signage, wall signage, light pole banner signs, and historical markers or interpretive signage.
- c. Simplicity and legibility are primary design criteria for effective wayfinding signage.
- d. The signage plan should show uniformity and consistency in sign design for all sign types so users can easily recognize signage as part of the HUMC/Mountainside Hospital campus

by, for example, consistent materials and construction; consistent typeface, colors, arrows, and logos; and consistent graphic layouts and consistent overall appearance. Branding and marketing, however, are secondary considerations to informational effectiveness for signage.

- e. Signage shall contribute to a facility's design character and quality. Signs should complement architecture and help establish the character for the environment.
- f. Signs shall be externally illuminated in accordance with the Montclair Ordinance.
- g. Signage and graphics are to be durable, resilient, easily maintained and resistant to normal deterioration and acts of vandalism

10.2 Building Signage

- a. The primary purpose of this sign type is to identify the name of the building and to indicate primary entrances. The wall sign may include a donor or honorific name for a building.
- b. Signage should be positioned on the building facade at the primary entrance and in view of major pedestrian walkways.
- c. Signage should respect the architecture of the building, and be placed so as not to obscure the distinctive architectural features.
- d. Letters should be mounted at or near the building entrance, or on a smooth horizontal area, surface or element integral to the design of the building, such as a belt course, horizontal mullion or cornice, and in a manner that does not damage the building materials or architectural elements.
- e. The size of wall-mounted signs shall comply with the Montclair Ordinance for signs in commercial districts.



10.3 Freestanding Building Identification Signs

Standalone signs are a “first impression” visual communication tool upon entering a site and shall be attractive to visitors. They shall be permitted as follows:

- a. Only one (1) such sign is permitted at each visitor entrance driveway or entry gate.
- b. They shall be two-sided and stand perpendicular to the street.
- c. Such sign shall be set back at least five feet from the closest property line.
- d. The signs shall contain only the official name of the building and the address, except the sign may also contain the Hospital’s name or logo. This type of sign not intended as a building directory. Names of occupying units or internal spaces are to be placed on internal directories. Full donor or commemorative names should not be on these signs.
- e. The sign shall be of a low-height or monument style, and of a design consistent in appearance with all signs in the sign package and building architecture in the campus.
- f. The base of the sign shall be landscaped with ground-cover vegetation that will not grow in height to obscure the sign.
- g. The maximum sign area shall be 20 square feet, and the maximum sign height 6 feet.



10.4 Vehicular wayfinding

The purpose of vehicular wayfinding signage is to provide drivers with advance directional information as to the locations of HUMC/Mountainside Hospital Campus destinations and parking facilities. Vehicular wayfinding signage should identify destinations such as:

- Emergency Department
- Patient drop-off
- Visitor/Patient parking
- Valet parking
- Building Entrances
- Deliveries

- a. Content should be simple, and may only contain the destination name, directional arrow, and symbol, if applicable.
- b. Such signs shall be placed along streets within the Hospital campus, placed perpendicular to the road, facing oncoming traffic.
- c. Placement location and height shall maximize visibility, except that sign height shall not exceed 8 feet.
- d. Secondary directional signs are also permitted at driveway entrances and within a parking area to provide further guidance at decision points. Such signs shall not exceed 3 feet in height.



Example Secondary
Directional Signs



10.5 Pedestrian wayfinding

Pedestrian wayfinding signage provides pedestrians with directional information to reach their ultimate destination, which can include, for example:

- Building entrances
 - Parking areas
 - Bus stops
 - Outdoor areas (i.e., to use mobile devices, make phone calls, smoke cigarettes)
 - Play areas for children
- a. One sign should be located at each pedestrian confluence point.

- b. Signs can contain more information than those geared towards motorists since pedestrians have opportunity for longer reading time.
- c. The size and height of pedestrian wayfinding signage shall fit within the HUMC/Mountainside setting, and meet the approval of the reviewing board. Such signs shall not exceed eight (8) feet in height.



