

VILLAGE OF RIDGEWOOD  
 PLANNING BOARD  
 WEDNESDAY, JULY 15, 2009  
 COMMENCING AT 7:42 P.M.

IN THE MATTER OF :  
 VALLEY HOSPITAL : TRANSCRIPT OF  
 PRESENTATION ON H-ZONE : PROCEEDINGS

B E F O R E :

VILLAGE OF RIDGEWOOD PLANNING BOARD  
 THERE BEING PRESENT:

- DAVID NICHOLSON, CHAIRMAN
- DAVID PFUND, MAYOR
- ANNE ZUSY, COUNCILWOMAN
- JIM BOMBACE, FIRE CHIEF
- ANNE WARD, MEMBER
- TOM RICHE, ALTERNATE MEMBER
- CHARLES NALBANTIAN, ALTERNATE MEMBER

LAURA A. CARUCCI, C.S.R., R.P.R., L.L.C.  
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A L S O P R E S E N T :

- BLAIS BRANCHEAU, PP, VILLAGE PLANNER
- CHRIS RUTISHAUSER, PE, VILLAGE ENGINEER
- BARBARA CARLTON, RECORDING SECRETARY

A P P E A R A N C E S :

PRICE, MEESE, SHULMAN & D'ARMINIO, P.C.  
 BY: GAIL PRICE, ESQ.  
 50 Tice Boulevard  
 Woodcliff Lake, New Jersey 07677  
 Counsel to the Board

CHARLES C. COLLINS, JR., ESQ.  
 Counsel to the Valley Hospital

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00:-37 1 CHAIRMAN NICHOLSON: I'd like to call  
00:-36 2 this special meeting of the Ridgewood Planning Board  
00:-36 3 to order.  
00:-36 4 In accordance with the provisions of  
00:-36 5 Section 10-4-8D of the Open Public Meetings Act, the  
00:-36 6 date, location and time of the commencement of this  
00:-36 7 meeting is reflected in a meeting notice, a copy of  
00:-36 8 which schedule was filed with the Village Manager and  
00:-36 9 the Village Clerk and a copy of which schedule was  
00:-35 10 mailed to The Ridgewood News and The Record  
00:-35 11 newspapers of general circulation throughout the  
00:-35 12 Village of Ridgewood. And a copy of which schedule  
00:-35 13 was prominently posted on the bulletin board in the  
00:-35 14 entry lobby of the Village Municipal Offices at 131  
00:-35 15 North Maple Avenue and on the Village website.  
00:-35 16 All of the foregoing notice procedures  
00:-35 17 having been accomplished in accordance with the  
00:-35 18 provisions of the Act.  
00:-35 19 Please rise for the flag salute.  
00:-35 20 (Whereupon, everyone stands for a  
00:-35 21 recitation of the Pledge of Allegiance.)  
00:-35 22 CHAIRMAN NICHOLSON: Barbara, could you  
00:-35 23 take the roll, please?  
00:-35 24 MS. CARLTON: Mayor Pfund?  
00:-35 25 (NO RESPONSE.)

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00:-43 1 MS. CARLTON: Councilwoman Zusy?  
00:-43 2 COUNCILWOMAN ZUSY: Here.  
00:-43 3 MS. CARLTON: Mr. Bombace?  
00:-43 4 MR. BOMBACE: Here.  
00:-43 5 MS. CARLTON: Chairman Nicholson?  
00:-43 6 CHAIRMAN NICHOLSON: Here.  
00:-43 7 MS. CARLTON: Mr. Nalbantian?  
00:-43 8 MR. NALBANTIAN: Here.  
00:-43 9 MS. CARLTON: Mr. Hurley?  
00:-43 10 MS. HURLEY: Here.  
00:-43 11 MS. CARLTON: Ms. Ward?  
00:-43 12 MS. WARD: Here.  
00:-43 13 MS. CARLTON: Mr. Pucciarelli?  
00:-43 14 (NO RESPONSE.)  
00:-42 15 MS. CARLTON: Mr. Tsapatsaris?  
00:-42 16 (NO RESPONSE.)  
00:-42 17 MS. CARLTON: Mr. Barclay?  
00:-42 18 (NO RESPONSE.)  
00:-42 19 MS. CARLTON: Mr. Riche?  
00:-42 20 MR. RICHE: Here.  
00:-42 21 CHAIRMAN NICHOLSON: Thank you,  
00:-36 22 Barbara.  
00:-36 23 Welcome, ladies and gentlemen to the  
00:-36 24 fifth in a series of public meetings concerning the  
00:-36 25 proposed Master Plan Amendment relative to the H-Zone

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00:-36 1 here in the Village of Ridgewood.  
00:-35 2 Before we begin, three announcements  
00:-35 3 please note the fire exits in the auditorium two in  
00:-35 4 the back, two on the sides and one in the rear and  
00:-35 5 two up front on either side (indicating).  
00:-35 6 In the case of an emergency, please  
00:-35 7 move quick through one of these exits and then exit  
00:-35 8 the building.  
00:-35 9 If you have parked in anything other  
00:-35 10 than a striped space in the parking lot I strongly  
00:-35 11 recommend that you move your car. The fire  
00:-35 12 department will tow people parked in the fire lane.  
00:-35 13 And, lastly, please silence, turn off  
00:-35 14 or turn to vibrate your personal devices so we won't  
00:-35 15 be interrupted by them during the course of the  
00:-35 16 evening.  
00:-35 17 I will keep my opening remarks brief.  
00:-35 18 I will certainly not repeat what I've said at the  
00:-35 19 beginning of our other meetings, certainly everything  
00:-34 20 that I have said applies. But there are a couple of  
00:-34 21 things that we have to cover before we get onto our  
00:-34 22 first public speaker working from the list that we  
00:-34 23 were using last time and leaving off -- and left off  
00:-34 24 at speaker 45.  
00:-34 25 The first thing that I'd like to

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00:-34 1 outline is our schedule for the next few months.  
 00:-34 2 This will be the last of our public  
 00:-34 3 hearing sections this summer. Whether or not we get  
 00:-34 4 through out speakers' list tonight we will be having  
 00:-34 5 other meetings in September concerning this matter.  
 00:-34 6 And this is not, as I understood some people might  
 00:-34 7 have thought, the last opportunity to speak before a  
 00:-33 8 vote. We have many other things to do, including at  
 00:-33 9 that time conclusion of the remarks by the public and  
 00:-33 10 an opportunity for Mr. Gould to sum up his case and  
 00:-33 11 an opportunity for a Hospital representative, Mr.  
 00:-33 12 Collins, to do the same. After that deliberations by  
 00:-33 13 the Board before a vote. So we have a ways to go  
 00:-33 14 yet.  
 00:-33 15 The second thing that I'd like to touch  
 00:-33 16 on is that over the course of this process the Board  
 00:-33 17 has been very deliberate in its efforts to be as  
 00:-33 18 comprehensive in the study of this matter as we  
 00:-33 19 possibly can. And the fact that is has taken over  
 00:-33 20 two years, that is probably a reflection of that.  
 00:-33 21 But we have been trying to be very diligent in our  
 00:-32 22 evaluation of the Hospital's proposal and our  
 00:-32 23 proposed action. And I think everybody on both sides  
 00:-32 24 would appreciate that.  
 00:-32 25 The Board has decided that in the

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00:-30 1 tonight before we get into our first speaker is to  
 00:-30 2 have some of the Board professionals and members of  
 00:-30 3 the Board answer questions that have been posed  
 00:-30 4 during the last couple of nights but could not be  
 00:-30 5 answered personally because the member wasn't  
 00:-30 6 present.  
 00:-30 7 And for that I am going to turn the  
 00:-30 8 microphone over to Ms. Price to help us recall the  
 00:-30 9 questions and ask the residents to put their answers  
 00:-30 10 on the record.  
 00:-30 11 MS. PRICE: Thank you, Mr. Chairman.  
 00:-30 12 Is this on? Yes. Okay.  
 00:-30 13 I believe that we had three specific  
 00:-30 14 areas of questions that were left open at the last  
 00:-30 15 meeting, one being directed for the Chief -- directed  
 00:-30 16 to the Chief; one being directed for our Village  
 00:-30 17 Engineer; and one more the Village Planner.  
 00:-30 18 So what I would like to do is start  
 00:-29 19 with the Chief if I may I need to swear you in  
 00:-29 20 because you're going to wear a different hat.  
 00:-29 21 Do you swear the testimony you're about  
 00:-29 22 to give will be the truth, the whole truth and  
 00:-29 23 nothing but the truth, so help you God?  
 00:-29 24 CHIEF BOMBACE: Yes.  
 00:-29 25

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00:-32 1 interest of being comprehensive and in response to  
 00:-32 2 comments that we have heard from the public over the  
 00:-32 3 last three sessions that we are engaging specialists  
 00:-32 4 in the field of medical facility planning, who will  
 00:-32 5 advise -- review the material that has been amassed  
 00:-32 6 in these proceedings and ultimately will advise the  
 00:-32 7 Board relative to matters of appropriate sites for  
 00:-32 8 modern hospitals, appropriate physical requirements  
 00:-32 9 for modern hospitals and other aspects that have been  
 00:-32 10 the subject of questions or debate in these  
 00:-32 11 proceedings.  
 00:-32 12 The engagement of our professional is  
 00:-31 13 almost concluded. He will start work immediately.  
 00:-31 14 It is our intention that he work during the  
 00:-31 15 intervening month-and-a-half between now and  
 00:-31 16 September. And in September our first order of  
 00:-31 17 business then when we pick this matter back up is to  
 00:-31 18 hear his report.  
 00:-31 19 After we've heard his report, and Mr.  
 00:-31 20 Collins for the Hospital and Mr. Gould for the  
 00:-31 21 Concerned Residents of Ridgewood had an opportunity  
 00:-31 22 to ask our new expert questions, then we will pick up  
 00:-31 23 again with the public questions and statement phase  
 00:-31 24 of the public hearing.  
 00:-31 25 Everybody got that? The next step for

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1 J A M E S B O M B A C E,  
 2 Having been duly sworn, testifies as follows:  
 00:-29 3 MS. PRICE: And could you just identify  
 00:-29 4 the position under which you're testifying at the  
 00:-29 5 moment?  
 00:-29 6 CHIEF BOMBACE: I am currently serving  
 00:-29 7 as the director and Chief of the Ridgewood Fire  
 00:-29 8 Department.  
 00:-29 9 MS. PRICE: And, Chief, you were not  
 00:-29 10 present of the last meeting but you've been supplied  
 00:-29 11 with the questions that were asked relative to the  
 00:-29 12 provision of emergency services at the last  
 00:-29 13 meeting --  
 00:-29 14 CHIEF BOMBACE: Yes.  
 00:-29 15 MS. PRICE: Is that correct?  
 00:-29 16 And are you in a position this evening  
 00:-29 17 to provide answers to those two questions regarding  
 00:-29 18 the adequacy of the emergency services capability in  
 00:-29 19 the event that, A, there was a large scaled disaster  
 00:-29 20 and, B, what impact, if any, the increase in size  
 00:-29 21 might have on the emergency services itself?  
 00:-29 22 CHIEF BOMBACE: Yes.  
 00:-28 23 MS. PRICE: Could you explain in  
 00:-28 24 narrative form your opinion on those questions?  
 00:-28 25 CHIEF BOMBACE: Certainly.

