

HASTINGS PLANNING COMMISSION

A meeting of the Hastings Planning Commission has been scheduled for Tuesday, November 17, 2020 at 4:00 PM in the City Building, 220 North Hastings Avenue.

AGENDA:

1. Call to Order
2. Roll Call
3. Pledge of Allegiance
4. Motion to adopt the current agenda for the Planning Commission Meeting
5. Public Notice - Official Notice of the Regular Meeting was published in the Hastings Tribune on Friday, November 13, 2020. Pursuant to Nebraska Revised Statute Section 84-1412, the public is advised that a copy of today's agenda and all reproducible written material which will be discussed at today's meeting is located at the back of the Council Chambers. Also, a current copy of the Nebraska Open Meetings Act is posted on the south wall of the Council Chambers which is accessible to members of the public.
6. Approval of Minutes
 - a. Meeting of October 20, 2020
7. Special Order of Business
8. Unfinished Business
 - a. Continued Applications - None
 - b. Tabled Applications - None
 - c. Postponed Applications - None
 - d. Unfinished Applications - None
9. Public Hearings.
 - a. **2020-050.** Public hearing on a request for an amendment to Campus Master Development Plan for Mary Lanning Healthcare Association (MLHA).

Public hearing on a change of zoning for Lot One (1), Pleasant Addition to Hastings Nebraska in the City of Hastings, Adams County, Nebraska, from "R-3 Multiple-family Residential" to "CMP-Campus Institutional District" and to amend the Official Zoning District Map.

Recommend approval of the request for an amended Campus Master Development Plan for Mary Lanning Healthcare Association (MLHA).

Recommend approval for an ordinance and the amendment to the Official Zoning District Map to rezone Lot One (1), Pleasant Addition to Hastings Nebraska in the City of Hastings, Adams County, Nebraska, from "R-3 Multiple-family Residential" to "CMP-Campus Institutional District".

Planning Commission Agenda

November 17, 2020

Page 2

- b. **2020-048.** Public hearing to recommend a request for Plan Modification No. 2020-5 to Redevelopment Area Number 13, Theatre District Redevelopment Project, for the following collective property, to wit:

Parcel 1:

A tract of land comprising all of Block Nine (9), Imperial Village Addition to the City of Hastings, and lying in the Northeast Quarter (NE1/4) of Section Ten (10), Township Seven (7) North, Range Ten (10) West of the 6th P.M., Adams County Nebraska, according to the plat filed March 22, 1967, in Book 179, Page 239; and

Parcel 2:

Lot One (1), Imperial Theatre Subdivision to the City of Hastings, Adams County, Nebraska, according to the plat filed November 22, 1988, as Instrument No. 883615.

10. Subdivisions

11. Reports

- a. Committee Reports
- b. Chairman Comments
- c. Staff Reports

Adjourn

CITY OF HASTINGS, NEBRASKA
MINUTES OF PLANNING COMMISSION
Tuesday, October 20, 2020

Pursuant to due call and notice thereof, a meeting of the Hastings Planning Commission was conducted in the City Building, 220 North Hastings Avenue, on October 20, 2020.

The meeting was called to order at 4:00 p.m. in Regular Session by Vice Chair Ann Hinton with the following members present: Ann Hinton, LaDaun Schoenhals, Michelle Lewis, Rakesh Srivastava, Eric Arneson, Alternate Willis Hunt. Absent: Mac Rundle, Gavin Raitt, Marshall Gaines, Lou Kully.

The Vice Chair led the Commission in recital of the Pledge of Allegiance to the United States of America.

Moved by Hunt, seconded by Srivastava, to approve the current agenda for the Planning Commission Meeting. Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

The Public Notice was read into the record. Pursuant to Nebraska Revised Statute Section 84-1412, the public is advised that a copy of today's agenda and all reproducible written material which will be discussed at today's meeting is located at the back of the Council Chambers. Also, a current copy of the Nebraska Open Meetings Act is posted on the south wall of the Council Chambers which is accessible to members of the public.

Moved by Hunt, seconded by Schoenhals, to approve the minutes of the meeting of September 15, 2020. Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

7. Special Order of Business

a. 2020-043. Consider recommendation for approval of the City of Hastings Engineering Department 2021-2026 One and Six Year Street Improvement Plan.

Lee Vrooman, Director of Engineering, Interim City Engineer, gave a brief review of the One & Six Year Plan. He stated this is an annual requirement and next year the review will be held in conjunction with the budget so it will come to the Planning Commission in July-August timeframe. He discussed completed projects and those still in progress. To date, the City has expended \$4,174,416.00 on projects between paving, asphalt, water and sewer. Quiet crossings are still being discussed. The West Highway 6 project from Elm to Baltimore will be bid this fall, with construction to begin in the spring. The second project is the Hastings Southeast project, from "J" Street, Elm to Showboat. The City is currently conducting a transportation study, with a recommendation of one-way versus two-way streets downtown. He also discussed the 16th Street viaduct.

Moved by Hunt, seconded by Srivastava, to recommend approval to the Mayor and City Council, at the November 9th, meeting, the 2020-2026 One and Six Year Street Improvement Plan. Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

9. Public Hearings

a. 2020-044. Public hearing to consider bringing a tract of land being part of the south ½ of Section 5, Township 7 North, Range 10 West, of the 6TH P.M., Adams County, Nebraska into the City as part of Westbrook Village 17th Addition final plat.

Mark Evans, City Building Inspector, gave his report. Staff recommends approval.

As part of the final plat for Westbrook Village 17th Addition a tract of land is being considered for incorporation into City limits. This tract is part of the south ½ of Section 5, Township 7 North, Range 10 West, of the 6TH P.M., Adams County, Nebraska. This tract is legally described as beginning at the northwest corner of Lot 3 Westbrook Village 16TH Addition to the City of Hastings, Adams County, Nebraska, thence N00°37'47"W on the extended west line of said Lot 3 a distance of 25.00 Feet, Thence N72°25'09"E a distance of 140.78 feet to the northeast corner of said Lot 3, and also being the westerly right of way line of Nalan Drive, thence S63°14'55"W on the north of said Lot 3 a distance of 150.01 feet to the point of beginning, containing 0.04 acres more or less. Staff originally was advised this addition would only need to go before City Council for approval, but upon further research, it appears this was incorrect and it will need public hearing at Planning Commission for recommendation to City Council.

Currently zoning for this tract of land is both A, Agricultural and R-1, Single Family Residential. Planning Commission recommended for approval a rezone and the final plat with a condition at the September 15, 2020 Planning Commission Meeting.

The plat and its inclusive addition to City was reviewed by the development review team and the applicant has made all suggested revisions. Requirements of Hastings City Code Sections 38-203 have been met. Approval of the final plat carries a condition that has been affirmed for filing by our applicant to accomplish a preliminary plat if adding any additional territory to Westbrook subdivision.

Vice-Chair Hinton stated the Commission did discuss this item at a previous meeting, however, the Commission did not approve bringing the parcel into the City of Hastings limits.

Moved by Lewis, seconded by Schoenhals, to recommend approval to the Mayor and City Council bringing a tract of land being part of the south ½ of Section 5, Township 7 North, Range 10 West, of the 6TH P.M., Adams County, Nebraska into the City as part of Westbrook Village 17th Addition final plat. Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

b. 2020-045. Public hearing to consider a request for a Conditional Use Permit (CUP) for Southern Bell Heartland LLC, as is required for a creative sign for property located in the C-2, Central Business District, commonly addressed as 109 North Burlington Avenue, Hastings, NE 68901.

Mark Evans, City Building Inspector, gave his report. Staff recommends approval.

Southern Bell Heartland LLC desires to incorporate elements that are reminiscent to the interior sign, as was recommended by several members of the CRA that were on tour (this was not a requirement, but was a suggestion). The design the applicant has chosen is made of a raw steel material that is similar to the interior sign. Though a Projecting Sign is allowable in the C-2, Central Business District, this particular proposed sign, due to the nature of the building and the material, will require it to be affixed to the outside of the building at a much higher level than the maximum height of 12 feet allowed for with a projecting sign. In order to properly anchor a projecting sign in a building with old brick, it was recommended for safety reasons that the anchors be a threaded rod that goes completely through to the inside of the building where a large square plate would be placed in order to give the most stability for the sign. It would not be possible to do this where the glass and the cast are located (see photo of the interior room on the other side of this wall in the applicant's narrative). Anchoring the sign is also not possible on the area behind where the ACME sign is painted, as there would be nowhere to place the anchor because of the second-floor joists. This leaves the space above this area as the only option for a projecting sign. The anchor plate will be about a 1-foot square steel plate, so it would have to be centered at least 6 inches above the floor on the second level. Due to the unavoidable height constraint it was also recommended that this sign be larger than the maximum allowable square feet (10 sf). The sign consequently also exceeds the maximum projection (4 ft.) for this type of signage. Therefore, this sign exceeds the requirements of a projecting sign in its design height, maximum square feet and projection. The height is 22' 6" from the ground to the bottom of the sign (a deviation of 10' 6"), the square feet is 12 sf (a deviation of 2 sf) and the projection is 6' 8" (a deviation of 2' 8" sf).

All CUPs must meet the following general standards in accordance with Section 34-402 of City Code:

1. The proposed development will integrate compatibility with existing land uses and with permitted uses that may be established within any area to be affected by the proposed development.

Surrounding land uses are:

North – C-2, Central Business District

South – I-2, Heavy Industrial

East – C-2, Central Business District

West – I-1, Light Industrial & C-2, Central Business District

This lot and most of the surrounding property is zoned C-2, Central Business District. The applicant owns this property and utilizes this as mixed use property which is in line with the future land use map and the *Imagine Hastings* Comprehensive Plan. According to Districts Requirements Table found in the Sign Code 34-309, a projecting sign is allowable in the C-2 Use District. In fact this same type of sign was used at the Provident storefront a few doors north, however, that particular projecting sign was permitted under the pre-existing Sign Code (changed in 2019), but would not meet the requirements of our current sign code.

2. The use does not have a permanent negative impact that is substantially greater than the impact anticipated from development permitted in the base zone district.

Pedestrian and vehicular traffic circulation and safety. No traffic changes are anticipated with this use. Due to this signage being placed on a storefront off State right-of-way (Burlington Avenue) the applicant also must submit an application of encroachment to NDOT. This application is underway and a condition for approval of this CUP. In reviewing the sign design to these requirements and discussing with our representative in Grand Island, there does not appear to be any reason to believe that this sign will not be approved. The extra precautions being taken to

anchor this sign with a rod to the interior of the building and a square plate demonstrates the applicant and sign contractor's thoughtful consideration to pedestrian and vehicular safety below the sign. There are no bright and distracting lights to divert the attention of those passing by.

Reasonable and economic extension of public utilities and facilities. No utilities & facilities changes are anticipated with this particular use.

Noise, fumes, dust or other environmental pollution. No pollution is anticipated with this particular use.

The maintenance of logical and efficient development patterns and land use mixtures. Projecting signs are common on the older brick storefront buildings in the City and tend to fit nicely to the historical value of the structure where there are larger and taller than normal structure. Much of the decade when many of these buildings were erected utilized wall and or projecting signs as opposed to the more recent trend of free-standing signs. In fact, as mentioned before, there is a projecting sign a few doors north on this same storefront.

The maintenance of property values in accordance with established and permitted land uses. Should not present a negative impact on adjacent property values. In fact, this sign is a classy representation of a tradition used in the era that this storefront originated, and, in the material predominantly used during that decade. These things better preserve the historical element and will lend value-added to the property values. Public notice requirements have been adhered to and there have been no responses received from any adjacent property owners.

3. *The conditions imposed are necessary to ensure the maintenance of property values and the safety, health, comfort, and repose of the residents.* The condition to approve only with proof of NDOT approval of the Encroachment application will ensure safety, health, comfort or repose of residents as their standards are imposed to ensure the safety of those using their sidewalks and ROW.

4. That the use, subject to conditions, maintains compliance with the Comprehensive Plan and the purpose and intent of the zoning regulations. This lot and most of the surrounding property is zoned C-2, Central Business District. Southern Bell Heartland LLC owns this property and utilizes this as mixed-use property which is in line with the future land use map and Imagine Hastings Comprehensive Plan. According to Districts Requirements Table found in the Sign Code 34-309, a projecting sign is allowable in the C-2 Use District. All surrounding property is also zoned commercial and industrial so a sign of this caliber will fit not only the zoning of this lot but also to the intent of the area.

City Code for Creative Projecting Sign is found in 34-309.04 (1 & 2) & 34-309.05 (4). There can be only 1 per lot and all other design standards and requirements are not applicable if sign is approved as a Creative Sign in this CUP. An applicant must demonstrate in a narrative and plans how the proposed creative sign would contribute to the following:

1. A substantial aesthetic improvement to the site: The recommendation made by CRA was a good one. A historical site such as this deserves a sign that better compliments the era that it was erected. The more modern internally lit projecting sign is not as aesthetically appealing against the original brick and ornamental molding on the exterior of such a building.
2. A positive visual impact on the surrounding area by enhancing the character of the building and site: This sign is a classy representation of a tradition used in the era that this storefront originated and, in the material, predominantly used during that decade. These things better preserve the historical element and will lend value-added to the property values.
3. Unique design exhibiting a high degree of thoughtfulness, imagination, inventiveness, and spirit: The sign will be reminiscent of what is found inside her business and is a thoughtful concept to capture the historical value of this building that will be used in a more modern time.
4. Strong visual character through the imaginative use of graphics, color, texture, quality materials, scale, and proportion: The scale is fitting for this sign to be visible from the height that is necessary to anchor it. The material is a good accent to maintain historical consistency and the script used portrays the elegance and character of her business to those she will serve.

The applicant must also demonstrate how the sign contains at least one of the following contextual elements:

1. Creative image reflecting current or historic character of the city: This sign is a classy representation of a tradition used in the era that this storefront originated and, in the material, predominantly used during that decade.
2. Symbols or imagery relating to the use of the property: The industrial gear used to frame the title of this business portrays the industrial character of the applicant's historical event venue business in an elegant fashion to

those she will serve at their most memorable events. The title of her business reminiscent of the material so predominantly found in this building and at a date in which it was established lending immediate historical recognition to those utilizing the services.

3. Inventive representation of the use, name, logo, structure, or business. The script used portrays the elegance and character of her historical event venue business to those she will serve.

Staff feels there are no negative impact from the sign. The pedestrian/vehicular circulation safety was one of the concerns with the mounting attachment, so we were supportive that the sign would be adequately anchored to the building. Staff did request the Department of Transportation in Grand Island to look at the sign and they have asked that the applicant complete an encroachment application to notify the State that there will be a projection over the right-of-way. Staff recommends approval with the aforementioned conditions.

Moved by Hunt, seconded by Srivastava, to recommend approval to the Mayor and City Council, a CUP resolution to allow a creative sign for property located in the C-2, Central Business District, commonly addressed as 109 North Burlington Avenue, Hastings, NE 68901, subject to following conditions:

1) There shall be compliance with any other applicable City, County, State or Federal regulations that shall apply. Specifically, a Nebraska Department of Transportation Application for Encroachment must be submitted to NDOT and receive approval prior to the sign being installed. A copy of this approval must be provided to the Development Services Department.

2) This resolution shall be filed with the Registrar of Deeds so as to provide notice to any person examining the real estate records of the existence of this CUP. The recording costs incurred to comply with this section shall be paid by the applicant for the CUP.

Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

10. Subdivisions

a. 2020-046. Motion to recommend approval of C & R Subdivision, a re-plat of Lot 8, Lakeview 5th Addition and a tract of land located in the Southwest Quarter of Section 36, Township 8 North, Range 10 West of the 6th P.M in the City of Hastings, Adams County, Nebraska.

Mark Evans, City Building Inspector, gave his report. Staff recommends approval.

The Development Department and Plat Track review teams have reviewed this plat and the applicant has incorporated all preliminary recommendations. Street right-of-way to complete Dorothy Avenue dedication along the west side of this new lot has been dedicated as part of this final plat. Additional 10' Utility easements to the north and northeast sides of this additional area added to Lot 8 were also incorporated. All requirements of Hastings City Code Section 38-203 have been met, and the final re-plat can be approved. Staff recommends approval.

Moved by Schoenhals, seconded by Lewis, to recommend approval to the Mayor and City Council C & R Subdivision, a re-plat of Lot 8, Lakeview 5th Addition and a tract of land located in the Southwest Quarter of Section 36, Township 8 North, Range 10 West of the 6th P.M in the City of Hastings, Adams County, Nebraska. Roll Call: Ayes: Arneson, Lewis, Srivastava, Schoenhals, Hinton, Hunt. Nays: None. Absent: Rundle, Raitt, Gaines, Kully. The motion carried.

11. Reports

a. Committee Reports. Vice Chair Hinton reported the Ad Hoc Committee did not meet this month.

c. Staff Reports. None.

Moved by Schoenhals, seconded by Srivastava, to adjourn.

Chairman

Department: Development Services

Staff Contact: Lisa Parnell-Rowe

Planning Commission Meeting Date: 11/17/2020

File No: 2020-050

Prepared By: Lisa Parnell-Rowe, Director of Development Services

AGENDA ITEM SUMMARY SHEET

Description of Item:

Public hearing on a request for an amendment to Campus Master Development Plan for Mary Lanning Healthcare Association (MLHA).

Public hearing for a change of zoning for Lot One (1), Pleasant Addition to Hastings Nebraska in the City of Hastings, Adams County, Nebraska, from “R-3 Multiple-family Residential” to “CMP-Campus Institutional District” and to amend the Official Zoning District Map.

Recommend approval of the request for an amended Campus Master Development Plan for Mary Lanning Healthcare Association (MLHA).

Recommend approval for an ordinance and the amendment to the Official Zoning District Map to rezone Lot One (1), Pleasant Addition to Hastings Nebraska in the City of Hastings, Adams County, Nebraska, from “R-3 Multiple-family Residential” to “CMP-Campus Institutional District”.

Names of People/Business affected by this action:

The applicant, the people of Hastings, the people of the county and all surrounding communities that utilize MLHA services.

Why Planning Commission action is required:

Neb. Rev. Stat. 19-902 provides the city council shall receive the advice of the planning commission before taking definite action on any contemplated amendment, supplement, change, modification, or repeal, and no such regulation, restriction, or boundary shall become effective until after separate public hearings are held by both the planning commission and the city council in relation thereto, at which parties in interest and citizens shall have an opportunity to be heard. Notice of the time and place of such hearing shall be given by publication thereof in a legal newspaper in or of general circulation in such municipality at least one time ten days prior to such hearing.

Type of action requested:

Motion

Suggested motion:

Not applicable

Deadlines associated with action:

These items are scheduled to be heard at the City Council meeting on December 14, 2020. Once approved the applicant will submit a development permit with plans for each project separately and the specific requirements (e.g. yard & area requirements) will be reviewed and approved.

Department head comments:

Mary Lanning Healthcare Association Master Development Plan Amendment:

The CMP, Campus Institutional District, Section 34-212, is intended as a planned zoning district to assist and encourage the development of educational, institutional, and medical uses; and their complementary land uses, in a campus setting. This district should focus on organizing buildings and uses around distinct gathering places, and create a highly pedestrian or "park-once" environment within the campus. This district was created to allow campus-type uses more flexibility in design and layout while reducing time spent in the approval and entitlement process, by approving one master plan for the campus, and thereby allowing construction of individual improvements or phases without having to secure new approvals for each improvement or phase.

However, Section 34-212, Campus Institutional District does not address how to handle or process any necessary changes to a Master Development Plan. A Master Development Plan should be a fluid and ever-changing document so it should have a process to amend. As a campus grows and matures with additional area added there may be new needs not originally forecasted when the plan was established. As stated in the MLHA Narrative this plan will change and be reviewed and updated every 3-5 years. This being a shortfall in Section 34-212, and as CMP was intended to be a planned zoning district, we are following guidance found in the P.D., Planned District regulations, 34-215 (7) to amend this plan due to the fact the changes are significant and there are some changes in uses that are also not addressed in the Table 200-1, Uses and Districts. Therefore, we are asking Planning Commission to evaluate the added uses and make recommendations to City Council on these uses falling into the intent of this Campus zoning and, as such, being allowable in this district.

Mary Lanning Healthcare Association (MLHA) has provided a narrative and an updated Zoning Change Property Map. All additional uses have been added to this and are shown in a blue frame on the Zoning Map with proposed uses (see attached).

Changes to Master Development Plan are as follows:

Additional uses not previously proposed:

1. Ambulance Storage:

The ambulance storage building is to house 3 ambulances that are used for MLHA. These vehicles have currently either been parking on the 2 vacant lots north or in the driveway located at 744 N. Hastings Avenue. The structure located on 744 N. Hastings Avenue is also being used as the headquarters for ambulance staff. MLHA owns these lots and has just completed an administrative plat to replat these 3 lots together in order to build this structure next to the primary residential structure being used as the headquarters. The new accessory structure will better protect and secure these important vehicles.

Deviation of setback due to existing structure located at 744 N. Hastings Avenue: It should be noted that the existing residential structure on this lot does not meet the 10' side yard setback. Even under its pre-existing zoning district (R-3), the structure would likely have not met the side yard setback (see attached aerial). Normally, when an improvement is to be done there would need to be compliance to this setback, but whereas this is a planned district in intent this development standard can be specifically called out as a deviation or departure that is acceptable in order to meet the intent of the district (See 34-212 and 34-215, paragraph 3 on variations and departures). Staff believes this can be accepted as long as this structure remains for the purpose of an Ambulance Headquarters. MLHA may, in future, demolish this structure and if that occurs and another structure is built, then the new structure will need to either be proposed with deviations by way of an updated amendment or meet the minimum yard setbacks for the CMP District.

The base district of CMP is characterized as being for medical uses. Staff feels an Ambulance Storage is an acceptable and important part of medical service to the hospital and community at large. Table 200-1 does not currently list ambulances or a suitable similar category to assess whether this use is permitted, restricted to specific standards or conditional. Approving the Master Development Plan would allow this use to be permitted in this particular campus.

2. Central Boiler Plant:

A Central Boiler Plant that provides essential utilities such as emergency power, medical gases, heating, and air conditioning, will be built next to the existing Chiller Plant located at 723 N. Denver Avenue. This new Boiler Plant will replace MLHA's aging plant currently located inside the main hospital. The current Hospital Boiler Plant is located in the interior of the hospital, on the 1st floor. This will, in turn, allow that square footage to be utilized for hospital expansion down the road so they can service more patients at once. The existing plant was built in the early 1960's, and has reached the end of its useful life. The hospital Central Boiler physical plant, or steam plant, generates thermal energy in the form of steam for use in heating applications. The heating plant generates steam which is distributed to each building where it is used to make domestic hot water for human consumption, heating hot water in the case of hydronic heating systems, air heating in HVAC units, humidification, and sterilization at hospitals. The central boiler plant feature boilers, which generate steam for various uses and demands. The plant also hosts all of the boiler auxiliaries such as water treatment equipment, air handling, fuel handling, controls, instrument air, and various other plant systems which support the production of steam. Using Natural gas and

diesel fuel as a backup, the plant will not produce any smoke or dust. Noise will also be minimal with only some fan noise close by, but nothing from a distance. Additionally, the Engineer's are also exploring potentially bridging over or tunneling under Denver Avenue from the hospital to the structure. A bridge would be 400 - 500 feet in length and 2 full floors in height. Table 200-1, Districts and Uses, does not currently list an appropriate category for a plant of this nature that is not for public. Approving the Master Development Plan would allow this use to be permitted in this particular campus.

3. Medical Office Building: A new 65,000 square foot Medical Office Building to be used as a specialty health center to house outpatient services will be built on the parking lot south of the existing Medical Services Building and east of main hospital. It will connect directly to Medical Service Building on all three floors, allowing MLHA to create integrated outpatient clinics and physician offices. It will also necessitate building additional parking since the existing parking will be significantly reduced. This project is anticipated to start early 2021. Table 200-1, Districts and Uses, does list medical offices as a permitted use in the CMP District.

4. Parking Lots:

New parking lots will be built between Denver and Hastings avenues, north of 7th street, and between Denver and Kansas avenues to compensate for the loss of existing parking with the Medical Office Building (tentatively scheduled for early 2021). Additional parking will also be added between Kansas and Colorado avenues, south of 9th Street, as shown in the latest Master Development plan (tentatively scheduled for Late 2021 to Mid-2022). These lots will accommodate the needs of patients, visitors, and staff, alleviating demand for on-street parking. A parking assessment was accomplished in June 2018 by the DLR Group (attached). The revised numbers with parking removed from for the Medical Office Building and added as described above are shown and discussed in the narrative. Civil and City Engineers, and Building inspector have all reviewed. Due to the expected increase in parking stalls and capacity over the next several years we have added a condition to ensure that when each parking lot is built that there is appropriate consideration for drainage. This will be important as we increase impervious surface.

Here we are approving the additional uses and changes contemplated as part of this Master Development Plan Amendment. It should be noted that at the time of build for each individual project there will also be a development permit required to ensure fulfillment of the necessary requirements for landscaping, drainage, and other CMP-District minimum yard and area, maximum lot coverage and buffer requirements.

Mary Lanning Healthcare Association Rezone:

Surrounding zoning is as follows:

North – CMP, Campus Institutional

South – CMP, Campus Institutional

East – CMP, Campus Institutional

West – R-3, Multi-Family Residential (across Denver Avenue ROW)

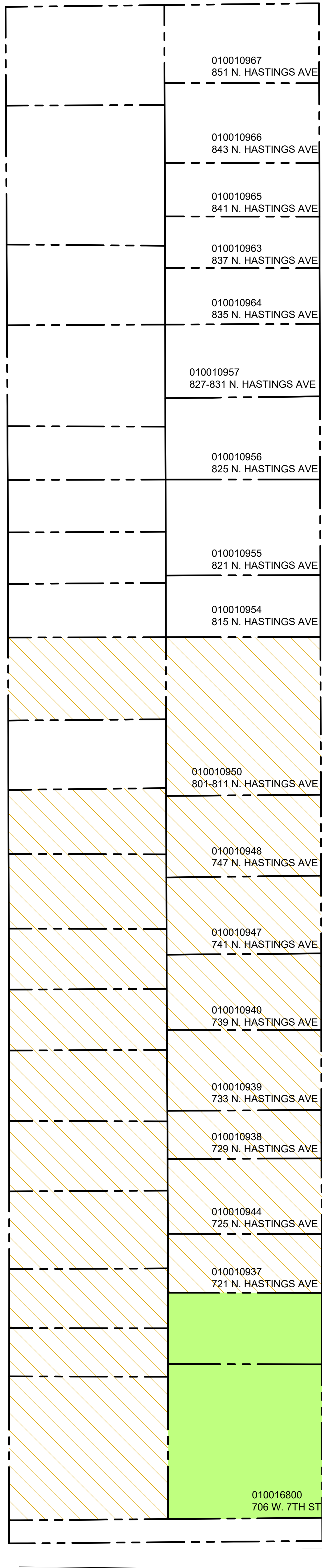
The property under consideration is consistent with the original campus master plan and has come into MLHA ownership since the initial designation of this area as a campus. It is now eligible to be brought under the CMP zoning designation with the ownership change. Lot One (1), Pleasant Addition is mostly surrounded by CMP and will fill in a pocket of R-3 that was in the middle of this portion of the campus. Nearly all of the existing area zoned CMP is slated in the future land use map for Public/Semi-Public. In the Comprehensive Plan, Imagine Hastings, Public/Semi-public is a category consistent with institutional land uses which specifically includes hospitals.

Recommendation:

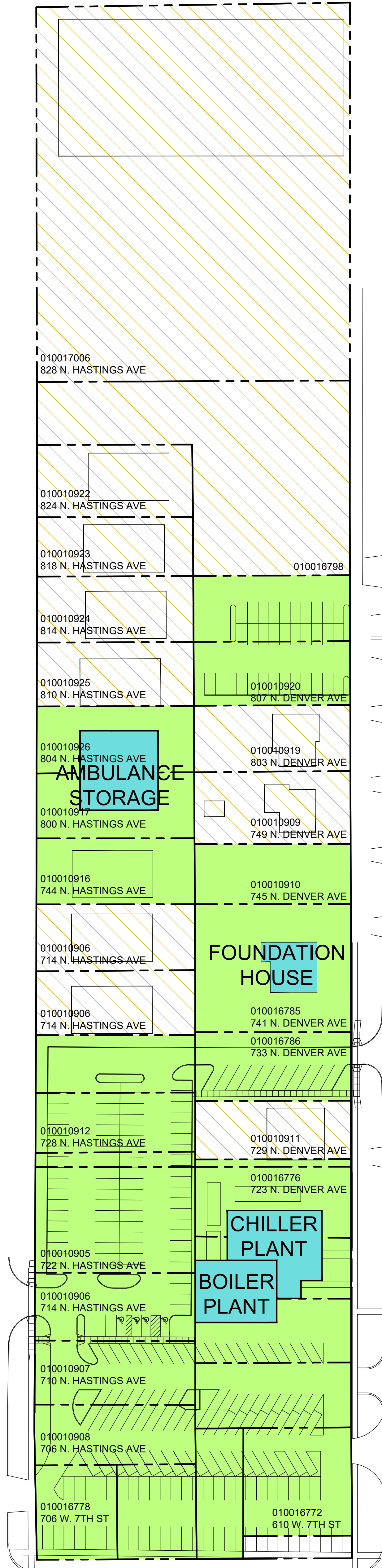
Staff recommends Planning Commission recommend approval for an ordinance to the Official Zoning District Map to rezone Lot One (1), Pleasant Addition to Hastings Nebraska in the City of Hastings, Adams County, Nebraska, from “R-3 Multiple-family Residential” to “CMP-Campus Institutional District”.

Staff recommends Planning Commission recommend approval of the request for an amended Campus Master Development Plan for Mary Lanning Healthcare Association (MLHA), with the following conditions:

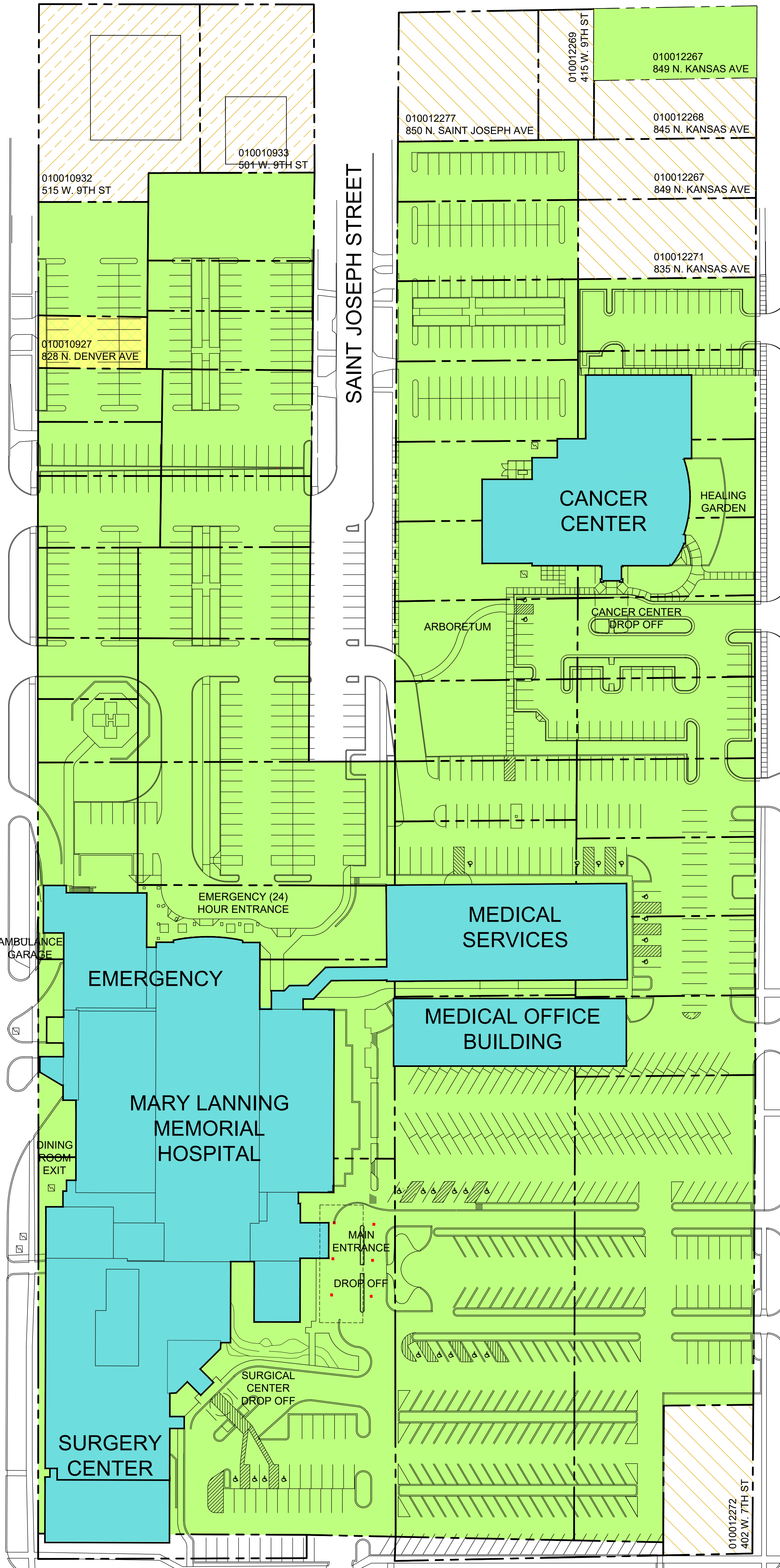
- 1) Computed quantities of runoff and discharge locations must be provided in a drainage plan prior to issuance of a building permit. Site alterations must address storm water quality through the use of structural or non-structural Best Management Practices (BMPs). Permanent BMPs shall be provided for in the drainage plan.
- 2) There shall be compliance with any other applicable City, County, State or Federal regulations that shall apply for each project as stated in this amended Master Development Plan.
- 3) This resolution shall be filed with the registrar of deeds for property located at 744 N. Hastings Avenue so as to provide notice to any person examining the real estate records of the existence of the approved deviation is minimum yard setback for the existing structure so long as it remains for the use of the ambulance headquarters. The recording costs incurred to comply with this section shall be paid by the applicant for the CUP.
- 4) Approval of the amended Master Development Plan also approves a deviation to the side yard setback on the south side of the existing structure located at 744 N Hastings Avenue so long as it remains the use of the Ambulance Headquarters for MLHA.