10.6 Other Permitted Sign Types

The following signs may be permitted, only where the Reviewing Boards make a determination that one or more of these sign types, when in combination with other wayfinding signage, will not “overload” or clutter the area with signage, but rather add to the character of the Hospital campus.

- a. Pole mounted banners
- b. Interpretive or Historical Marker Signs
- c. A Campus Gateway Sign

Banner Signs



Historical Signs



Campus Gateway Signs



11.0 Sustainability

Development within the Redevelopment Plan Area should incorporate appropriate “green design” techniques, which may include:

- a. Using green building techniques for the development and maintenance of buildings such as those promoted by the United States Green Building Council (USGBC).
- b. Green roofs covered with living vegetation which are intended to reduce costs for cooling and heating, increase building insulation, reduce the rate of stormwater runoff, reduce the urban heat island effect.
- c. Use of native, drought-tolerant plant species.
- d. Use of infiltration basins, bioswales and rain gardens for stormwater management purposes.
- e. Using pervious paving materials in some areas of the parking, such as valet parking areas or the furthest areas from buildings.
- f. Use of roof-top solar panels
- g. Electric vehicle charging ports in parking areas.
- h. Installing covered bicycle parking, and providing in-door bike parking, lockers and shower areas for staff use.
- i. Compliance with the New Jersey Energy Code.

12.0 Plan Consistency Review

The Redevelopment Plan carefully considers the needs, issues and opportunities of multiple jurisdictions in an effort to further the goals of existing plans.

12.1 Relationship to Local Planning Objectives

12.1.1 *Montclair Master Plan*

This Redevelopment Plan furthers the goal of the 2015 Draft Montclair Master Plan to “Create a new redevelopment plan to encompass Hackensack University Medical Center (HUMC)/Mountainside.” A principal goal of the master plan is to expand health care and health related uses in an effort to promote health care services as a “niche market” in the Township. The implementation of the HUMC/Mountainside Hospital Redevelopment Plan will help to achieve these goals.

12.1.2 *Glen Ridge Master Plan*

This Plan acknowledges and serves to address many of the issues noted in the 2003 Glen Ridge Borough Master Plan associated with the Hospital, including improving parking capacity, addressing circulation issues, modernizing the campus, and pursuing a course of action with the outdated School of Nursing.

12.2 Relationship to Other Plans

12.2.1 *Plans of Adjoining Municipalities*

The HUMC/Hackensack Hospital Redevelopment Plan Area straddles the boundary of Glen Ridge Borough and Montclair Township. The Plan Area does not adjoin any other municipalities. Given its physical separation, the master plans of other communities were not reviewed.

12.2.2 *Essex County Master Plan*

The County of Essex does not have a current Master Plan that was available for review. However, by adding needed medical facilities and improving parking and circulation conditions campus wide, this Plan will positively impact the entire Essex County region.

12.2.3 *State Development and Redevelopment Plan*

The objectives of the HUMC/Mountainside Hospital Redevelopment Plan are consistent with the goals, strategies and policies of the 2001 New Jersey State Development and Redevelopment Plan (SDRP). The entire Plan Area is located within the PA-1 Metropolitan Planning Area, where growth and redevelopment is recommended. Ultimately, the Redevelopment Plan will enhance the HUMC/Mountainside Hospital campus to better serve the healthcare needs of the Montclair and Glen Ridge communities and the State as a whole.

13.0 Plan Implementation

13.1 Outline of Proposed Actions

Construction of new structures and other improvements will take place as proposed in this Redevelopment Plan. Other actions that may need to be undertaken to implement the Redevelopment Plan may include the clearance of dilapidated, deteriorated, obsolete or underutilized structures or uses; provisions for public infrastructure necessary to service and support new development; and vacation of easements as may be necessary for redevelopment.