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00:-28 1 The first question dealt with how EMS  
 00:-28 2 would be able to handle an emergency evacuation of  
 00:-28 3 the hospital building. That was in relationship to  
 00:-28 4 once the hospital was increased in size.  
 00:-28 5 The answer to that really involves more  
 00:-28 6 than the EMS. It involves the police department, the  
 00:-28 7 fire department an EMS. An evacuation situation can  
 00:-28 8 be one of two types of situations. It can be an  
 00:-28 9 on-site where the evacuate one building and move the  
 00:-28 10 patients to an adjacent building. Patients can be  
 00:-28 11 moved through elevators moving floor to floor or  
 00:-28 12 through doors that separate the buildings.  
 00:-28 13 So you could have a situation say in  
 00:-28 14 the Bergen Wing, and we would have the option of  
 00:-27 15 moving the patients either to the Cheel Wing or the  
 00:-27 16 Phillip Wing currently as the complex sets up now.  
 00:-27 17 That plan as been in place for a number  
 00:-27 18 of years. And we've actually, in a limited scale,  
 00:-27 19 practiced that plan.  
 00:-27 20 The other type of evacuation would be a  
 00:-27 21 situation where it's determined it's necessary to  
 00:-27 22 evacuate the entire hospital facility, a little more  
 00:-27 23 complex, but certainly something that we've looked  
 00:-27 24 at, planned out and have had small drills involving  
 00:-27 25 the police, the fire department and the EMS. B.F.

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00:-27 1 Middle School would become -- this building here,  
 00:-27 2 would be come of first area of refuge. In other  
 00:-27 3 words, as many and as quickly as we can, we would  
 00:-27 4 remove patients and staff from that building to this  
 00:-26 5 building.  
 00:-26 6 Now obviously that could present  
 00:-26 7 somewhat of a more difficult problem during the  
 00:-26 8 school day, but we would move the students from here  
 00:-26 9 to Travell and then move the hospital staff to here,  
 00:-26 10 should that occur during the normal school week.  
 00:-26 11 From that point we would be able to  
 00:-26 12 disburse by using ambulance corps for surrounding  
 00:-26 13 communities and fire departments from surrounding  
 00:-26 14 communities that support the more critical care  
 00:-26 15 patients to other facilities.  
 00:-26 16 Understand we talking about a major  
 00:-26 17 catastrophe at Valley Hospital. So we're going to  
 00:-26 18 use a considerable amount of the county resources.  
 00:-26 19 So that plan has been in place. I  
 00:-26 20 don't see any change in the plan because of a change  
 00:-26 21 in the physical structure of the facility, Valley,  
 00:-26 22 itself.  
 00:-25 23 Clearly if we were talking about having  
 00:-25 24 more patient beds, more visitors, more activities,  
 00:-25 25 more inpatient, outpatient type of testing and

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00:-25 1 surgeries going on, the more people present a larger  
 00:-25 2 problem. But as far as I can tell that doesn't seem  
 00:-25 3 to be an issue at this point.  
 00:-25 4 The second question related to -- and  
 00:-25 5 I'm going to read it: Whether the Hospital gets  
 00:-25 6 involved at all when there is a possible New York  
 00:-25 7 City terrorist threat? What happens with regard to  
 00:-25 8 the Hospital in both terms of its own evacuation as  
 00:-25 9 well as efforts to assist other agencies, if  
 00:-25 10 something such as a New York City terrorist threat  
 00:-25 11 occurs?  
 00:-25 12 That's kind of a broad question, but  
 00:-25 13 the person I think was getting at, if something  
 00:-25 14 happens in New York City can it affect Valley. And  
 00:-24 15 the answer is clearly yes. September 11th there were  
 00:-24 16 a number of people who were transported across the  
 00:-24 17 river to Jersey City, who ended up going to Jersey  
 00:-24 18 City hospitals and some other hospitals that were  
 00:-24 19 closer to where they came into Jersey. Valley was  
 00:-24 20 put on alert. Clearly, if something happens Valley  
 00:-24 21 could very well be involved.  
 00:-24 22 To answer that, because it's possible  
 00:-24 23 the numbers of people coming could be overwhelmingly  
 00:-24 24 and they could have some type of a situation where  
 00:-24 25 they needed to be decontaminated the fire department

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00:-24 1 has a plan in place, along with the 13 towns that  
 00:-24 2 consist of the Northwest Bergen Mutual Aid, we, along  
 00:-24 3 with Valley Hospital, have trained for  
 00:-24 4 decontamination of individuals before they enter the  
 00:-24 5 hospital facility so as not to contaminate either the  
 00:-24 6 staff, other employees or other patients in the  
 00:-24 7 hospital.  
 00:-24 8 We have a process which the other  
 00:-23 9 municipality fire department's have agreed to provide  
 00:-23 10 us with equipment and manpower to help us in this  
 00:-23 11 situation. And it could range from, you know, 50 to  
 00:-23 12 60 people, up to a couple of hundred people,  
 00:-23 13 depending upon what the nature of the property  
 00:-23 14 problem is.  
 00:-23 15 But, yes, the fire department has  
 00:-23 16 looked at and we've always taken a position of what  
 00:-23 17 if. And Valley Hospital is certainly one of our  
 00:-23 18 larger facilities and is certainly one of our larger  
 00:-23 19 concerns because of the life hazard in that building.  
 00:-23 20 So I'm comfortable in saying that we  
 00:-23 21 already have a plan. The plan has been in place for  
 00:-23 22 a number of years. It's certainly a plan that we've  
 00:-23 23 refined as time went on and Valley grew. Obviously  
 00:-23 24 if Valley grows again it's certainly going to have to  
 00:-23 25 be looked at again and we'll do whatever is necessary

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00:-23 1 to make sure that both the patients, the staff and  
 00:-23 2 the community is well protected in whatever way is  
 00:-22 3 necessary.  
 00:-22 4 MS. PRICE: Thank you, Chief.  
 00:-22 5 Mr. Chairman, I'm not sure if the Board  
 00:-22 6 has any follow up questions for the Chief.  
 00:-22 7 If not, I'll proceed with the questions  
 00:-22 8 to the Village Engineer.  
 00:-22 9 CHAIRMAN NICHOLSON: Any questions for  
 00:-22 10 the Chief?  
 00:-22 11 (NO RESPONSE.)  
 00:-22 12 CHAIRMAN NICHOLSON: No?  
 00:-22 13 Thank you, Chief.  
 00:-22 14 CHIEF BOMBACE: You're welcome.  
 00:-22 15 C H R I S R U T I S H A U S E R,  
 00:-22 16 Having been previously sworn, continues to  
 00:-22 17 testify as follows:  
 00:-22 18 MS. PRICE: Chris, at the last meeting  
 00:-22 19 there was a question postured concerning water  
 00:-22 20 consumption by the Hospital and you advised that you  
 00:-22 21 would go back and take a look at that issue.  
 00:-22 22 Have you had an opportunity to do that  
 00:-22 23 in the interim since the last meeting?  
 00:-22 24 MR. RUTISHAUSER: Yes, I have.  
 00:-22 25 MS. PRICE: Are you in a position this

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00:-21 1 So Valley uses just about two percent  
 00:-21 2 of the water company's total output.  
 00:-21 3 MS. PRICE: Mr. Chairman, I believe  
 00:-21 4 that those were the issues for the Village Engineer.  
 00:-21 5 I'm not sure if there's any follow up  
 00:-21 6 from the Board Member on that?  
 00:-21 7 CHAIRMAN NICHOLSON: Anybody have a  
 00:-20 8 follow up question of Chris on that?  
 00:-20 9 (NO RESPONSE.)  
 00:-20 10 CHAIRMAN NICHOLSON: Thank you, Chris.  
 00:-20 11 MR. RUTISHAUSER: I think there's also  
 00:-20 12 -- wasn't there also a question regarding sewer use?  
 00:-20 13 The Village currently bills Valley  
 00:-20 14 Hospital for discharging to our sewer, sanitary sewer  
 00:-20 15 collection system. I don't have the exact numbers,  
 00:-20 16 but in the previous year we billed them, I think, in  
 00:-20 17 the range of about \$220,000 based on our billing  
 00:-20 18 ordinances of which they're not exempt.  
 00:-20 19 MS. PRICE: Okay. Thank you.  
 00:-20 20 B L A I S B R A N C H E A U,  
 00:-20 21 Having been previously sworn, continues to  
 00:-20 22 testify as follows:  
 00:-20 23 MS. PRICE: Mr. Brancheau, the last  
 00:-20 24 question is directed for you in the area of planning.  
 00:-20 25 At the end of the last hearing a

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00:-22 1 evening to advise the public and the Board concerning  
 00:-22 2 the issue of water consumption for the last four  
 00:-22 3 quarters or so?  
 00:-22 4 MR. RUTISHAUSER: Yes, I am.  
 00:-22 5 MS. PRICE: Can you just go through the  
 00:-22 6 details concerning consumption and any other  
 00:-22 7 particulars on the issue, if you can?  
 00:-22 8 MR. RUTISHAUSER: Just one question, do  
 00:-21 9 you want me under oath.  
 00:-21 10 MS. PRICE: You've been previously  
 00:-21 11 sworn --  
 00:-21 12 MR. RUTISHAUSER: Okay.  
 00:-21 13 MS. PRICE: And you remain under oath.  
 00:-21 14 MR. RUTISHAUSER: Okay. Thank you.  
 00:-21 15 Valley Hospital was billed for the  
 00:-21 16 previous four quarters 191,370.95 for their  
 00:-21 17 connections at their facility at the corner of  
 00:-21 18 Linwood Avenue and Van Dien.  
 00:-21 19 Their -- for quarter average  
 00:-21 20 consumption is 14 million gallons,  
 00:-21 21 14,430,000 gallons.  
 00:-21 22 Their daily consumption is on average  
 00:-21 23 158,571 gallons.  
 00:-21 24 That relates to a system average  
 00:-21 25 consumption of 8 million gallons a day.

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00:-20 1 question arose as to whether in performing the  
 00:-20 2 analysis concerning the overall floor area for the  
 00:-20 3 proposal or for the Master Plan Amendment,  
 00:-20 4 consideration was, in fact, given to above grade  
 00:-19 5 structures as well as below grade structures. And  
 00:-19 6 there may have been an issue that needed to be  
 00:-19 7 clarified for the record.  
 00:-19 8 And I'd ask if you have reviewed that  
 00:-19 9 issue since the last meeting and are in a position to  
 00:-19 10 provide additional testimony on that point?  
 00:-19 11 MR. BRANCHEAU: Yes, I am.  
 00:-19 12 Is this on?  
 00:-19 13 MS. PRICE: Now -- yes, now I can hear.  
 00:-19 14 MR. BRANCHEAU: Yes, I am.  
 00:-19 15 MS. PRICE: Do you recall the question  
 00:-19 16 --  
 00:-19 17 MR. BRANCHEAU: Yes.  
 00:-19 18 MS. PRICE: -- concerning differential?  
 00:-19 19 MR. BRANCHEAU: Yes.  
 00:-19 20 There's really -- and the reason the  
 00:-19 21 confusion creeps in is because the Master Plan is  
 00:-19 22 proposing to regulate two components of floor area  
 00:-19 23 which overlap, but which are not mutually exclusive.  
 00:-19 24 And there may be some confusion because of that.  
 00:-19 25 The two aspects of floor area that the

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00:-19 1 Master Plan recommends be regulated first relate to  
 00:-19 2 the intensity of the hospital use and that -- by  
 00:-19 3 intensity we are referring to those activities in the  
 00:-18 4 Hospital that generate significant volume of  
 00:-18 5 employees, visitors and patients.