N HASTINGS AVENUE



N DENVER AVENUE

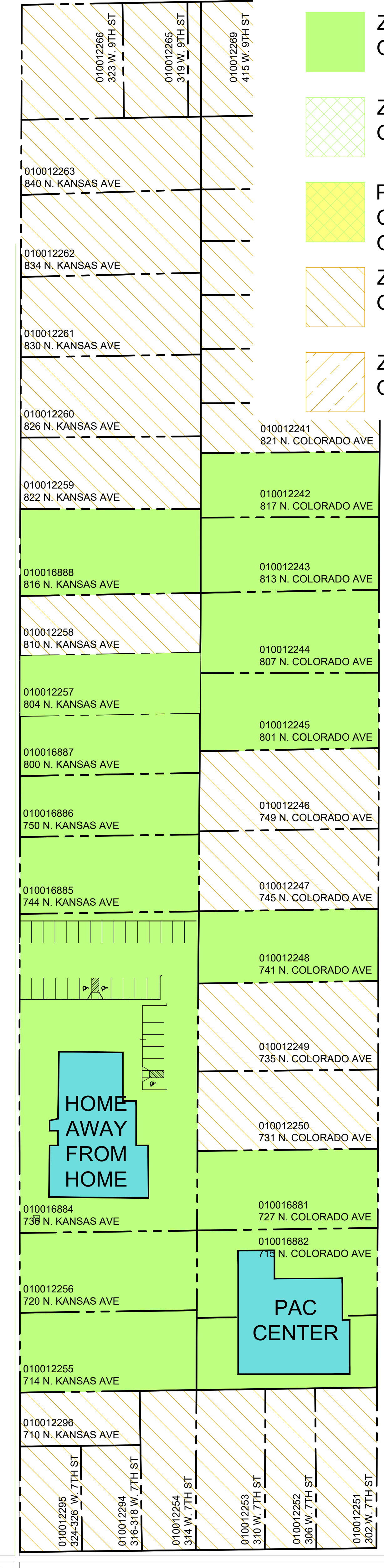


W 9TH STREET

SAINT JOSEPH STREET

W 7TH STREET

N KANSAS AVENUE



N COLORADO AVENUE

- Zone: CMP
Owner: Mary Lanning
- Zone: R-3
Owner: Mary Lanning
- Proposed Zone
Change: R-3 to CMP
Owner: Mary Lanning
- Zone: R-3
Owner: Other
- Zone: C-0
Owner: Other

Mary Lanning Memorial Hospital Association
also known as Mary Lanning Memorial Hospital

Mary Lanning
Memorial
Hospital
Association
also known
as Mary
Lanning
Memorial
Hospital

CLIENT INFORMATION
Mary Lanning
Memorial
Hospital
Association
Hastings, Nebraska

PROJECT INFORMATION
Mary Lanning
Memorial
Hospital -
Master Plan

Job # unassigned
ISSUE DATE 11-10-2020
Revisions:
10 Date Description

CHECKED: JCTR
AUTHOR: JCTR
DESIGN: JCTR
ALL RIGHTS RESERVED

SHEET TITLE
Proposed
Zoning
Change
Property Map

SHEET NUMBER

C-103

Mary Lanning Healthcare

Master Plan Overview

INDEX

1.0 EXECUTIVE SUMMARY	6
Overview of “What Are We Doing Now”	
1.1 INTRODUCTION	6
Description of the rationale for why a Master Plan Update is needed now	
1.2 PURPOSE OF PLAN	5
1.3 PLANNING CONSIDERATIONS	5
1.4 COMMITMENT TO COMMUNITY	6
2.0 EXISTING CONDITIONS	7
2.1 ENVIRONMENT OF CARE ASSESSMENT	7
2.2 LANDSCAPE ASSESSMENT	10
2.3 UTILITIES ASSESSMENT	10
3.0 ALTERNATIVES ANALYSIS	11
3.1 EVALUATION CRITERIA	11
3.2 BUILDING ORGANIZATION	13
3.3 ALTERNATIVES	13
3.4 PREFERRED SOLUTION ALTERNATIVE	13
4.0 MARY LANNING HEALTHCARE BUILDING EXPANSION	14
4.1 AMBULANCE HEADQUARTERS VEHICLE STORAGE	14
4.2 MEDIAL OFFICE BUILDING EXPANSION	15
4.3 BOILER CENTRAL PLANT EXPANSION	18
5.0 TRANSPORTATION ANALYSIS	21
5.1 Existing Conditions	21
5.2 Forecast No build Conditions	21

6.0 FORECAST BUILD CONDITIONS with traffic generation.	21
6.1 7 TH STREET LANE EXPANSION INVESTIGATION	21
6.2 CIRCULATION	22
7.0 PARKING ANALYSIS	22
8.0 MASTER PLAN DISTRIBUTION OF USES	29
8.1 EXISTING ZONING ORDINANCE	29
8.2 MASTER PLANNED DISTRIBUTION OF USES	29
8.3 EXISTING & PLANNED FACILITY ZONES	30
8.4 OPEN SPACE	30
8.5 WAYFINDING	30
8.6 LIGHTING	31
9.0 BUILDING DESIGN STANDARDS	31
9.1 EXISTING TYPOLOGIES	32
9.2 LANDSCAPE AND DRAINAGE FEATURES	33
10.0 SUSTAINABLE BUILDING PRACTICES	33
11.0 DEVELOPMENT PHASING	34
12.0 IMPROVING NEIGHBORHOOD CONNECTIVITY	36
APPENDIX	37
a. Mary Lanning_062618_FINAL-reduced Parking plan	
b. MLH_Master-103-1	

What are we doing?

As many Western Nebraska residents now realize, the Mary Lanning Healthcare Medical Campus is a premier health care, medical education institution and community interests located downtown Hastings. The campus to date has undergone dramatic growth both in terms of employment and infrastructure additions. It is clearly one of the most tangible expressions of successful economic development in our region that is also directly responsive to the evolving health needs of our citizenry.

This update of the 2018 MLH Master Plan implicitly recognizes the dramatic growth of the campus far exceeding initial expectations. It reflects the need to revise assumptions, process and aspirations. As a result, it is not cast in stone. We appropriately anticipate adaptations “on the fly” and new iterations as we progress. However, the revision exercise itself helps the campus interests to coordinate and collaborate for mutual and community benefit. That has been our guiding objective from the start and it has served us well.

The Mary Lanning Healthcare development projects will evolve over several years. This is not a “single project” proposal, but a multi-phase plan that will occur in stages over the years to come. At its core is our commitment to create an environment in which we can provide the best possible care for patients and families—an environment geared toward safety, healing, and comfort, following the most proven, effective, and efficient practices in healthcare facility design.

- Some details of the plan as it stands now:
- **Ambulance Storage building** – Building to house three (3) ambulances to protect from weather and provide higher level of security for the vehicles. This building will be directly north of the Ambulance Headquarters located at 744 North Hastings Ave. Anticipated start of this project is November 2020.
- A new 65,000 square foot **Medical Office Building** a specialty health center housing outpatient services—will be built on the parking lot south out the MSB and east of main hospital. It connect directly to Medical Service Building on all three floors, allowing MLH to create integrated outpatient clinics and physician offices; that is, they will be located in close proximity to hospitalized patients, labs, and testing facilities. It will also necessitate building additional parking. This project is in the financing stage. Anticipated start early 2021.
- The hospital will be expanding, modernizing, and renovating the **emergency department**. Anticipated start early to mid-2021.
- **New parking lots** will be built between Denver and Hastings Avenues, north of 7th street, (early 2021),and between Kansas and Colorado Avenue south of 9th Street(Late 2021 to mid-2022). These lots will accommodate the needs of patients, visitors, and staff, alleviating demand for on-street parking.
- A **new central boiler plant**, which provides essential utilities such thermal energy and domestic water services for the main hospital, will be built between Denver and Hastings Avenue, north of the parking lot at 7th and Denver / Hastings Avenue, replacing our aging plant currently located inside the main hospital. In an effort to explore alternative approaches within the west Solution and further minimize impact on existing infrastructure, Mary Lanning team is exploring an access tunnel or bridging the street. Considering impacts to the healthcare and building organization approach previously discussed, the structure bridging it would be in the order of 400 - 500 feet in length and 2 full floors in height. Anticipated start in 2022.

Master Plan

The information contained Mary Lanning Healthcare provides the background, details, and context for our Hastings development. Mary Lanning has a history of careful planning and fiscal responsibility, and is deeply committed to the citizens of Hastings, to our neighborhoods, and to the region. The final plan is the culmination of a decade of careful assessment, evaluation, and reevaluation and:

- Projects needs and planning to the year 2030.
 - Modernizes existing facilities and structures, on currently developed land, as much as possible to reduce resource consumption and unnecessary land and infrastructure development.
 - Ensures responsible use of resources by adopting sustainable design and operation practices in new and existing facilities.
 - Minimizes disruption to current medical center services.
 - Maximizes our future capacity and growth opportunities.
 - Serves as a living outline for future development and as such will be periodically updated, presented, and recorded with the agencies having jurisdictional interest and approval, and will be revisited at a minimum of every 3-5 years depending on need and activity.
-



1.0 INTRODUCTION

Mary Lanning Healthcare System is a not for profit healthcare system. The system is comprised of hospital facilities located in central and southern Nebraska, numerous clinics and physician practices, and partnerships with healthcare providers in the surrounding service areas. It is committed and invested in each community it serves. The flagship hospital is located in Hastings, where the most acute cases from the service area are referred for the most specialized care.

Mary Lanning Healthcare facility has existed for more than a century. It has struggled and prospered, all the while providing dedicated care for its community. Its downtown location has grown from a single hospital accommodating, to a hospital with more than 100 inpatient beds and a collection of buildings providing needed care to hundreds of people a day. The perceived impact to the current Mary Lanning Healthcare facility is one element influencing this master plan. The hospital began at 715 North St Joseph Ave and expanded through the decades, east and north. Each new building and addition touching the last, and progressively increasing in size to accommodate the needs of the time. This pattern demonstrates careful planning and fiscal responsibility, as well as the importance of maintaining connectivity to current departments within the hospital, limiting disruptions to current operations.

Having reached 7th Avenue to the south, the building cannot continue to grow further south without great complication, compromise and the uncertainty of success. Therefore, this plan explores alternate approaches to address future expansion. In this plan, great effort has been taken by Mary Lanning Healthcare Administration, community leaders, stakeholders including the City of Hastings

and Adams County. This document is the culmination of a decade of careful assessment, evaluation and reevaluation in reaction to trends and policy.

1.2 PURPOSE OF PLAN

The goals and objectives of any facility master plan should identify the needs and vision of the organization, then strive to provide a clear, albeit flexible, roadmap for coordinated development; a path to modernize existing facilities and systems; and evolutionary planning to replace structures that are nearing the end of their useful lives. Additionally, healthcare facility planning requires imperatives including, most importantly, patient safety and evidence-based design. The plan must be adaptable to offer opportunity to future needs. By its nature, health care is dynamic. Inherently, challenges from the insurance industry, government agencies and policies, treatment and care delivery protocol, ever-improving technologies, and the evolution of illness make the planning of healthcare facilities an ongoing task. Spaces and infrastructure must be planned to be as flexible as possible and anticipate future needs and trends to ensure a maximum usable life. So, too, must be the hospital facility. This master plan projects needs and planning to the year 2030; any further projections become unreliable and any less becomes too limiting to be useful. The document will serve as a living outline for future development and as such will be periodically updated, presented and recorded with the agencies having jurisdictional interest and approval. It has been discussed the plan would be revisited at a minimum of every 3-5 years depending on need and activity.

The master plan is illustrative of a full build-out of the facility; however, based on changing conditions and market need, individual buildings may be phased or scaled back accordingly.

1.3 PLANNING CONSIDERATIONS

The planning framework considers first and foremost the needs of the hospital and its patients. Health care is, at the end of the day, the charge of any healthcare organization. Secondarily, urban and transportation planning objectives have been considered to the extent they do not conflict negatively with the first priority. To be successful, this plan must achieve an acceptable balance and wherever possible improve the lives of those who are impacted. Where ideals of the second priority cannot be met due to the imperatives of the first, the plan offers enhanced alternatives developed with the help and commitment of the community. The iterative plan development process progressed through numerous neighborhood meetings and public open houses. The initial plan was presented and evaluated by all parties, discussion and concerns recorded, and the plan adjusted to address feedback where at all possible.

Hospital Planning Considerations

- Patient First – Organizing the built environment around the patient experience, from wayfinding to treatment and everything in between.
- Maintain and Improve Connectivity – Relating not only to straightforward wayfinding and departmental organization, but to building services and distribution.
- Facility Renewal & Evolution – Responsible planning makes use of existing assets and respects current investments where possible. Considers future phases. Facilities Renewal Plan (Project)
- Provide Flexibility – Healthcare is dependent upon technology. The built environment and building systems must be adaptable to future technological and treatment needs.

- 24-hour Building Occupancy & Operation – The hospital cannot simply be shut down during construction activities, requiring more complex planning and phasing of projects.
- Transportation/Urban Planning Considerations
- Maintain or Improve Neighborhood Connectivity – Community consecutiveness and walkability are key to sustainable urban design. The plan provides adequate access to amenities such as sidewalks, paths, and maintaining and improving the transportation network in and around the study area.
- Minimize Negative Impact on Infrastructure – Mitigate impact on public systems.
- Improve User Experience - Where possible improve and encourage usability of existing facilities, create new amenities, and destinations. Such as incorporating open space and creating opportunities for public.
- Reduce Environmental Impacts - Use existing facilities and structures on previously developed land to the extent possible to reduce resource consumption and unnecessary land and infrastructure development.

1.4 COMMITMENT TO COMMUNITY

It is important to acknowledge Mary Lanning Healthcare’s commitment to the community and its betterment. Mary Lanning has taken care of patients, both from around the corner and from around the state. It strives to be a responsible steward of community development, the environment, and a healthy lifestyle.

Essential to community vibrancy and enhancing quality of life are protecting open space and creating culture. The initial phases of this master plan carry a significant financial investment not only to Mary Lanning’s downtown facilities, but over the next decade it is estimated several hundred million dollars of rollover economic benefit and job growth will be provided to the larger community. As an example of this commitment to the community, Mary Lanning Healthcare is engaged in a robust outreach campaign with the intent of keeping interested parties updated on developments specific to its master plan. The engagement began many years ago and has encompassed separate meetings with agencies, organizations and neighbors. Mary Lanning did not only present information on the plan, but the attendees were able to provide feedback and insight, to further shape and focus this document. The outreach effort is anticipated to continue throughout the public approval process. In addition, Mary Lanning Healthcare’s provides updated plan details and relevant resources. In the plan that follows, there is an assessment of the existing transportation conditions, identifying areas of concerns and proposing solutions for broader consideration. Great care has been given in any of the offered solutions to address safety, performance, and comfort. It is Mary Lanning Healthcare’s intent to enhance its facility with improvements, encouraging use by the public and improving satisfaction with each system.

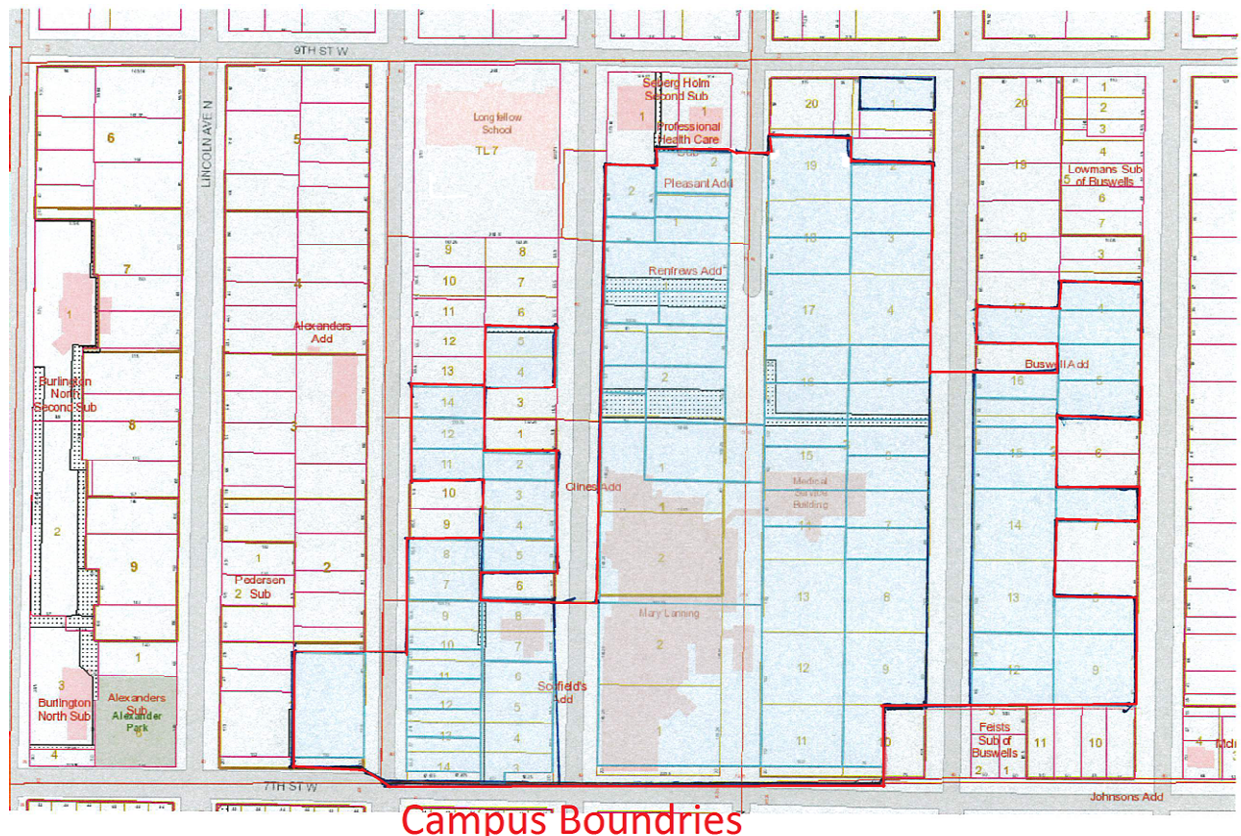
Taking Advantage of the Investment in Existing Facilities:

All of these efforts have come together over the years to help meet the ongoing need for high quality, evidence-based, compassionate care, and to further Mary Lannings mission. Now, Mary

Lanning Healthcare is planning another critical development that will allow its Hastings hospital to deliver on its commitment to patients and continue to provide the level of care. Over the course of many years, this planned development will result in a new Medical Office Building expansion of the Medical Services Building, modernization and renovation of the main hospital emergency department, expansion of Morrison cancer center services, and construction of a new central plant, and additional parking areas.

2.0 EXISTING CONDITIONS

Beginning in 2018 the team was asked to provide a series of comprehensive assessments of the existing Mary Lanning Healthcare facility. The analysis consisted of a series of building system investigations and walkthroughs of the hospital facility. The assessment considered all aspects of healthcare delivery as well as site conditions, existing infrastructure, surrounding neighborhoods, interior finishes, patient and staff circulation, existing building codes, and forward looking consideration of pending healthcare guidelines and standards.



2.1 ENVIRONMENT OF CARE ASSESSMENT

Purpose of Review:

The purpose of this review was to establish the existing condition of the hospital. In particular, this evaluation is to establish the potential for addition and/or remodeling.

Basis of Evaluation:

1. Existing physical condition.
2. Compliance with codes that would be in effect if remodeled or an addition was added.
3. Site availability for addition.

Existing Physical Condition:

The following review represents a visual and plan evaluation of the facility. There was no specific testing for items behind walls, ceilings, or floors; however, there was opportunity to look above ceilings and below floors in a couple of access points. All mechanical and electrical rooms were visually reviewed. The roof was viewed. A basic understanding of the existing mechanical and electrical systems was achieved. Building was reviewed for space and architectural only. Reports for mechanical and electrical systems are not included.

Site Analysis:

The site is fully used at the present time. Any addition or new building would require loss/relocation of parking and/or other buildings. Site improvements such as pavements and sidewalks, while for the most part are in reasonable condition, some areas show some signs of aging but appear to meet accessibility standards. Site landscaping is mostly simple and mature, except for the newer area around the new parking areas around St Joseph Avenue, and north of the Morrison Cancer Center.

Parking availability is adequate for both visitors and staff, except some of the staff parking is a reasonable distance from the hospital. Parking is provided in existing surface parking. It is not feasible to add on to the existing surface parking; therefore, new parking accommodations for visitors and staff must be provided and convenient to any new construction.

Many of these portions of the hospital have undergone numerous remodels and use changes over the years. Floor-to-floor heights range from 10' to 12' and are very tight to accommodate the needed mechanical, electrical and plumbing utilities inherent in most healthcare uses. The facility uses a primary central corridor system conveying visitors, patients, staff and materials. While this system is not a code violation, the preferred system would be to separate staff and patients from visitors, where material movement can occur on a support floor. All of these portions of the building were built around an inpatient focused model. Outpatient services were a very small portion of care at that time and required minimal technology. Today, outpatient services account for large percent of hospital visits; therefore, most of the outpatient diagnostic and treatment areas have grown, and will continue to grow, far beyond what was originally envisioned. Many of these services (Surgery, Emergency Department, Diagnostic Imaging, Lab, etc.) have planned renovations. Some other challenges with these older portions of the building include:

1. Aging emergency power, data and electrical outlets upgrades to present codes.
2. Aging mechanical and plumbing systems, minimal air changes, and aging infrastructure.
3. Accessibility appears to have been well dealt with for the present uses; however, if more intensive uses needed to expand into these older buildings that would be a concern.
4. Storage is a concern. While not in violation of codes, most departments have expressed concern over the lack of storage convenient to their unit.

The greatest challenge of these older building is the size of rooms. Every few years, codes related to the size of healthcare spaces are updated and typically grow in size required. When originally designed, the sizes were not a concern; however, today those that have not been recently remodeled are problematic.

Outpatient services in the buildings have insufficient space for needed technology. Many of the most intensive services (OR, ED, imaging etc.) have been relocated into these portions of the building and work well today. If expansion/additions are needed in the imaging area and the ED, these spaces could be added on to with minimal code concerns.

2.2 LANDSCAPE ASSESSMENT

The Master Facility Plan, was update was conducted in 2018 - 2019. A review of landscape to determine the cost for relocating any trees that are healthy, desirable, and of the caliper that could be relocated was also conducted. It is also noted that any plant material determined to be capable of relocation should be relocated during the proper season (after leaves have fallen in autumn or before leafing out in spring). Shrubs are briefly described in the assessment to present a complete inventory. Mary Lanning is exploring relocation due to its perceived significance to the donor community; however, a new location has not been identified. Overall, the species and spacing of trees within the Right of Way are consistent and complementary to the surrounding neighborhoods. Most trees surveyed were in fair health at the time of the assessment given their respective ages.

2.3 UTILITIES ASSESSMENT

Hastings Utilities is the purveyor of power to the MLH facility in Hastings. The facility receives power from primarily the North Denver Substation, the alternative substations are B St and Bypass substations. The substation feeds 2 transformers rated 205mega-volt-amperes (MVA) each. These provide power to the feeder circuits. The third 205mega-volt-amperes (MVA) transformer feeds the Morrison Cancer Center and the Medical Service Building.

3.0 ALTERNATIVES ANALYSIS

As part of the master plan process, the MLH Team identified possible expansion sites adjacent to the existing facility. Sites were considered initially regardless of current ownership, but as illustrated in the commentary, ownership was a consideration. Each location was then populated with large blocks representing approximate building square footage required to address each need and conceptually arranged based on best practice departmental adjacencies. The resultant options were then evaluated based on a set of healthcare planning criteria aligning with the institution's commitment of fiscal responsibility.

The options were vetted thoroughly through an iterative process with both internal and external stakeholders, including impacted neighbors and citizens. Possible expansion locations explored include:

- East - Location includes the two full blocks east of the existing hospital bound by Colorado Street, Kansas Avenue, between 9th and 7th Street. Properties include both MLH-owned and non-MLH-owned interests.
- South – Having reached 7th Avenue, the building cannot continue to grow further south without great complication, compromise and the uncertainty of success. Therefore, this plan explores alternate approaches to address future expansion.
- West - Location includes two full blocks to the west of the existing hospital bound by Hastings Avenue and Denver Avenue. Denver Avenue currently housing MLH chiller plant, MLH contractor parking, Mary Lanning Foundation Offices, and the current ambulance team house.

- North - Location includes two full blocks north of the existing hospital bound by 9th Street, Colorado Avenue, Kansas Avenue, Denver Avenue and Hastings Avenue. Properties include hospital helicopter landing site, Morrison Cancer Center, patient / visitor and staff parking, and smaller hospital-owned properties, and smaller non-hospital owned properties. In the following sections, the evaluation criteria is explained, each alternate solution is described and evaluated, and the preferred option illustrated. In addition, the team explored additional variations to the preferred location option, and commentary is included addressing challenges encountered.

3.1 EVALUATION CRITERIA

The possible expansion options were individually evaluated on the following criteria. Each criteria is described in detail in an effort to establish a consistent understanding for application.

Traditionally, hospitals grow and evolve over time; as a result, corridors become buried within masses of building and where there was a door or window yesterday, there is a wall today. If not considered up front as an organizing element, staff efficiency and patient and visitor comfort may be sacrificed. This criteria addresses the need to simplify, maintain, and enhance existing corridors and connectivity into possible expansion areas.

Minimize Disruption to Current Operations - The hospital serves the community and region by providing care for the sick and injured. Key to this objective, the hospital and its services must maintain operations 24 hours a day, 7 days a week, 365 days a year. Its services cannot be interrupted nor stopped without significant consequence.

Visibility/Patient Accessibility and Convenience - The hospital entrances and access must be readily accessible and intuitive to patients. This is especially true in emergency situations when patients and family under situational stress need to find the hospital, park if needed, and locate the entrance as expeditiously as possible.

Sufficient Future Capacity - As previously stated, interruption to hospital operations can be disastrous and costly. By providing the maximum amount of future capacity and flexibility that can be afforded over meeting current needs, the hospital can minimize future impacts. **Parking Near Entrance(s)** - Akin to patient access, adequate parking near entrances is imperative for patients who are of limited mobility and for those responders charged with their care.

Better Health Reduce/Eliminate Pedestrian-Vehicular Conflicts - One of the principle precepts of medical ethics that all students are taught in medical school is "First, do no harm." The hospital facility should, by its nature, be safe. In an urban setting where cars, pedestrians, and bikes exist, care should be given to reduce the possibility of instances where pedestrians can potentially be struck by vehicles.

Minimize Negative Impact on Public Infrastructure - This criteria gauges expansion scenarios on their perceived impact on existing utilities like power, water, and sewer, as well as existing roadway, and pedestrian.

Connects to Most Recent Construction - Over time, building codes and technologies advance, becoming better at protecting and serving building occupants. Connecting to the most recently constructed portion of the hospital is not only safer, it also helps ensure better long-term viability by not attaching to construction that may be nearing the end of its functional life, ultimately needing to be replaced.

Lower Costs Enable Facility Regeneration - As a not-for-profit, Mary Lanning strives to be sustainable and a positive community steward. Aligned with its mission to lower costs, it must responsibly use resources, one of which is the land the MLH facility occupies. To ensure there is room to grow in the future and to mitigate impact to its neighbors, the options were judged on how well they protect future growth opportunities without sprawl.

Connection to Central Plant - The Central Plant houses building systems essential for the operation of the hospital facilities. New construction needing these services must be able to reasonably connect to the Central Plant in order to avoid costly and unnecessary redundancies. Respects Existing Investments - Being a not-for-profit means Mary Lanning has to invest wisely in its facilities and its delivery of health care. Its financial resources are limited and existing investments, like recent investments in surgeries and emergency services, must be maximized. Constructability - The end solution must be able to be efficiently built and flexible to adapt to future needs, so as not to waste limited resources. In Section 5.0 ALTERNATIVES, the preceding criteria have been applied and tabulated to inform site preference.

3.2 BUILDING ORGANIZATION

The emphasis on specialist physicians more and more in both the hospital providing care and in the outpatient clinic on an hour-by-hour basis to provide care. Gone are the days when a specialist physician can have his office blocks or miles away. Mary Lanning Healthcare is the tertiary care center of the health system, caring for the sickest of patients through transfers from other less well-equipped hospitals in the area. The result has been a boon for patients overall by having excellent specialists available to all in the area. The result of these fundamental changes in healthcare delivery has been a need for more specialized care capability at the Hastings hospital facility and the deeper integration of physician clinics in close proximity to the care delivery modalities of surgery, radiation therapy, imaging, neonatal intensive care, cardiac cath, and other vital technologies that save lives. Hospitals are an integrated whole and as a modality such as surgery expands, the footprint of the area needed is beyond the available footprint of the existing blocks.

3.3 ALTERNATIVES

Based on the results and more detailed investigation, the East solution provides the best opportunity to achieve the evaluation criteria from a healthcare planning perspective.

To further illustrate the rationale for the recommendation, each alternative has been taken to a greater level of development and an additional layer of traffic planning evaluation was undertaken to further inform the decision-making process. Each are provided here with further commentary for consideration.



4.0 Mary Lanning Healthcare Building Expansion

4.1 Ambulance Storage building

Ambulance Storage building – Building to house three (3) ambulances to protect from weather and provide higher level of security for the vehicles. This building will be directly north of the Ambulance Headquarters located at 744 North Hastings Ave. Anticipated start of this project is November 2020.

EAST SOLUTION

- Mary Lanning does not own all the property to east of the Ambulance Headquarters.

SOUTH SOLUTION

- Mary Lanning does not currently own the property required to accommodate the South Solution.

West SOLUTION

- Mary Lanning does not currently own the property required to accommodate the West Solution.

North SOLUTION

- MLH currently owns all the property required to accommodate the North Solution.
- North of the existing Ambulance Headquarters Building is currently available and vacant. Previous building was demolished due to not being occupied and capable of meeting code compliance. Solution creates more compact facility and limits sprawl potential.

4.2 Medical Office Building Expansion

EAST SOLUTION

- With some exceptions, MLH currently owns all the property required to accommodate the East Solution.
- South of the existing Medical Services Building. Parking south and east of the proposed construction site would be required to vacate and close.
- Solution creates more compact facility and limits sprawl potential.
- East Side Main Entrance drop-off would require closure, rerouting admission and visitors to the North Admissions entrance traffic, leaving access to the East End only employee entrance. Access from Kansas Avenue and 7th Street would be limited.
- Additional access points to new facilities would be necessary on Kansas, increasing congestion deeper into the East End.
- New Medical Office Building (MOB) development connected to existing Medical Service Building outpatient areas at each floor with the connection to the inpatient area via existing link. This making departmental efficiencies and care delivery a challenge.
- The buildable footprint available for the MOB development would be sufficient for the anticipated building program. The overall height of the expansion would remain the same as current Medical Service Building. Without further impacting the adjacent neighborhood.
- Development to the east straddles Zoning Districts CMP and R-1. Rezoning to allow the new use would require City of Hastings and Open Meetings.
- Street-level connectivity between new construction and existing presents safety challenges to pedestrians crossing Kansas.
- Kansas Avenue drop-off and parking access would require entrance changes to process site access traffic. Patient and visitor access to front door is problematic.
- Internal connectivity and circulation becomes inefficient and problematic between the medical office building (MOB) expansion and the main hospital during the construction phase of the first (1) floor.
- Development to the east across Kansas Avenue straddles Zoning Districts CMP and R-1. Rezoning to allow the new use would be required as well as the area would need to be replatted.

SOUTH SOLUTION

- Mary Lanning does not currently own the property required to accommodate the South Solution.
- Additional access points would be necessary on 7th Street, and Kansas Avenue intersection would increase congestion deeper into the East parking area.
- Expansion to the south causes redevelopment of the east and west sides of the existing hospital.