Once a redeveloper is selected, the redeveloper will be required to enter into a Redeveloper's Agreement with each municipality. The agreement shall stipulate the precise nature and extent of the improvements to be made and their timing and phasing as permitted therein.

13.2 Zoning Amendments

The Zoning Map referenced in Section 347-4 of the Zoning Ordinance of the Township of Montclair is hereby amended to reference this Redevelopment Plan. Additionally, the listing of zoning districts in Section 347-3 of the Zoning Ordinance is hereby amended to include a reference to said Redevelopment Plan.

The Zoning Map referenced in Section 17.08.020 of the Zoning Ordinance of the Borough of Glen Ridge is hereby amended to reference this Redevelopment Plan. Additionally, the listing of zoning districts in Section 17.08.010 of the Zoning Ordinance is hereby amended to include a reference to said Redevelopment Plan.

Existing portions of the Hospital Campus that are located outside of the Plan Area will continue to operate under the pre-existing zoning of each municipality and prior municipal land use approvals.

13.3 Properties to be Acquired

In light of the Hospital (Merit Mountainside, LLC) or Partners for Health, Inc. (formerly known as The Mountainside Hospital Foundation, Inc.), or their affiliates, owning all lots located within the portion of the HUMC/Mountainside Hospital Redevelopment Plan Area that was designated as an area in need of redevelopment, the HUMC/Mountainside Redevelopment Plan will not require the acquisition of any privately-owned property within the Redevelopment Area.

13.4 Relocation

The Redevelopment Plan does not anticipate the displacement or relocation of any residents or businesses within the Plan Area. However, should either municipality acquire properties within the Plan Area, it will undertake the following steps to provide for relocation:

- At the time of property acquisition, the actual extent of displacement will be determined.
- A Workable Relocation Assistance Plan (WRAP) will be prepared and submitted to the New Jersey Department of Community Affairs for approval.
- The municipalities will comply with the requirements of the State's relocation statutes and regulations as applicable, and will provide all benefits and assistance required by law.

13.5 Infrastructure

In addition to the new development described in the foregoing chapters, several other actions may be taken to further the goals of this Plan. These actions may include, but shall not be limited to: 1) for infrastructure necessary to service new development; 2) environmental remediation; 3) vacation of public utility easements and other easements and rights-of-way as may be necessary to effectuate the redevelopment.

13.6 Other Actions

The Redevelopment Agreement(s) between the municipalities and the redeveloper will contain the terms, conditions, specifications, and a description of required performance guarantees (such as performance bonds or other acceptable performance security) pertaining to redeveloper's obligation to provide the infrastructure and improvements required for the project, including the provision of water, sanitary sewer, and stormwater sewer service as well

as sidewalks, curbs, streetscape improvements, street lighting, and on- and off-site traffic controls and road improvements for the project or required as a result of the impacts of the project.

13.7 Designation of Redeveloper and Redeveloper Agreements

Qualifications of the full design and development team shall be presented to Montclair and Glen Ridge prior to the designation of the redeveloper. The team shall demonstrate experience with institutional and/or medical use development within a similar historic urban or suburban town context.

- a. The following materials shall be submitted to the entities acting as the Redevelopment Agencies (RA), together with any other materials requested by the RA (collectively, “Redeveloper Materials”):
 - (i) Name, contact information and qualifications for all members of the design and development team, including but not limited to the developer, architect, civil engineer and traffic engineer.
 - (ii) A list of completed projects of similar size, use and configuration.
 - (iii) A list of at least 3 professional references of the designated redeveloper.
 - (iv) If the contractor has been selected, include information and qualifications for the company, project manager and site supervisor. If no contractor has been selected at the time of site plan application the developer shall submit this information to the municipalities upon selection of a contractor.
 - (v) Documentation evidencing financial responsibility and capability with respect to proposed development.
 - (vi) Estimated offering price and deposit for acquisition of any land(s) to be acquired from the municipality for development.
 - (vii) Estimated total development cost.
 - (viii) Fiscal impact analysis addressing the effect of the proposed project on municipal services and tax base.
 - (ix) Detailed description of proposed public amenities and benefits.
 - (x) Estimated time schedule for start and completion of development.
 - (xi) Conceptual plans and elevations sufficient in scope to demonstrate the design, architectural concepts, parking, vehicle and pedestrian circulation, landscaping, active and/or passive recreation space, and sign proposals for all uses.
 - (xii) A detailed proposal for the transition and relocation assistance that will be provided to existing tenants, including where feasible incorporation of existing tenants in the project.