00:-18 6 We do not regulate, for purposes of  
 00:-18 7 intensity of use in the Master Plan, other portions  
 00:-18 8 of the building that don't contribute or which would  
 00:-18 9 be double counting of patients, employees and  
 00:-18 10 visitors.

00:-18 11 For example, parking decks, while they  
 00:-18 12 contribute to the volume of the overall facility at  
 00:-18 13 the Hospital the people that are parking in the  
 00:-18 14 parking deck are also going into the building. So  
 00:-18 15 that would be double counting those people. So that  
 00:-18 16 part is not included for purposes of intensity of use  
 00:-18 17 regulation.

00:-18 18 Same thing with the cafeteria and the  
 00:-18 19 hallways. The people that are in the cafeteria, the  
 00:-18 20 people that are in the hallways, are also in other  
 00:-18 21 areas of building where they are being counted for  
 00:-17 22 purposes of regulation.

00:-17 23 Also certain other incidental areas  
 00:-17 24 like mechanical areas and storage areas, which  
 00:-17 25 typically have little or no employees and no visitors

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00:-16 1 above ground is counted. And nothing that is below  
 00:-16 2 ground is counted because what's below ground has no  
 00:-16 3 visual impact. What is above ground does have a  
 00:-16 4 visual impact, whether or not it's a hallway, whether  
 00:-16 5 or not it's a cafeteria, whether or not it's a  
 00:-16 6 parking deck. And the Master Plan proposes to limit  
 00:-15 7 approximately 970,000 square feet above ground, of  
 00:-15 8 which 626,000 is for the hospital buildings and  
 00:-15 9 344,000 is for parking decks.

00:-15 10 So those two components, while there is  
 00:-15 11 some overlap -- obviously, portions of the building  
 00:-15 12 that are above ground are also used for inpatient bed  
 00:-15 13 areas and are also used for diagnostic areas and  
 00:-15 14 administrative areas. So there is some overlap with  
 00:-15 15 the regulation of intensity of use. They are not  
 00:-15 16 separate -- totally separate, but they're also  
 00:-15 17 totally not identical.

00:-15 18 Now, there was a question about do  
 00:-15 19 either of these regulations affect the entire area of  
 00:-15 20 the Hospital above and below grade including parking  
 00:-15 21 decks, including mechanical spaces and hallways and  
 00:-15 22 stairwells and forth. No, they do not.

00:-15 23 Currently, in the Village of Ridgewood  
 00:-14 24 the gross floor area regulations for all  
 00:-14 25 nonresidential uses typically exclude parking decks,

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00:-17 1 or patients in them, are also not included in the  
 00:-17 2 regulation of the intensity of use.

00:-17 3 So the intensity of use regulation is  
 00:-17 4 based upon 454 maximum beds, plus 378,000 square feet  
 00:-17 5 of floor area for shared inpatient and outpatient  
 00:-17 6 diagnostic treatment areas, clinical support areas,  
 00:-17 7 logistical support areas and administrative areas.

00:-17 8 To clarify the floor area that's  
 00:-17 9 devoted to the beds is approximately, in the full  
 00:-17 10 build-out, a little over 400,000 square feet of floor  
 00:-17 11 area.

00:-17 12 So if you were to look at it from a  
 00:-17 13 strictly floor area standpoint it would be roughly  
 00:-17 14 800,000 square feet the Hospital would be limited to,  
 00:-16 15 in the Master Plan, as far as by the intensity of the  
 00:-16 16 use goes.

00:-16 17 The Master Plan then proposes to  
 00:-16 18 regulate a second component of the Hospital and that  
 00:-16 19 is the building mass of those portions of the  
 00:-16 20 building which are above the ground.

00:-16 21 And the purpose of that regulation is  
 00:-16 22 not number of patients, visitors, traffic and  
 00:-16 23 everything else, but the visual impact of these  
 00:-16 24 fairly large buildings.

00:-16 25 So in that case everything that is

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00:-14 1 typically exclude basement areas and dead storage  
 00:-14 2 areas from that calculation.

00:-14 3 So this is no real departure from what  
 00:-14 4 we already do and have done for many years at the  
 00:-14 5 Hospital.

00:-14 6 The question came up what the total  
 00:-14 7 floor area of the Hospital was with all of these  
 00:-14 8 areas included and we stated that without trying to  
 00:-14 9 give exact numbers it's about 1.5 million square feet  
 00:-14 10 above and below grade including parking decks,  
 00:-14 11 including those portions of parking decks that are on  
 00:-14 12 the ground.

00:-14 13 So -- and this we stated at the -- one  
 00:-14 14 of the January meetings of the Board where we were  
 00:-14 15 discussing the concept of floor area ratio. And it's  
 00:-14 16 in the transcript, I've checked it since the last  
 00:-14 17 meeting. And we did, in fact, advise the Board at  
 00:-13 18 that time about the 1.5 million total for the  
 00:-13 19 hospital complex if we were to include those things.

00:-13 20 But, again, for the reasons I've  
 00:-13 21 already stated, because of this double layer of  
 00:-13 22 regulations, because below grade area doesn't have  
 00:-13 23 visual impact and because certain areas of the  
 00:-13 24 Hospital don't generate patients, visitors or  
 00:-13 25 employees, we aren't including them in the regulation

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00:-13 1 because there would be no point in including them.  
 00:-13 2 So I don't know if that clarifies  
 00:-13 3 things for people, but that's really how we got to  
 00:-13 4 where we are today, and why we're choosing to  
 00:-13 5 regulate it the way we do.  
 00:-13 6 And that was discussed, at least once,  
 00:-13 7 if not twice, before the Board in the various work  
 00:-13 8 sessions that the Board had prior to the preparation  
 00:-13 9 of the final draft of the Land Use Plan Amendment.  
 00:-13 10 MS. PRICE: Blais, let me ask you a  
 00:-13 11 follow up question, when you performed that  
 00:-12 12 calculation, at some point in time you referenced a  
 00:-12 13 January -- and the Board discussed that number to  
 00:-12 14 come up with the 1.5 million, did you perform a  
 00:-12 15 similar calculation along the way for the existing  
 00:-12 16 space, i.e. above ground and below ground?  
 00:-12 17 Was there a similar comparison made?  
 00:-12 18 MR. BRANCHEAU: Yes, I checked that  
 00:-12 19 since the last meeting. And the existing hospital  
 00:-12 20 building above ground and below ground is about  
 00:-12 21 530,000 square feet, which was stated also on the  
 00:-12 22 record in prior hearings.  
 00:-12 23 As far as parking structures go, there  
 00:-12 24 are no above grade parking structures. But if we  
 00:-12 25 count the various below grade areas of parking as

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00:-12 1 well as the surface parking which is counted in the  
 00:-12 2 -- to do an apples and apples comparison, the surface  
 00:-11 3 parking is counted in the full above grade figure  
 00:-11 4 that I just cited a minute ago if we were to do that  
 00:-11 5 comparison existing parking takes up 374,000 square  
 00:-11 6 feet.  
 00:-11 7 So if you are add the two together, you  
 00:-11 8 get about 900,000 square feet between the hospital  
 00:-11 9 buildings and the parking.  
 00:-11 10 So compare that with the 1.5 million,  
 00:-11 11 translates to about a 600,000-square foot expansion.  
 00:-11 12 MS. PRICE: So the question at the last  
 00:-11 13 meeting about comparing 500,000 to a million-five,  
 00:-11 14 your analysis compared 900,000 plus or minus to a  
 00:-11 15 million-five.  
 00:-11 16 MR. BRANCHEAU: That's correct.  
 00:-11 17 The 500 to 1.5 is apples and oranges.  
 00:-11 18 The 500 didn't include parking decks, which is  
 00:-11 19 roughly 600,000 square feet of the total of the 1.5  
 00:-11 20 million in the full build-out.  
 00:-11 21 CHAIRMAN NICHOLSON: Thank you, Blais.  
 00:-10 22 Any members of the --  
 00:-10 23 COUNCILWOMAN ZUSY: I do.  
 00:-10 24 CHAIRMAN NICHOLSON: Go ahead.  
 00:-10 25 COUNCILWOMAN ZUSY: I have a question.

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00:-10 1 CHAIRMAN NICHOLSON: Go ahead.  
 00:-10 2 COUNCILWOMAN ZUSY: Blais, I know  
 00:-10 3 you've repeated all these numbers, but I'd like to be  
 00:-10 4 able to scrutinize them more easily perhaps by  
 00:-10 5 putting them back to back.  
 00:-10 6 So the hospital now in toto is 530,000  
 00:-10 7 square feet; is that right?  
 00:-10 8 MR. BRANCHEAU: Yes.  
 00:-10 9 COUNCILWOMAN ZUSY: Okay. How much of  
 00:-10 10 that 530,000 square feet that exists today is above  
 00:-10 11 ground?  
 00:-10 12 MR. BRANCHEAU: About 370,000.  
 00:-10 13 COUNCILWOMAN ZUSY: So 370 and below  
 00:-10 14 ground?  
 00:-10 15 MR. BRANCHEAU: About 160.  
 00:-10 16 COUNCILWOMAN ZUSY: So 160,000 is below  
 00:-10 17 ground?  
 00:-10 18 MR. BRANCHEAU: Yes.  
 00:-10 19 COUNCILWOMAN ZUSY: And then you said  
 00:-10 20 the parking decks were below grade, what's the number  
 00:-10 21 for that?  
 00:-10 22 MR. BRANCHEAU: Two -- well, currently  
 00:-10 23 below grade parking is 223,000 approximately.  
 00:-10 24 COUNCILWOMAN ZUSY: So -- and below  
 00:-10 25 grade, that's different than below ground?