- Access to the Surgery Department and South Admissions becomes challenging.

WEST SOLUTION

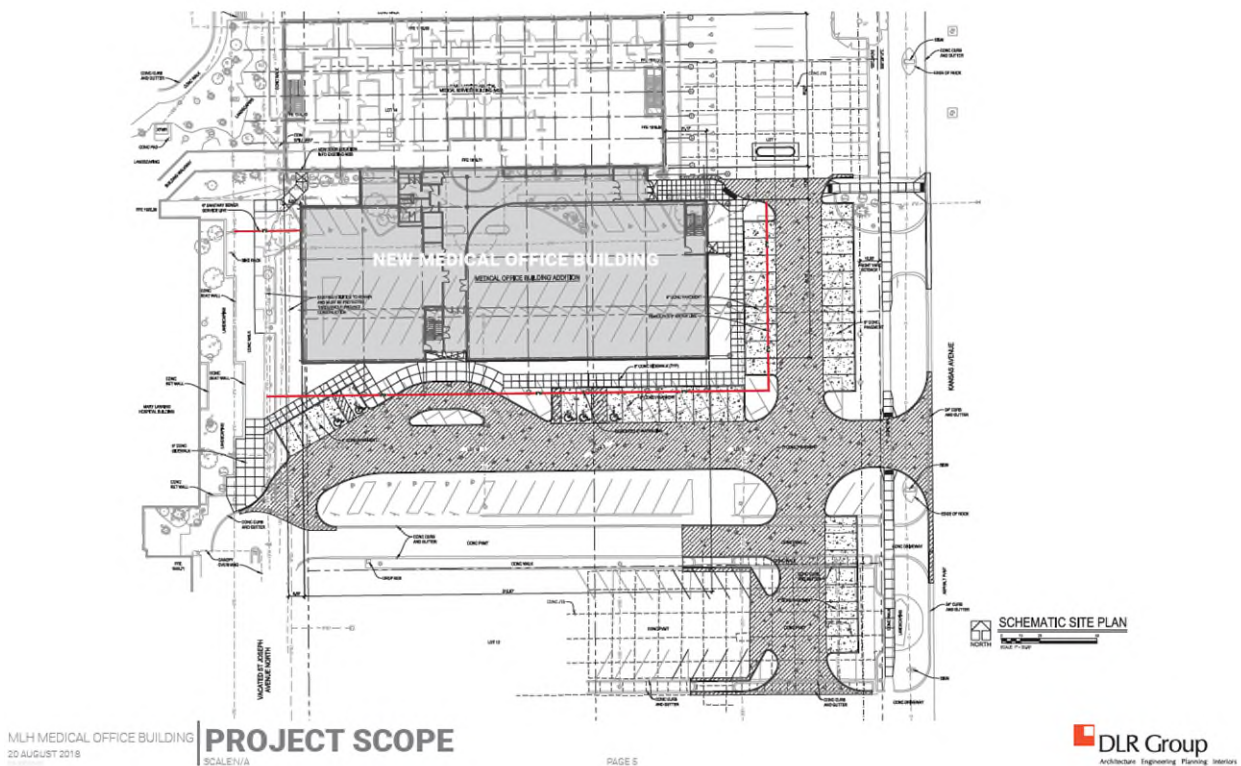
- Locating the hospital development to the west of the existing building would necessitate a Denver Avenue drop-off for expanded and relocated services, increasing vehicular traffic on Denver Avenue. New medical office building would be required to be located on the north side of 7th Street, further increasing congestion. Locating building access along Denver Avenue would also increase pedestrian crossing at street level, increasing the opportunity for vehicular conflict. The 7th Street and Denver Avenue intersection would increase congestion deeper into the 7th Street.
- Emergency department traffic would be potentially be impacted, possibly creating a dead end at the Emergency Department entrance.
- A new parking lot will provide an additional 107 parking spots. It will be constructed between Denver Ave and Hastings Ave. It will also include a change to the entrance / Exit of the lot on the corner of Hastings Ave and 7th St. The plan has two (2) access drives to Hastings Avenue and one (1) access drive to Denver Avenue. The driveway modifications will improve traffic circulation.
- New hospital development not connected to clinics or existing inpatient areas, making departmental efficiencies and care delivery a challenge. Location increases.

NORTH SOLUTION

- New and existing primary hospital functions like surgery, emergency department, and associated support functions connect to create a horizontally integrated care model.
- Traffic circulation becomes inefficient and problematic at the 9th Street and Denver Avenue, due to Longfellow School traffic and lack of school access parking. Although, the resultant congestion could be mitigated.
- Vacation of St Joseph Avenue between 8th and 9th is desired to allow control of setbacks and maximize buildable footprint.
- The North Solution distributes increased traffic volume, driven by Mary Lanning development around the facility, rather than at a single point.

PREFERRED SOLUTION Medical Service Building location

As illustrated, the East Solution ranks best of all locations explored for the Medical Office Building expansion. However, perceived execution of the concept necessitates a parking vacation and entrance closure to allow existing traffic to access east parking. Medical Service Building departments on all floors, containing some of the more expensive and heavily invested space, to expand horizontally. As previously discussed, contiguous space within key departments is operationally and fiscally more efficient. A detailed look at current floor spaces relative to proposed expansion illustrates the challenge of maintaining the parking and street access. Thus, the solution would impact public infrastructure. In this case, existing departments needing large contiguous space could move into the structure to a floor capable of supporting this need, without causing abandonment of multi-million dollars' worth of previous investment and sacrificing current relationships. It would allow for consolidation of supporting ancillary functions. Following are a conceptual rendering illustrating the specific condition described.



MLH MEDICAL OFFICE BUILDING
20 AUGUST 2018

PROJECT SCOPE
SCALE: 1/4" = 1'-0"

PAGE 5

DLR Group
Architects Engineering Planning Interiors

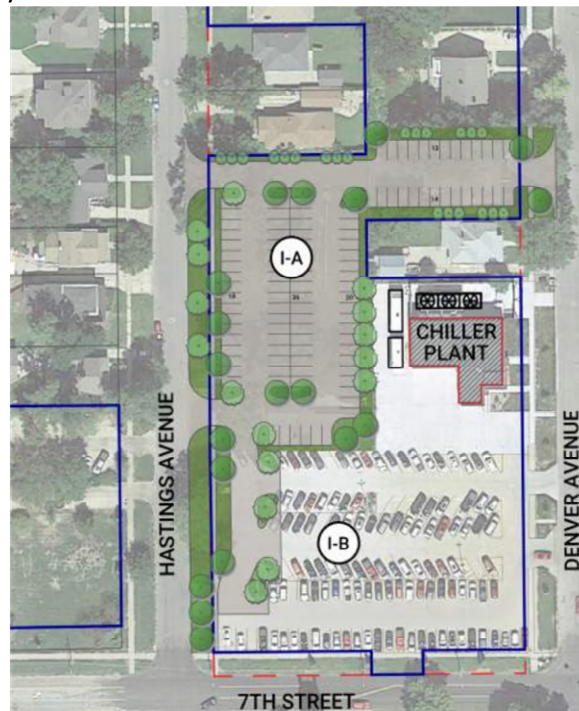
4.3 Boiler Central Plant Building Expansion

The current Hospital boiler plant is located in the interior of the hospital, on the 1st floor. The plant was built in the early 1960's, and has reached the end of its useful life. The hospital Central Boiler physical plant, or steam plant, generates thermal energy in the form of steam for use in heating applications. The boiler heating plant is dedicated to generating heat for use in various processes. The heating plant generates steam which is distributed to each building where it is used to make domestic hot water for human consumption, heating hot water in the case of hydronic heating systems, air heating in HVAC units, humidification, and sterilization at hospitals. The central boiler plant feature boilers, which generate steam for various uses and demands. The plant also hosts all of the boiler auxiliaries such as water treatment equipment,

air handling, fuel handling, controls, instrument air, and various other plant systems which support the production of steam.

WEST SOLUTION

- Locating the hospital Boiler Central Plant Expansion development to the west of the existing Central Chiller Plant off Denver Avenue. New Boiler Central Plant Expansion would be required to be located on the north side of 7th Street, between Denver and Hastings Avenues. The 7th Street and Denver Avenue intersection would not be affected. Locating building access along Denver Avenue would also increase pedestrian crossing at street level, increasing the opportunity for vehicular conflict.
- Emergency department traffic would not be potentially be impacted.
- Access to the current chiller Central Plant and the Boiler Central Plant Building Expansion with a sky bridge or tunnel would reduce pedestrian traffic across Denver Avenue.
- Solution creates more compact facility and limits sprawl potential.
- The Shipping and Receiving office provides services for hospital operations and distribution. It is assumed half of the trips occur during off-peak time periods.
- A new parking lot will provide an additional 107 parking spots. It will be constructed between Denver Ave and Hastings Ave. It will also include a change to the entrance / Exit of the lot on the corner of Hastings Ave and 7th St. The plan has two (2) access drives to Hastings Avenue and one (1) access drive to Denver Avenue. The driveway modifications will improve traffic circulation. See artist renditions of planned parking lot.
- With some exceptions, MLH currently own all the property required to accommodate the East Solution. ** The property at 729 North Denver is not a Mary Lanning Memorial Hospital Association property. **



EAST SOLUTION

- With some exceptions, MLH currently own all the property required to accommodate the East Solution.

- South of the existing Medical Services Building. Parking south and east of the proposed construction site would be required to vacate and close.
- Solution creates more compact facility and limits sprawl potential.
- East Side Main Entrance drop-off would require closure, rerouting admission and visitors to the North Admissions entrance traffic, leaving access to the East End only employee entrance. Access from Kansas Avenue and 7th Street would be limited.
- Additional access points to new facilities would be necessary on Kansas, increasing congestion deeper into the East End.
- The buildable footprint available for the New Boiler Central Plant Expansion development would be sufficient for the anticipated building program. Without further impacting the adjacent neighborhood.
- Internal connectivity and circulation becomes inefficient and problematic between the New Boiler Central Plant Expansion and the main hospital during the construction phase.

SOUTH SOLUTION

- Mary Lanning does not currently own the property required to accommodate the South Solution.
- Additional access points would be necessary on 7th Street, and Kansas Avenue intersection would increase congestion deeper into the East parking area.
- Expansion to the south causes redevelopment of the east and west sides of the existing hospital.
- Access to the Surgery Department and South Admissions becomes challenging.

NORTH SOLUTION

- New and existing primary hospital functions like surgery, emergency department, and associated support functions connect to create a horizontally integrated care model.
- Traffic circulation becomes inefficient and problematic at the 9th Street and Denver Avenue, due to Longfellow School traffic and lack of school access parking. Although, the resultant congestion could be mitigated.
- Vacation of St Joseph Avenue between 8th and 9th is desired to allow control of setbacks and maximize buildable footprint.
- The North Solution distributes increased traffic volume, driven by Mary Lanning development around the facility, rather than at a single point.

PREFERRED SOLUTION Boiler Central Plant Building Expansion

As illustrated, the West Solution ranks best of all locations explored for the **Boiler Central Plant Building Expansion**. **Boiler Central Plant Building Expansion creates an open space on ground and first floors**, containing some of the more expensive and heavily invested space, to allow for internal hospital departments to expand horizontally. As previously discussed, contiguous space within key departments is operationally and fiscally more efficient. In this case, existing departments needing large contiguous space could move into the structure to a floor capable of supporting this need. Future conceptual rendering will illustrate the specific condition described.

5.0 TRANSPORTATION ANALYSIS

5.1 EXISTING CONDITIONS

The existing roadway system serving the area is described as follows:

- Colorado Avenue is a minor arterial at intersections and a stop signs at 7th and 9th streets, is an urban two-lane collector located east of the area.
- Kansas Avenue is a two-lane minor arterial (to 7th and 9th Streets).
- St Joseph Avenue is a two-lane minor arterial (to 9th Street) that terminates at 8th Street.
- Denver Avenue is a two-lane minor arterial (to 7th and 9th Streets). Traffic signals exist at Denver Avenue and 7th Street intersection. Denver carries the emergency department traffic, and houses the loading dock facilities for the main hospital.
- Hastings Avenue is a two-lane minor arterial (to 7th and 9th Streets) is an urban two-lane collector located west of the area.

A thorough data collection effort was has not been undertaken to establish baseline traffic conditions. Existing turn movement counts (TMCs) should be at key intersections for both the A.M. and P.M. peak hours. To capture peak-hour conditions, counts should be, from 7:00 A.M. to 9:00 A.M. and from 3:00 P.M. to 6:00 P.M.

5.2 FORECAST NO BUILD CONDITIONS

6.0 FORECAST BUILD CONDITIONS WITH MARY LANNING HEALTHCARE DEVELOPMENT -Site traffic generation.

6.1 7TH Street LANE EXPANSION INVESTIGATION

Board of Public Roads Classifications and Standards
Form 9 Summary of Six-Year Plan
Six-Year Period Ending: September 30, 2025

Sheet 1 of 2

COUNTY:		CITY: HASTINGS		VILLAGE:	
PRIORITY NUMBER	PROJECT NUMBER	LENGTH- (Nearest Tenth)	UNIT OF MEASURE	ESTIMATED COST (Thousands)	REMARKS
	M-330 (45) / STP-5512 (2)	0.5	Miles	1,650	7th Street Widening - Burlington Ave to Colorado Ave

It is Mary Lanning's position, that this could negatively impact our campus and our mission if the expansion requires footprint on the north side of 7th street between Kansas and Denver. Mary Lanning is committed to working with the City of Hastings and community stakeholders to implement transportation solutions that greatly enhance the transportation experience for all stakeholders.

6.2 CIRCULATION

Mary Lanning facility serves as a regional destination for patients and visitors. As such, connectivity and access to the facility and its front door is of the utmost importance. The current vehicular circulation network consists of minor arterials bordering the east and south edge of the facility. North Admissions current vehicular circulation network consists of minor arterials bordering the west and north edge of the facility, providing expedient vehicular access, with urban collectors serving the facility interior, east and south edge. Pedestrian access is facilitated by a complete sidewalk and crosswalk network to and through the current parking facility. 2018 Parking plan recommended improvements include conversion of Kansas Avenue from a two way to a boulevard street, intersection improvements, as well as expanded and enhanced pedestrian facilities. Phase V will include the option to develop boulevard medians in Kansas Avenue and St Joseph Avenue. The median development will enhance the aesthetics of the site with additional landscaping, clarify traffic circulation and provide opportunities for added clarity to site wayfinding and signage.

7.0 PARKING ANALYSIS

Mary Lanning Healthcare hired DLR in 2018 to prepare a Parking Demand Analysis for their main Hospital facility. The DLR Group planning process began with confirmation of the goals for the site parking evaluation and master plan. The scope of the planning study to be inclusive of the existing hospital campus site in conjunction with the continued acquisition of residential properties contiguous to the existing hospital campus. The site parking planning master plan study area includes the existing hospital campus bounded by 7th Street on the south and 9th Street on the north and Kansas Avenue on the east and Denver Avenue on the west. Additional properties acquired by the hospital to the west side of Denver Avenue and to the east side of Kansas Avenue are also considered in the master plan.

Specific planning goals include the following:

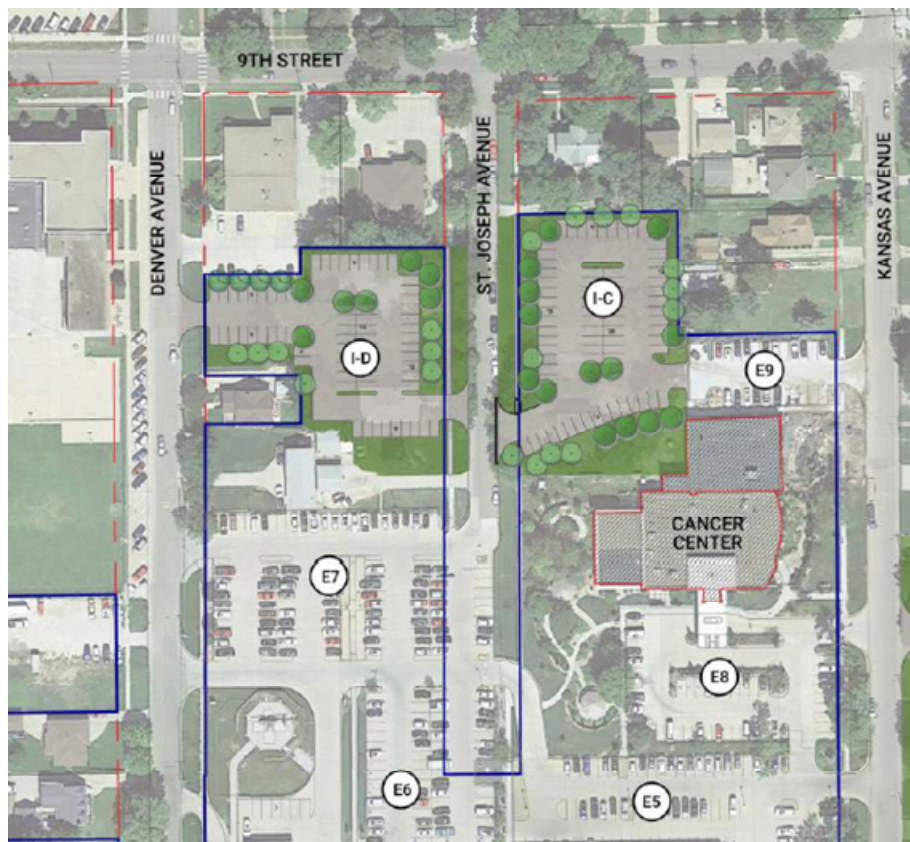
- Development of a site parking and circulation master plan that can be implemented through phases, providing flexibility in build-out of the master plan in alignment with available funding.
- Improve overall traffic circulation, simplified wayfinding and improve safety for vehicles and pedestrians on the hospital campus.
- Provide an improved and visible main entrance to the campus.
- Improve parking efficiency of the existing campus.
- Comply with zoning requirements for parking capacity, layout and landscaping per the City of Hastings.
- Provide a plan that accommodates areas of construction for a proposed new Medical Office. Building and meets the increased parking requirements for the new building.
- Provide a plan that is cost efficient and allows for phased implementation and flexibility for continued growth of hospital facilities.
- Maintain existing emergency and patient admissions entry on the north and the primary hospital visitor entry to the east; while developing a clearer circulation path for travel from the north side of the campus to the east side of the campus.
- Maintain visibility of the main Hospital building from 7th Street.
- Provide a plan that limits conflicts between parent drop-off operations before and during school at Longfellow Elementary School (located at the northwest corner of the site) and Hospital patrons. A fence was added south of the dentist office, to reduce the potential conflict with Pre-school and afternoon school. With the intention of reducing vehicular and pedestrian interaction.

The report addresses the existing parking needs for the hospital, using two different approaches:

- Parking spaces required by City Code, and
- Parking spaces needed based on the observed current usage (with an appropriate adjustment for the design day).

The analysis also provides a review of this master plan and projects associated with the Medical Office Building. Parking Required by Code Parking required for the facility may be subject to some interpretation, as different buildings may be located outside of the overlay zone, and/ or may fall under older code standards or variances which have been grandfathered in.

Construction in summer of 2019 included two new parking lots north of the hospital. Parking lots I-C and I-D added 164 stalls with 3 of the stalls being ADA. This allowed the hospital to move employee parking from the north and south side of the Medical Service Building, and allow more hospital visitor parking.



Visitor parking will be impacted by the construction of the Medical Office Building. With some exceptions, MLH does not currently own all the property required to accommodate the East Solution.



DLR Group has provided a master plan parking study evaluating the required parking count once the MOB has been completed. The existing parking count is currently below the recommended number before the reduction of parking due to the addition of the MOB. The existing parking count is 832 and the recommended capacity is 927 stalls without adding the MOB. Once the MOB is added in Phase III the recommended parking is 1,172.

The master plan outlines a five-phase approach in executing the addition of the MOB and provides for a total parking capacity of 1,318 parking stalls. The proposed master plan improves the identity of Mary Lanning campus, improves wayfinding, and improves parking efficiency.

Projected parking improvement	Parking onsite	city zoning min required	city maximum allowed	Parking study recommended capacity	existing parking removed or Demo'd	New parking construction / improved parking	improved parking construction	
Existing site	832	927	1020	966	7	164	989	* 164 stalls added in 2019 with 3 ADA stalls
Phase 2	989	927	1020	966	0	93	1082	**Schedule construction of 1-A Denver / Hastings Ave delayed by COVID 19 pandemic. Will include 4 ADA stalls.
Phase 3	1082	1172	1086	1172	16	37	1103	
Phase 4	1103	1086	1194	1172	433	560	1230	
Phase 5	1230	1086	1194	1172	0	88	1318	

Phase 1 Construction completed in 2019

Phase I was partial completed in 2019. Which was the construction of two additional parking areas towards the northern end of the hospital campus. Parking **Lots I-C and I-D** increased the total site capacity by an additional 164 stalls for a total site parking capacity at the end of Phase I construction of 989 parking stalls. The added capacity has provided employee parking away from the hospital, and freed up space for visitor parking area in the North Entrance area.

Phase 1 Anticipated start in Mid-2021.

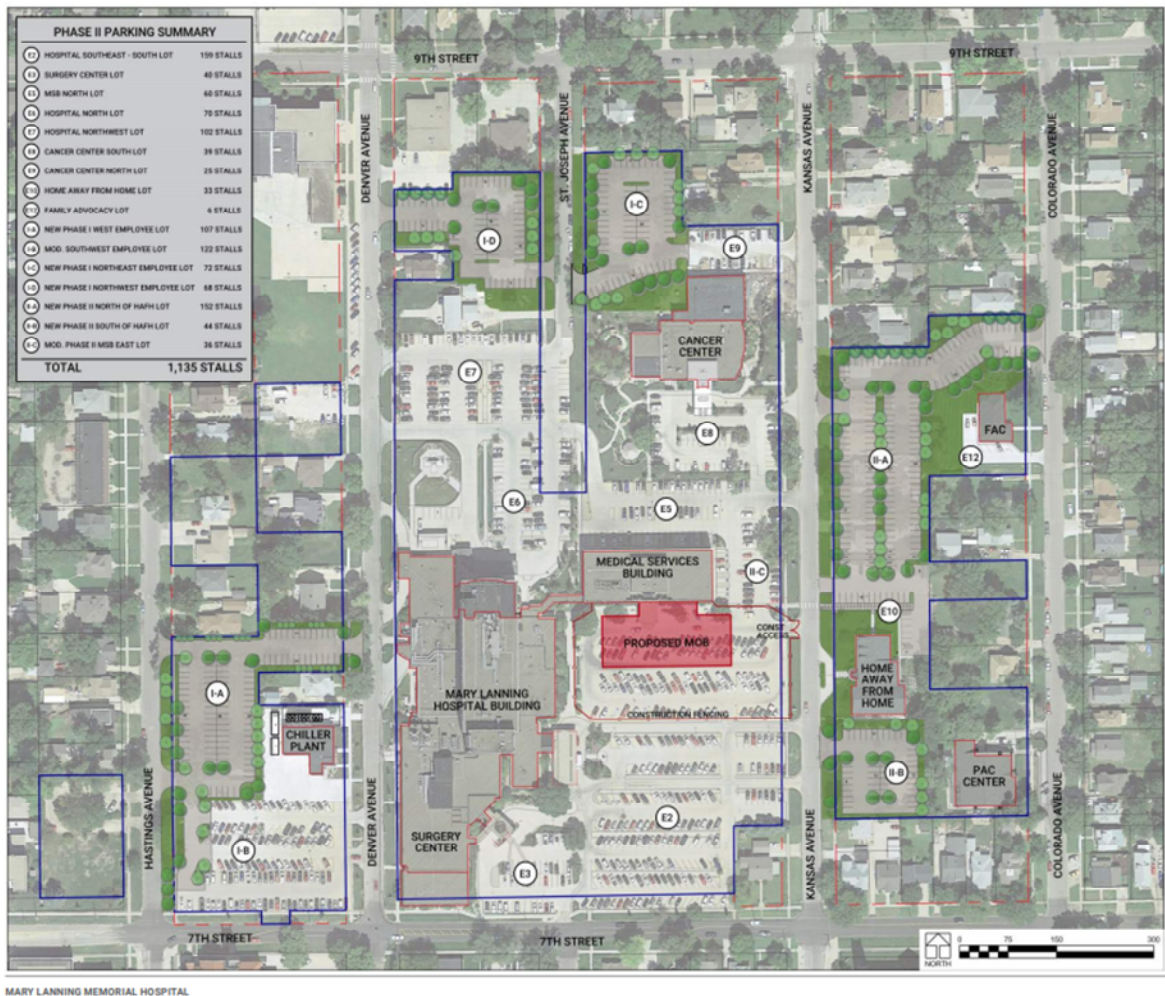
The first phase of construction was to provide an additional employee designated parking area. Parking Lot I-A, which was delayed due to the COVID -19 pandemic, will providing an additional 107 parking

stalls, will be constructed between the existing chiller plant and Hastings Avenue. Construction of Lot I-A also includes the reconfiguration of the western end of existing Lot E11 (resulting in a loss of 7 parking stalls within the lot, becoming Lot I-B) by eliminating the access drive to Hastings Avenue, which is located too near to the intersection with 7th Street. The new parking lot will include the construction of two access drives to Hastings Avenue and one access drive to Denver Avenue. The driveway modifications will improve traffic circulation for employees in this area of the campus. As construction of the new MOB begins, existing parking will be displaced.

PHASE II

Phase II implementation plan will provide the necessary site area for a proposed new Medical Office Building (MOB), an area required for a construction staging zone, and includes the construction of additional parking areas on the east side of Kansas Avenue. During the construction time frame of the MOB, 133 parking stalls will be displaced on the south and east sides of the existing Medical Services Building, temporarily reducing the total site parking capacity. Construction of Lots II-A and II-B will add 196 parking stalls. The parking indicated on Phase II meets the City's zoning requirements for the site (including the required parking needed to serve the new MOB construction) while staying beneath the 110% threshold for additional landscaping requirements.

Construction of the Phase II parking indicated will adequately provide parking for the Hospital Campus while construction for the MSB is underway. The anticipated construction timeline is scheduled to be a duration of twenty months. In addition to the site parking capacity another consideration with the Phase II MOB construction plan is the need to provide adequate parking and convenient access for hospital visitors and Medical Service Building patients. The recommended parking capacity for hospital visitors is 85 and for MSB patients is 185. This combined parking capacity will be served with designated hospital visitor parking on the east side of the hospital and on the south and north sides of the existing MSB. Providing convenient patient access to the existing MSB during construction of the proposed Medical Office Building will also require improvements to the north MSB entrance and construction of a new temporary entrance near the southwest corner of the MSB.



PHASE III Anticipated start late 2021 to early 2022.

Phase III site development is planned to be constructed concurrently with completion of the proposed new Medical Office Building. Completion of Phase III will provide an additional parking capacity of an additional 37 parking stalls (all located in direct proximity to the new MOB).

This total parking capacity meets both the City of Hastings's zoning requirements and the recommended requirements associated with the new Medical Office Building and the hospital. The parking construction included in **Phase III** will include some minor reconfiguration in the northeast corner of the existing hospital southeast parking area, and construction/ modification of parking around the new MOB and on the east side of the existing MSB. The parking completed at the end of Phase III and after completion of the MOB meets the recommended requirements, and maintains much of the existing southeast parking lot as is.

This gives the hospital the flexibility to implement future parking renovations of the existing parking lots to improve circulation and landscaping without significantly hindering the daily operations of the hospital. Completion of Phase III provides a parking capacity of 292 parking stalls within the parking lots located south of the new MOB and north and east of the existing MSB (located west of Kansas Avenue). With the assumption that employee parking will be in other designated areas this capacity will meet the

recommended parking requirements for hospital visitors and MOB and MSB patients exclusive of additional parking areas (II-A and II-B) indicated on the east side of Kansas Avenue.

Phase III site development will also include development of a well-defined pedestrian crosswalk on Kansas Avenue enhancing safe access to the parking area on the east side of Kansas Avenue. Parking areas and access drives on the south side of the new Medical Office Building will be planned and constructed to align with future parking area improvements on the east side of the hospital building. Improved site signage will be developed to improve way finding, reserve designated patient and visitor parking and coordinate with the master site development plan.

PARKING CAPACITY EVALUATION

Based on DLR's interpretation of Title 11, the following has been concluded:

Determination of the required parking counts of the Mary Lanning Hospital campus necessitates an understanding of the City of Hastings zoning requirements as well as available research data and parking recommendations documented for healthcare facilities. Development of a site parking master plan also requires an understanding of the specific and unique parking needs of various healthcare services and buildings on the hospital campus. Consideration of specific parking requirements for patients, visitors and hospital employees will allow planning options to be responsive to the necessary distribution of parking as well as total parking capacity.

The City of Hasting's Zoning Ordinance defines the parking requirement for a hospital use as one (1) car per three (3) beds plus one (1) car for every two (2) employees. The existing Medical Services Building (MSB) and Cancer Center are assumed to be business occupancies. City of Hasting's Zoning Ordinance for a business use requires 3.3 cars per 1,000 square feet for buildings less than 60,000 square feet and 3.3 cars per 1,000 square feet of net leasable area for buildings larger than 60,000 square feet. Based on these criteria the minimum required parking of the existing site per the City's Zoning Ordinance is determined to be 927 cars. As proposed the new Medical Office Building (MOB) will be a 48,000-square foot building and will require an additional 159 parking stalls on the site to meet the City's Zoning Ordinance. The total parking requirement inclusive of the proposed MOB will therefore be 1,086 cars. The Zoning Ordinance also requires additional mitigating design features be implemented should the provided on-site parking exceed 110-percent of the minimum requirement. These additional requirements would necessitate increased areas of site landscaping or development of public or common open space within parking areas. The use of permeable pavement design alternatives may also be considered as one of the required mitigating design features. Since implementation of the allowable mitigating design features conflicts with the goal of cost efficiency and effective use of available parking areas site parking planning has been completed assuming 110% of the minimum requirement as the maximum allowable parking. The maximum allowable parking inclusive of the proposed MOB therefore is 1,194 cars.

Typically, City Zoning Ordinances provide criteria for total site parking but do not clearly identify a breakdown of parking requirements necessary to meet peak needs or criteria important to the distribution of parking on the site. To further validate parking requirements, guidelines published by the Facility Guidelines Institute (FGI) and the Institute of Transportation Engineers (ITE) were also considered. The FGI recommendations for hospitals include one (1) car per bed plus one (1) car for each employee during a maximum weekday shift. The guideline for surgery centers is four (4) cars per procedure room plus one (1) car for each employee. The ITE recommendation for the MSB and the proposed MOB is 4.5 cars per 1,000 square feet of building area. This recommendation exceeds the City of Hasting's parking requirement. The recent ITE recommendation is based on 2007 research completed at 50 stand-alone Medical Office Buildings similar in size to the existing MSB and proposed MOB.

The recommended planning criteria for parking considers the City Zoning requirement, the ITE and FGI guidelines and specific detail provided by Mary Lanning Memorial Hospital regarding the number of

peak shift employees, number of physicians as well as the anticipated patient and visitor requirements of the specialty clinic and hospital occupancies. As shown in the table summary the recommended parking capacity breakdown for the six primary healthcare facility occupancies is comparable to the FGI and ITE guidelines. The recommended employee parking requirement has been determined to be 90% of the number of peak shift employees. This factor assumes that 10% of employees will ride share or use alternative transportation. In total the recommended parking requirement exceeds the City Zoning requirement and is within the 110% maximum number as determined by City zoning. The total recommended parking count is 966 for the existing site and 1,172 inclusive of the proposed new Medical Office Building.

PARKING CAPACITY CALCULATION SUMMARY

CITY ZONING REQUIREMENT	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
PATIENTS/VISITORS	85	25			6			
EMPLOYEES	1,200	600			2			
TOTAL AREA		29,000 SF	68,000 SF	13,000 SF			48,000 SF	
LEASEABLE AREA			45,500 SF				32,000 SF	
TOTAL PARKING	625	96	152	43	7	927	159	1086
								MAXIMUM PARKING = 1194
ITE GUIDELINES (MOB)	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
FGI GUIDELINES (HOSP)								
PATIENTS/VISITORS	85	85			6			
EMPLOYEES	500	50			2			
PROCEDURE ROOMS		6						
TOTAL AREA			68,000 SF	13,000 SF			48,000 SF	
TOTAL PARKING	585	74	306	59	7	1031	218	1247
RECOMMENDED PLANNING CRITERIA	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
PATIENTS/VISITORS	85	30	185	15	6		130	
EMPLOYEES (X 0.9)	500	40	87	22	2		62	
PHYSICIANS	14	10	28	6			20	
TOTAL PARKING	549	79	292	41	8	966	206	1172

8.0 RECOMMENDED DISTRIBUTION OF USES

8.1 EXISTING ZONING ORDINANCE

Current zoning designations surrounding Mary Lanning facility include: R-3 Multi-Family Residential, CMP- Health Service. The adjacent map illustrates the boundaries and extents of zoning districts in the area of discussion. Mary Lanning is bounded by a Residential Office zone to the west and south, Commercial Office Non-Retail District Area to the north, Combined Residential and Mult-Family Residential to the east. Mary Lanning facility is zoned as CMP Campus Institutional District. There are no perceived non-conforming uses being envisioned as part of the proposed master plan. Aerial photograph of Mary Lanning.