- (xiii) A certification that no member of the governing bodies nor any member of the Redevelopment Entities will receive any pecuniary benefit from the Redeveloper or as a consequence of the redevelopment of the subject properties.
- b. The RA shall review such submissions, may request supplemental information (which supplemental information shall be considered within the scope of “Redeveloper Materials”) and, in its discretion, determine the acceptability of such submissions and determine whether to proceed with redeveloper designation and negotiation of a redevelopment agreement. The RA shall have the authority to determine at what pace and in what order it shall designate redevelopers for redevelopment of the properties in the Redevelopment Area.
 - c. The redeveloper will be obligated to carry out the specified improvements in accordance with the HUMC Mountainside Hospital Redevelopment Plan and the redevelopment agreements.
 - d. Upon completion of the required improvements, the conditions determined to exist on the subject property at the time the Redevelopment Area was determined shall be deemed to no longer exist, and the land and improvements thereon shall no longer be deemed “in need of redevelopment” pursuant to the LRHL.

13.8 Non-Discrimination Provisions

No covenant, agreement, lease, conveyance or other instrument shall be effected or executed by the redevelopers, the municipalities, or successors, lessees, or assigns of any of them, by which the land in the Redevelopment Area is restricted as to sale, lease, or occupancy upon the basis of race, color, creed, religion, ancestry, national origin, sex, sexual orientation, or marital status. Appropriate covenants, running with the land forever, will prohibit such restrictions and shall be included in the disposition instruments. There shall be no restrictions of occupancy or use of any part of the Plan Area on the basis of race, creed, color or national origin.

13.9 Adverse Influences

No use shall be permitted which, when conducted under proper and adequate conditions and safeguards, will produce corrosive, toxic or noxious fumes, glare, electromagnetic disturbance, radiation, smoke, cinders, odors, dust or waste, undue noise or vibration, or other objectionable features so as to be detrimental to the public health, safety or general welfare.

13.10 Affordable Housing Requirements

The selected redeveloper shall pay a fee equal to 2.5% of the equalized assessed value of the land and improvements for all new nonresidential construction, subject to the provisions of the adopted municipal Development Fee Ordinances, and as specified in the Redeveloper Agreement.

13.11 Site Plan & Subdivision Review and Approval

The review of all applications for redevelopment within the HUMC/Mountainside Hospital Redevelopment Plan Area shall consist of the following steps:

- a. **Concept Submission.** Applicants may submit conceptual plans prior to submitting full applications, although this is not required.
- c. **Development Applications.** All applications for development must be approved by the Montclair Planning Board for development proposals in Montclair Township and by the Glen Ridge Planning Board for development proposal in Glen Ridge Borough. Any site plan or subdivision plan within the Redevelopment Area shall be in accordance with the requirements of this Redevelopment Plan and the land development ordinances of the Township of Montclair in effect as of the date of adoption of this Redevelopment Plan (Chapters 202, 281, 295 and 301 of the Township Code a copy of which is annexed hereto in Appendix B), except that where this Redevelopment Plan contains provisions that differ from those in said ordinances, this Plan shall prevail.
- d. **Historic Commission / Architectural Review.** In advance of submission to the Reviewing Planning Boards, the site plan drawings shall also be submitted to the Township of Glen Ridge Historic Preservation Commission (HPC) and the Montclair Development Review Committee (DRC) for courtesy design review in an advisory capacity to the Planning Boards. The HPC and DRC may form a subcommittee that meets together to streamline this review process. The subcommittee or individual entities shall prepare and submit their design recommendations to the reviewing Planning Boards.
- e. **Submission Requirements.** All applications for development shall include the checklist requirements listed in Section 202-29.1 of the Montclair Township Code, as well as the following:
 - (i) Phasing Plan
 - (ii) Traffic and circulation analysis that considers mass transit routes and evaluates the cumulative effect of the ingress and egress requirements of the proposed development and the effects on adjacent and affected roadways created by the proposed development.
 - (iii) Parking Management Plan
 - (iv) Open Space Plan
 - (v) Signage Plan
 - (vi) LEED or other Green Building checklist specifying proposed methods
 - (vii) Fiscal Impact Analysis, evaluating fiscal impacts of the project on the municipalities.
 - (viii) Utility Impact Analysis evaluating the impacts to Township utilities.