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00:-10 1 MR. BRANCHEAU: No. That's the same  
 00:-10 2 thing.  
 00:-10 3 COUNCILWOMAN ZUSY: Well you said that  
 00:-10 4 right now the Hospital in toto includes 160,000  
 00:-10 5 square feet below ground, bu then you said the  
 00:-10 6 parking decks are 223,000 square feet?  
 00:-10 7 MR. BRANCHEAU: I'm sorry. Would you  
 00:-10 8 repeat that?  
 00:-10 9 COUNCILWOMAN ZUSY: Yes.  
 00:-10 10 In talking about the specifications of  
 00:-10 11 the hospital as it exists today you said the Hospital  
 00:-09 12 in toto is 530,000 square feet of which 370,000 is  
 00:-09 13 above ground, 160,000 is below ground.  
 00:-09 14 And then I asked you how many square  
 00:-09 15 feet for parking decks and you gave a different  
 00:-09 16 figure which was 223,000.  
 00:-09 17 MR. BRANCHEAU: That was the below  
 00:-09 18 grade figure.  
 00:-09 19 COUNCILWOMAN ZUSY: So --  
 00:-09 20 MR. BRANCHEAU: There is another  
 00:-09 21 151,000 which is surface parking.  
 00:-09 22 COUNCILWOMAN ZUSY: What I don't -- I'm  
 00:-09 23 sorry. Say that again?  
 00:-09 24 MR. BRANCHEAU: There's another 151,000  
 00:-09 25 which is surface parking.

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00:-09 1 COUNCILWOMAN ZUSY: Okay.  
 00:-09 2 MR. BRANCHEAU: Which gives you a total  
 00:-09 3 of about --  
 00:-09 4 COUNCILWOMAN ZUSY: I see. Okay.  
 00:-09 5 MR. BRANCHEAU: -- 370 some thousand for  
 00:-09 6 all parking today.  
 00:-09 7 COUNCILWOMAN ZUSY: But that's not  
 00:-09 8 considered part of above ground --  
 00:-09 9 MR. BRANCHEAU: It will be in the full  
 00:-09 10 build-out. So for purposes of --  
 00:-09 11 COUNCILWOMAN ZUSY: Well, for purposes  
 00:-09 12 of the Hospital as exists today --  
 00:-09 13 MR. BRANCHEAU: -- apples -- you know  
 00:-09 14 for purposes of the comparison -- comparing today  
 00:-09 15 with the full build-out, I included the surface  
 00:-09 16 parking in that figure because it will be counted in  
 00:-08 17 the full build-out.  
 00:-08 18 COUNCILWOMAN ZUSY: But because it's on  
 00:-08 19 the surface it's not considered part of the above  
 00:-08 20 ground per se?  
 00:-08 21 MR. BRANCHEAU: It's not a -- it's not  
 00:-08 22 in --  
 00:-08 23 COUNCILWOMAN ZUSY: It's not a  
 00:-08 24 structure that can --  
 00:-08 25 MR. BRANCHEAU: It's not a structure

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00:-08 1 today.  
 00:-08 2 That's correct.  
 00:-08 3 COUNCILWOMAN ZUSY: Okay. So now how  
 00:-08 4 -- can we do the same exact thing we just did for the  
 00:-08 5 Hospital as it exists today for the proposed hospital  
 00:-08 6 in toto the -- the total is 1.5 million. Is that  
 00:-08 7 right?  
 00:-08 8 MR. BRANCHEAU: Not as it exists today.  
 00:-08 9 COUNCILWOMAN ZUSY: No, no, no.  
 00:-08 10 MR. BRANCHEAU: Oh.  
 00:-08 11 COUNCILWOMAN ZUSY: For the -- how  
 00:-08 12 large is the proposed hospital going to be in toto?  
 00:-08 13 MR. BRANCHEAU: About 980 some  
 00:-08 14 thousand, give or take.  
 00:-08 15 COUNCILWOMAN ZUSY: Okay. And of that  
 00:-08 16 how much is supposed to be above ground?  
 00:-08 17 MR. BRANCHEAU: About 580 give or take.  
 00:-08 18 COUNCILWOMAN ZUSY: Okay. And below?  
 00:-08 19 MR. BRANCHEAU: About 400 give or take.  
 00:-08 20 COUNCILWOMAN ZUSY: And parking, let's  
 00:-08 21 -- I mean do we need to differentiate between below  
 00:-08 22 grade as well as surface in the parking --  
 00:-08 23 MR. BRANCHEAU: Surface above grade  
 00:-08 24 would be about 345.  
 00:-07 25 COUNCILWOMAN ZUSY: And below?

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00:-07 1 MR. BRANCHEAU: About 235.  
 00:-07 2 COUNCILWOMAN ZUSY: Okay.  
 00:-07 3 Now we have all the figures back to  
 00:-07 4 back.  
 00:-07 5 So can you give us an indication of  
 00:-07 6 what -- how much larger this proposed hospital would  
 00:-07 7 be vis-a-vis the square feet in toto, the feet above  
 00:-07 8 ground, the feet below ground and that for the  
 00:-07 9 parking deck --  
 00:-07 10 MR. BRANCHEAU: Right.  
 00:-07 11 COUNCILWOMAN ZUSY: -- for the below  
 00:-07 12 grade or on surface.  
 00:-07 13 MR. BRANCHEAU: Okay.  
 00:-07 14 As it exists today, total for  
 00:-07 15 everything is roughly 900,000 including the hospital  
 00:-07 16 buildings and including both surface and below grade  
 00:-07 17 parking.  
 00:-07 18 COUNCILWOMAN ZUSY: How come -- how --  
 00:-07 19 what percentage of an increase would we have for  
 00:-07 20 the --  
 00:-07 21 MR. BRANCHEAU: It's about a 60 to  
 00:-07 22 70 percent increase.  
 00:-07 23 COUNCILWOMAN ZUSY: For the hospital in  
 00:-07 24 toto?  
 00:-07 25 MR. BRANCHEAU: In total for --

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00:-07 1 COUNCILWOMAN ZUSY: Okay. How about --  
 00:-07 2 MR. BRANCHEAU: Including parking.  
 00:-07 3 COUNCILWOMAN ZUSY: -- looking  
 00:-07 4 specifically -- okay.  
 00:-07 5 Looking specifically at the increase  
 00:-07 6 above ground, what kind of a percentage increase are  
 00:-07 7 we talking about.  
 00:-06 8 MR. BRANCHEAU: About 80 to 90 percent  
 00:-06 9 increase.  
 00:-06 10 COUNCILWOMAN ZUSY: And 80 to 90  
 00:-06 11 percent --  
 00:-06 12 MR. BRANCHEAU: Above ground.  
 00:-06 13 COUNCILWOMAN ZUSY: -- of what is  
 00:-06 14 visible -- is what I'm calling the space --  
 00:-06 15 MR. BRANCHEAU: Yes.  
 00:-06 16 COUNCILWOMAN ZUSY: -- in your face?  
 00:-06 17 Eighty to 90 percent more space in your face than  
 00:-06 18 now?  
 00:-06 19 MR. BRANCHEAU: Yes.  
 00:-06 20 COUNCILWOMAN ZUSY: Okay.  
 00:-06 21 How about below ground? What kind of  
 00:-06 22 an increase are we talking about, the below ground  
 00:-06 23 stuff which will not be space in your face?  
 00:-06 24 MR. BRANCHEAU: I just need to do the  
 00:-05 25 math here.

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00:05 **1** It's going from about 380 below grade  
 00:05 **2** today to full build-out of about 635 or so --  
 00:05 **3** COUNCILWOMAN ZUSY: What --  
 00:05 **4** MR. BRANCHEAU: In full build-out.  
 00:05 **5** COUNCILWOMAN ZUSY: -- what would you  
 00:05 **6** say the percentage increase is going to be?  
 00:05 **7** MR. BRANCHEAU: Probably around 80  
 00:05 **8** percent.  
 00:05 **9** COUNCILWOMAN ZUSY: I'm sorry?  
 00:05 **10** MR. BRANCHEAU: It's probably around 80  
 00:05 **11** percent.  
 00:05 **12** COUNCILWOMAN ZUSY: An 80 percent  
 00:05 **13** increase in the below ground.  
 00:05 **14** MR. BRANCHEAU: In the below, yes.  
 00:05 **15** COUNCILWOMAN ZUSY: So we're going to  
 00:05 **16** have an 80 to 90 percent in the above ground --  
 00:05 **17** MR. BRANCHEAU: Above ground.  
 00:05 **18** COUNCILWOMAN ZUSY: And a 80 percent  
 00:05 **19** increase in the below ground?  
 00:05 **20** MR. BRANCHEAU: I know there's  
 00:05 **21** something that's -- that's wrong because you can't  
 00:05 **22** have two 80s and have it average out at 60 to 70 --  
 00:05 **23** COUNCILWOMAN ZUSY: Yes.  
 00:05 **24** MR. BRANCHEAU: -- so there's something  
 00:05 **25** with wrong with the math.

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00:04 **1** much would the increase be for the surface parking?  
 00:04 **2** And how much of an increase for the below -- the  
 00:04 **3** below and on the same parking?  
 00:04 **4** MR. BRANCHEAU: Surface parking is a  
 00:04 **5** little more than doubling going from a little over  
 00:04 **6** 150,000 to 344.  
 00:04 **7** COUNCILWOMAN ZUSY: So it's about 50  
 00:04 **8** percent increase?  
 00:04 **9** MR. BRANCHEAU: It's more than  
 00:04 **10** doubling.  
 00:04 **11** COUNCILWOMAN ZUSY: Well, how many  
 00:04 **12** hundred --  
 00:04 **13** MR. BRANCHEAU: It's more than doubling?  
 00:04 **14** COUNCILWOMAN ZUSY: It's more than  
 00:04 **15** doubling, 100 percent.  
 00:04 **16** MR. BRANCHEAU: Yes.  
 00:04 **17** COUNCILWOMAN ZUSY: Okay.  
 00:04 **18** MR. BRANCHEAU: More than a hundred  
 00:04 **19** percent.  
 00:04 **20** COUNCILWOMAN ZUSY: More than a hundred  
 00:04 **21** percent.  
 00:04 **22** And the below, not the same parking,  
 00:03 **23** what's the increase in that?  
 00:03 **24** MR. BRANCHEAU: The below is increasing  
 00:03 **25** slightly only by like 10,000.