The neighborhood to the west is reflective of neighborhoods in transition from residential use to more dense and commercial in nature. Many single-family homes have been converted into multi- Family Residential. Uses to the east are primarily residential in nature.

8.2 MASTER PLANNED DISTRIBUTION OF USES

The proposed facility plan is a continuation of established best practice hospital facility planning. Careful study shows today's hospital and cadre of ancillary facilities has followed a similar hub and spoke development model throughout its history. In concept, the inpatient functions and highly specialized care occur at the center, or in the hospital proper with ancillary and support functions, like parking facilities, building services and medical office buildings, concentrically located at the periphery. This arrangement allows convenient public and outpatient access to the higher-activity, more frequently used functions associated with and housed on the grounds of the hospital without having to penetrate deep into the heart of the development. Items such as physician offices and outpatient imaging and testing are located conveniently at the edge with immediate access to parking, major streets and transit facilities. Inpatient functions, typically characterized by longer lengths of patient stay and acute care involving more staff and more equipment, occur at the center of the facility. By allowing vehicular access at the edge and limiting through traffic, the potential for pedestrian/vehicular conflicts is reduced and internal hospital transport of compromised patients can occur horizontally in a controlled healthcare environment without having to traverse streets, or cross at street level.

8.3 EXISTING & PLANNED FACILITY ZONES In addition to planning concerns expressed in the previous section, consideration is also given to respect the livelihoods of the facility's neighbors by organizing hospital activities in a complementary fashion. In looking at the way the current facility is organized, the observation can be made that the more regular business hour operations happen adjacent to the more residential neighbors and the more 24-hour functions occur either at the center of the development buffered by those that cease to operate in the evening, or adjacent to nonresidential neighbors, like the park and businesses to the north. The benefits of such planning concepts mitigate obtrusive noise caused by around the clock operation and emergency services, as well as excessive traffic on neighborhood streets, and parking lot lighting that can be minimal at night to prevent unwanted nighttime light intrusion. As the diagrams indicate, the proposed organization continues this approach. Emergency traffic, such as ground ambulance and activities will continue to be accessed from North Admissions which is off Denver Avenue. The main Emergency Department public entrance and drop-off will continue to be accessed as it is today. New outpatient functions, central plant, and supporting parking facility will be located to the north and west, abutting mixed residential uses

8.4 OPEN SPACE

There is open space built into the parking plans.

8.5 WAYFINDING

This section describes key wayfinding elements around Mary Lanning Healthcare facility for the public and staff. The present plan is part of the master plan for this project. These elements will be further developed as the project progresses. Wayfinding – Key Decision Points and Drop-offs. This wayfinding is circulation routes that will be utilized by the public and staff when heading to Mary Lanning campus.

One key decision point, unique from the others, is located on Denver Avenue. At this location, public access is available onto Denver Avenue, but is not available at the ambulance entrance exit from Denver Street. Access to facility is from the North Admissions area that involves drop-off, parking, or both; South Admissions area, that involves drop-off, parking, or both, and East facility entrance area that involves drop-off, parking, or both. There are multiple access points for staff that do not have drop-off or parking. Access to the Medical Service Building involves drop-off, parking, or both;

Appropriate material and signage are needed to properly convey to the public that the ambulance entrance is not a place of public access. Patient access involves drop-off, parking, or both.

Most of the public parking currently exists on the north end and Southeast end of the facility. Additional public parking will be provided on the north end of the facility and north and east of the Morrison Cancer Center and east of the Pac -2 Children Care Pavilion.

The new parking lots located on the north end of the facility (2019) provides direct access to the outpatient main entrance. Staff and patients can enter/exit the surface parking from Denver Avenue (north and south), from Kansas Avenue (north), and an additional entrance from south end of St. Joseph Avenue. The public parking area east of the Children's Care center "PAC -2" will be accessed from Kansas Avenue.

Major deliveries and truck traffic will access the loading docks west of Mary Lanning hospital off of Denver Avenue. This separation of traffic will minimize blockage of main public access routes and other drop-off locations.

The location and types of signage that will be used to help the public and staff navigate the hospital facility. Located near the intersection of 7th and Denver Avenue is an existing Mary Lanning pedestal sign that will remain. This sign is not so much a wayfinding sign, but rather signifies to the public their arrival at the Mary Lanning campus. Beyond this point, wayfinding signs will be strategically placed to guide the public to their destinations. The types of signs to be used are pedestals and wall-mounted signs.

The existing Mary Lanning pedestal sign on Denver Avenue is a tall pedestals is that one boldly locates the Emergency Department. Pole-mounted signs are represented by private parking, visitor, and contractor parking areas. Entrances to the North Admission area is made noticeable with wall-mounted signage, back-lit so the public can clearly locate the Emergency Department at all hours lighted for easier nighttime visibility and. Near the ambulance entrance, appropriate signage that the access is to prevent public access.

8.5 LIGHTING

The facility outdoor lighting system is well developed, and consists of decorative luminaires and poles. The outdoor lighting system will maintain the standard already developed. The poles will consist of straight-fluted shafts 10 to 14 feet in height, colored black. The luminaires will be decorative acorn style to match the existing Holophane Granville model used throughout the facility. The lighting system will be designed to enhance security and allow for safe movement along paths, sidewalks, roadways, and drive entries. Lighting is controlled by photo sensors and are full cutoff. Target horizontal illumination levels will be 0.5 foot-candles maintained. Outdoor lighting will match the standard established for the hospital facility.

9.0 BUILDING DESIGN STANDARDS

The original hospital Mary Lanning built in 1913 – 1915, with official opening on January 15, 1915 at the corner of St. Joseph and 7th streets established the precedent for the architectural vocabulary that has characterized Mary Lanning facilities for more than 105 years. Over this era, many Mary Lanning visionaries and their chosen design professionals have continued to develop the aesthetic into today's recognizable building brand. Although no two buildings are exactly the same, many of the additions and new facilities possess trademark design elements and a common material palette. Regardless of type of care, number of stories, size or scale, all locations and facilities evoke the feeling of "this is a Mary Lanning facility."

The following discussion identifies common elements and variations indicative of the timeless quality found throughout Mary Lanning Health System's family of facilities.

9.1 EXISTING TYPOLOGIES - BUILDINGS

The landscape of Mary Lanning, like health care, is ever changing and continually growing. In the early 1990's, Mary Lanning began expanding its services to outlying communities. Planned medical office plazas, buildings, and clinics were being constructed. Mary Lanning expansion included a new hospital building, and a supporting medical office buildings. While the existing hospital showcase the design elements of Mary Lanning facilities, they are the face of health care for those community. Facilities currently at the hospital site location include: the hospital, a professional medical office building and clinics, and the facility's central chiller and emergency power plant. Each facility type has different requirements of access/entry for the public and staff, visibility, security, privacy, and service. Along with these requirements, consistent building elements have been established from existing building typologies that will continue as the facility continues to evolve and expand.

TYPOLOGIES - BUILDING VOCABULARY AND FEATURES Typically, Mary Lanning buildings are constructed with a common material palette. The building's size, scale, climate, and use will affect the amount of each material used. Although strong and iconographic, not all identifiable design features will be incorporated into each new facility. However, the design of a new Mary Lanning building will have a material palette, including a few consistent building elements, as the baseline. Typical design elements include: stepped pediments, stepped parapets with flat roofs, and relief in the brickwork, inset corners at the building edges, columns and pilasters, patterned window arrangements in lobbies and entrances.

MATERIAL USE - Mary Lanning building palette embodies three primary materials: Precast concrete panels, anodized aluminum window frames and tinted glazing systems, and grey-white colored exterior insulation finish system (EIFS). Other complementary building materials have been introduced into the palette at different facilities, including: stone, architectural precast concrete. They have been utilized for their effect, appropriateness and durability. The grey-white colored exterior insulation finish system (EIFS) has been, and will continue to be, the signature material symbolizing Mary Lanning buildings. It is the primary and most used building material. The arrangement of the panels can be characterized in a simplistic large planar arrangement that incorporates soldier coursing at floor breaks, and window head and sill conditions. It is best utilized at areas of buildings that require little to no transparency and protection from public visibility. Openings are usually oriented vertically (tall and narrow). Typically, entrances and lobbies maximize the use of window and glass systems for their transparency, but more importantly as a wayfinding element for the public to find the "front door." In addition, where possible, these systems are utilized along public corridors fronting exterior walls, again to aid as a wayfinding element. Having exposure to natural light is important for patients admitted for extended stay and recovery. Patient rooms capture natural light, but at a smaller scale. Privacy and screening are factors when determining opening sizes and placement. Exterior insulation finish systems (EIFS) are used as the primary building cap and parapet elements. Mary Lanning architects use EIFS for its flexibility to create multiple shapes and profiles, efficient cost, and because it is a light, durable building material.

9.2 LANDSCAPE AND DRAINAGE FEATURES

Mary Lanning Health System successfully implements landscape elements to enhance the aesthetics of its facilities. Landscape features are designed and maintained to provide a link between the built and natural context within which they reside. Beyond streetscapes, Mary Lanning landscape elements combine areas of hard and softscapes for a variety of purposes including beautification, external auto and pedestrian circulation, recreation, and respite. For example, landscapes can reduce or eliminate storm water discharges from built improvements, while improving water quality. Landscape plantings,

especially trees, improve air quality and mitigate heat islands by reducing or shading impermeable surfaces such as asphalt and concrete. Strategies can include incorporation of permeable paver systems and bio-retention planter areas. Native and drought-tolerant plantings, such plantings are used in combination with more traditional turf type landscaping at many of Mary Lanning facilities. Throughout the Mary Lanning Health site, differing climate conditions afford opportunities for a variety of approaches for landscape treatments. Incorporating climate and region-appropriate landscape treatments help conserve water while also helping to reduce operating and maintenance costs. Permeable pavers and bio-retention designed into pedestrian circulation. The environmental benefits of site landscapes are less evident than the obvious aesthetic appeal of well-landscaped sites. Mary Lanning has in the past used several runoff infrastructure practices that mimic natural habitats and absorb excess water. These include permeable pavements, bioretention cells (or bioswales), vegetative swales, infiltration trenches, and garden catching filtration. Using decorative gardens that catch the stormwater, and allow for filtering of the water, that encourage the infiltration and reduce excessive runoff. Mary Lanning has plans for future parking and building projects that will include the will include use of several runoff infrastructure practices at the time of project permitting.

10.0 SUSTAINABLE BUILDING PRACTICES

One of the most important parts of creating a successful, sustainable facility is the internal elements that are not always visible. Mary Lanning Heath System is particularly interested in taking such elements into consideration in order to improve energy efficiency and provide a high quality indoor environment for both staff members and patients. Mary Lanning Healthcare pursues efficiency through both design and operational practices. Hospitals and healthcare buildings typically have some of the highest energy intensities of all other building types. Due to the high energy use, utilities can be a substantial operating cost. To mitigate this cost, Mary Lanning designated design and operational staff to pursue efficiency whenever possible. During the design phase at the Medical Office Building, extensive design efforts resulted in substantial energy savings. Reducing energy use at its facilities not only helps Mary Lanning, but it also helps preserve the health of the environment and its inhabitants. Beyond saving energy to improve the natural environment, Mary Lanning is also focused on providing a high quality, healthy indoor environment within their facility. In order to provide such environment, designs must be centered on the incorporation of natural light, clean filtered air, and providing a connection to nature. The materials used in the facility are selected upon a criteria of durability, ability to increase air quality, and cleanliness to lessen the spread of bacteria. The conservation of energy, incorporation of nature indoors, and meticulous material selection all work cohesively to create an indoor setting that utilizes the positive effects of nature on personal and environmental health. As previously mentioned in the Landscape Features section a variety of best practice storm water control features have previously been introduced at Mary Lanning facilities including at the hospital. Planning for future low impact, sustainable storm water development at the facilities will be included in the overall planning process. This process will include, but will not be limited to the following design principles for storm water management.

- Understand the site and its watershed setting context. This step should include gaining better understanding of local hydrological features, such as water table depth, design storm flows, and floodway impacts for example.
- Apply conservation design. Working within the context of an urban setting, appropriate building and landscape interactions can be explored to minimize the impacts from development on natural and man-made hydrology.

- Manage rainfall where it originates. Landscape and architectural features should be designed to retain and absorb water onsite, rather than convey it away.
- Design with construction and maintenance in mind. Systems should be evaluated for their proven track record and durability
- Calculate runoff volume and water quality. Total volumes and quantities should be compared against existing and proposed design solutions.

11.0 DEVELOPMENT PHASING Mary Lanning plans to maintain and develop its current facilities in Hastings, although exact timing of the projects will be somewhat dependent on philanthropic involvement from the community and hospital board approvals, a conceptual phasing sequence is articulated in the following section.

The timing of each phase is relative to the issuance of the submission date of this document and denotes potential construction start dates.

Phase 1:

Ambulance Storage building – Anticipated start of this project is November 2020.

Building to house three (3) ambulances to protect from weather and provide higher level of security for the vehicles. This building will be directly north of the Ambulance Headquarters located at 744 North Hastings Ave. Anticipated start of this project is November 2020.

Medical Office Building – Anticipated Start Date: 6 months – 2 years

Phase 1 will include construction of a new medical office building directly connected to the existing Medical Service Building located east of main hospital, south of the Morrison Cancer Center at 715 N. Kansas Avenue. The currently entitled facility is a three-story building with below-grade basement floor. The building will house physician clinics and is planned to connect to the Medical Service Building on each floor at the elevator lobby. Also included in this phase will be the demolition of existing Mary Lanning owned properties to the north and east of the existing hospital in order to make room for the surface parking needed to replace the parking sacrificed for the building footprint. Addition of the planned Medical Office Building expansion of the Medical Services Building, gives Mary Lanning the flexibility to centralize some of the outlying clinics.

Phase 2: Boiler Central Plant Relocation – Anticipated Start Date: 1-3 years

The building will house boiler and facility maintenance related shops / offices and is planned to connect to the main hospital via underground utility tunnels or sky bridge.

Phase 3 activities will include the demolition of the existing central boiler plant, after the completion of the new central plant between Kansas and Hasting Avenue. The new central plant is planned to be integrated into the existing Central Chiller / Emergency Power plant facility, and will connect to the existing and expanded hospital via underground utility tunnels or sky bridge. Moving the central boiler plant to Denver / Hastings Avenue provides additional valuable high usage patient space for potential modernization and renovation of the main hospital emergency department, laboratory and imaging area.

Phase 3: Existing Hospital Renovations – Anticipated Start Date: 5-7 years.

The third major phase of construction planned as part of this master plan will be extensive remodels of the existing emergency department on 1st floor.

It is anticipated this will take many interim logistical phases to complete once the expansion is complete and can be used for temporary swing space. This phase will most likely be confined to interior remodels of the existing buildings and development of an improved emergency room entry to be located adjacent to the existing North Admissions entry.

Phase 4: Existing Hospital Renovations – Anticipated Start Date: 5-7 years.

The fourth and final major phase of construction planned as part of this master plan will be extensive remodels of the existing hospital 5th floor. It is anticipated this will take many interim logistical phases to complete once the expansion is complete and can be used for temporary swing space. This phase will most likely be confined to interior remodels of the existing buildings.

- Need to convert to private rooms.
- Update finishes to latest standards
- Indoor air quality

Future Phases: The planning team has included conceptualized possible locations for future construction as a potential starting point for planning beyond the scope of this current plan. The locations illustrated, size, and uses are all subject to change as future demands are currently unknown.

- Medical Services Building
 - Elevator modernization
 - Removal or replacement of chiller plant
- Visitor Entrance Lobby
 - Remodel to latest standards
- Improvement of Garden View Grill
- Other Space Needs
 - Emergency department
 - Surgery / PACU
- Electrical System Updates
 - Safety issues with old panels
 - Surgery Isolated Power Panels
- High Rise Code Requirements
 - Elevator control system upgrade
- Lighting Updates
 - Parking lot lighting

- Develop a 10 year capital plan for facility improvements
- Determine the new location for the Lab
- Prioritize infrastructure improvements
 - Energy/ Plant
- Purchase strategic properties

12.0 IMPROVING NEIGHBORHOOD CONNECTIVITY As illustrated in the body of this document, Mary Lanning Health System is deeply committed to improving the health of the region. Hospitals must engage their communities when it comes to plans for growth and development. Likewise, communities must engage hospitals—their anchor institutions—in the decisions that shape the neighborhood. In the former case, a hospital representative is being part of the City of Hastings Parking and Traffic council, or become a member of a local planning commission. Having community members attend planning meetings and play an active role in the public process completes this two-way street. It is critical to build trust and collaboration with adjacent neighborhoods and find ways of providing true community benefit.

A tried-and-true key to success: plan ahead. Experience has shown, hospitals do not always expand according to plan. Instead, expansion comes when opportunity arises—either when a donor makes funding available, or when a temporary solution becomes untenable, such as leasing off-campus space. By contrast, when hospitals create a 15- or 10-year strategic plan, it becomes possible to evaluate specific sites within a larger framework and a set of defined goals. Such a framework might address shifting service models, expansion or contraction, lease timelines, costs of land development, impact on the community. Hospitals are in positions of power to dramatically shape neighborhoods, and it is deeply important for them to outline in advance how they will function as good neighbors. Once a clear path is charted for these and other themes, determining the highest and best use of a property becomes much easier. We must develop symbiotic relationships with their surrounding neighborhoods. By doing so, there is tremendous opportunity for hospitals to remain competitive while becoming true engines for community and economic development.

APPENDIX

The documents attached as part of this appendix are included for additional relevant detail and are referenced in the appropriate sections of the greater document. Additional materials provided include:

DATE 10/27/20

FILE NO. PDA-2020-050


HASTINGS
 DEVELOPMENT SERVICES

PROJECT APPLICATION

 City of Hastings – Development Services
 220 N. Hastings Avenue, Hastings, NE 68901
 Phone: (402) 461-2302; Fax: (402) 461-2304
 www.cityofhastings.org

Please check the appropriate box below to indicate the type of application you are requesting. Contact Development Services for minimum requirements. Incomplete applications will not be processed. All applications must be completed by applicant prior to submission with all of the requested support materials by the last Monday of each month or they will be held until the next deadline to be processed.

- | | | | |
|---|---|--|--|
| ☐ Preliminary Plat | ☐ Final Plat | ☐ Short Plat | ☐ Administrative Plat |
| ☐ Code Amendment | ☐ Zoning Change | ☐ Vacation (Plat / ROW / Easements) | |
| ☐ Conditional Use Permit / Amendment | ☒ Planned District / Amendment (Master Plan - Campus) | | |
| ☐ Comprehensive Plan / Amendment | ☐ Annexation Petition / Addition to the City | | |

PROJECT INFORMATION

Project Name: Mary Lanning Healthcare Ass. (MLHA)

Project Address: Various Within City Limit ☒ Yes ☐ No

Existing Zoning: R-3&CMP Proposed Zoning / Use: Rezone 1 R-3 lot to CMP & update Master Plan w/ New uses

Existing Comprehensive Plan Designation: _____ Gross Area: _____

Legal Description: _____ Number of Lots: 1 Rezone

APPLICANT INFORMATION

Applicant: Eric Barber Company: MLHA

Address: 715 N. St Joseph Ave Tel: 402-984-4181 Fax: _____

City: Hastings State: NE Zip: 68901 Email: Steven.Ardiana@MaryLanning.org

Property Owner: Same as above Company: _____

Address: _____ Tel: _____ Fax: _____

City: _____ State: _____ Zip: _____ Email: _____

Key Contact: Steven Ardiana Company: _____

Address: _____ Tel: _____ Fax: _____

City: _____ State: _____ Zip: _____ Email: _____

I hereby acknowledge that all information provided with this application is true to the best of my knowledge.

Property Owner Signature

Date

Applicant Signature

Date

DEPARTMENTAL USE ONLY
Fees: 400⁰⁰Receipt No. DS1-90519Accepted by Staff: _____ Case No. 2020-050

Signature

City of Hastings
220 N. Hastings Avenue
Hastings NE 68901

Payee: MARY LANNING HEALTHCARE

Date: 10/27/2020 Time: 3:24 PM

Receipt Number: DS1 / 90519

Clerk: TERI

ITEM	REFERENCE	AMOUNT
ZONE PLAN MOD		
Zoning Fees		400.00
Total:		400.00
assor	#473377	400.00
Change:		0.00

W 9TH STREET

Mary Lanning Memorial Hospital Association
also known as Mary Lanning Memorial Hospital

Lincoln
1221 N Street, Suite 600
Lincoln, NE 68502
Phone 402-475-9722
Fax 402-475-9722
Vermillion
15 East Main, Suite 201
Vermillion, NE 68582
Phone 605-824-1081



- Zone: CMP
Owner: Mary Lanning
- Zone: R-3
Owner: Mary Lanning
- Proposed Zone
Change: R-3 to CMP
Owner: Mary Lanning
- Zone: R-3
Owner: Other
- Zone: C-0
Owner: Other

NEW USES
PROPOSED

N COLORADO AVENUE

N KANSAS AVENUE

N DENVER AVENUE

N HASTINGS AVENUE

W 7TH STREET

1 Site Plan
Scale 1" = 50'

Mary Lanning
Memorial
Hospital
Association
also known
as Mary
Lanning
Memorial
Hospital

CLIENT INFORMATION
Mary Lanning
Memorial
Hospital
Association
Hastings, Nebraska

PROJECT INFORMATION
Mary Lanning
Memorial
Hospital -
Master Plan

Job # unassigned

ISSUE DATE 11-3-2020

REVISIONS

NO. DATE DESCRIPTION

CHECKED
AUTHOR
DATE

DESIGNED
DATE

SHEET TITLE

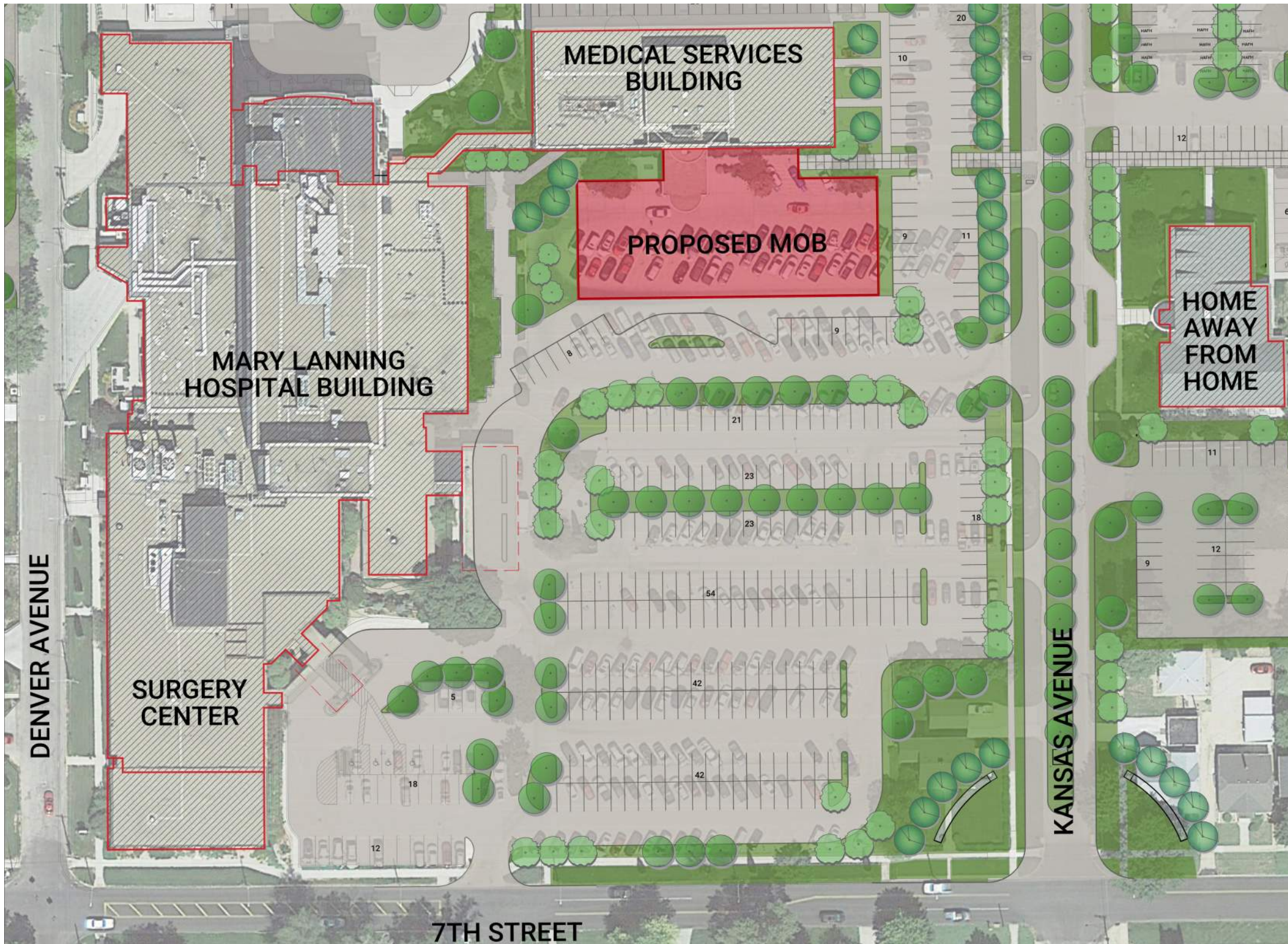
Proposed
Zoning
Change
Property Map

SHEET NUMBER

C-103

Mary Lanning Memorial Hospital

April 26, 2018 – REVISED JUNE 22, 2018



listen.DESIGN.deliver

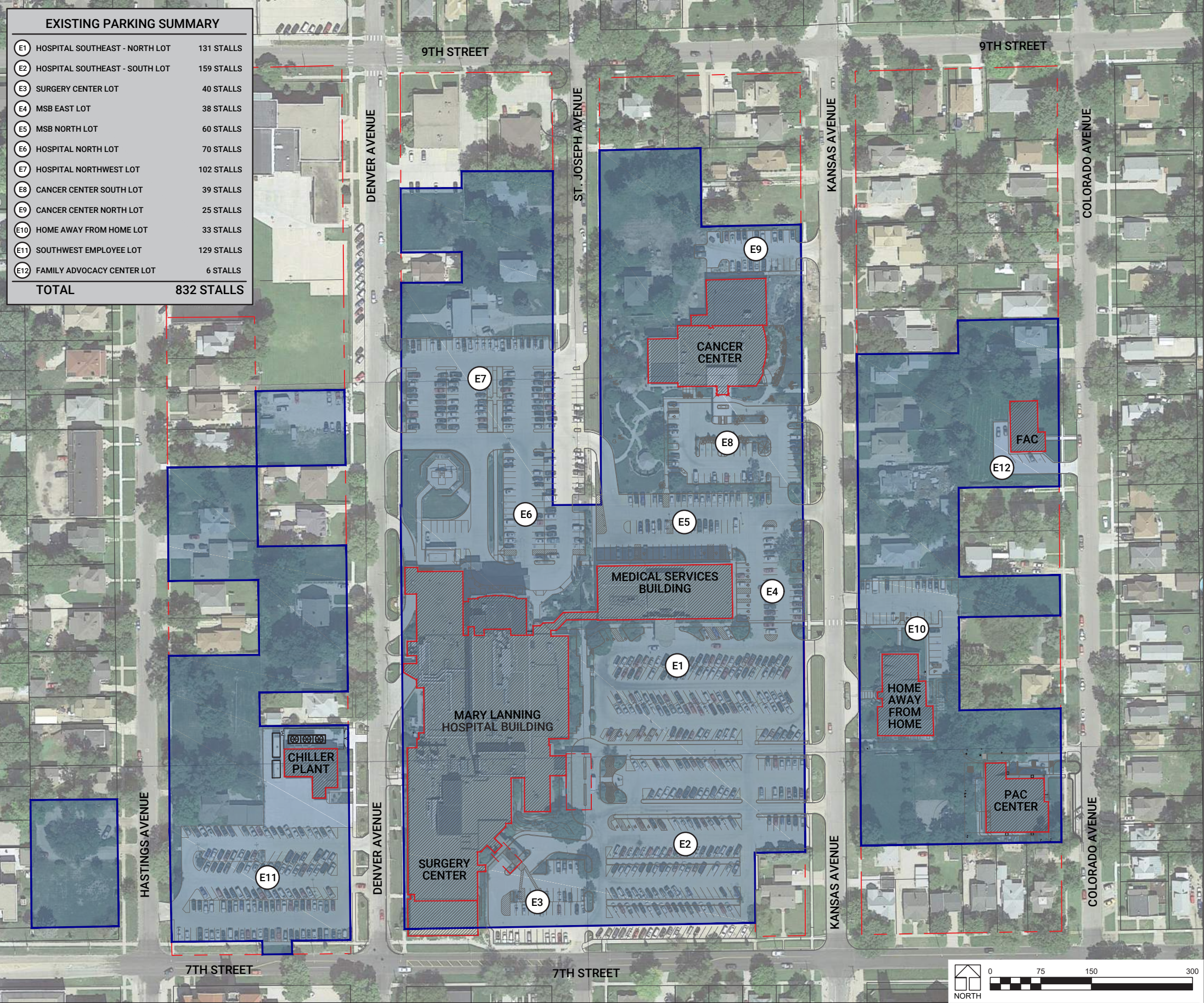
PLANNING GOALS AND STUDY AREA

The DLR Group planning process began with confirmation of the goals for the site parking evaluation and master plan. We understand the scope of the planning study to be inclusive of the existing hospital campus site in conjunction with the continued acquisition of residential properties contiguous to the existing hospital campus. The site parking planning master plan study area includes the existing hospital campus bounded by 7th Street on the south and 9th Street on the north and Kansas Avenue on the east and Denver Avenue on the west. Additional properties acquired by the hospital to the west side of Denver Avenue and to the east side of Kansas Avenue are also considered in the master plan.

Specific planning goals include the following:

- Development of a site parking and circulation master plan that can be implemented through phases, providing flexibility in build-out of the master plan in alignment with available funding.
- Improve overall traffic circulation, simplified wayfinding and improve safety for vehicles and pedestrians on the hospital campus.
- Provide an improved and visible main entrance to the campus.
- Improve parking efficiency of the existing campus.
- Comply with zoning requirements for parking capacity, layout and landscaping per the City of Hastings.
- Provide a plan that accommodates areas of construction for a proposed new Medical Office Building and meets the increased parking requirements for the new building.
- Provide a plan that is cost efficient and allows for phased implementation and flexibility for continued growth of hospital facilities.
- Maintain existing emergency and patient admissions entry on the north and the primary hospital visitor entry to the east; while developing a clearer circulation path for travel from the north side of the campus to the east side of the campus.
- Maintain visibility of the main Hospital building from 7th Street.
- Provide a plan that limits conflicts between parent drop-off operations before and during school at Longfellow Elementary School (located at the northwest corner of the site) and Hospital patrons.





EXISTING PARKING FACILITIES

The existing hospital campus provides a total parking capacity for 832 vehicles. This includes the main campus, 129 parking stalls west of Denver Avenue, 33 parking stalls adjacent to the Home Away from Home facility and six parking stalls near the new Family Advocacy Center facility on the east side of Kansas Avenue. The existing campus map summarizes the parking counts for each area of the site; and highlights portions of the site that are owned or have recently been acquired by the hospital.

PARKING CAPACITY EVALUATION

Determination of the required parking counts of the Mary Lanning Hospital campus necessitates an understanding of the City of Hastings zoning requirements as well as available research data and parking recommendations documented for healthcare facilities. Development of a site parking master plan also requires an understanding of the specific and unique parking needs of various healthcare services and buildings on the hospital campus. Consideration of specific parking requirements for patients, visitors and hospital employees will allow planning options to be responsive to the necessary distribution of parking as well as total parking capacity.

The City of Hasting’s Zoning Ordinance defines the parking requirement for a hospital use as one (1) car per three (3) beds plus one (1) car for every two (2) employees. The existing Medical Services Building (MSB) and Cancer Center are assumed to be business occupancies. City of Hasting’s Zoning Ordinance for a business use requires 3.3 cars per 1,000 square feet for buildings less than 60,000 square feet and 3.3 cars per 1,000 square feet of net leasable area for buildings larger than 60,000 square feet. Based on these criteria the minimum required parking of the existing site per the City’s Zoning Ordinance is determined to be 927 cars. As proposed the new Medical Office Building (MOB) will be a 48,000-square foot building and will require an additional 159 parking stalls on the site to meet the City’s Zoning Ordinance. The total parking requirement inclusive of the proposed MOB will therefore be 1,086 cars. The Zoning Ordinance also requires additional mitigating design features be implemented should the provided on-site parking exceed 110-percent of the minimum requirement. These additional requirements would necessitate increased areas of site landscaping or development of public or common open space within parking areas. The use of permeable pavement design alternatives may also be considered as one of the required mitigating design features. Since implementation of the allowable mitigating design features conflicts with the goal of cost efficiency and effective use of available parking areas site parking planning has been completed assuming 110% of the minimum requirement as the maximum allowable parking. The maximum allowable parking inclusive of the proposed MOB therefore is 1,194 cars.