13.12 Requests for Deviations & Design Exceptions

The Montclair and Glen Ridge Planning Boards may grant deviations from the regulations contained within this Redevelopment Plan, where, by reason of exceptional narrowness, shallowness or shape of a specific piece of property, or by reason of exceptional topographic conditions or physical features uniquely affecting a specific piece of property, the strict application of any bulk regulation adopted pursuant to this Redevelopment Plan would result in peculiar practical difficulties to, or exceptional and undue hardship upon, the redeveloper.

The Planning Boards may also grant such relief in an application relating to a specific piece of property where the purposes of this Redevelopment Plan would be advanced by a deviation from the strict requirements of this Plan and the benefits of the deviation would outweigh any detriments.

No relief may be granted under the terms of this section unless such deviation or relief can be granted without substantial detriment to the public good and without substantial impairment of the intent and purpose of the Redevelopment Plan.

An application for a deviation from the requirements of this Redevelopment Plan shall provide public notice of such application in accord with the requirements of public notice as set forth in N.J.S.A. 40:55D-12a and b. Notwithstanding the above, no deviations should be granted that would permit any of the following: a use or principal structure that is not otherwise permitted by this Redevelopment Plan; or an increase in the maximum permitted height of a principal structure by more than 10 feet or 10%, whichever is less.

No deviation from the requirements herein shall be cognizable by the Township of Montclair or Glen Ridge Zoning Board of Adjustment.

13.13 Procedures for Amending the Plan

This Redevelopment Plan may be amended from time to time upon compliance with the requirements of state law. A non-refundable application fee of \$5,000 shall be paid by the party requesting such amendment, unless the request is issued from any agency of Montclair Township or the Borough of Glen Ridge. The municipal governing bodies, at their sole discretion, may require the party requesting the amendments to prepare a study of the impact of such amendments, which study shall be prepared by a professional planner licensed in the State of New Jersey.

13.14 Duration of the Plan

The selected redeveloper(s) within the HUMC Mountainside Hospital Redevelopment Area shall begin the development of land and construction of improvements within a reasonable period of time, as specified in a redevelopment agreement.

Provisions of this plan specifying redevelopment of the HUMC Mountainside Hospital Redevelopment Area and requirements and restrictions with respect to thereto shall be in

effect for a period of 30 years from the date of approval of this plan by the Municipal Councils of the Township of Montclair and the Borough of Glen Ridge

13.15 Completion of Redevelopment

Upon the inspection and verification by the Township of Montclair and the Borough of Glen Ridge that the redevelopment within the Plan Area has been completed, certificates of completion shall be issued to the redeveloper. All redevelopment agreements associated with the implementation of this Redevelopment Plan shall be in effect until the issuance of such certificates.

13.16 Severability

If any section, paragraph, division, subdivision, clause or provision of this Redevelopment Plan shall be adjudged by the courts to be invalid, such adjudication shall only apply to the section, paragraph, division, subdivision, clause or provision so judged, and the remainder of this Redevelopment Plan shall be deemed valid and effective.