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00:05 **1** COUNCILWOMAN ZUSY: Maybe you can come  
 00:05 **2** back to us on that?  
 00:05 **3** MR. BRANCHEAU: Yes.  
 00:05 **4** COUNCILWOMAN ZUSY: But before you do,  
 00:05 **5** let's just finish up the equation.  
 00:05 **6** The parking decks, how many -- what  
 00:05 **7** kind of an increase are we talking about parking --  
 00:05 **8** square footage for parking in toto? And then I want  
 00:05 **9** -- I want to figure on the increase for surface and s  
 00:05 **10** below ground.  
 00:05 **11** MR. BRANCHEAU: Okay. Total parking  
 00:05 **12** today is about 374,000. Full build-out for parking  
 00:04 **13** would be about 578, so you have a little over 200,000  
 00:04 **14** square feet increase in parking.  
 00:04 **15** COUNCILWOMAN ZUSY: So the percentage  
 00:04 **16** increase is?  
 00:04 **17** MR. BRANCHEAU: So 200,000 on top of  
 00:04 **18** 374, so that's about 60 percent.  
 00:04 **19** COUNCILWOMAN ZUSY: Sixty percent  
 00:04 **20** increase in parking for how many more beds are we  
 00:04 **21** going to have here?  
 00:04 **22** MR. BRANCHEAU: Three more beds.  
 00:04 **23** COUNCILWOMAN ZUSY: Three more beds.  
 00:04 **24** And then let's look at the parking  
 00:04 **25** deck, same way we did with these other equations, how

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00:03 **1** COUNCILWOMAN ZUSY: Slightly. So  
 00:03 **2** percentage of an increase is?  
 00:03 **3** MR. BRANCHEAU: Oh, 5 percent.  
 00:03 **4** COUNCILWOMAN ZUSY: Five percent?  
 00:03 **5** MR. BRANCHEAU: Four to 5 percent.  
 00:03 **6** COUNCILWOMAN ZUSY: Four to 5 percent.  
 00:03 **7** Okay. Thank you very, very much.  
 00:03 **8** Do you want to get back to us and  
 00:03 **9** double check on the -- the 80 percent (applause)  
 00:03 **10** figure for below ground; the 80 to 90 percent figure  
 00:03 **11** for above ground --  
 00:03 **12** MR. BRANCHEAU: Yes. I -- I can --  
 00:03 **13** COUNCILWOMAN ZUSY: -- and the in toto  
 00:03 **14** for the 70 --  
 00:03 **15** MR. BRANCHEAU: I can do all these on a  
 00:03 **16** percentage basis for you, for the next meeting.  
 00:03 **17** COUNCILWOMAN ZUSY: I beg your pardon?  
 00:03 **18** MR. BRANCHEAU: I can do all of these  
 00:03 **19** on a percentage basis for you for the next meeting.  
 00:03 **20** COUNCILWOMAN ZUSY: Okay. I just think  
 00:03 **21** we have to be absolutely definitive on what we're  
 00:03 **22** talking about in terms.  
 00:03 **23** MR. BRANCHEAU: Sure.  
 00:03 **24** COUNCILWOMAN ZUSY: -- in terms of  
 00:03 **25** these increases.

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00:03 **1** Thank you very much.  
 00:03 **2** CHAIRMAN NICHOLSON: Any other members  
 00:03 **3** of the Board have questions of Blais?  
 00:03 **4** (NO RESPONSE.)  
 00:03 **5** CHAIRMAN NICHOLSON: All right. Just a  
 00:03 **6** reminder on our instructions to our speakers. Your  
 00:03 **7** time at the microphone is in two parts. The first is  
 00:03 **8** an opportunity to ask questions of the witnesses that  
 00:03 **9** have given testimony to the Board on the matter. We  
 00:02 **10** have most of them here tonight, but we do not have  
 00:02 **11** Mr. Staigar, the Board's traffic engineer. But if do  
 00:02 **12** you have a question for Mr. Staigar, please ask it  
 00:02 **13** and it will be answered by Mr. Staigar at our next  
 00:02 **14** meeting or a later meeting.  
 00:02 **15** And the second part of your time at the  
 00:02 **16** microphone is the time for your statement.  
 00:02 **17** I will ask you if you have questions.  
 00:02 **18** Once the questions and the answers are complete, I'll  
 00:02 **19** ask you if you would like to start your statement.  
 00:02 **20** And at that time that clock will start. Barbara  
 00:02 **21** Carlton, the Board Secretary, has the clock. When  
 00:02 **22** the clock makes it's little warning chime I'd ask you  
 00:02 **23** to wrap up your statement in two or three sentences.  
 00:02 **24** And we'll move on to the next speaker.  
 00:01 **25** Also remember if you have your  
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00:01 **1** statement in written form, you can submit it to the  
 00:01 **2** Board for the record. Give it to Barbara. It will  
 00:01 **3** be marked in in the order in which it was received  
 00:01 **4** with a number. And it will become part of the record  
 00:01 **5** and Members of the Board will have the opportunity to  
 00:01 **6** read your statement in writing as well.  
 00:01 **7** As I stated previously, please  
 00:01 **8** questions are questions succinctly stated. Please  
 00:01 **9** don't make them also your statement, so we have time  
 00:01 **10** this evening to get to as many speakers as we  
 00:01 **11** possibly can.  
 00:01 **12** Also as I said before, we're going to  
 00:01 **13** go back to the beginning of the list and give the  
 00:01 **14** people who were here very early on the very first  
 00:01 **15** night, who diligently signed up to speak, but weren't  
 00:00 **16** at our subsequent meetings, the opportunity to have  
 00:00 **17** their turn now.  
 00:00 **18** So Mr. Dryer, Mark Dryer, 295 Richards  
 00:00 **19** Road. Mr. Dryer with us tonight?  
 00:00 **20** (NO RESPONSE.)  
 00:00 **21** CHAIRMAN NICHOLSON: And forgive me if  
 00:00 **22** I cannot properly pronounce your name or read your  
 00:00 **23** handwriting.  
 00:00 **24** No, we're here (indicating).  
 00:00 **25** Lefferman, 94 Heights Road?  
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00:00 **1** (NO RESPONSE.)  
 00:00 **2** CHAIRMAN NICHOLSON: Michael Stern, 71  
 00:00 **3** John Street?  
 00:00 **4** MR. BRANCHEAU: Here we go.  
 00:00 **5** CHAIRMAN NICHOLSON: Just a reminder,  
 00:00 **6** please state your name, spell your last name, and  
 00:00 **7** give your address for the record.  
 00:00 **8** MR. STERN: My name is Michael Stern,  
 00:00 **9** S-t-e-r-n, 71 John Street.  
 00:00 **10** CHAIRMAN NICHOLSON: Thank you, Mr.  
 00:00 **11** Stern, so you have questions?  
 00:00 **12** MR. STERN: Sure. One question.  
 00:00 **13** CHAIRMAN NICHOLSON: Go ahead.  
 00:00 **14** MR. STERN: I'm going to quote a  
 00:00 **15** Ridgewood water document that I found on the Internet  
 00:00 **16** from May of 2007. And it says:  
 00:00 **17** "19,150 of the service connections are  
 00:00 **18** single family residential properties. And  
 00:00 **19** most of the remainder are small businesses,  
 00:00 **20** apartment complexes, light commercial,  
 00:00 **21** institutional and municipal. The Valley  
 00:00 **22** Hospital stands out, by far, as the largest  
 00:00 **23** single water user".  
 00:00 **24** And then under the section called  
 00:00 **25** "supply" it says:  
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00:00 **1** "This issue has long been the Achilles  
 00:00 **2** heel of this system".  
 00:00 **3** CHAIRMAN NICHOLSON: I'm sorry, Mr.  
 00:00 **4** Stern, could you move the microphone closer to your  
 00:00 **5** mouth?  
 00:00 **6** MR. STERN: Sure.  
 00:00 **7** CHAIRMAN NICHOLSON: Thank you.  
 00:00 **8** MR. STERN: Since the very first  
 00:00 **9** reviews and assessments Ridgewood Water has grappled  
 00:00 **10** with having enough supply capacity. This issue  
 00:01 **11** remains in full force today.  
 00:01 **12** Factors that loom are the economics and  
 00:01 **13** the logistics of bringing the volume of water into  
 00:01 **14** the system.  
 00:01 **15** So my question, and which I think I  
 00:01 **16** propose to the Village Engineer, is who will pay so  
 00:01 **17** that the water system already struggling to meet  
 00:01 **18** demand, can be further improved to meet the demands  
 00:01 **19** of a single heavy user, namely the Hospital.  
 00:01 **20** MR. RUTISHAUSER: When did you have  
 00:01 **21** your data from, 2007, I believe?  
 00:01 **22** MR. STERN: I had picked this up off  
 00:01 **23** the Internet in June and it's a May of 2007 piece of  
 00:01 **24** data from Ridgewood Water.  
 00:01 **25** MR. RUTISHAUSER: I do know the water  
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00:01 1 company has established an interconnection with  
 00:01 2 United Water to address some of the supply issues  
 00:01 3 that have hampered the system over the years.  
 00:01 4 If would you like, I can forward this  
 00:01 5 over to the water company's engineer for  
 00:01 6 clarification.  
 00:01 7 MR. STERN: If you would, that would be  
 00:02 8 great.  
 00:02 9 And the specific question is, is does  
 00:02 10 the -- does the supply of water meet the struggling  
 00:02 11 demand? And if further supply is required, who is  
 00:02 12 going to pay for the single heavy user which is  
 00:02 13 Valley Hospital.  
 00:02 14 How will I get the answer to that?  
 00:02 15 MR. RUTISHAUSER: If you want to see me  
 00:02 16 at a break time, give me your e-mail address, I'll  
 00:02 17 forward you the e-mails when I get them from the  
 00:02 18 water company engineer. If that's okay with you.  
 00:02 19 MR. STERN: That's fine.  
 00:02 20 CHAIRMAN NICHOLSON: Well, also for the  
 00:02 21 record, Mr. Stern, at our next meeting we'll ask  
 00:02 22 Chris to put the answer on the record.  
 00:02 23 MR. STERN: Perfect. Okay.  
 00:02 24 CHAIRMAN NICHOLSON: Any other  
 00:02 25 questions?

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00:03 1 only for Valley Hospital, but for the entire Village.  
 00:03 2 The changes to the Master Plan are  
 00:03 3 worth tens of millions of dollars to Valley Hospital.  
 00:03 4 And based on the testimony it appears that the  
 00:03 5 Planning Board expects the taxpaying residents to  
 00:03 6 accept compromise with little value in return.  
 00:03 7 Now, I speak to you as a CEO of a  
 00:03 8 public company. So I have to tell you I have a bias  
 00:03 9 towards a very business perspective, which is going  
 00:03 10 to come through loud and clear in this comment. But  
 00:03 11 Valley's corporate leadership has framed the Renewal  
 00:04 12 argument as an urgent and necessary requirement to  
 00:04 13 supply quality healthcare. And that's under  
 00:04 14 testimony they said that.  
 00:04 15 While this may be true, I think there's  
 00:04 16 a business model behind the Renewal that makes the  
 00:04 17 expansion economically favorable for Valley.  
 00:04 18 So beyond providing healthcare, the  
 00:04 19 Valley corporation is a business, with a business  
 00:04 20 plan, that calls for sales growth, and I think we can  
 00:04 21 reasonably assume, earnings growth as well.  
 00:04 22 Viewing Valley Hospital from a business  
 00:04 23 vantage point, and not just a healthcare vantage  
 00:04 24 point, the Village leadership should be negotiating  
 00:04 25 an agreement that allows Valley to achieve profitable

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00:02 1 MR. STERN: No. I'm ready for the  
 00:02 2 comments. And I apologize ahead of time. I timed  
 00:02 3 this and it was 22 seconds over the three minutes.  
 00:02 4 So if you can bear with me?  
 00:02 5 CHAIRMAN NICHOLSON: Talk faster.  
 00:02 6 COUNCILWOMAN ZUSY: We'll give it to  
 00:02 7 you. Mr. Stern, we should give it to you.  
 00:02 8 MR. STERN: I will talk faster.  
 00:02 9 COUNCILWOMAN ZUSY: Mr. Stern, we  
 00:02 10 should give it to you.  
 00:02 11 MS. PRICE: Let me just swear you in  
 00:03 12 first.  
 00:03 13 Do you swear the testimony you're about  
 00:03 14 to give in this matter is the truth, the whole truth  
 00:03 15 and nothing but the truth?  
 00:03 16 MR. STERN: Absolutely, yes.  
 00:03 17 M I C H A E L S T E R N,  
 00:03 18 Residing at 449 Meadowbrook Avenue, Ridgewood,  
 00:03 19 New Jersey, having been duly sworn, testifies as  
 00:03 20 follows:  
 00:03 21 MS. PRICE: Okay. Go ahead.  
 00:03 22 MR. STERN: You might think I'm crazy  
 00:03 23 if I said that I truly believe that if the Village  
 00:03 24 leaders, which includes you all, played their cards  
 00:03 25 right, the Valley Renewable to create real value not