Typically, City Zoning Ordinances provide criteria for total site parking but do not clearly identify a breakdown of parking requirements necessary to meet peak needs or criteria important to the distribution of parking on the site. To further validate parking requirements, guidelines published by the Facility Guidelines Institute (FGI) and the Institute of Transportation Engineers (ITE) were also considered. The FGI recommendations for hospitals include one (1) car per bed plus one (1) car for each employee during a maximum weekday shift. The guideline for surgery centers is four (4) cars per procedure room plus one (1) car for each employee. The ITE recommendation for the MSB and the proposed MOB is 4.5 cars per 1,000 square feet of building area. This recommendation exceeds the City of Hasting’s parking requirement. The recent ITE recommendation is based on 2007 research completed at 50 stand-alone Medical Office Buildings similar in size to the existing MSB and proposed MOB.

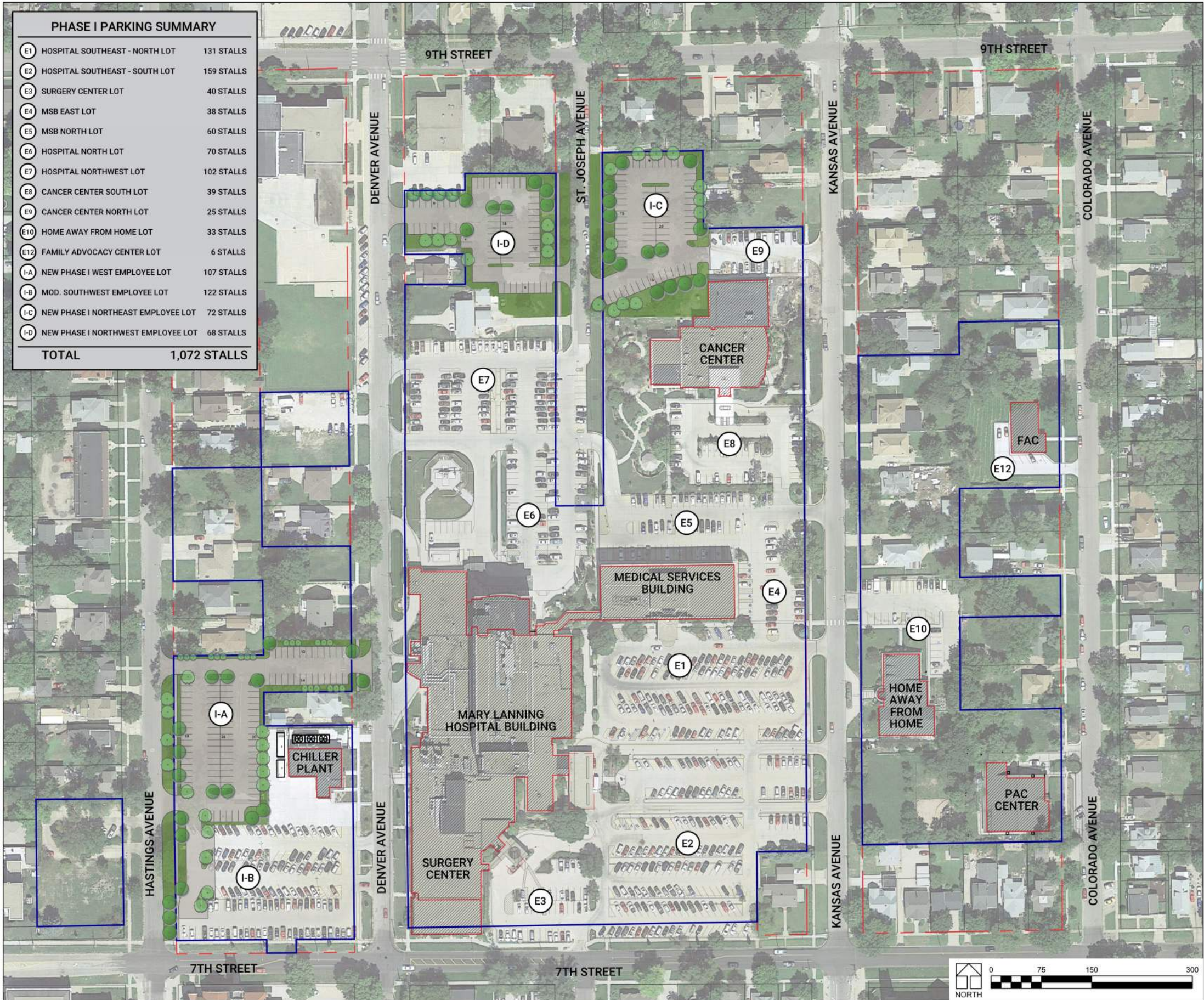
The recommended planning criteria for parking considers the City Zoning requirement, the ITE and FGI guidelines and specific detail provided by Mary Lanning Memorial Hospital regarding the number of peak shift employees, number of physicians as well as the anticipated patient and visitor requirements of the specialty clinic and hospital occupancies. As shown in the table summary the recommended parking capacity breakdown for the six primary healthcare facility occupancies is comparable to the FGI and ITE guidelines. The recommended employee parking requirement has been determined to be 90% of the number of peak shift employees. This factor assumes that 10% of employees will ride share or use alternative transportation. In total the recommended parking requirement exceeds the City Zoning requirement and is within the 110% maximum number as determined by City zoning. The total recommended parking count is 966 for the existing site and 1,172 inclusive of the proposed new Medical Office Building.

PARKING CAPACITY CALCULATION SUMMARY

CITY ZONING REQUIREMENT	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING		REQD PARKING	
	PATIENTS/VISITORS							
	EMPLOYEES							
	TOTAL AREA							
	LEASEABLE AREA							
	TOTAL PARKING							
MAXIMUM PARKING = 1194								
ITE GUIDELINES (MOB) FGI GUIDELINES (HOSP)	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING		REQD PARKING	
	PATIENTS/VISITORS							
	EMPLOYEES							
	PROCEDURE ROOMS							
	TOTAL AREA							
	TOTAL PARKING							
RECOMMENDED PLANNING CRITERIA	HOSPITAL	SURGERY CENTER	MEDICAL SERVICES BLDG	CANCER CENTER	HOME AWAY	TOTAL EXISTING SITE	MEDICAL OFFICE BLDG	TOTAL W/ NEW MOB
	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING	REQD PARKING		REQD PARKING	
	PATIENTS/VISITORS							
	EMPLOYEES (X 0.9)							
	PHYSICIANS							
	TOTAL PARKING							

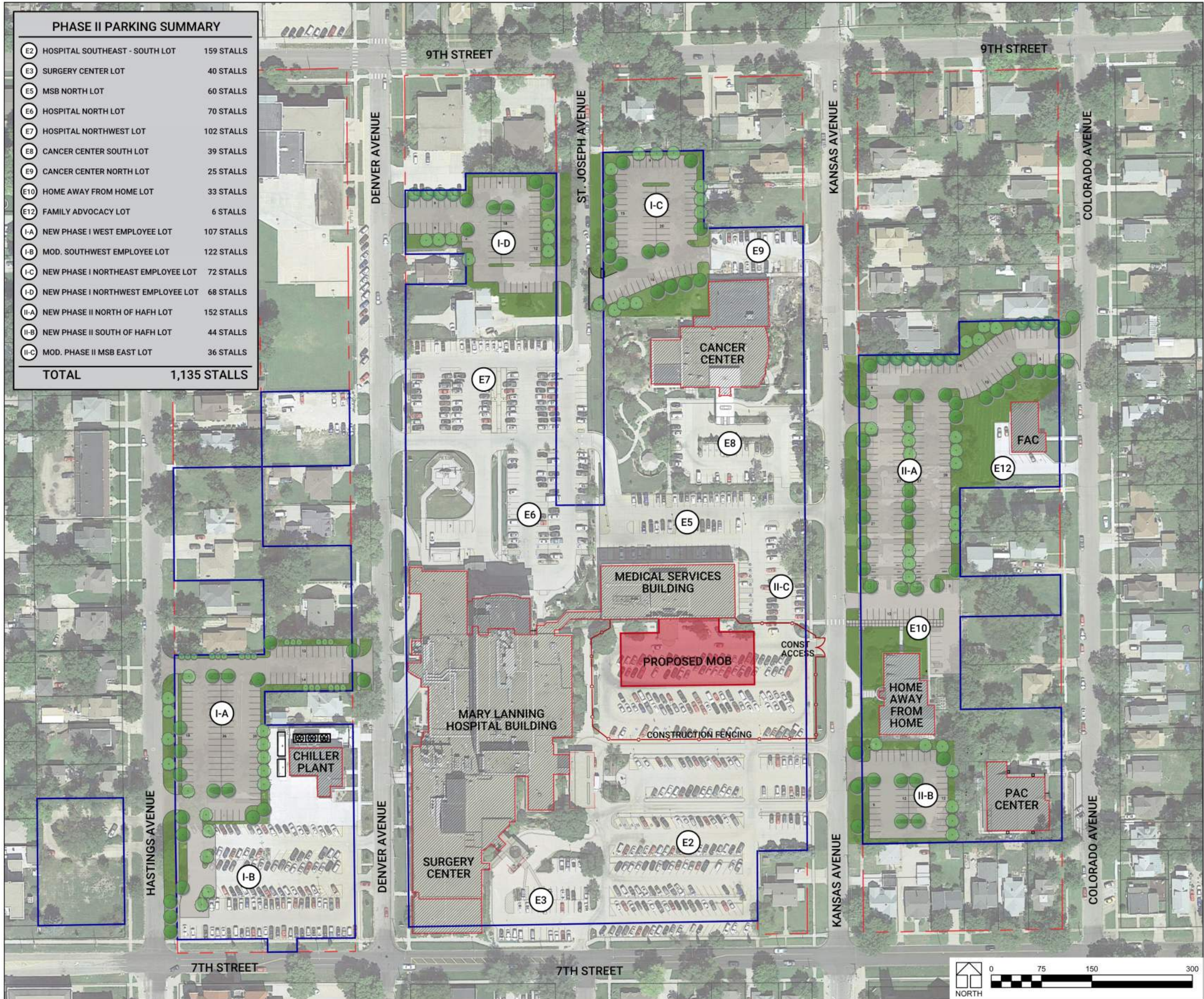
PHASED IMPLEMENTATION OPTIONS

One of the important goals of the Mary Lanning Hospital parking master plan is the development of a plan that will allow for implementation in phases. A phased plan is necessary to allow compliance with available funding and to provide flexibility for plan implementation; and for coordination of future site construction projects. The need for expanded parking capability and a preference to provide patient and visitor parking in the closest proximity to their preferred building entrance locations also requires that designated parking areas for employees be established. Designated employee parking areas will be defined in the first phases of implementation and will be maintained through all future phases of parking expansion.



PHASE I

The first phase of construction will provide an additional employee designated parking area. Parking Lot I-A, providing an additional 107 parking stalls, will be constructed between the existing chiller plant and Hastings Avenue. Construction of Lot I-A also includes the reconfiguration of the western end of existing Lot E11 (resulting in a loss of 7 parking stalls within the lot, becoming Lot I-B) by eliminating the access drive to Hastings Avenue, which is located too near to the intersection with 7th Street. The new parking lot will include the construction of two access drives to Hastings Avenue and one access drive to Denver Avenue. The driveway modifications will improve traffic circulation for employees in this area of the campus. As construction of the new MOB begins, existing parking will be displaced, so Phase I also considers the construction of two additional parking areas towards the northern end of the hospital campus. Parking Lots I-C and I-D will increase the total site capacity by an additional 140 stalls for a total site parking capacity at the end of Phase I construction of 1,072 parking stalls. The added capacity will provide the opportunity to shift employee parking away from the hospital visitor parking area which will be impacted by the construction of the MOB.

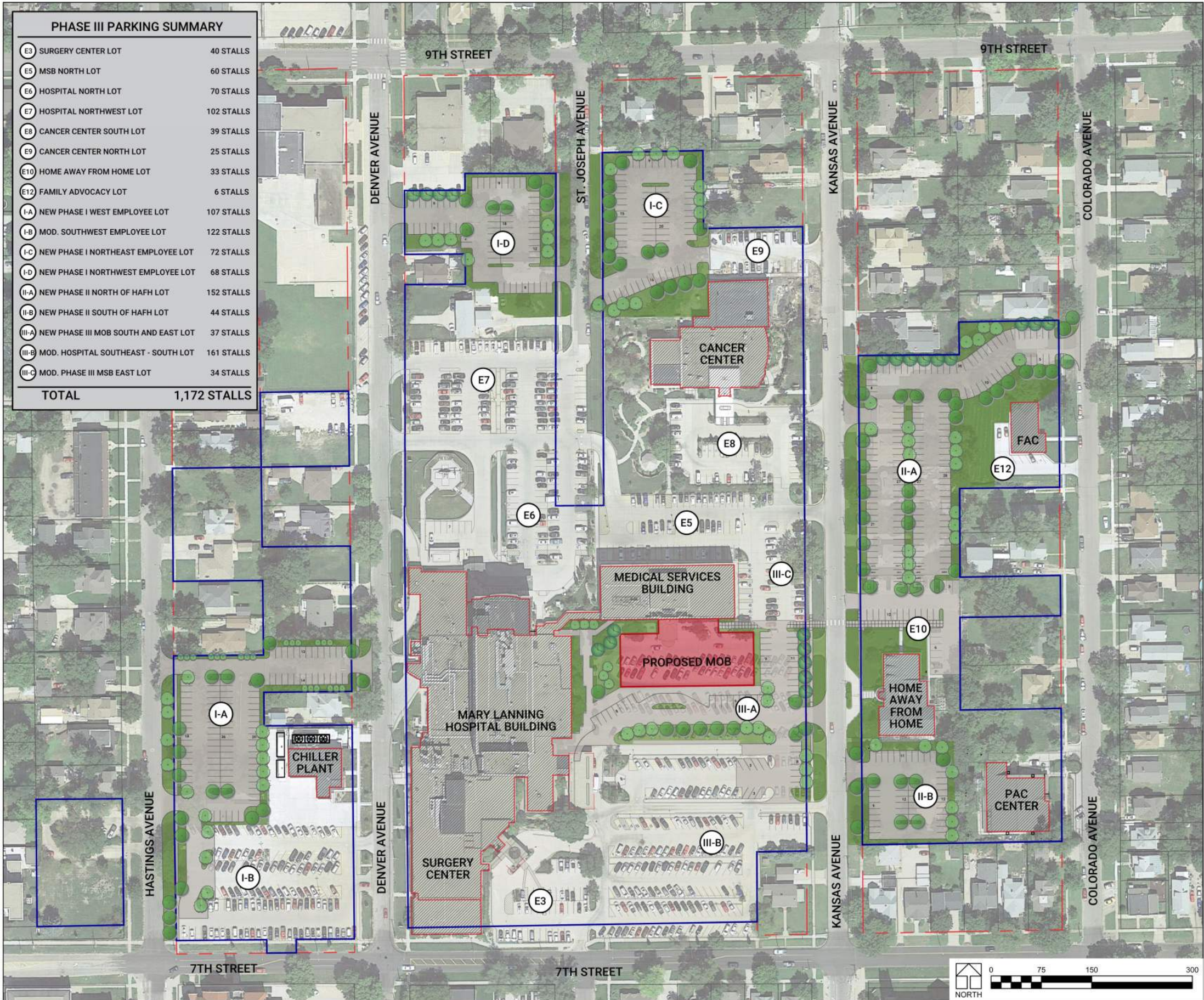


PHASE II

The suggested Phase II implementation plan will provide the necessary site area for a proposed new Medical Office Building (MOB), an area required for a construction staging zone, and includes the construction of additional parking areas on the east side of Kansas Avenue. During the construction time frame of the MOB, 133 parking stalls will be displaced on the south and east sides of the existing Medical Services Building, temporarily reducing the total site parking capacity (after Phase I construction) to 939 parking stalls. Construction of Lots II-A and II-B will add 196 parking stalls near the existing MSB; bringing the total site capacity to 1,135 parking stalls. The parking indicated on Phase II meets the City's zoning requirements for the site (including the required parking needed to serve the new MOB construction) while staying beneath the 110% threshold for additional landscaping requirements. The parking is however slightly lower than the DLR Group recommended parking of 1,172 for the overall campus; but increases the total parking count from existing conditions by 303 parking stalls. Construction of the Phase II parking indicated will adequately provide parking for the Hospital Campus while construction for the MSB is underway. The anticipated construction timeline is scheduled to be a duration of twenty months.

In addition to the site parking capacity another consideration with the Phase II MOB construction plan is the need to provide adequate parking and convenient access for hospital visitors and Medical Service Building patients. The recommended parking capacity for hospital visitors is 85 and for MSB patients is 185. This combined parking capacity will be served with designated hospital visitor parking on the east side of the hospital and on the south and north sides of the existing MSB.

Providing convenient patient access to the existing MSB during construction of the proposed Medical Office Building will also require improvements to the north MSB entrance and construction of a new temporary entrance near the southwest corner of the MSB.



PHASE III

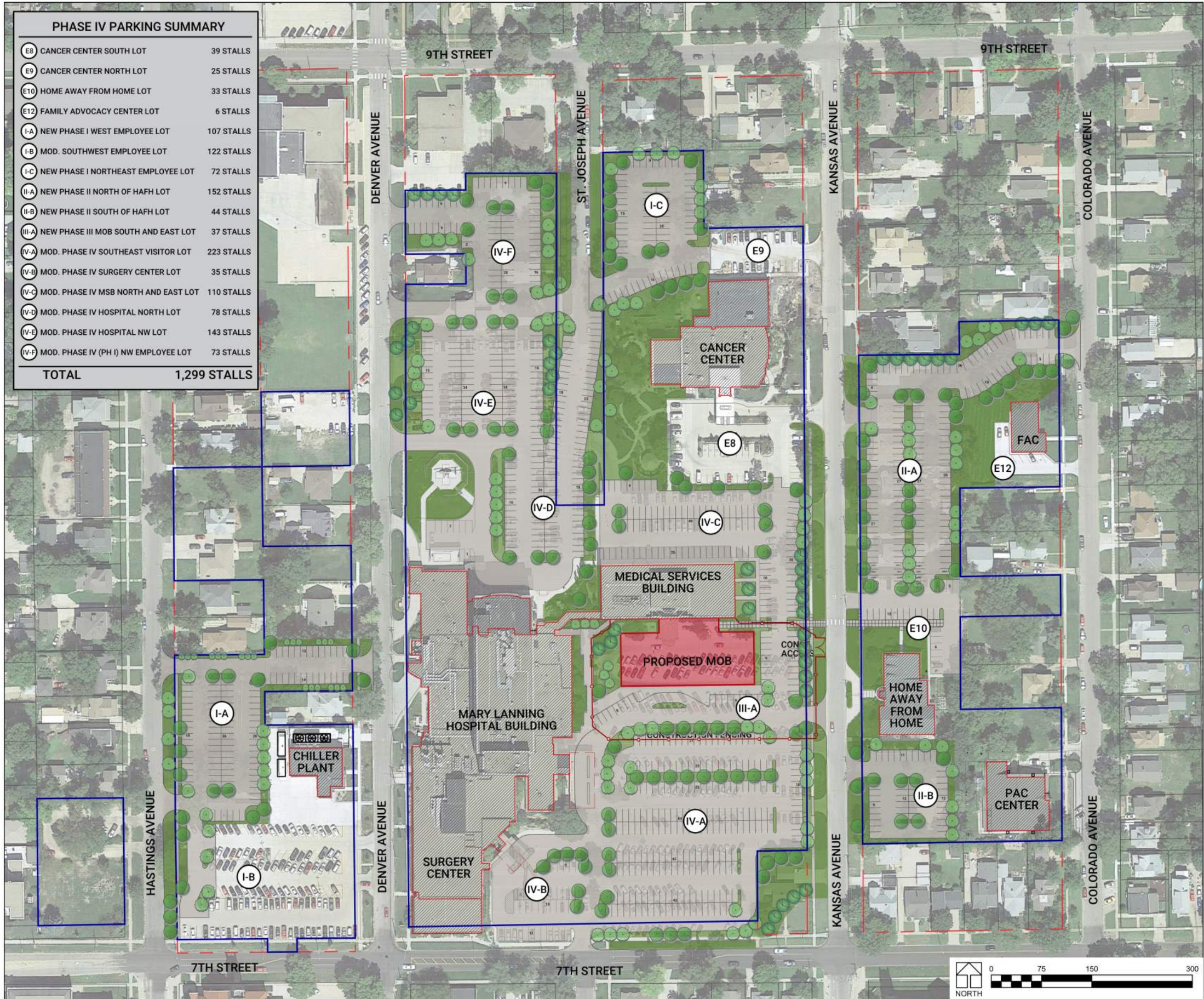
Phase III site development is planned to be constructed concurrently with completion of the proposed new Medical Office Building. Completion of Phase III will provide an additional parking capacity of an additional 37 parking stalls (all located in direct proximity to the new MOB) and results in a total of 1,172 parking stalls on the site. This total parking capacity meets both the City of Hastings's zoning requirements and the recommended requirements associated with the new Medical Office Building and the hospital.

The parking construction included in Phase III will include some minor reconfiguration in the northeast corner of the existing hospital southeast parking area, and construction/ modification of parking around the new MOB and on the east side of the existing MSB. The parking completed at the end of Phase III and after completion of the MOB meets the recommended requirements, and maintains much of the existing southeast parking lot as is. This gives the hospital the flexibility to implement future parking renovations of the existing parking lots to improve circulation and landscaping without significantly hindering the daily operations of the hospital.

Completion of Phase III provides a parking capacity of 292 parking stalls within the parking lots located south of the new MOB and north and east of the existing MSB (located west of Kansas Avenue). With the assumption that employee parking will be in other designated areas this capacity will meet the recommended parking requirements for hospital visitors and MOB and MSB patients exclusive of additional parking areas (II-A and II-B) indicated on the east side of Kansas Avenue.

Phase III site development will also include development of a well-defined pedestrian crosswalk on Kansas Avenue enhancing safe access to the parking area on the east side of Kansas Avenue.

Parking areas and access drives on the south side of the new Medical Office Building will be planned and constructed to align with future parking area improvements on the east side of the hospital building. Improved site signage will be developed to improve way finding, reserve designated patient and visitor parking and coordinate with the master site development plan.



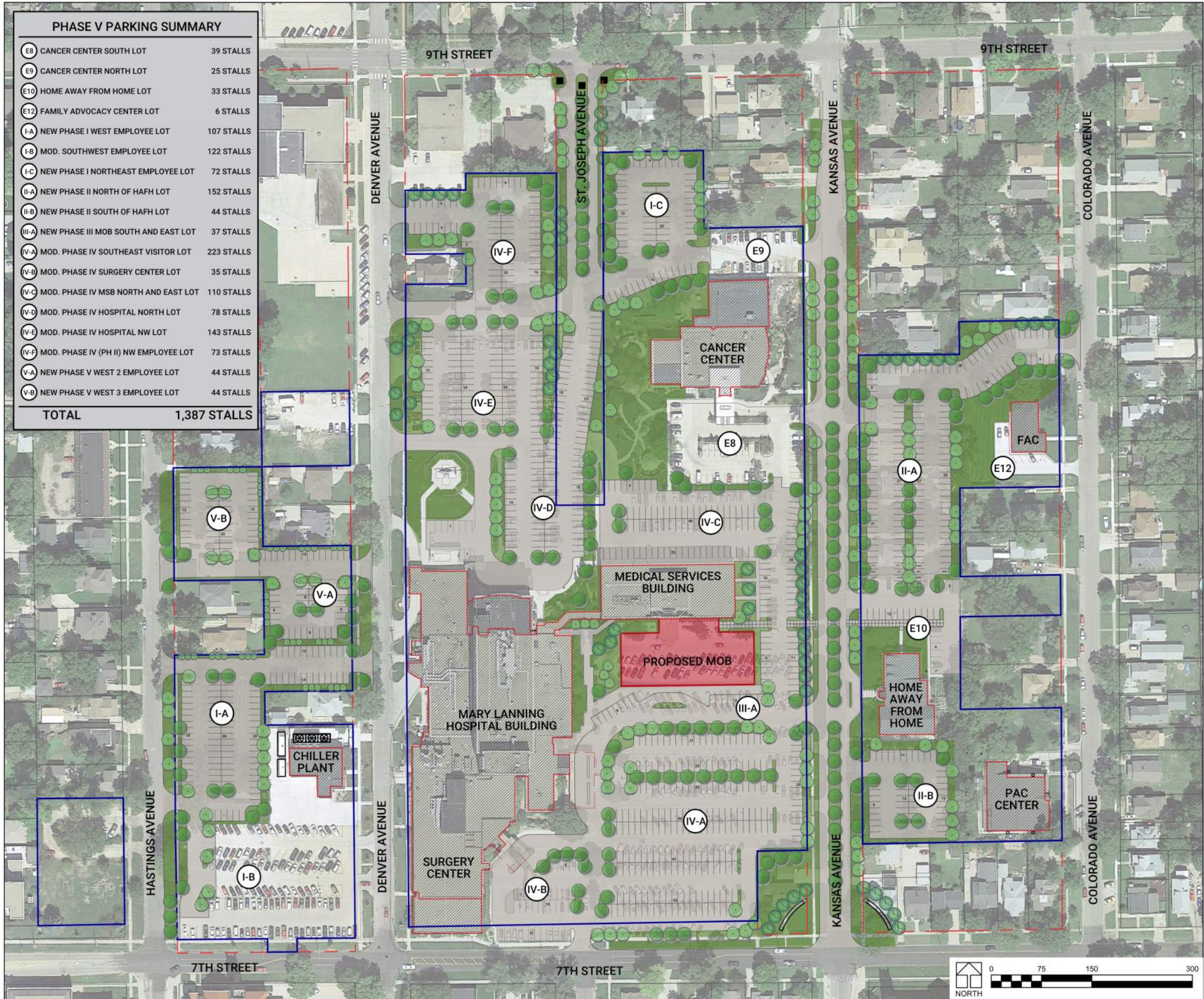
PHASE IV

Phase IV parking and site development will reconstruct the existing parking areas north of the hospital's north entrance, the southeast visitor parking lot, and the parking areas north and east of the existing Medical Services Building. Completion of this construction phase will increase additional parking capacity and improve vehicular and pedestrian circulation for the entire medical center campus.

Completion of Phase IV will also complete a new east/west vehicle connection access across the site north of the Cancer Center. This site circulation option provides improved campus vehicle circulation and eliminates the current traffic conflicts occurring during the afternoon traffic staging at Longfellow Elementary School. The incorporation of this east-west connection across the northern end of the Hospital campus provides for a distinguishable path to traverse unimpeded from the northern parking areas to the eastern parking areas. This new driveway configuration also requires the reconfiguration of the driveway connection points constructed in Phase I at parking Area I-D, modifying the parking stall count within this lot.

The construction work included in Phase IV will need to be sequenced to minimize the impact on existing parking and continue to provide safe pedestrian access to existing building entrances. A detailed sequence of construction will need to be defined with the construction contract requirements for this phase. The sequence of construction for completion of Phase IV can also be defined to coordinate with available funding and hospital priorities for continued site improvement.

With completion of Phase IV the total site parking capacity will be 1,299 parking stalls.



PHASE V

Completion of the site master plan in Phase V will include the option to develop boulevard medians in Kansas Avenue and St Joseph Avenue. The median development will enhance the aesthetics of the site with additional landscaping, clarify traffic circulation and provide opportunities for added clarity to site wayfinding and signage. The master plan also identifies two additional parking areas (Lots V-A and V-B) of 88 stalls that would result in a total campus parking of 1,387 parking stalls..

CONCLUSION

DLR Group has provided a master plan parking study evaluating the required parking count once the MOB has been completed. The existing parking count is currently below the recommended number before the reduction of parking due to the addition of the MOB. The existing parking count is 832 and the recommended capacity is 966 stalls without adding the MOB. Once the MOB is added in Phase III the recommended parking is 1,172.

The master plan outlines a five-phase approach in executing the addition of the MOB and provides for a total parking capacity of 1,387 parking stalls. The proposed master plan improves the identity of Mary Lanning campus, improves wayfinding, and improves parking efficiency.

Master Plan – Projected Phase Estimates

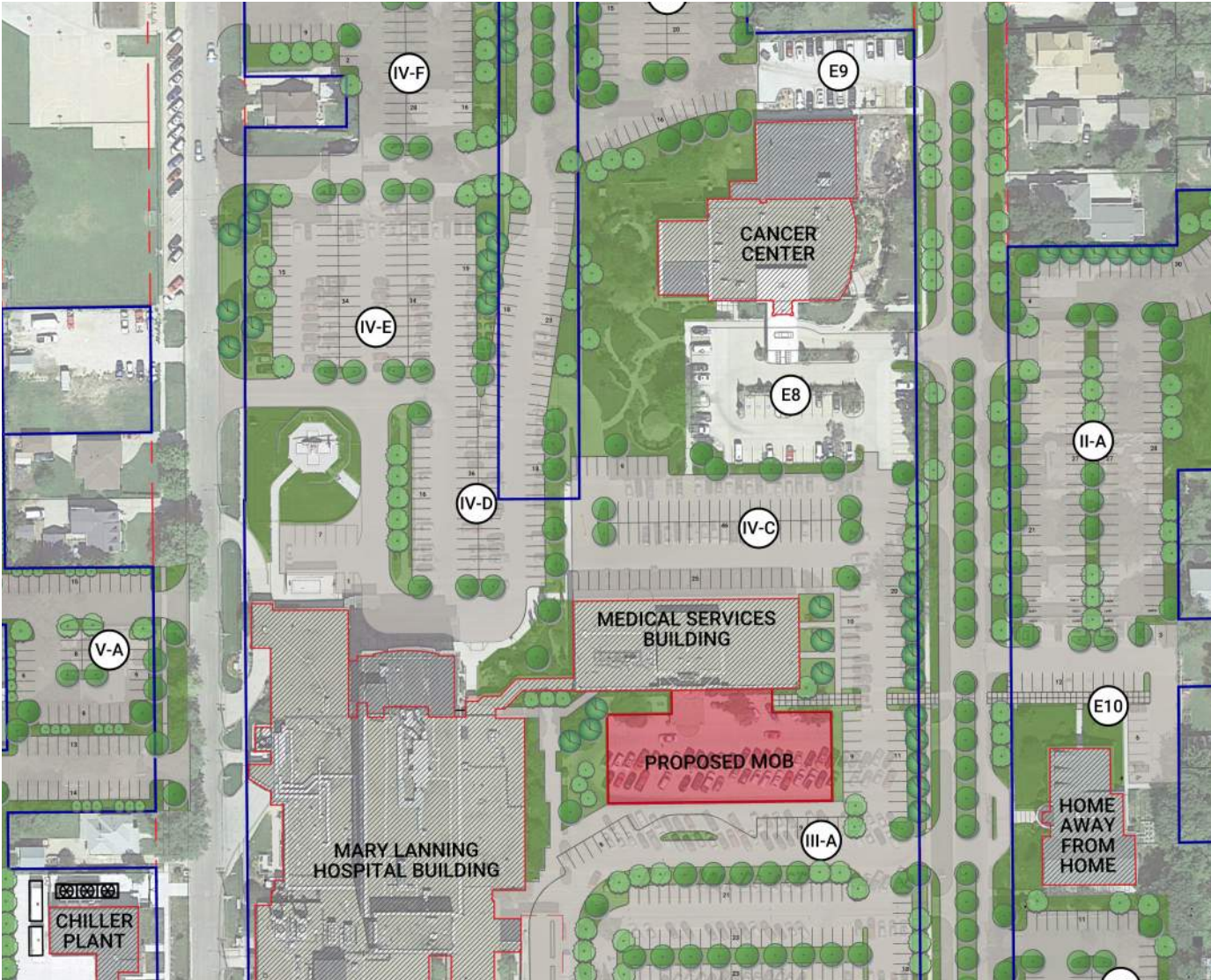
	Estimated Construction Subtotal	Projected Project Soft Costs	Contingency (10%)	ESTIMATED PHASE PROJECT TOTAL
PHASE I				
Phase I-A	\$ 379,340	\$ 36,157	\$ 37,934	\$ 453,431
Phase I-B	\$ 40,844	\$ 5,405	\$ 4,084	\$ 50,333
Phase I-C	\$ 238,192	\$ 25,732	\$ 23,819	\$ 287,743
Phase I-D	\$ 237,304	\$ 26,425	\$ 23,730	\$ 287,459
PHASE I ESTIMATED TOTAL				\$ 1,078,967
PHASE II				
Phase II-A	\$ 515,525	\$ 48,009	\$ 51,552	\$ 615,086
Phase II-B	\$ 146,106	\$ 20,997	\$ 14,611	\$ 181,714
PHASE II ESTIMATED TOTAL				\$ 796,800
PHASE III				
Phase III-A through C	\$ 481,143	\$ 42,774	\$ 48,114	\$ 572,032
PHASE III ESTIMATED TOTAL				\$ 572,032
PHASE IV				
Phase IV-A through B	\$ 786,684	\$ 66,134	\$ 78,668	\$ 931,486
Phase IV-C	\$ 336,983	\$ 29,904	\$ 33,698	\$ 400,585
Phase IV-D through F	\$ 808,058	\$ 65,524	\$ 80,806	\$ 954,388
PHASE IV ESTIMATED TOTAL				\$ 2,286,459
PHASE V				
Phase V-A through B	\$ 287,896	\$ 26,713	\$ 28,790	\$ 343,399
Phase V-C	\$ 718,300	\$ 59,190	\$ 71,830	\$ 849,320
PHASE V ESTIMATED TOTAL				\$ 1,192,718

Additional Considerations:

- The master plan is based on an aerial photo and not a survey; final counts could vary based on actual survey information.
- ADA required stalls are not accounted for in the parking counts. This will need to be considered for the final design.
- Impervious and pervious areas have generally been considered in the master plan to meet city code requirements.
- Landscaping shown is implied and may not meet city code requirement. This will need to be considered during the final design.
- Additional detail that will need to be resolved during final design once surveys have been completed other than noted above; ADA slopes, storm water management and grading. All of which could alter the final parking counts.