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00:04 1 growth while giving the Village some return.  
 00:04 2 In other words, the expansion could  
 00:04 3 create value for everyone. The 94 percent of the  
 00:04 4 patients from outside Ridgewood, the taxpaying  
 00:04 5 residents and the non-taxpaying hospital.  
 00:05 6 How does this happen?  
 00:05 7 Well in return for resident concessions  
 00:05 8 and zoning requirements, construction inconvenience,  
 00:05 9 increased traffic and noise, et cetera, the Hospital  
 00:05 10 is mandated to fund projects throughout the Village  
 00:05 11 that improve community, increase the desirability of  
 00:05 12 the town, and potentially increase property values.  
 00:05 13 In addition, incorporate contingency  
 00:05 14 clauses into the agreement. Let's not argue about  
 00:05 15 Valley's predictions on traffic growth or congestion  
 00:05 16 or incremental infrastructure costs.  
 00:05 17 If the traffic is worse than Valley  
 00:05 18 Hospital tells this Board and taxpaying residents  
 00:05 19 that it could be, they should be contractually  
 00:05 20 obligated to pay for the incorrect professional  
 00:05 21 judgement.  
 00:05 22 It may bother me as a taxpaying  
 00:05 23 resident that I have to be involved in a seemingly  
 00:05 24 endless and losing battle against a non-taxpaying  
 00:06 25 corporate entity like Valley Hospital.

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00:06 1 But, that's not what bothers me most.  
 00:06 2 It may bother me that my three  
 00:06 3 daughters, all at B.F. this year, will have graduated  
 00:06 4 from high school and college by the time the  
 00:06 5 construction is done.  
 00:06 6 But, that doesn't bother me most.  
 00:06 7 What bothers me most is that the  
 00:06 8 Planning Board is compromising the integrity of the  
 00:06 9 Master Plan and giving away the most valuable  
 00:06 10 bargaining chip the Village arsenal, which is the  
 00:06 11 Master Plan. Without gaining anything of value for  
 00:06 12 these changes.  
 00:06 13 It's reasonable to assume that the  
 00:06 14 changes to the Master Plan are worth tens of millions  
 00:06 15 of dollars to Valley Hospital. And the Planning  
 00:06 16 Board expects the taxpaying residents to accept  
 00:06 17 compromise with little value in return.  
 00:06 18 CHAIRMAN NICHOLSON: Thank you,  
 00:06 19 Mr. Stern.  
 00:06 20 MR. STERN: Almost done.  
 00:06 21 CHAIRMAN NICHOLSON: Please, please,  
 00:07 22 please.  
 00:07 23 MR. STERN: It just doesn't make good  
 00:07 24 sense.  
 00:07 25 CHAIRMAN NICHOLSON: Please, please,  
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-03:-31 1 pool? What if Valley paid the cost of  
 -03:-31 2 building restrooms at Vets field or  
 -03:-31 3 professional landscaping around the Village?  
 -03:-31 4 Or a parking deck to support the Central  
 -03:-30 5 Business District?  
 -03:-30 6 "If the Planning Board is not in a  
 -03:-30 7 position to negotiate with Valley, please vote  
 -03:-30 8 down the request for changes to the Master  
 -03:-30 9 Plan and let the Village Council negotiate an  
 -03:-30 10 agreement and truly create value of everyone  
 -03:-30 11 (share some of the economic windfall of this  
 -03:-30 12 expansion with the community that supports  
 -03:-30 13 them).  
 -03:-30 14 "I have three points to make which  
 -03:-30 15 should take 3:52 seconds if all goes well.  
 -03:-29 16 "First, I'd like to comment on Valley  
 -03:-29 17 Hospital's framing of the current discussions.  
 -03:-29 18 Valley has told you that you should support  
 -03:-29 19 the Valley Renewal because it is about  
 -03:-29 20 improving the quality of healthcare in your  
 -03:-29 21 community. I am CEO of a public company in  
 -03:-29 22 New Jersey. Our company makes components for  
 -03:-29 23 airplanes and airplane engines for military  
 -03:-29 24 and commercial use. We have been in our  
 -03:-29 25 current facility since 1959 and building has  
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00:07 1 you've made your point.  
 00:07 2 Please submit your statement in writing  
 00:07 3 and we're going to move onto the next speaker.  
 00:07 4 MR. STERN: What if Valley paid for a  
 00:07 5 different renewal?  
 00:07 6 CHAIRMAN NICHOLSON: I was very clear  
 00:07 7 -- I was very clear about the time limit --  
 00:07 8 MR. STERN: I told you I had 22 seconds  
 00:07 9 extra.  
 00:07 10 CHAIRMAN NICHOLSON: -- for everyone's  
 00:07 11 presentation.  
 00:07 12  
 00:07 13 MR. STERN: Twenty-two seconds, that's  
 00:07 14 all I ask.  
 00:07 15 CHAIRMAN NICHOLSON: Mr. Stern, yield  
 00:07 16 the podium, please, and submit your document to the  
 00:07 17 secretary.  
 00:07 18 MR. STERN: (Complies).  
 00:07 19 (Applause).  
 00:07 20 MS. PRICE: O-6 for the record.  
 00:07 21 (Whereupon, Mr. Stern's Written  
 00:07 22 Comments were received and marked as Exhibit  
 00:07 23 O-6 for Identification.)  
 -03:-31 24 MR. STERN: "What if Valley paid for a  
 -03:-31 25 different renewal - the renewal of Graydon  
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-03:-29 1 been expanded twice. There is no more room,  
 -03:-29 2 so if I needed to go to our local town and  
 -03:-29 3 request a variance so that we could grow, here  
 -03:-28 4 is what I could say: Our product supports the  
 -03:-28 5 troops in Iraq and Afghanistan. Do you  
 -03:-28 6 support the troops in Iraq and Afghanistan?  
 -03:-28 7 If so, you should really allow us to expand so  
 -03:-28 8 we can continue to provide the troops with the  
 -03:-28 9 quality products that they need. Who is going  
 -03:-28 10 to vote against the troops?  
 -03:-28 11 "Similarly, Valley Hospital has framed  
 -03:-28 12 their discussions in such a way that if you  
 -03:-28 13 support quality healthcare, you must support  
 -03:-28 14 their business expansion. I hope that the  
 -03:-28 15 Planning Board can recognize the rhetorical  
 -03:-28 16 spin of a company that is trying to achieve  
 -03:-28 17 its objectives. It would have been refreshing  
 -03:-28 18 if the Hospital had been more transparent in  
 -03:-27 19 their business objectives. As an executive in  
 -03:-27 20 a public company, I have been driven by law to  
 -03:-27 21 be transparent in our actions and behavior.  
 -03:-27 22 Is it too much to expect such behavior from a  
 -03:-27 23 not-for-profit community hospital?  
 -03:-27 24 "My second point has to do with the  
 -03:-27 25 infrastructure and who is going to assume the  
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-03:-27 1 risks and costs associated with the increased  
 -03:-27 2 needs of Valley Hospital. Here's a quote from  
 -03:-27 3 a Ridgewood water document dated March 2007.  
 -03:-27 4 It says:  
 -03:-27 5 '19,150 of the service connections are  
 00:00 6 single family residential properties. And  
 00:00 7 most of the remainder are small businesses,  
 00:00 8 apartment complexes, light commercial,  
 00:00 9 institutional and municipal. The Valley  
 00:00 10 Hospital stands out, by far, as the largest  
 00:00 11 single water user. Supply: This issue has  
 00:00 12 long been the Achilles heel of this system'.  
 00:00 13 "Since the very first reviews and  
 -03:-26 14 assessments, RW has grappled with having  
 -03:-25 15 enough supply capacity. This issue remains in  
 -03:-25 16 full force today. Factors that loom are the  
 00:01 17 economics and the logistics of bringing the  
 00:01 18 volume of water into the system.  
 00:01 19 Who will pay so that the water system,  
 00:01 20 already struggling to meet demand, can be  
 00:01 21 further improved to meet the demands of a  
 00:01 22 single heavy user? Valley should be writing a  
 -03:-25 23 check to the Village of Ridgewood and  
 -03:-25 24 Ridgewood Water for 100 percent of the  
 -03:-25 25 infrastructure improvements.

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-03:-23 1 I can understand if the Planning Board does  
 -03:-23 2 not have the authority to negotiate on behalf  
 -03:-23 3 of the town. In that case, vote down the  
 -03:-23 4 proposed changes to the Master Plan and let  
 -03:-23 5 the Council negotiate an agreement with  
 -03:-23 6 Valley. Only after an agreement is  
 -03:-23 7 negotiated, and the town gets some financial  
 -03:-23 8 benefit to having Valley Hospital as a  
 -03:-23 9 neighbor, should any expansion be approved.  
 -03:-23 10 "Your first priority should be to the  
 -03:-22 11 taxpayers of this community. I hope that some  
 -03:-22 12 of the points that I have made tonight, as a  
 -03:-22 13 taxpayer, will be taken into consideration in  
 -03:-22 14 the Planning Board's final decision".  
 00:07 15 CHAIRMAN NICHOLSON: Is Mr. Morgan with  
 00:07 16 us tonight?  
 00:07 17 Mr. Morgan?  
 00:07 18 (NO RESPONSE.)  
 00:07 19 CHAIRMAN NICHOLSON: Mr. Groom, Tom,  
 00:07 20 Knollwood Road?  
 00:07 21 (NO RESPONSE.)  
 00:07 22 CHAIRMAN NICHOLSON: Mr. Byers, East  
 00:08 23 Ridgewood Avenue, 201 East Ridgewood Avenue?  
 00:08 24 (NO RESPONSE.)  
 00:08 25 CHAIRMAN NICHOLSON: Ms. Wright, Cedar

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-03:-25 1 "Let's say the fire department needs a  
 -03:-25 2 new truck and, for example, the incremental  
 -03:-25 3 costs of that truck to meet the needs of the  
 -03:-25 4 Valley Hospital campus are \$100,000. Who pays  
 -03:-24 5 the incremental costs? Will it be buried into  
 -03:-24 6 the unit price as a cost for the taxpayer to  
 -03:-24 7 bear? Valley should be writing a check to the  
 -03:-24 8 Village of Ridgewood to pay the incremental  
 -03:-24 9 costs.  
 -03:-24 10 "So, how do you get Valley Hospital, a  
 -03:-24 11 local business with a need to continue  
 -03:-24 12 growing, to pay all the foreseen and  
 -03:-24 13 unforeseen costs related to this expansion?  
 -03:-24 14 "This brings me to my third point which  
 -03:-24 15 is negotiating the agreement. Negotiations  
 -03:-24 16 are about trade-offs. What is in it for the  
 -03:-24 17 town and its taxpayers to provide the Valley  
 -03:-24 18 Hospital, a business, with a change to the  
 -03:-23 19 Master Plan? I don't know the answer to that  
 -03:-23 20 question, except right now I see marginal  
 -03:-23 21 benefits for the associated pain to the  
 -03:-23 22 taxpaying community. What we do know is that  
 -03:-23 23 the Master Plan represents the single greatest  
 -03:-23 24 bargaining chip in the Village's arsenal.  
 -03:-23 25 Voting away this bargaining chip is a mistake.

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00:08 1 Avenue?  
 00:08 2 (NO RESPONSE.)  
 00:08 3 CHAIRMAN NICHOLSON: Barbara Donatachi?  
 00:08 4 (NO RESPONSE.)  
 00:08 5 CHAIRMAN NICHOLSON: Mr. Bono, 356  
 00:08 6 North Van Dien?  
 00:08 7 (NO RESPONSE.)  
 00:08 8 CHAIRMAN NICHOLSON: Ms. Davis, Darby  
 00:08 9 Court?  
 00:08 10 (NO RESPONSE.)  
 00:08 11 CHAIRMAN NICHOLSON: Mr. King?  
 00:08 12 Thank you, Mr. King.  
 00:08 13 Is Daniel Gioia with us tonight?  
 00:08 14 You're next, sir.  
 00:08 15 CHAIRMAN NICHOLSON: Mr. King, do you  
 00:09 16 have any questions.  
 00:09 17 MR. KING: Yes, I do.  
 00:09 18 CHAIRMAN NICHOLSON: Could you state  
 00:09 19 your name, spell your last name and give your address  
 00:09 20 please?  
 00:09 21 MR. KING: Mark Andrew King, K-i-n-g,  
 00:09 22 449 Meadowbrook Avenue, Ridgewood.  
 00:09 23 My first question is to the Village  
 00:09 24 Planner, I just wanted to understand a little bit  
 00:09 25 better about the statement that is constantly being

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00:09 1 made by the Hospital about the demand for single bed  
 00:09 2 inpatient rooms, the demand for that.  
 00:09 3 I wanted to understand is it a health  
 00:09 4 demand or is it a comfort demand?  
 00:09 5 MR. BRANCHEAU: I think you have to  
 00:09 6 speak the Hospital representatives they would be  
 00:10 7 better qualified to answer that question.  
 00:10 8 I think it's probably a little bit of  
 00:10 9 both, but -- and I don't know where you draw the line  
 00:10 10 between health and when you say "comfort" I don't  
 00:10 11 know what you -- if you consider privacy a health  
 00:10 12 issue or a comfort issue, I don't know. But you'd  
 00:10 13 really have to speak to somebody who's better versed  
 00:10 14 in healthcare than me to answer that question.  
 00:10 15 MR. KING: Did you author the new  
 00:10 16 Master Plan?  
 00:10 17 MR. BRANCHEAU: Did I offer it? Did I  
 00:10 18 author it?  
 00:10 19 MR. KING: Yeah.  
 00:10 20 MR. BRANCHEAU: I wrote it, yes.  
 00:10 21 MR. KING: Okay. Can I read from it  
 00:10 22 then?  
 00:10 23 It says: "Currently these changes  
 00:10 24 include the demand for single bed inpatient  
 00:10 25 rooms. Larger patient rooms, larger treatment  
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00:11 1 compared existing hospitals in the state to Valley or  
 00:11 2 compared their plans against Valley.  
 00:11 3 MR. KING: Right.  
 00:12 4 My questions are all about this, so  
 00:12 5 just to finish, I probably, as the quick statement  
 00:12 6 that I think a fair balance would be to consider --  
 00:12 7 MS. PRICE: Mr. King -- Mr. King, if  
 00:12 8 you're going to -- let me just swear you if --  
 00:12 9 MR. KING: Okay.  
 00:12 10 MS. PRICE: -- if you're going to make  
 00:12 11 a statement.  
 00:12 12 Do you swear the testimony you're about  
 00:12 13 to give in connection with this matter is the truth,  
 00:12 14 the whole truth and nothing but the truth?  
 00:12 15 MR. KING: Yes, I do.  
 00:12 16 M A R K A N D R E W K I N G,  
 00:12 17 Residing at 449 Meadowbrook Avenue, Ridgewood,  
 00:12 18 New Jersey, having been duly sworn, testifies as  
 00:12 19 follows:  
 00:12 20 MS. PRICE: Okay. Thank you.  
 00:12 21 MR. KING: I think the balance should  
 00:12 22 be to accommodate the same number of beds but with  
 00:12 23 less rooms to increase the setbacks and to be more  
 00:12 24 fair with the residents of Ridgewood.  
 00:12 25 But the statement I'm going to present,  
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00:10 1 and diagnostic rooms and increased story  
 00:10 2 height to accommodate medical space needs".  
 00:10 3 So if you authored it, it's in the  
 00:10 4 Mater Plan, how don't you know the answer to my  
 00:10 5 question?  
 00:10 6 CHAIRMAN NICHOLSON: Mr. King, this is  
 00:11 7 one of the reasons why, as I stated earlier, we've  
 00:11 8 engaged a hospital planning expert to, in fact,  
 00:11 9 answer your question and ours that we have along the  
 00:11 10 same lines.  
 00:11 11 So what I'm going to suggest is that  
 00:11 12 we'll -- we record that question and make sure it's  
 00:11 13 answered for you by our expert.  
 00:11 14 MR. KING: Yeah, I was just surprised  
 00:11 15 that that statement made it to the plan. So...  
 00:11 16 My following question is, has the  
 00:11 17 research been made as to how many hospitals in New  
 00:11 18 Jersey actually only have single patient rooms and  
 00:11 19 don't have a balance of single patient, double  
 00:11 20 patient and triple patient rooms? Has the research  
 00:11 21 like that been made already by the plan -- by the  
 00:11 22 Board?  
 00:11 23 CHAIRMAN NICHOLSON: No, we have not --  
 00:11 24 MR. KING: No.  
 00:11 25 CHAIRMAN NICHOLSON: We have not  
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00:12 1 which is signed, I'll just read it.  
 00:12 2 Over the past two years I have tried to  
 00:12 3 attend most of the meeting related to the Valley  
 00:12 4 Hospital expansion issue.  
 00:12 5 During our last meeting one of my  
 00:12 6 fellow neighbors spoke out to mention how  
 00:12 7 disillusioned she was with the fact that we went from  
 00:12 8 "if" we will accept a revision to the Master Plan to  
 00:12 9 how we should accept it. I concur with this  
 00:12 10 statement. And I'm also disillusioned with how the  
 00:12 11 process evolved. I am still puzzled as to how and  
 00:13 12 why this happened.  
 00:13 13 I have paid close attention to the  
 00:13 14 sessions where the Village planner spoke and educated  
 00:13 15 all of us on similar processes. I am, however, very  
 00:13 16 concerned with the fact that Ridgewood will continue  
 00:13 17 to be the only municipality to continue to make the  
 00:13 18 sacrifices should we accept to change the Master  
 00:13 19 Plan.  
 00:13 20 After reading the draft of the new  
 00:13 21 Master Plan being proposed, although it mentions that  
 00:13 22 it tries to promote a reasonable balance between the  
 00:13 23 Hospital, I could not of this balance in its content.  
 00:13 24 My view of the document is one that it is making a  
 00:13 25 very big effort to give the Hospital all that it has  
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00:13 1 requested without taking so much into account all the  
 00:13 2 issues raised by the Concerned Residents of  
 00:13 3 Ridgewood.  
 00:13 4 A reasonable balance, in my view, would  
 00:13 5 have been a plan where the Hospital would have been  
 00:13 6 given the ability the accommodate both single and  
 00:13 7 double patient rooms to be able to keep the same  
 00:13 8 number of beds in a smaller facility and not all  
 00:13 9 single patient rooms. It is common sense,  
 00:13 10 considering what happened in the history of the  
 00:14 11 Hospital, that with their continued growth future  
 00:14 12 variances will be requested for them to increase the  
 00:14 13 number of beds in the future.  
 00:14 14 I concur with the Concerned Residents  
 00:14 15 of Ridgewood that the tipping point has already been  
 00:14 16 reached, through the years the limits have always  
 00:14 17 been pushed towards the residents. And it's now time  
 00:14 18 to say no to this change.  
 00:14 19 Thank you.  
 00:14 20 CHAIRMAN NICHOLSON: Thank you, Mr.  
 00:14 21 King.  
 00:14 22 MS. PRICE: Mr. King's statement will  
 00:14 23 be O-7 for the record.  
 00:14 24  
 00:14 25

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00:15 1 to get the 750 million paid back or else you don't --  
 00:15 2 you know, you wouldn't do it.  
 00:15 3 Anyway, that being said, the I think  
 00:15 4 the square footage -- my square footage question was  
 00:15 5 taken care of, so thank you.  
 00:15 6 I have a question on this traffic  
 00:15 7 study. Traffic engineer not here tonight. But I  
 00:15 8 think this really would go best to your expert that  
 00:15 9 you're bringing in from the -- from -- you know, to  
 00:16 10 evaluate the plan relative to other hospitals because  
 00:16 11 I just don't understand the concept that number of  
 00:16 12 beds are the main determinant of intensity of use. I  
 00:16 13 think outpatient services are everything these days  
 00:16 14 or almost everything. So that has to be driving, you  
 00:16 15 know, the traffic in and out of the Hospital so I  
 00:16 16 would ask that you're -- or the town's new expert  
 00:16 17 take a look at that. And I had my -- I'll submit  
 00:16 18 this -- these questions and statement later after I  
 00:16 19 -- I'll get you a new one because I wrote all the  
 00:16 20 percentages and crossed them out and rewrote them.  
 00:16 21 Question for the Board, with respect to  
 00:16 22 making decisions around changes of plans and what  
 00:16 23 have you, but I just want to know does the Planning  
 00:17 24 Board consider precedent decisions when considering  
 00:17 25 changes, specifically, you know have you or will you

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00:14 1 (Whereupon, Mr. King's Written  
 00:14 2 Comments were received and marked as Exhibit  
 00:14 3 O-7 for Identification.)  
 00:14 4 CHAIRMAN NICHOLSON: Is Anne Raftery  
 00:14 5 with us tonight?  
 00:14 6 Anne, you'll be next.  
 00:14 7 MS. PRICE: Who's coming up?  
 00:14 8 CHAIRMAN NICHOLSON: Gioia.  
 00:14 9 MS. PRICE: Okay.  
 00:14 10 CHAIRMAN NICHOLSON: Mr. Gioia, do I  
 00:14 11 have the pronunciation of your name, correct?  
 00:14 12 MR. GIOIA: Well done.  
 00:14 13 You must know of one of us.  
 00:15 14 CHAIRMAN NICHOLSON: If you would,  
 00:15 15 state your name and spell it for the record.  
 00:15 16 MR. GIOIA: Sure. It's -- I spell it  
 00:15 17 all the time, even off the record.  
 00:15 18 It's Daniel Gioia at 447 Fairway Road  
 00:15 19 G-i-o-i-a.  
 00:15 20 I have a couple of questions, actually  
 00:15 21 a few questions, and then my comment or statement, I  
 00:15 22 should say.  
 00:15 23 But I certainly would argue with  
 00:15 24 Mr. Stern that this whole expansion is not worth tens  
 00:15 25 of millions it's worth hundreds of millions. You got