DLR Group would be happy to assist in moving the master plan parking study into action. Careful consideration and coordination will be required with the parking phases and the addition of the MOB to allow for smooth construction phasing and minimize the impact on the patient or visitor experience to the hospital.

	PARKING INDICATED	CITY ZONING MIN. REQUIRED	CITY MAXIMUM ALLOWED	DLR GROUP RECOMMENDED CAPACITY	EXISTING PARKING REMOVED OR DEMO'D	NEW PARKING CONSTRUCTION	IMPROVED PARKING CONSTRUCTION
EXISTING SITE	832	927	1,020	966			
PHASE I	1,072	927	1,020	966	7	247	
PHASE II	1,135	927	1,020	966	133	196	
PHASE III	1,172	1,086	1,194	1,172	16	37	16
PHASE IV	1,299	1,086	1,194	1,172	433	0	560
PHASE V	1,387	1,086	1,194	1,172	0	88	0





55

55.5

11

744

Clines Add

10



010010916

Owner Name

MARY LANNING MEMORIAL HOSPITAL ASSOCIATION

Property Address

744 N HASTINGS AVE

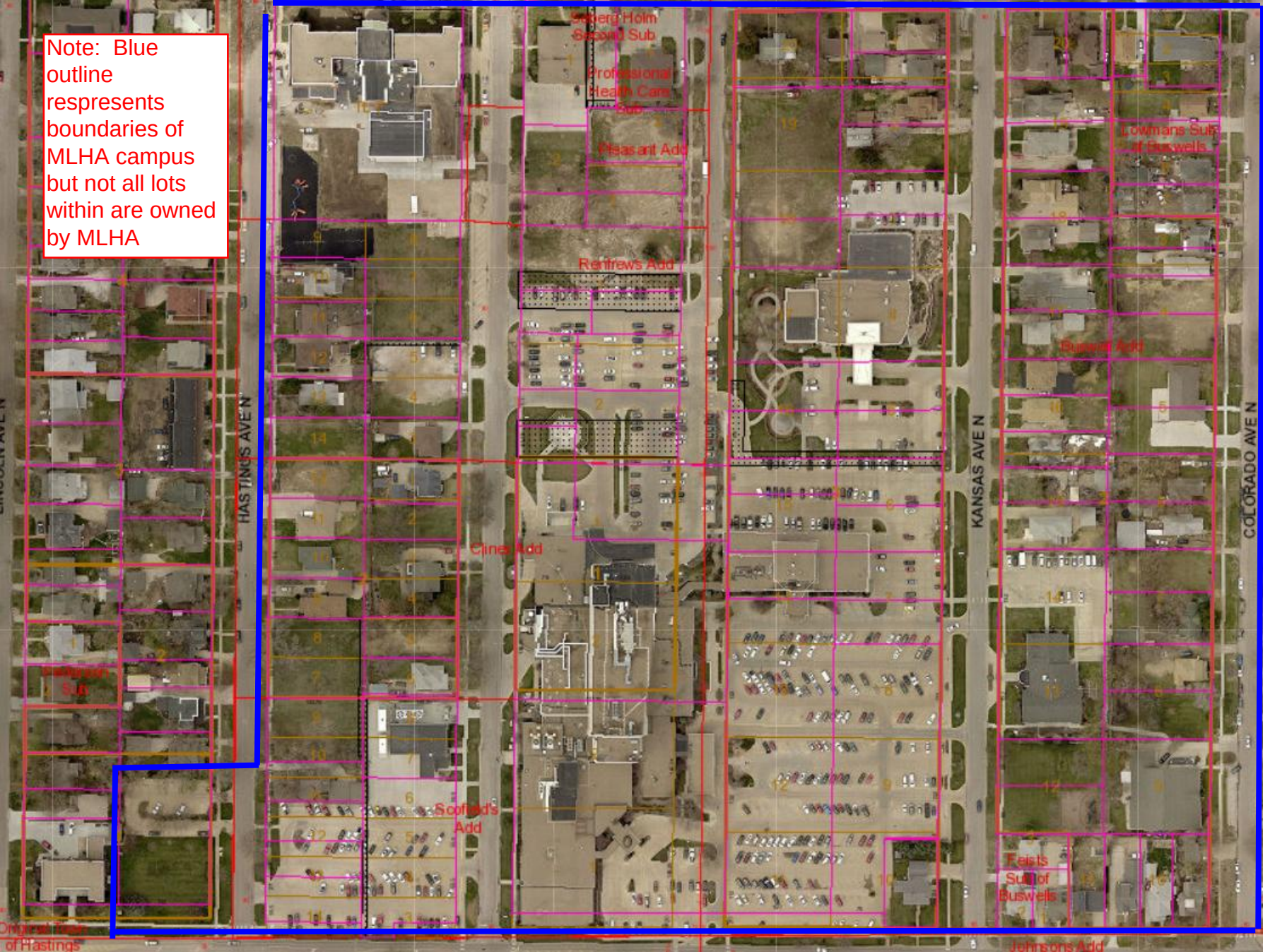
[Zoom to](#)



Legal non-conforming side yard setback



Note: Blue outline represents boundaries of MLHA campus but not all lots within are owned by MLHA



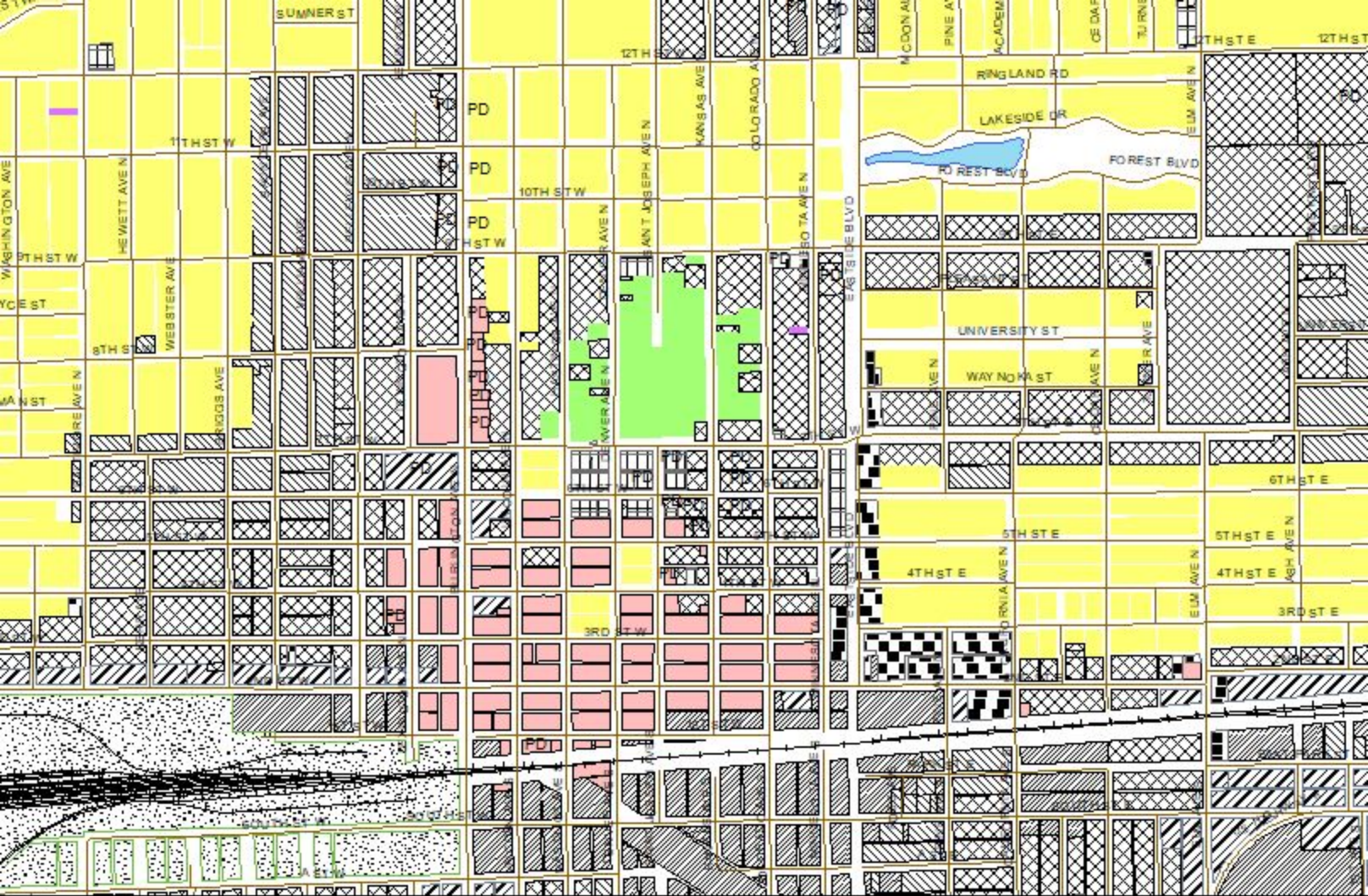


City Limits	R-3. Multiple-family	C-1. Local business
Subdivision	R-1A. Single family large lot	C-2. Central business
A. Agricultural district	R-1S. Single family suburban	C-3. Commercial business
R-1. Urban single family	R-5. Urban single family undersized lot	C-6. Commercial office
R-2. Two-family	CMP. Campus institutional	I-1. Light industrial
R-3G. Garden apartment	CZ. Clear zone	I-2. Heavy industrial



Subtitle

City of Hastings Zoning



City Limits	R-3. Multiple-family	C-1. Local business
Subdivision	R-1A. Single family large lot	C-2. Central business
A. Agricultural district	R-1S. Single family suburban	C-3. Commercial business
R-1. Urban single family	R-5. Urban single family undersized lot	C-6. Commercial office
R-2. Two-family	CM*. Campus institutional	I-1. Light industrial
R-3G. Garden apartment	C-2. Clear zone	I-2. Heavy industrial

Subtitle

City of Hastings Zoning



Future Land Use

City of Hastings, Nebraska



0 140 280 560 Feet

Land Use:

- Rural Residential
- Suburban Residential
- Urban Residential

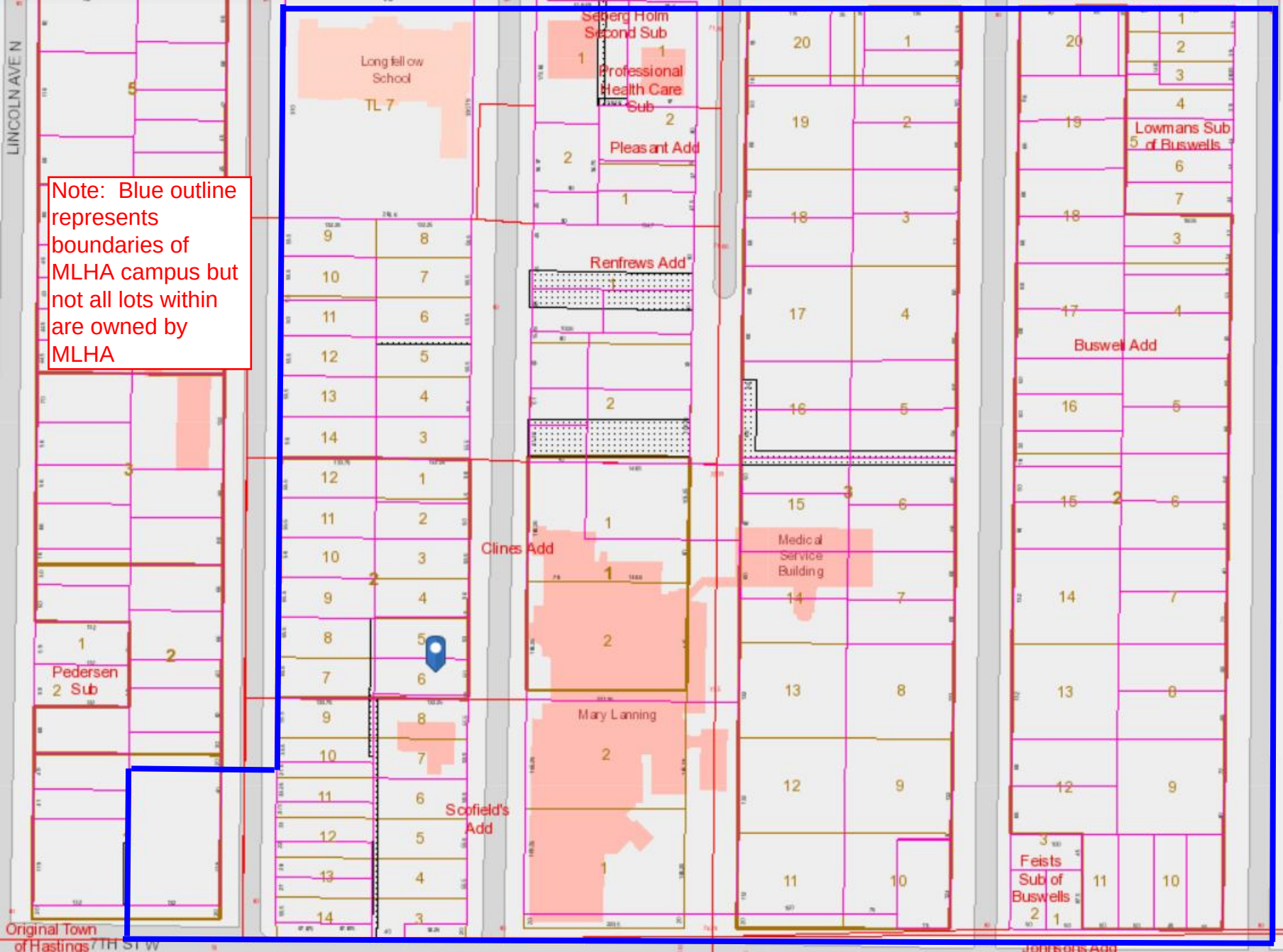
- Mixed-Use - Neighborhood
- Mixed-Use - Community
- Mixed-Use Downtown
- Commercial/Retail
- Employment/Industrial

- Public / Semi-Public
- Parks & Recreation
- Agriculture

Overlay Districts:

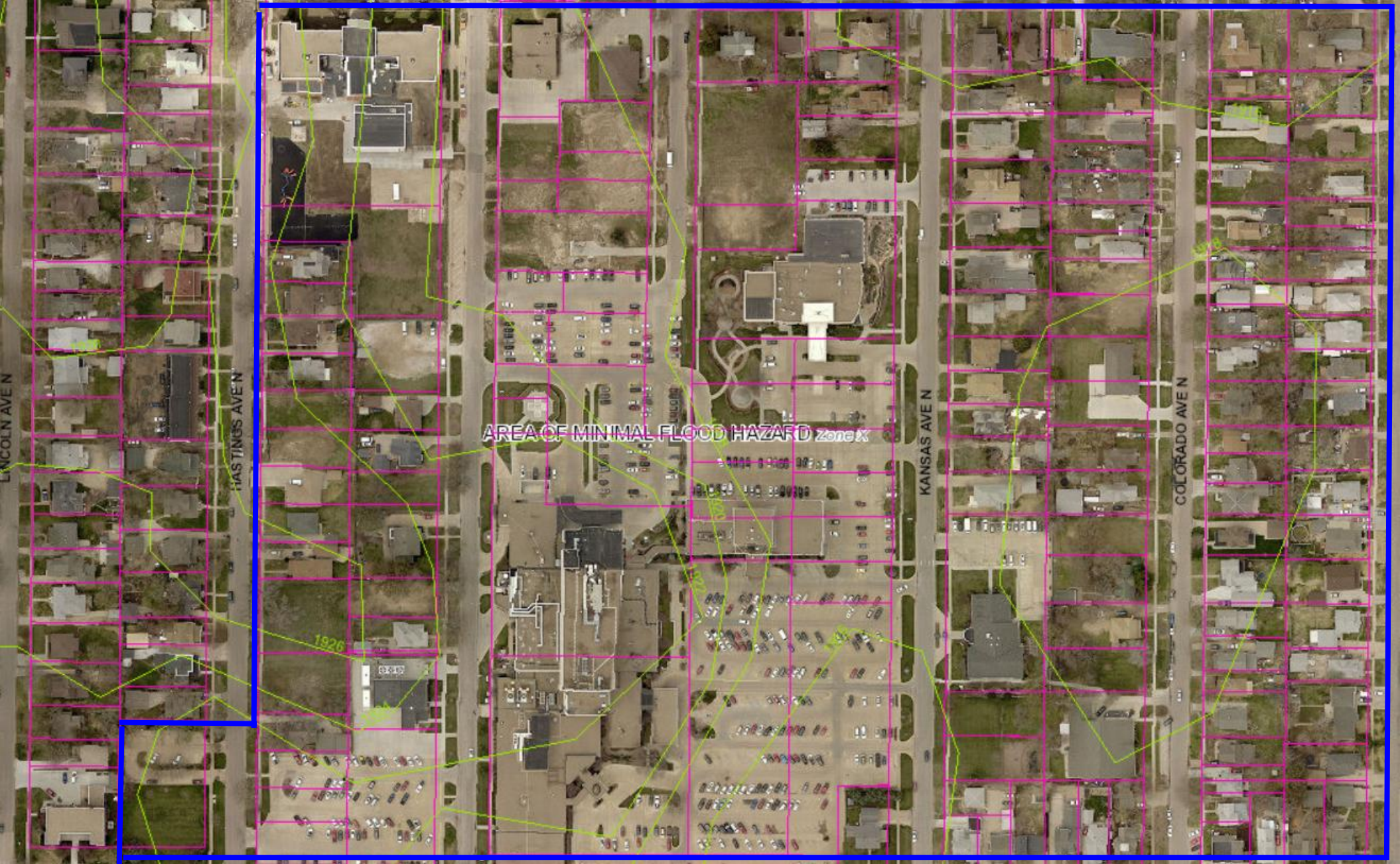
- South Burlington Overlay
- Highway 6 Overlay
- Urban Industrial Overlay

- Floodplain
- City Boundary
- ETJ Boundary



Note: Blue outline represents boundaries of MLHA campus but not all lots within are owned by MLHA





AREA OF MINIMAL FLOOD HAZARD Zone X

LINCOLN AVE N

HASTINGS AVE N

KANSAS AVE N

COLORADO AVE N

1926

Department: Development Services
Staff Contact: Lisa Parnell-Rowe
Planning Commission Meeting Date: 11/17/2020
File No: 2020-048
Prepared By: Lisa Parnell-Rowe, Director of Development Services

AGENDA ITEM SUMMARY SHEET

Description of Item:

Public hearing to recommend a request for Plan Modification No. 2020-5 to Redevelopment Area Number 13, Theatre District Redevelopment Project, for the following collective property, to wit:

Parcel 1:

A tract of land comprising all of Block Nine (9), Imperial Village Addition to the City of Hastings, and lying in the Northeast Quarter (NE1/4) of Section Ten (10), Township Seven (7) North, Range Ten (10) West of the 6th P.M., Adams County Nebraska, according to the plat filed March 22, 1967, in Book 179, Page 239; and

Parcel 2:

Lot One (1), Imperial Theatre Subdivision to the City of Hastings, Adams County, Nebraska, according to the plat filed November 22, 1988, as Instrument No. 883615.

Names of People/Business affected by this action:

The applicant, the people of Hastings, the Community Redevelopment Authority, and the City.

Why Planning Commission action is required:

Prior to recommending a redevelopment plan to the governing body for approval, an authority shall submit such plan to the planning commission or board of the city in which the redevelopment project area is located for review and recommendations as to its conformity with the general plan for the development of the city as a whole. The planning commission or board shall submit its written recommendations with respect to the proposed redevelopment plan to the authority within thirty days after receipt of the plan for review. Upon receipt of the recommendations of the planning commission or board or, if no recommendations are received within such thirty days, then without such recommendations, an authority may recommend the redevelopment plan to the governing body of the city for approval (N.R.S. 18-2112).

Type of action requested:

Motion

Suggested motion:

In addition to this Plan Modification which assesses the initial concept to fit with the *Imagine*

Hastings Comprehensive plan, there will be a Preliminary Planned Development Plan and replat coming to Planning Commission for recommendations in the near future. These hearings will break down the plans even further and provide opportunities to review some of the more specific development project details.

Deadlines associated with action:

This case will be presented for final approval at the December 14, 2020 regular City Council meeting.

Department head comments:

Theatre District, LLC has purchased property at 3101 west 12th street (parcels 1 & 2). The intent is to demo a portion of the main Imperial Mall Structure, repurpose and remodel the remaining K-Mart portion of the old mall for an indoor recreational facility, construct 2 multi-family structures geared at living for 55 years of age and older. The old mall theatre building will also be repurposed and remodeled back to its original use as a theatre. There area also plans for a few outlying lots on the east side of existing Block 9, Imperial Village Addition, where a variety of commercial uses are proposed from retail to grocery in order to create a mixed neighborhood community atmosphere. All of this will be done in a few separate phases, starting with the demolition of the old mall structure (excluding the old Kmart) and construction of one of the two multi-family apartment buildings.

The applicant intends to utilize Tax Increment Financing (TIF) to aid with demolition, structure rehabilitation, façade enhancements, architectural, engineering and planning costs, which is consistent with the 2013 Downtown Revitalization Plan and the Hastings Housing Study of 2016 and HEDC's goal to increase workforce housing in the community. The needs for housing have also been more recently expressed in the 2019 Hastings Housing Survey where many participants stated a desire to add additional housing for those downsizing and desiring a final place to reside that would require less maintenance.

Total project costs are estimated at over \$10,855,000 for just the multi-family component of this project. The project valuation upon completion is anticipated to be at \$6,850,000 and the developer anticipates an incremental valuation increase of approximately \$6,510,000. The Developer is contributing owner equity/bank financing in amount of \$9,255,000 for the project and has requested \$1,600,000 in tax increment financing (TIF) loan amortized over 15 years. None of the phases of this Redevelopment Project would be feasible without the use of TIF.

Future Land Use for this area is Mixed Use – Community. The City of Hastings Comprehensive Plan discusses the need move away from segregating separate uses and the reliance on the automobile to travel within the community. It prescribes to encourage mixed uses where appropriate and locating services in proximity of neighborhoods and people as well as the reuse of land in older areas of town. The concept that has been provided to us for this redevelopment demonstrates this element very well and the uses incorporated fit the mixed use-community concept perfectly.

Plan Modification 2020-5, attached, details further information.

Recommendation:

Recommend a motion to recommend approval of a resolution for Plan Modification #2020-5 for Redevelopment Area Number 13, Theatre District Redevelopment Project, for the following collective property, to wit:

Parcel 1:

A tract of land comprising all of Block Nine (9), Imperial Village Addition to the City of Hastings, and lying in the Northeast Quarter (NE1/4) of Section Ten (10), Township Seven (7) North, Range Ten (10) West of the 6th P.M., Adams County Nebraska, according to the plat filed March 22, 1967, in Book 179, Page 239; and

Parcel 2: Lot One (1), Imperial Theatre Subdivision to the City of Hastings, Adams County, Nebraska, according to the plat filed November 22, 1988, as Instrument No. 883615.

**PROJECT APPLICATION**

City of Hastings – Development Services
220 N. Hastings Avenue, Hastings, NE 68901
Phone: (402) 461-2302; Fax: (402) 461-2304
www.cityofhastings.org

Please check the appropriate box below to indicate the type of application you are requesting. Contact Development Services for minimum requirements. Incomplete applications will not be processed. All applications must be completed by applicant prior to submission with all of the requested support materials by the last Monday of each month or they will be held until the next deadline to be processed.

- | | | | |
|---|--|--|--|
| ☐ Preliminary Plat | ☐ Final Plat | ☐ Short Plat | ☐ Administrative Plat |
| ☐ Code Amendment | ☐ Zoning Change | ☐ Vacation (Plat / ROW / Easements) | |
| ☐ Conditional Use Permit / Amendment | ☐ Planned District / Amendment ☒ Modification to Redevelopment Plan | | |
| ☐ Comprehensive Plan / Amendment | ☐ Annexation Petition / Addition to the City | | |

PROJECT INFORMATION

Project Name: Plan Modification #2020-5 to Redevelopment Area #13

Project Address: 3101 W. 12th Street including the Imperial Theatre Within City Limit ☒ Yes ☐ No

Existing Zoning: C3-Planned District Proposed Zoning / Use: C3-Planned District

Existing Comprehensive Plan Designation: Mixed Use - Community Gross Area: 30+ acres

Legal Description: _____ Number of Lots: 2 parcels

APPLICANT INFORMATION

Applicant: Randal Chick Company: Community Redevelopment Authority

Address: 301 S. Burlington Tel: 402-461-8415 Fax: _____

City: Hastings State: NE Zip: 68901 Email: bidcra@gmail.com

Property Owner: Theatre District, LLC Company: Theatre District, LLC

Address: 9200 Andermatt Drive Tel: 402-488-1666 ext 118 Fax: _____

City: Lincoln State: NE Zip: 68506 Email: thuston@perryreid.com

Key Contact: Tom Huston Company: Theatre District, LLC

Address: 9200 Andermatt Drive Tel: 402-488-1666 ext 118 Fax: _____

City: Lincoln State: NE Zip: 68506 Email: thuston@perryreid.com

I hereby acknowledge that all information provided with this application is true to the best of my knowledge.

	10/26/20		10/26/20
Property Owner Signature	Date	Applicant Signature	Date

DEPARTMENTAL USE ONLY

Fees: \$400.00 Receipt No. DS1/90527

Accepted by Staff:  Case No. 2020-048

Signature

REDEVELOPMENT PLAN #13
PLAN MODIFICATION NO. 2020-5
(Theatre District Redevelopment Project)

The Community Redevelopment Authority (CRA) of the City of Hastings intends to amend the Redevelopment Plan for Area #13 within the city, pursuant to the Nebraska Community Development Law (the "Act") and provide for the financing of the phasing of a specific redevelopment project in Area #13.

Executive Summary:

Project Description

THE PROJECT CONSISTS OF REDEVELOPMENT OF THE PROPERTY LOCATED SOUTH OF 12TH STREET AND WEST OF MARIAN ROAD AND IS THE FORMER SITE OF THE IMPERIAL MALL AND THE IMPERIAL THEATRE. THE PROPERTY WILL BE ACQUIRED, BLIGHTED STRUCTURE DEMOLISHED INFRASTRUCTURE INSTALLED AND THE REDEVELOPER WILL CONSTRUCT A MULTI-PHASE MIXED-USE PROJECT.

- a. The First Phase of the Redevelopment Project shall include:
- The demolition of the existing mall structure as shown on the survey of the current improvements;
 - The construction of a new public street traversing the project site to improve the access as depicted on the Site Plan;
 - The development of an approximately 75 dwelling unit multifamily housing project targeted for residents at age 55 and over, which qualifies as a "Workforce Housing" project under the Nebraska Community Development Law;
 - The re-use and repurposing of the former Kmart building into an indoor youth sports facility; and
 - The re-use and repurposing of the former SunMart building into a multi-tenant building providing needed neighborhood services.

The repurposing of the former Kmart and Sunmart buildings may occur as subsequent subphases following the development of the multifamily component of the Phase One project although it is intended to complete the exterior renovation of such buildings to set the stage for the development. The creative use of the establishment of "Effective Dates" shall be required to be further defined in the Redevelopment Agreement.

- b. The Second Phase is envisioned to be a second multifamily structure containing another approximately 75 dwelling units, the timing of which will depend on the absorption and stabilization of the occupancy of the building developed in Phase One
- c. Subsequent phases of the Project could include the development of the peripheral pad sites into a Mixed-Use center to provide locations for retail, hospitality and other neighborhood support services. As shown on the Site Plan, such uses could include a re-use/renovation of the former theatre building; a coffee kiosk; office use; small grocery; and restaurant uses

The Redeveloper envisions some flexibility on the timing of the implementation of the various phases and components of the Project. Such an approach may require the establishment of staggered or varied Effective Dates for the Tax Increment Financing of the phases and subphases of the Project in the Redevelopment Agreement

The Redeveloper shall utilize Tax Increment Financing to aid in the acquisition, demolition, site preparation, infrastructure expenses and related construction costs associated with the purchase and development of this mixed-use project which shall include the workforce housing on the Project site which will be further subdivided to accommodate the separate ownership and phasing of the Project.

The Project shall utilize the benefits of the Nebraska Community Development Law, including the use of tax increment financing for eligible costs of the Project which shall include, but not be limited to:

- Site acquisition costs for the individual phases and subsequent projects;
- Demolition of the blighted and substandard structures and related parking lots;
- Site preparation including grading and stormwater improvements;
 - The installation of public infrastructure which shall include a new public street and the extension of necessary public utilities;
 - Building enhancements including façade improvements to assist in the prevention of future blight conditions and energy enhancements to make the structures more energy efficient; and
 - The development of workforce housing in accordance with the requirements of the Nebraska Community Development Law.

The Project will encounter these costs at this Redevelopment Area and this Project is not financially feasible without the use of tax increment financing. This Project will not occur as presently designed without the use of tax increment financing.

TAX INCREMENT FINANCING TO PAY FOR THE ACQUISITION OF THE PROPERTY AND INSTALLATION OF SEWER, WATER AND PAVING WILL COME FROM THE FOLLOWING REAL PROPERTY:

Property Description (the "Redevelopment Project Area")

South of 12th Street and west of Marian Road to include the 30+ acre site of the former Imperial Mall and former Imperial Theatre in the City of Hastings, Adams County, Nebraska.

- **Legal Descriptions:** Parcel 1:
A tract of land comprising all of Block Nine (9), Imperial Village Addition to the City of Hastings, and lying in the Northeast Quarter (NE1/4) of Section Ten (10), Township Seven (7) North, Range Ten (10) West of the 6th P.M., Adams County Nebraska, according to the plat filed March 22, 1967, in Book 179, Page 239; and

Parcel 2:

Lot One (1), Imperial Theatre Subdivision to the City of Hastings, Adams County, Nebraska, according to the plat filed November 22, 1988, as Instrument No. 883615.

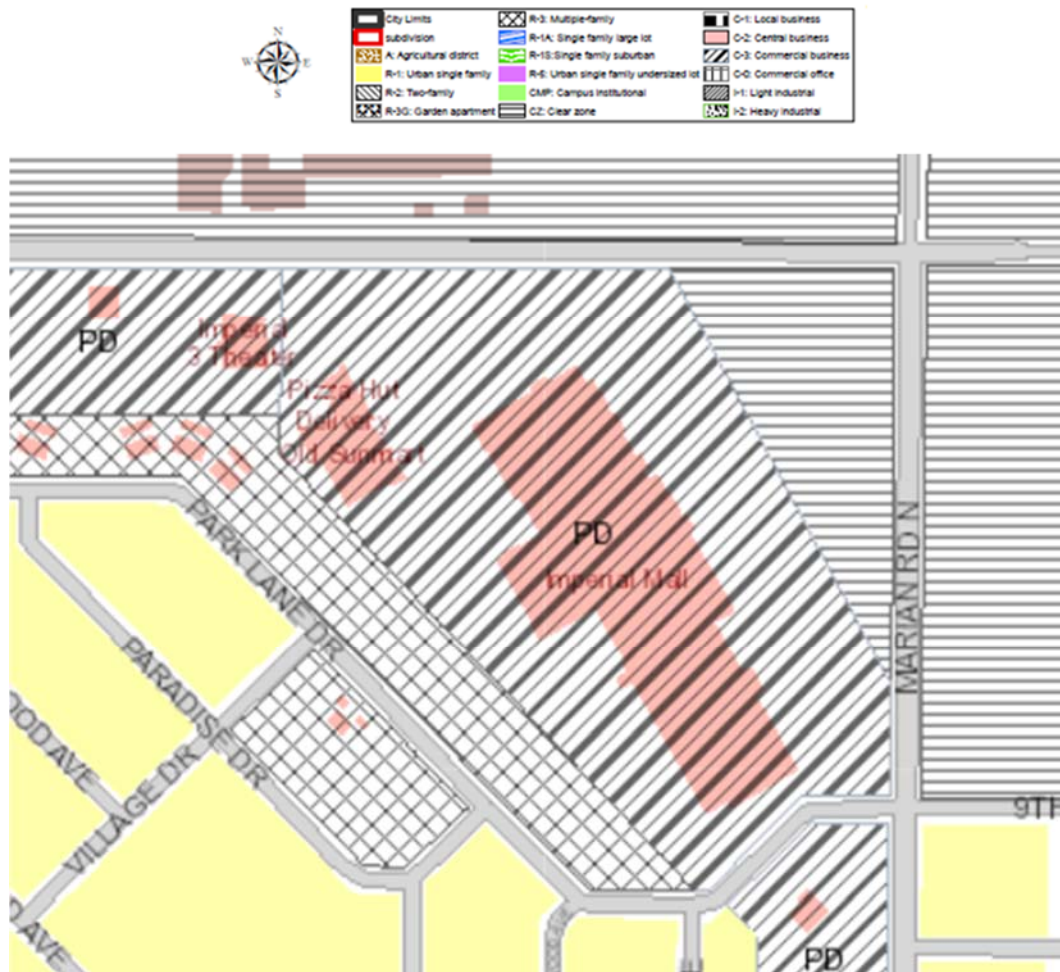
(collectively, the "Property")

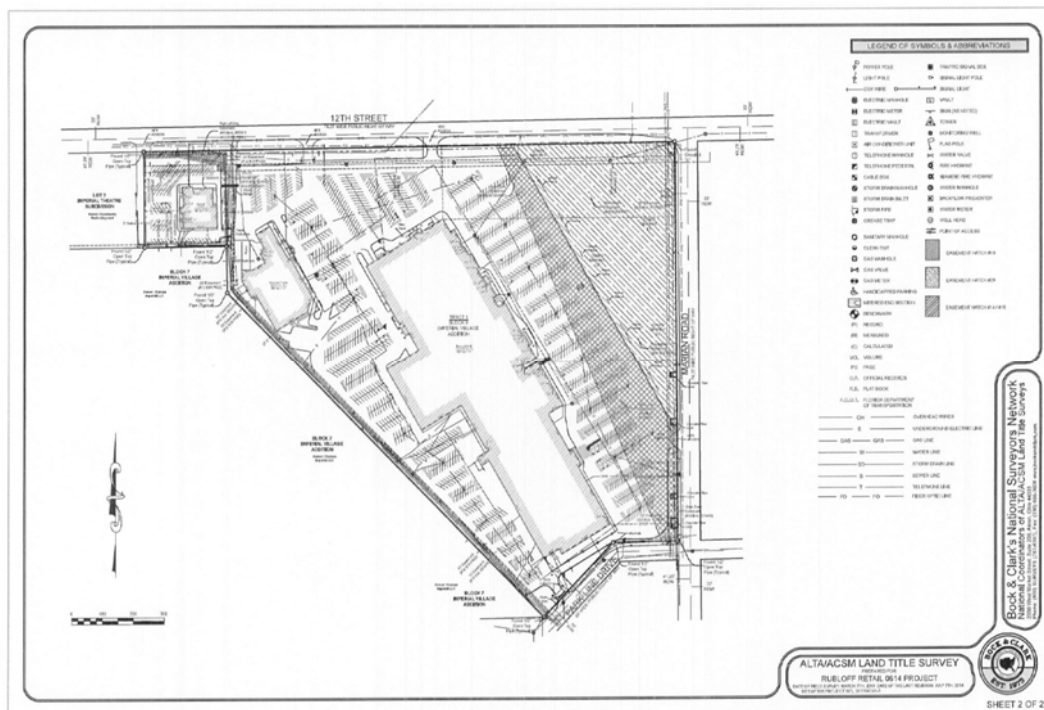
- **Survey:** Attached below is an accurate ALTA/NSPS Land Title Survey which depicts the current circumstance at the project site and reflects the large abandoned mall structure of the former Imperial Mall. One of the threshold actions upon approval of the Redevelopment Project will be the substantial demolition of the blighted and vacant mall structure. The stand-alone building on the NW corner, which is the former Sunmart building, will be retained and renovated for a mix of uses which could include small retail and/or office uses. The SE corner of the mall structure will be retained as it formerly housed the Kmart business. Due to its size of approximately 85,000 square feet and its high ceilings, it is easily re-purposed into a indoor sports facility which could

house basketball, volleyball and soccer fields/courts. The Redeveloper would intend to partner with or sell this structure to a sports program or entity which could better fully utilize this structure; and

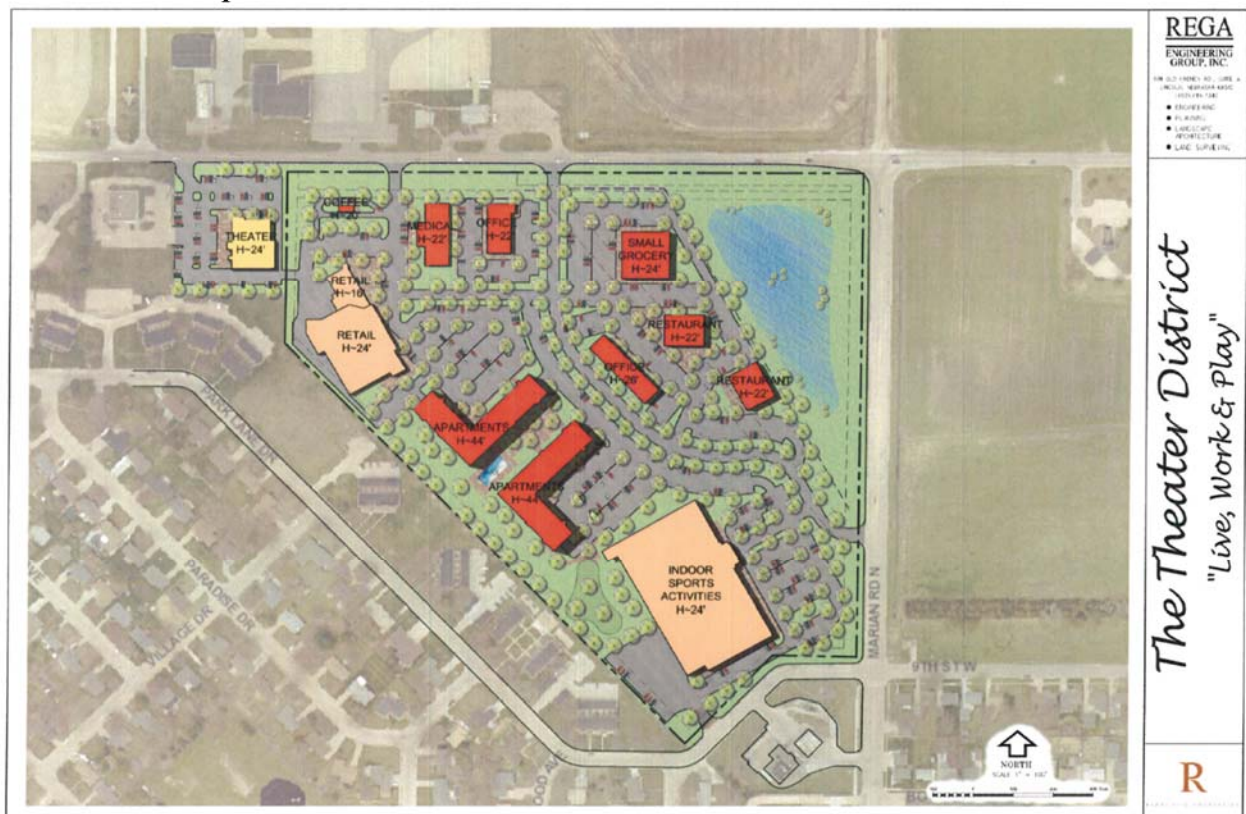
- **Site Plan:** Attached below is the conceptual Site Plan prepared by the Project Engineers which depicts the location of the multifamily structures, the retention of the Sunmart and Kmart buildings, and the location of the other contemplated uses which could include coffee kiosk, office, medical, small grocery, and restaurant locations. The Site Plan also depicts the new public street contemplated for the site to improve and facilitate access to the mix of uses envisioned for the Project Site.

Map of Existing Land Use and Proposed Redevelopment Site





Site Plan of the Proposed Mixed-Use Theatre District:



The tax increment will be captured for the tax years 2022 through 2036 inclusive. Provided, however, if there is no increase in valuation for the 2022 tax year, the increment will be captured beginning in the year when an increase in value is available for capture and ending fifteen years later.

The real property ad valorem taxes on the current or base valuation will continue to be paid to the usual taxing entities. The increase in value will come from the new construction of up to approximately 75 dwellings units which shall qualify as workforce housing townhomes as permitted in the Planned Development District and the Development Plan applicable to the Theatre District.

Total project costs for the Phase One project are in excess of \$16,500,000 which includes the costs of demolition of \$780,000; site preparation /grading of \$350,000; and street construction of \$650,000. The new private improvements contemplated as part of the Phase One project includes an investment of approximately \$15,000,000 and envisions the completion of the exterior renovations and building enhancements to the former Kmart building and the former Sunmart building concurrently with the construction of the multifamily use since the entire Theatre District needs improvement now and the investment for the multifamily structure requires enhancement of all structures.

The Phase Two Project is anticipated to consist of a second multifamily project also containing approximately 75 dwelling units. The timing of the Phase Two will depend on the stabilization of the occupancy of the Phase One project. It is anticipated that the multifamily project of Phase Two will cost in the neighborhood of \$10,000,000 and will generate approximate \$1,800,000 to \$2,000,000 of tax increment financing. Subsequent phases can include the renovation of the theatre building; coffee kiosk; medical office; grocery and restaurant uses. It is anticipated that this Redevelopment Plan will need to be supplemented with additional detail as those subsequent phases are solidified.

Statutory Pledge of Taxes.

In accordance with Section 18-2147 of the Act and the terms of the Resolution providing for the issuance of the TIF Note, the Authority hereby provides that any ad valorem tax on the Redevelopment Project Area for the benefit of any public body be divided for a period of fifteen years after the effective date of this provision as set forth in the Redevelopment Contract, consistent with this Redevelopment Plan, Said taxes shall be divided as follows:

- a) That portion of the ad valorem tax which is produced by levy at the rate fixed each year by or for each public body upon the redevelopment project valuation shall be paid into the funds, of each such public body in the same proportion as all other taxes collected by or for the bodies; and
- b) That portion of the ad valorem tax on real property in the redevelopment project in excess of such amount, if any, shall be allocated to and, when collected, paid into a special fund of the Authority to pay the principal of; the interest on, and any premiums due in connection with the bonds, loans, notes, or advances on money to, or indebtedness incurred by, whether funded, refunded, assumed, or otherwise, such Authority for financing or refinancing, in whole or in part, a redevelopment project. When such bonds, loans, notes, advances of money, or indebtedness including interest and premium due have been paid, the Authority shall so notify the County Assessor and County Treasurer and all ad valorem taxes upon real property in such redevelopment project shall be paid into the funds of the respective public bodies.

Pursuant to Section 18-2150 of the Act, the ad valorem tax so divided is hereby pledged to the repayment of loans or advances of money, or the incurring of any indebtedness, whether funded, refunded, assumed, or otherwise, by the CRA to finance or refinance, in whole or in part, the redevelopment project, including the payment of the principal of, premium, if any, and interest on such bonds, loans, notes, advances, or indebtedness.

Redevelopment Plan Amendment Complies with the Act:

The Community Development Law requires that a Redevelopment Plan and Project consider and comply with a number of requirements. This Plan Amendment meets the statutory qualifications as set forth below.

- 1. The Redevelopment Project Area was first declared blighted and substandard by action of the Hastings City Council based on the “Blight and Substandard Study for Redevelopment Areas #12 and 13 dated March 2009 as prepared by Hanna:Keelan Associates, P.C. (§18-2109) Such declaration was made after a public hearing with full compliance with the public notice requirements of §18-2115 of the Act,**
- 2. Conformation to the General Plan for the Municipality as a whole. (§18-2103 (13) (a) and §18-2110)**

Hastings adopted a Comprehensive Plan on February 24, 2009. This Redevelopment Plan Amendment and Project are consistent with the Comprehensive Development Plan, in that no changes in the Comprehensive Development Plan elements are intended. The Comprehensive Development Plan identifies this Project Site as “Mixed Use - Community” which designation is consistent with the redevelopment plan for the Theatre District. This plan merely provides funding for the redeveloper to construct workforce housing for residential uses on this property as defined by the current and effective zoning regulations. The Hastings Planning Commission held a public hearing at their meeting on November 17, 2020 and approved Plan Modification 2020-5 to Redevelopment Plan #13 confirming that this project is consistent with the Comprehensive Development Plan for the City of Hastings.

- 3. The Redevelopment Plan must be sufficiently complete to address the following items: (§18-2103/13) (b)**

a. Land Acquisition:

The Redevelopment Plan for Area #13 provides for real property acquisition and this plan amendment does not prohibit such acquisition. Theatre District, LLC has recently acquired the project site and it is envisioned that Theatre District, LLC shall sell the individual pad sites to the actual redevelopers constructing the improvements as will be required by project financing.

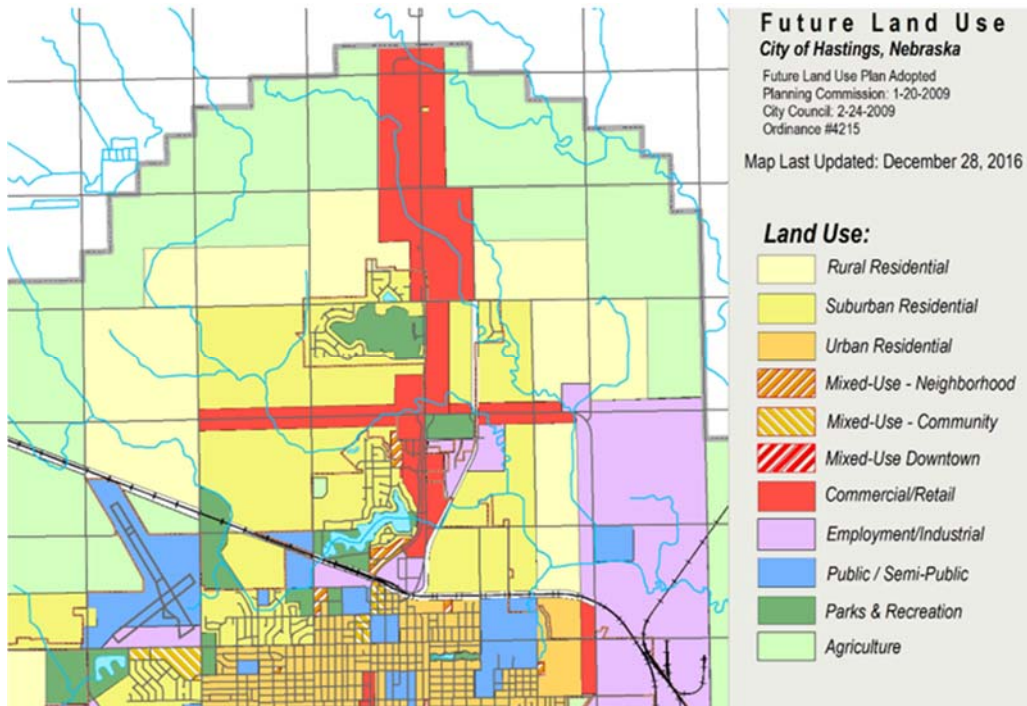
b. Demolition and Removal of Structures:

The Project to be implemented with this plan depends on the selective but substantial demolition of the former mall structure. As shown on the ALTA Survey depicted above, the majority of the former mall structure shall be removed to make way for the redevelopment uses. The current cost estimate for such demolition of the structure and the surrounding deteriorated parking lot is approximately \$780,000.

c. Future Land Use Plan

See the attached map from the 2009 Hastings Comprehensive Development Plan. The Project Site is identified as “Mixed-Use Community” in the Comprehensive Development Plan which use is consistent with this Amendment. the site in private ownership is planned for residential development and ancillary uses of the area after redevelopment as required by Section 18-2111(5) of the Nebraska Community Development Law.

Future Land Use Map



d. Changes to zoning, street layouts and grades or building codes or ordinances or other planning changes

The project area is currently zoned for commercial use under the CP-3 district with a Planned Development overlay district and Development Plan. The Redeveloper is concurrently pursuing an amendment to the PD permit to allow the mix of uses contemplated herein. Upon demolition of the former mall structure, the project site shall be graded and the site prepared for redevelopment. The Site Plan reflects the dedication of a new public street which will be constructed in conjunction with the Theatre District plat to be filed with the City of Hastings. No changes are anticipated in building codes or ordinances, nor are any other planning changes contemplated [§18-2103(b) and §18-2111] other than as described herein.

e. Site Coverage and intensity of Use

The redeveloper is proposing to construct a multifamily structure containing approximately 75 dwelling units and related parking. The redeveloper plans to meet the applicable regulations regarding site coverage and intensity of use. [§18-2103(b) and §18-2111]

f. Additional Public Facilities or Utilities

Sewer, water and street paving will be installed by the redeveloper to support this development. Sufficient electric utilities and gas lines will also be installed by the redeveloper for the proposed construction of all uses reflected on the Site Plans. The redeveloper will be responsible for installing any sidewalks required for the project. No other utilities would be impacted by the development. [§18-2103(b) and §18-2111]

- The Act requires a Redevelopment Plan provide for relocation of individuals and families displaced as a result of plan implementation.** The project site is vacant with one commercial tenant located in the former Sunmart building. The redeveloper intends to retain this commercial tenant as part of the mixed-use development dependent on the tenant's desire to remain part of the development. [§18-2103.02]

5. No member of the Authority, nor any employee thereof holds any interest in any property in this Redevelopment Project Area. [§18-2106]

6. Section 18-2114 of the Act requires that the Authority consider:

1. Method and cost of acquisition and preparation for redevelopment and estimated proceeds from disposal to redevelopers.

The redeveloper anticipates that the multifamily structure which is part of the Phase One project will have land acquisition costs of approximately \$450,000. It is anticipated that the aggregate development cost of the first multifamily building, including all hard and soft costs will be approximately \$10,125,000. In addition, the redeveloper anticipates that the early eligible costs of the project shall include:

- Demolition: \$780,000
- Site Preparation: \$350,000
- Street construction: \$650,000
- Facades: Estimate of \$3,500,000*

(* This cost estimate includes the building/façade enhancements for the multifamily structure and also the repurposed Sunmart and Kmart structures)

The first multifamily building will generate approximately \$1,600,000 of tax increment financing which obviously will not fully fund the Phase One eligible expenses. The unfunded eligible expenses shall be eligible for funding when the uses or users for the former Sunmart building and/or Kmart building are fully identified and the renovations of those buildings proceed as subphases of the Phase One project which will be more fully described in the Redevelopment Agreement. None of the phases of the Redevelopment project would be feasible without the use of tax increment financing.

2. Statement of proposed method of financing the redevelopment project.

The redeveloper anticipates that the sources of financing for the multifamily portion of the Phase One of the Project shall be structured as follows:

• First mortgage indebtedness:	\$7,125,000
• Tax Increment Financing:	\$1,600,000
• Equity:	\$1,150,000
• HEDC Rural Workforce funds:	<u>\$200,000</u>
Total	\$10,125,000

However, this summary listing of Sources does not include the up-front costs of demolition of the mall structure nor the cost of installation of the public street. The Redeveloper anticipates refinement of the Project Sources/Uses and working with the CRA and the City of Hastings to arrive at an acceptable Project financing plan. The key to making the financing plat is to be able to spread the aggregate project costs across all of the phases of the development plan.

3. Statement of feasible method of relocating displaced families.

No families will be displaced as a result of this plan.

7. Section 18-2113 of the Act requires:

Prior to recommending a redevelopment plan to the governing body for approval, an authority shall consider whether the proposed land uses and building requirements in the redevelopment project area are designed with the general purpose of accomplishing, in conformance with the general plan, a coordinated, adjusted, and harmonious development of the city and its environs which will, in accordance with present

and future needs, promote health, safety, morals, order, convenience, prosperity, and the general welfare, as well as efficiency and economy in the process of development, including, among other things, adequate provision for traffic, vehicular parking, the promotion of safety from fire, panic, and other dangers, adequate provision for light and air, the promotion of the healthful and convenient distribution of population, the provision of adequate transportation, water, sewerage, and other public utilities, schools, parks, recreational and community facilities, and other public requirements, the promotion of sound design and arrangement, the wise and efficient expenditure of public funds, and the prevention of the recurrence of insanitary or unsafe dwelling accommodations or conditions of blight.

The Authority has considered these elements in proposing this Plan Amendment. This amendment, in and of itself will promote consistency with the Hastings Comprehensive Development Plan by providing the following benefits;

- Quality workforce housing for the senior resident demographic;
- The repurposing of the blighted and substandard structures existing on the Project site; and
- A mix of neighborhood services and other complementary uses.

8. Time Frame for Development

Development of the first multifamily portion of Phase One of the Project is anticipated to be commenced in the Springs of 2021 and construction completion could occur in the Fall of 2022 with an anticipated construction schedule of 16-18 months. Excess valuation should be available for this project for 15 years beginning with the 2022 tax year, provided, however, if there is no increase in valuation for the 2022 tax year, the excess valuation will be available beginning in the year when an increase in value is available for capture.

9. Justification of Project

The demolition of the blighted and substandard Imperial Mall structure is warranted and will substantially benefit the Redevelopment Area and the City of Hastings. The repurposing of the former Sunmart and Kmart structures while providing beneficial uses for the City is further justification of the project. Additionally, the extension of utilities, substantial site grading and installation of a new public street are necessary to facilitate redevelopment of this site. The redevelopment of this project site will result in increased workforce housing opportunities and increased sales tax and is the first step in the creation of affordable housing opportunities for the Hastings community. The Hastings Economic Development Corporation and the Hastings City Council have made it clear with previous decisions that they support development that will increase residential workforce opportunities.

10. Cost Benefit Analysis

Section 18-2113 of the Act, further requires the Authority conduct a cost benefit analysis of the plan amendment in the event that Tax Increment Financing will be used. This analysis must address specific statutory issues.

As authorized in the Nebraska Community Development Law, §18-2147, Neb. Rev. Stat. (2012), the City of Hastings has analyzed the costs and benefits of the proposed Redevelopment Project, including:

Phase 1 - Project Sources and Uses for the multifamily component

Approximately \$1,600,000 in public funds from tax increment financing provided by the Hastings Community Redevelopment Authority will be required to complete the multifamily component of the Phase One project. This investment by the Authority will leverage approximately \$9,255,000 in private sector or other non-local financing; a private investment of \$5.78 for every TIF dollar investment.

Description	TIF Funds	Equity, Bank, other Funds	Totals
Site Acquisition	\$450,000		\$450,000
Demolition	\$780,000		\$780,000
Infrastructure costs	\$370,000	\$280,000	\$650,000
Construction costs		\$8,625,000	\$8,625,000
Site Preparation		\$350,000	\$350,000
TOTALS	\$1,600,000	\$9,255,000	\$10,855,000

Tax Revenue. The property to be redeveloped is anticipated to have a January 1, 2021, valuation of approximately \$340,000 with such sum to be allocated to the various components and lots to be platted as part of the Project. Based on the 2020 levy of .02258474 this would result in real property taxes of approximately \$7,678 which will be paid out to all the existing taxing entities. It is anticipated that the assessed value will increase by \$6,500,000 upon full completion, as a result of the site redevelopment. This development will result in an additional estimated tax increase of over \$145,000 annually. This tax increment gained from the Redevelopment Project Area would not be available for use as city general tax revenues, for a period of 15 years, or such shorter time as may be required to amortize the TIF bond, but would be used for eligible private redevelopment costs to enable this project to be realized.

Estimated 2020 assessed value:	\$340,000
Estimated value after completion:	\$6,850,000
Incremental value:	\$6,510,000
Annual TIF generated:	\$146,800
TIF Bond Issue:	\$1,600,000

Statement Identifying Financial Gap and Necessity for use of Tax Increment Financing for proposed Project:

A large financial gap exists on this project after conventional financing is utilized. A combination of owner equity, TIF and other incentives are needed to make the project feasible. The developer is contributing owner equity/bank financing of \$9,255,000 and TIF funding is intended to fill the remaining gap, making this project feasible. The project is asking for \$1,600,000 in a TIF loan amortized over 15 years. Without the availability of TIF funding for the project, it would not be feasible for the developer to proceed with this redevelopment. Please see the table below which shows rate of returns from 1.4% to 1.6% without TIF funding which is an unacceptable return on investment in today's market.

Proforma Operating Statement w/o TIF							
			<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>	
Rent Revenue			\$ 885,754	\$ 894,612	\$ 903,558	\$ 912,593	
Expenses			\$ (415,151)	\$ (422,814)	\$ (430,627)	\$ (438,593)	
NOI Without TIF			\$ 470,603	\$ 471,798	\$ 472,931	\$ 474,000	
Debt Service			\$ (435,053)	\$ (435,053)	\$ (435,053)	\$ (435,053)	
Cash Flow Without TIF			\$ 35,550	\$ 36,745	\$ 37,878	\$ 38,947	
Cash on cash return wo/TIF			1.40%	1.45%	1.50%	1.60%	
Equity Investment			\$ 2,531,300	\$ 2,531,300	\$ 2,531,300	\$ 2,531,300	

Proforma with TIF

Proforma Operating Statement w/o TIF						
			<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>	<u>Year 4</u>
Rent Revenue			\$ 885,754	\$ 894,612	\$ 903,558	\$ 912,593
Expenses			\$ (378,717)	\$ (382,613)	\$ (386,584)	\$ (390,631)
NOI Without TIF			\$ 507,037	\$ 511,999	\$ 516,974	\$ 521,962
Debt Service			\$ (416,795)	\$ (416,795)	\$ (416,795)	\$ (416,795)
Cash Flow Without TIF			\$ 90,242	\$ 95,204	\$ 100,179	\$ 105,167
Cash on cash return wo/TIF			7.85%	8.28%	8.71%	9.14%
Equity Investment			\$ 1,150,000	\$ 1,150,000	\$ 1,150,000	\$ 1,150,000

(a) Tax shifts resulting from the approval of the use of Tax Increment Financing;

The proposed redevelopment will create additional valuation of \$6,510,000. No tax shifts are anticipated from the project. The project creates new valuation from the construction of an approximately 75 dwelling unit multifamily housing project that will support taxing entities long after the project is paid off.

(b) Public infrastructure and community public service needs impacts and local tax impacts arising from the approval of the redevelopment project;

The Project anticipates the installation of a new public street to be dedicated to the City of Hastings to improve access to the mix of uses contemplated for the Project. Existing water and waste water facilities will not be impacted by this development. The electric utility has sufficient capacity to support the development. It is anticipated that this project will not impact schools in any significant way as the housing component will be targeted to those residents aged 55 and over. Fire and police protection are available and should not be negatively impacted by this development.

(c.) Impacts on employers and employees of firms locating or expanding within the boundaries of the area of the redevelopment project; and

This project will not have a negative impact on employers and employees of firms locating within the boundaries of the redevelopment and should provide for additional housing opportunities for employees and employers. Further, the mix of the uses envisions additional commercial uses which should create additional job opportunities, the number of which is difficult to quantify at this time.

(d.) Impacts on other employers and employees within the city or village and the immediate area that are located outside of the boundaries of the area of the redevelopment project; and

This project will not have a negative impact on other employers in any manner different from any other expanding business within the Hastings area and should provide for additional housing opportunities for employees.

(e.) Impacts on student populations of school districts within the City or Village:

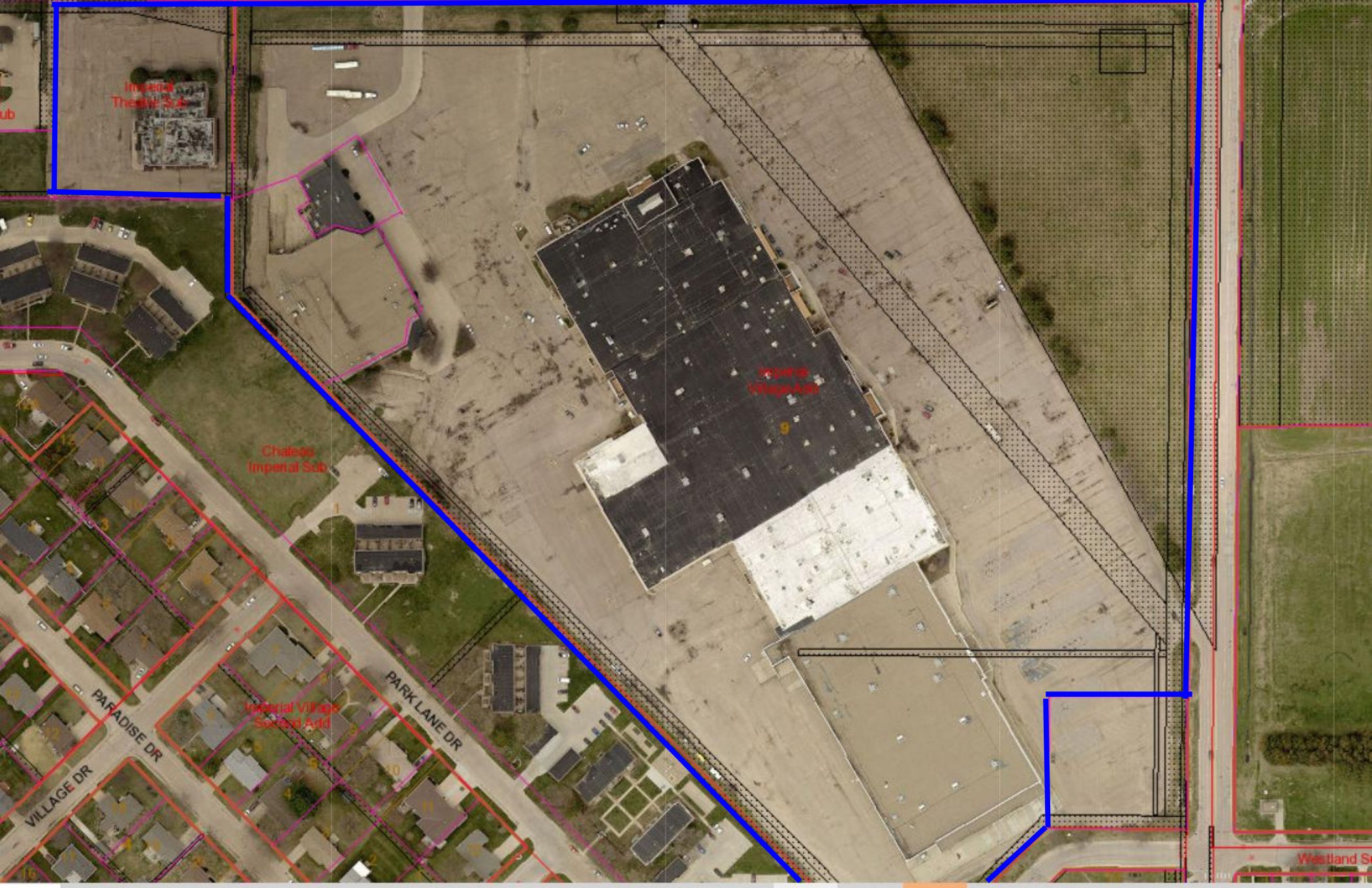
This development will have a minimal impact on the Hastings area school systems as it will likely not result in any increased attendance and the local school systems would be able to absorb any students from this additional development without adding to school facilities or staffing.

(f.) Any other impacts determined by the authority to be relevant to the consideration of costs and benefits arising from the redevelopment project.

This project is consistent with the goals of the City's Comprehensive Plan, the Hastings Housing Study of 2016 and HEDC's goal to increase workforce housing in the community.

Time Frame for Development

Development of the Phase One multifamily component containing approximately 75 dwelling units is anticipated to be developed commencing in approximately June of 2021 and substantially completing construction by December of 2022. Further, the Redeveloper envisions that the internal street shall be constructed during this time period and that redeveloper shall undertake the exterior building enhancements to the former Kmart and Sunmart buildings.



Imperial Theater Sub

Imperial Village Add

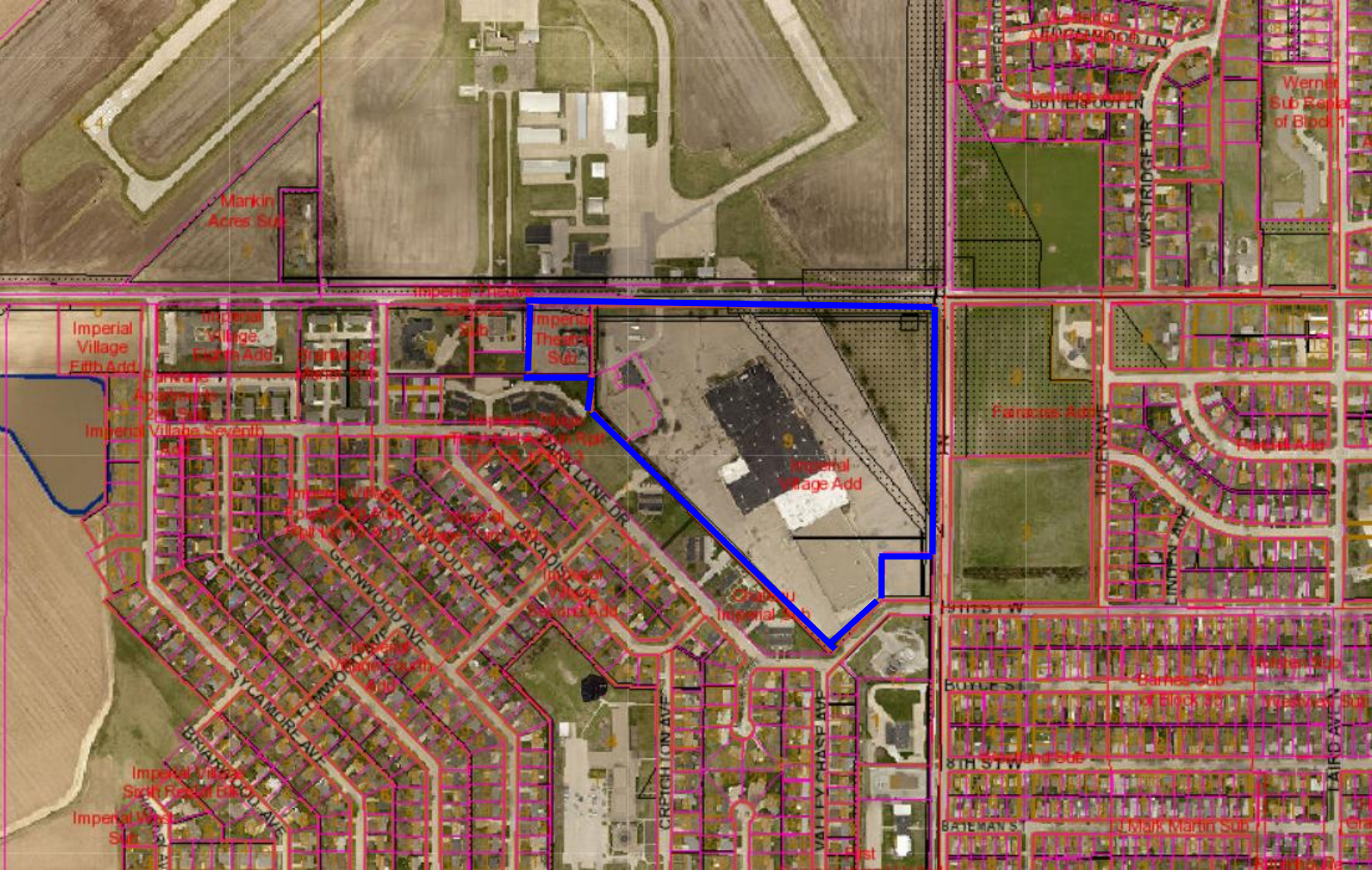
Chateau Imperial Sub

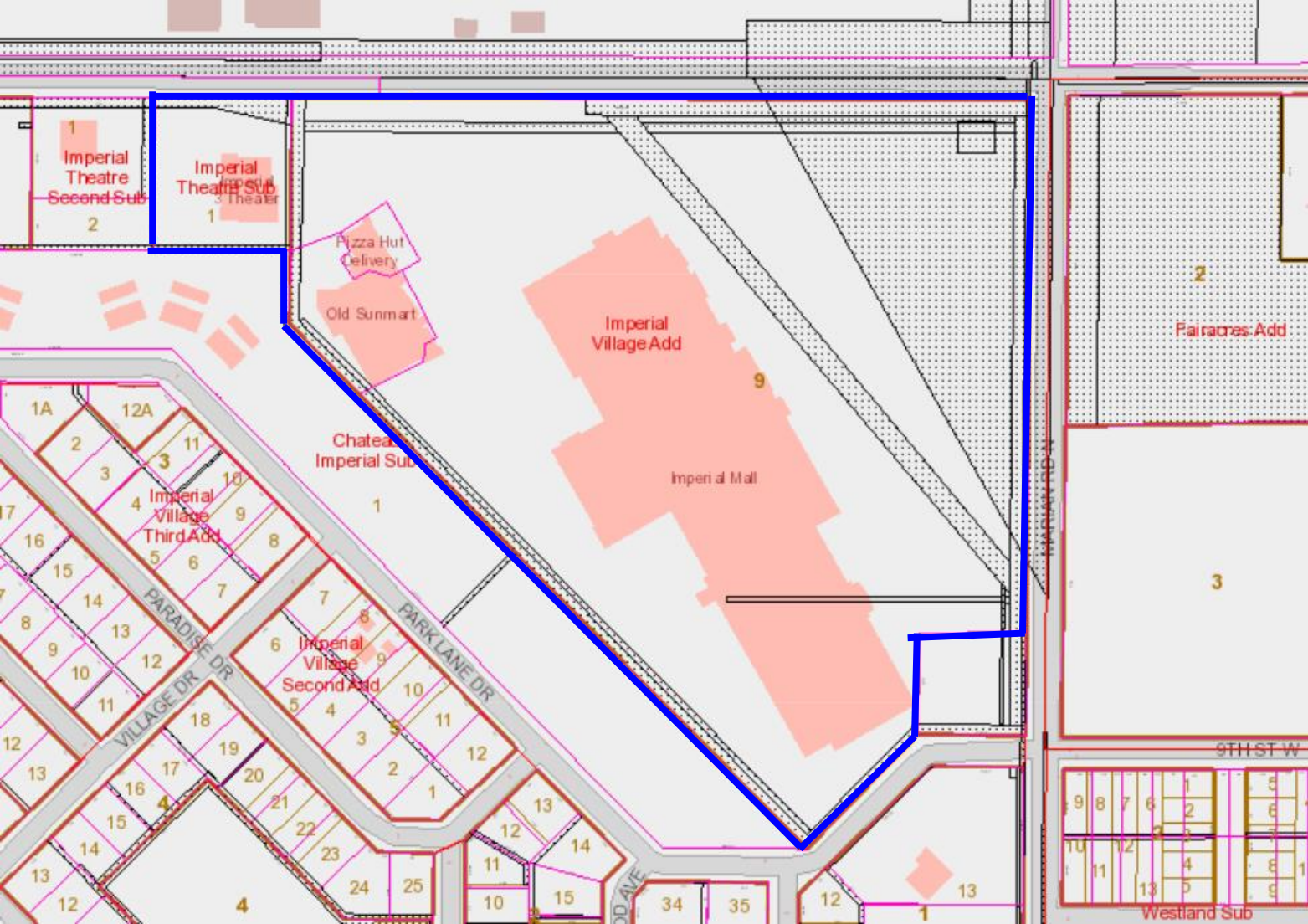
Imperial Village Second Add

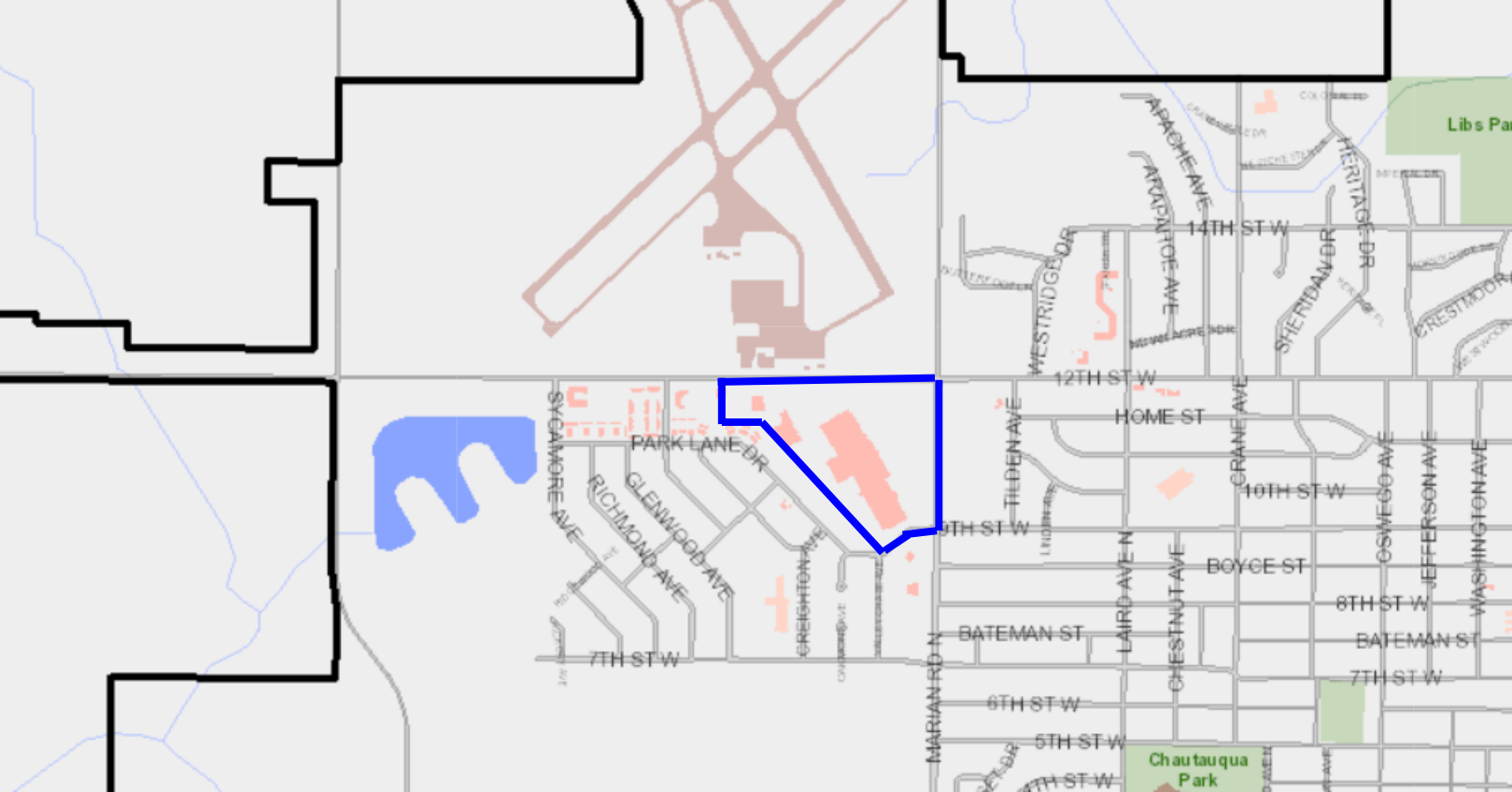
Westland Sub

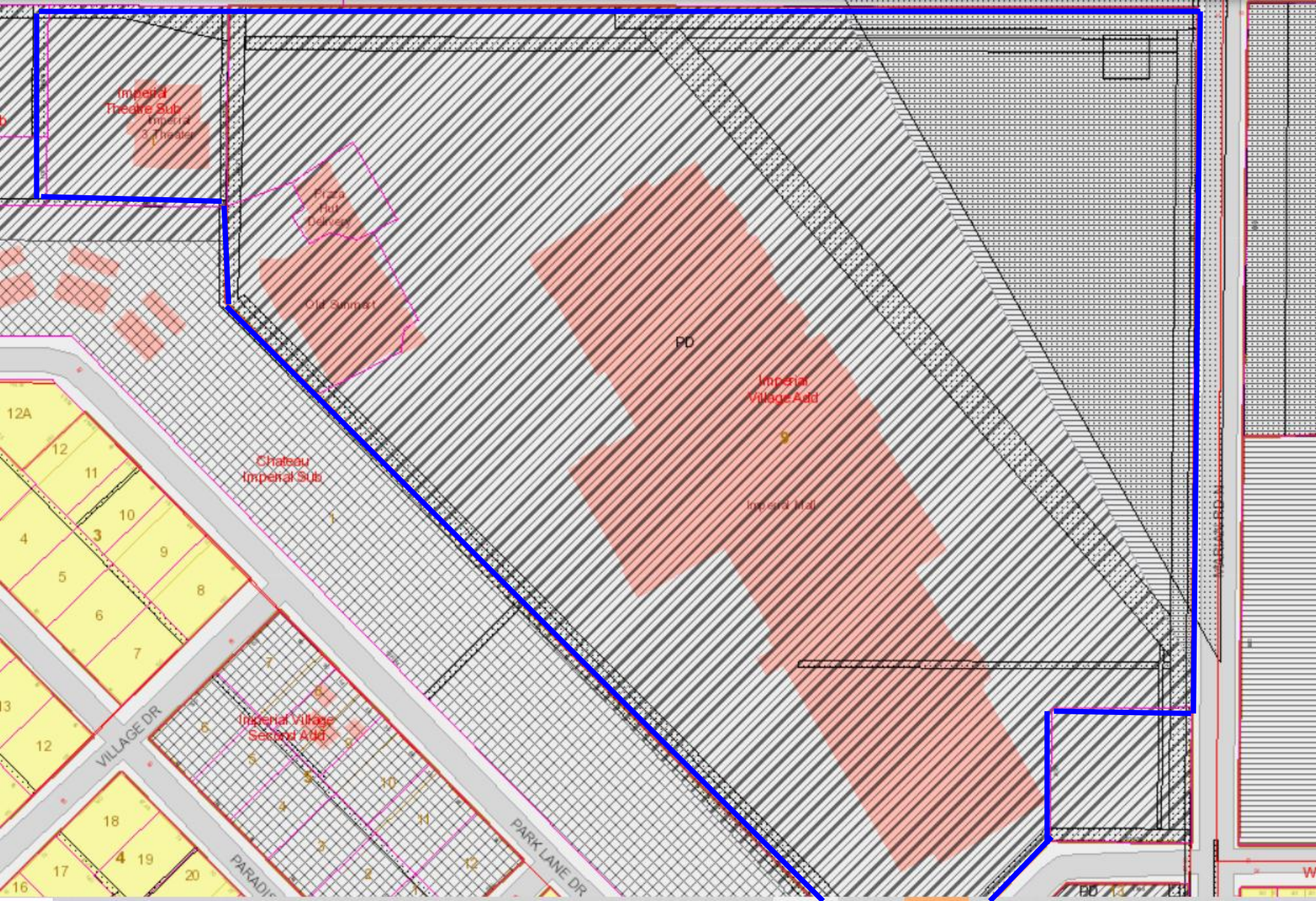
VILLAGE DR
PARADISE DR

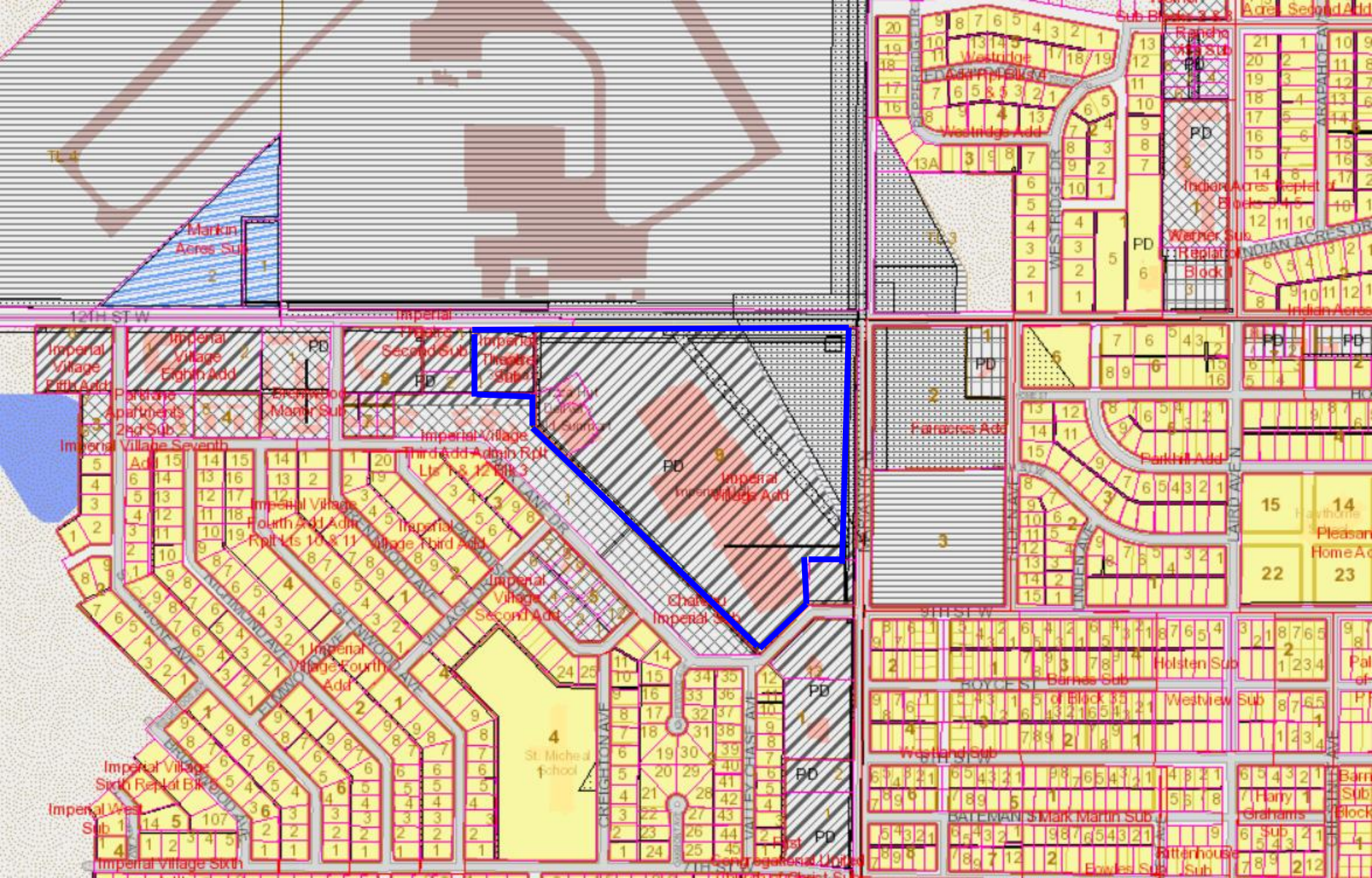
PARK LANE DR

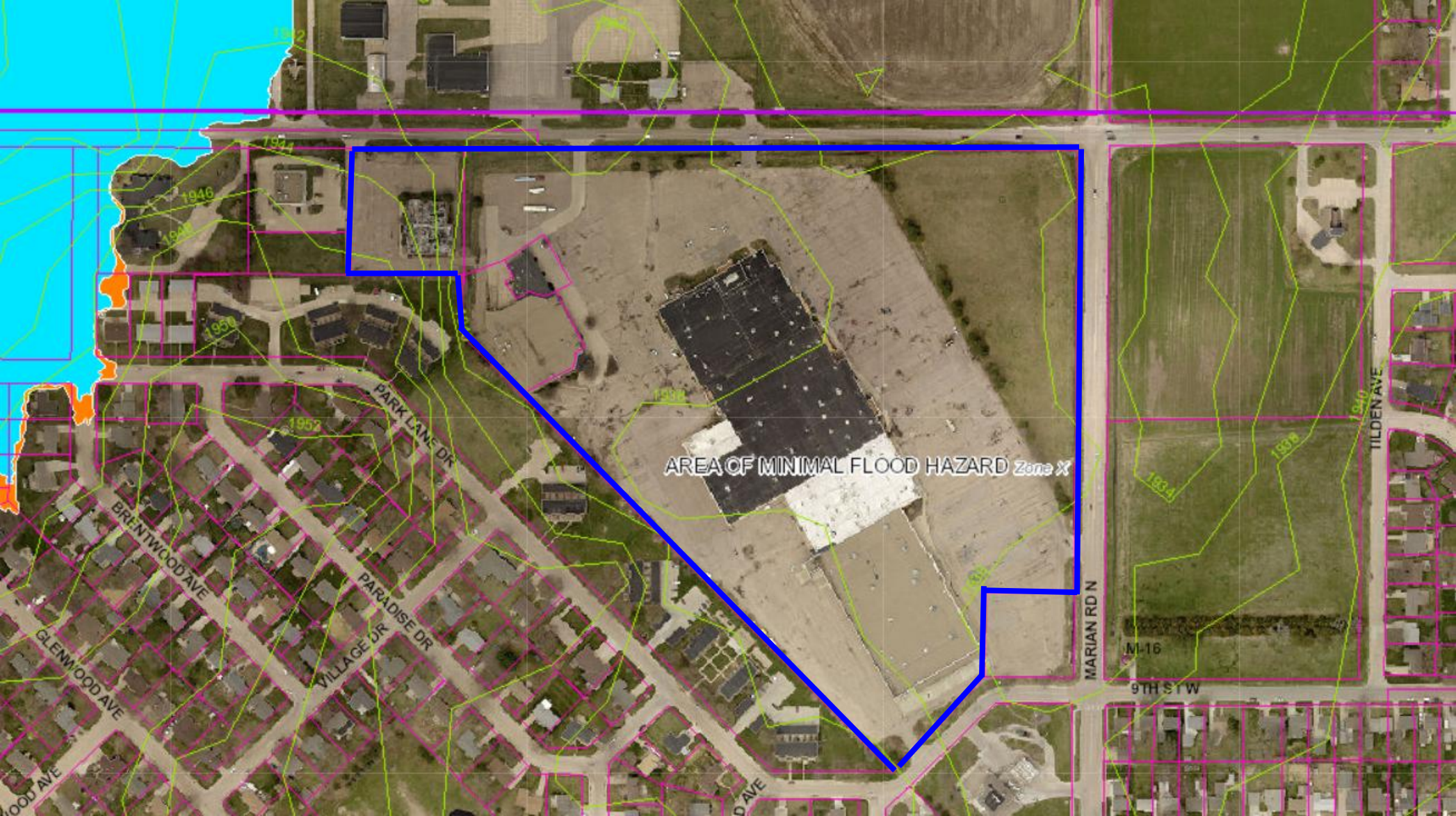












AREA OF MINIMAL FLOOD HAZARD Zone X

MARIAN RD N

M-16

9TH STW

TILDEN AVE

PARK LANE DR

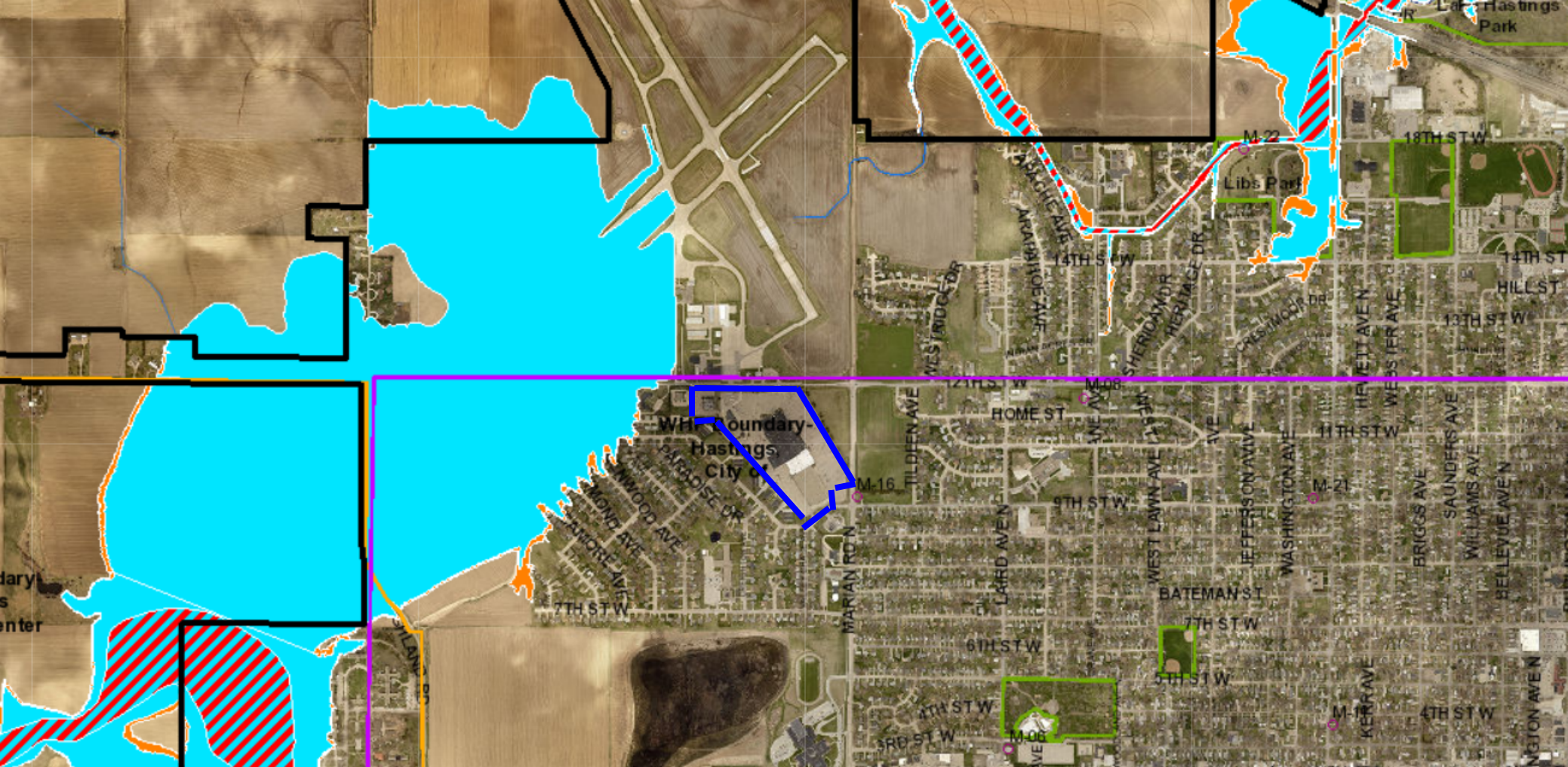
PARADISE DR

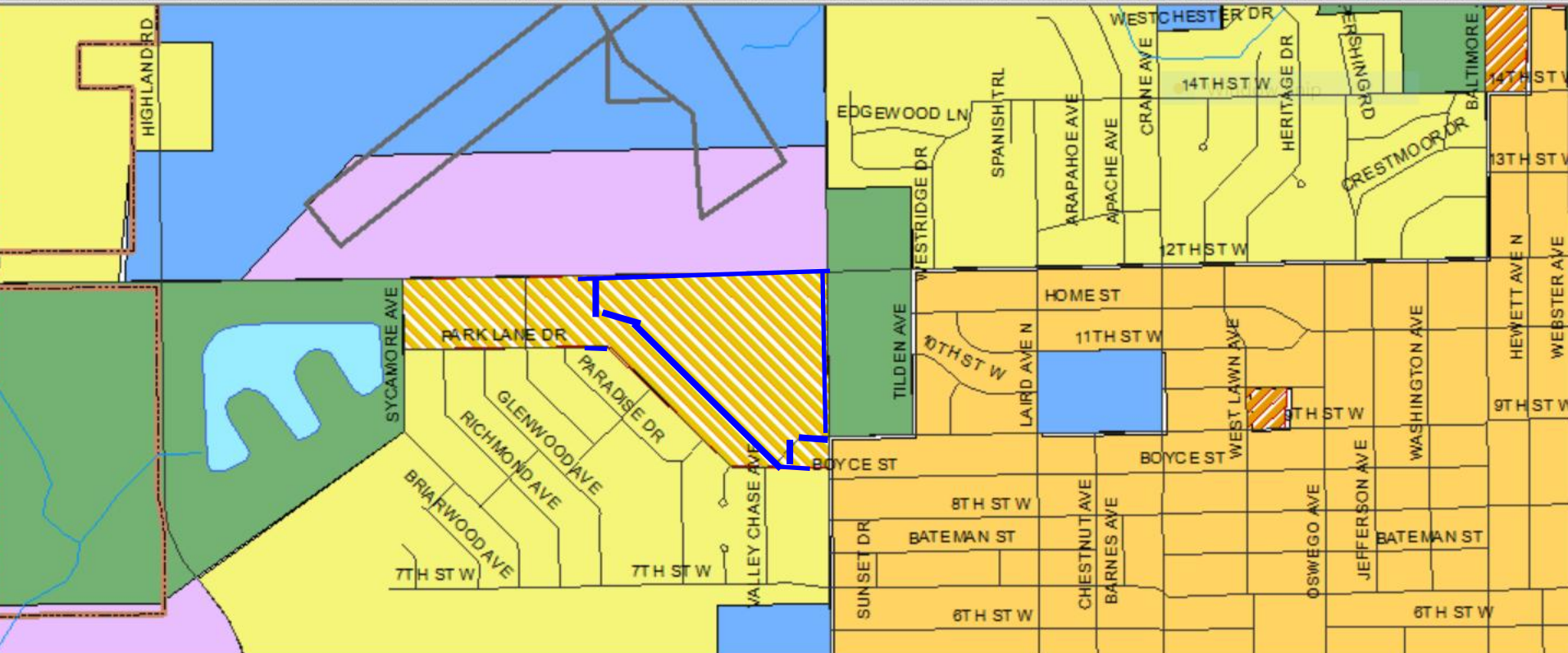
VILLAGE DR

BRENTWOOD AVE

GLENWOOD AVE

WOOD AVE





Future Land Use

City of Hastings, Nebraska



0 485 970 1940 Feet

Land Use:

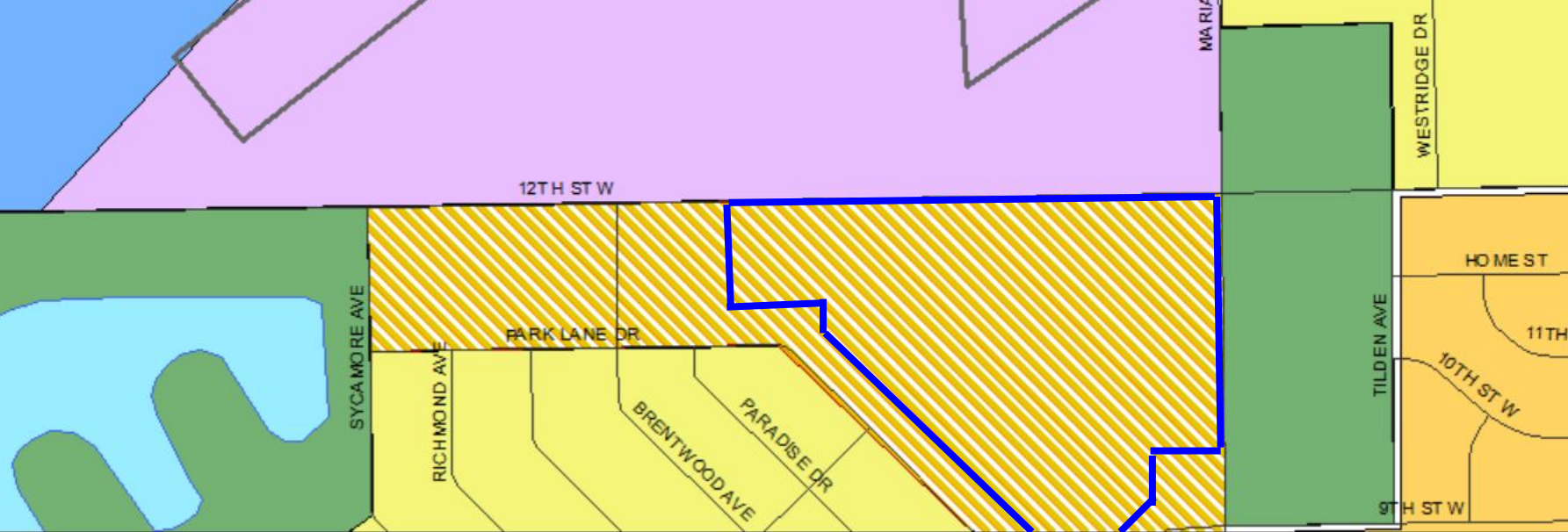
- Rural Residential
- Suburban Residential
- Urban Residential

- Mixed-Use - Neighborhood
- Mixed-Use - Community
- Mixed-Use Downtown
- Commercial/Retail
- Employment/Industrial

- Public / Semi-Public
- Parks & Recreation
- Agriculture

Overlay Districts:

- South Burlington Overlay
- Highway 6 Overlay
- Urban Industrial Overlay
- Floodplain
- City Boundary
- ETJ Boundary



Future Land Use of Hastings, Nebraska

255 510 1020 Feet



Land Use:

Rural Residential

Suburban Residential

Urban Residential



Mixed-Use - Neighborhood



Mixed-Use - Community



Mixed-Use Downtown



Commercial/Retail



Employment/Industrial



Public / Semi-Public



Parks & Recreation



Agriculture

Overlay Districts:



South Burlington Overlay



Highway 6 Overlay



Urban Industrial Overlay



Floodplain



City Boundary



ETJ Boundary