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00:17 1 consider the facts surrounding a '96 decision to have  
 00:17 2 the Kraft Building removed to accommodate the  
 00:17 3 expansion at that time? And why would this project  
 00:17 4 be any different?  
 00:17 5 So I guess the real question is, do you  
 00:17 6 look at historical or precedent decisions and how the  
 00:17 7 Board is -- makes decisions with respect to changes  
 00:17 8 in plan and/or any change in -- or a variance being  
 00:17 9 granted?  
 00:17 10 MS. PRICE: Blais, will you answer that  
 00:17 11 orally.  
 00:17 12 CHAIRMAN NICHOLSON: Blais, you want to  
 00:17 13 take a stab at that?  
 00:17 14 MR. GIOIA: Their history around the  
 00:17 15 precedent.  
 00:17 16 MR. BRANCHEAU: I'm sorry, I didn't  
 00:17 17 hear -- with the motorcycle I couldn't hear the  
 00:17 18 question.  
 00:17 19 CHAIRMAN NICHOLSON: Could you hear --  
 00:17 20 MR. BRANCHEAU: I heard his, but I  
 00:17 21 didn't hear yours.  
 00:17 22 MS. PRICE: Do you want to answer that  
 00:17 23 or do you want to --  
 00:17 24 MR. BRANCHEAU: Yes, I can try to  
 00:17 25 answer that somewhat. If you feel you need a

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00:17 1 supplement that's fine.  
 00:17 2 The answer is yes and no. We do --  
 00:18 3 well, let me explain what I mean by that. We do look  
 00:18 4 at the history, and as -- if you were here you'll  
 00:18 5 know that cited fairly extensively the history of  
 00:18 6 development and approvals at the Hospital Zone.  
 00:18 7 And we relied somewhat in part upon  
 00:18 8 those decisions, for example, in establishing parking  
 00:18 9 standards in the Master Plan. There's been a  
 00:18 10 consistent granting of variances for parking at the  
 00:18 11 Hospital. And there's been a determination that our  
 00:18 12 ordinance requires more parking than is really needed  
 00:18 13 the Board has consistently granted the variances for  
 00:18 14 that.  
 00:18 15 And so we consider that in establishing  
 00:18 16 the parking standard that we granted. We didn't rely  
 00:19 17 totally upon that so in the sense that first part was  
 00:19 18 yes and this part is no, that no, we didn't rely  
 00:19 19 totally on that, we also looked at independent data  
 00:19 20 and independent studies of hospitals in general and  
 00:19 21 their parking needs.  
 00:19 22 So in that sense we didn't rely upon  
 00:19 23 what had been done in the past. It was a blend of  
 00:19 24 both.

00:19 25 Similarly, we looked at traffic, as it

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00:21 1 request as to the Valley Hospital. So we just didn't  
 00:21 2 assume, okay, hospitals grow so there we go. So yes  
 00:21 3 and no, in the sense that, yeah, we looked at this in  
 00:21 4 a broader picture and we looked at this in the trends  
 00:21 5 of what's happened over time here as well as in the  
 00:21 6 State of New Jersey. But we also looked at this  
 00:21 7 particular proposal on its own merits and on its own  
 00:21 8 facts and on its own circumstances.  
 00:21 9 So it wasn't a black and white one or  
 00:21 10 the other. It was some cases, yes, some cases no.  
 00:21 11 Some cases a blend of no and yes.  
 00:21 12 MR. GIOIA: Specifically with the '96  
 00:21 13 decision, there was specifically made that the  
 00:21 14 Hospital take the Kraft Building down.  
 00:21 15 MR. BRANCHEAU: That the Hospital what?  
 00:22 16 MR. GIOIA: To remove the Kraft  
 00:22 17 Building, it's my understanding. And so I guess the  
 00:22 18 question is -- or the request is is that you go back  
 00:22 19 and you know I know you've reviewed everything pretty  
 00:22 20 extensively, all the different changes, but I mean  
 00:22 21 there was a reason they required that back then. I  
 00:22 22 suggest that we, you know, review that and make sure  
 00:22 23 that previous boards or -- or members of the Board  
 00:22 24 didn't have, you know, a better reason or some reason  
 00:22 25 for that.

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00:19 1 had -- we looked at prior traffic studies. We looked  
 00:19 2 at the growth over time in the traffic as one of the  
 00:19 3 factors in evaluating the future the projection of  
 00:19 4 traffic. We looked at the expansion of the Hospital  
 00:19 5 over time. In looking at this and trying to  
 00:19 6 understand whether we're looking at the larger trend  
 00:19 7 or whether we're looking at a localized condition  
 00:19 8 where expansion something that unusual when, in fact,  
 00:20 9 we've seen here, and I've seen personally in many  
 00:20 10 locations, that hospitals, as a rule, tend to expand  
 00:20 11 over time for a variety of reasons. Some of which is  
 00:20 12 increased number of patients. Some of which is  
 00:20 13 changes in the healthcare technology and needs.  
 00:20 14 So we obviously factor that into the  
 00:20 15 analysis just so that, for example, if no other  
 00:20 16 hospitals or very few hospitals grew over time we  
 00:20 17 might look at this with a different lens then if most  
 00:20 18 hospitals did grow. And -- or many hospitals did  
 00:20 19 grow. So since we saw that many hospitals grew and  
 00:20 20 since we saw the history of the approvals here, that  
 00:20 21 it had grown, we feel fairly confidently that this is  
 00:20 22 not simply a Valley specific issue but it's an issue  
 00:21 23 that deals with hospitals in general.

00:21 24 So while we looked at that, we also  
 00:21 25 wanted specifics as to the need and the -- for the

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00:22 1 So, I'll move on.  
 00:22 2 I guess back -- back to you, Mr.  
 00:22 3 Brancheau.  
 00:22 4 It's Brancheau, right, Brancheau?  
 00:22 5 MR. BRANCHEAU: That's correct.  
 00:22 6 MR. GIOIA: Okay. What are we going to  
 00:22 7 do -- how -- how is the Board going to address the  
 00:22 8 COAH issue that we brought about by the expansion of  
 00:22 9 square footage?  
 00:22 10 I must say I'm not an expert on COAH.  
 00:22 11 It seems like we're hoping it goes away is how we're  
 00:23 12 dealing with it. That may not be the case.  
 00:23 13 And then the question ultimately is has  
 00:23 14 the Hospital offered to help alleviate any burden?  
 00:23 15 Because I think there'll be an additional burden if  
 00:23 16 that's right.  
 00:23 17 MR. BRANCHEAU: At the moment there  
 00:23 18 will be, if the Hospital is developed as proposed,  
 00:23 19 and if the laws do not change, there will be, I think  
 00:23 20 we stated, roughly, you know, I haven't done a  
 00:23 21 precise calculation, 60 additional affordable house  
 00:23 22 units that the Village would be obligated to plan for  
 00:23 23 in its housing plan.  
 00:23 24 Valley has indicated it would do  
 00:23 25 whatever the law requires it to do in this regard.

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00:23 1 The law currently does not require the Hospital to do  
 00:23 2 anything to assist the Village in addressing its  
 00:23 3 obligation.  
 00:23 4 As to what the Village will do, if and  
 00:23 5 when the time comes, I don't know the answer.  
 00:23 6 MR. GIOIA: I refer to Mr. Stern,  
 00:23 7 again. And that's his comments.  
 00:24 8 COUNCILWOMAN ZUSY: What was that?  
 00:24 9 What was that I didn't hear you?  
 00:24 10 MR. GIOIA: Well, if the law doesn't  
 00:24 11 require the Hospital to do anything, I understand  
 00:24 12 that. The law doesn't require a lot of things with  
 00:24 13 respect to the Hospital.  
 00:24 14 But the point is, is they need a change  
 00:24 15 in the -- in the Master Plan. And they need you to  
 00:24 16 change it. They need the -- the Village Council to  
 00:24 17 -- to vote for that. It's about cutting a deal in  
 00:24 18 life and I think, you know, if they want something  
 00:24 19 they're going to have to pay for it at the end of the  
 00:24 20 day, if that's --  
 00:24 21 CHAIRMAN NICHOLSON: Mr. Gioia?  
 00:24 22 MR. GIOIA: -- if that's what you  
 00:24 23 ultimately have --  
 00:24 24 CHAIRMAN NICHOLSON: Mr. Gioia, are you  
 00:24 25 --

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00:25 1 approval or cannot make an obligation or a financial  
 00:25 2 contribution part and parcel of any determination,  
 00:25 3 but it doesn't prevent an agreement from being  
 00:25 4 reached.  
 00:25 5 MR. GIOIA: I understand. I  
 00:25 6 understand.  
 00:25 7 MS. PRICE: Okay.  
 00:25 8 MR. GIOIA: I appreciate that.  
 00:25 9 MS. PRICE: Okay.  
 00:25 10 MR. GIOIA: Two more questions and then  
 00:25 11 I'll move on to my statement.  
 00:25 12 Question about the financial  
 00:25 13 relationships with respect to the Village and Valley.  
 00:26 14 And I don't expect you to have all the answers  
 00:26 15 tonight, but in September I would appreciate it.  
 00:26 16 Would you please outline all of the financial  
 00:26 17 relationships? We heard about some of the water  
 00:26 18 bills and what have you between Valley and the  
 00:26 19 Village.  
 00:26 20 Like do we -- do they pay for anything  
 00:26 21 besides sewer -- sewerage and water? I know they  
 00:26 22 make contributions and -- and donations to different  
 00:26 23 charities. I'm not sure if you track any of that?  
 00:26 24 But, I'd like to know what all the -- what -- you  
 00:26 25 know, what are the financial relationships between

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00:24 1 MR. GIOIA: -- to --  
 00:24 2 CHAIRMAN NICHOLSON: -- are you asking  
 00:24 3 your question or have you started your statement?  
 00:24 4 MR. GIOIA: No. I -- I -- I asked a  
 00:24 5 question. I made a comment. Someone asked me to  
 00:24 6 clarify it.  
 00:24 7 I'll let you know when I start my  
 00:24 8 comment.  
 00:24 9 MS. PRICE: Let me just make it --  
 00:24 10 CHAIRMAN NICHOLSON: Soon please.  
 00:24 11 MS. PRICE: Let me just make a  
 00:24 12 statement on the affordable housing situation because  
 00:24 13 under the current version of that law, which is ever  
 00:24 14 changing, the municipality's hands are tied in terms  
 00:24 15 of asking or demanding any kind of contribution in  
 00:25 16 return for any kind of obligation.  
 00:25 17 And that's specifically provided for,  
 00:25 18 unfortunately, in the bill. It's doesn't prevent a  
 00:25 19 developer from offering to help, but a demand can't  
 00:25 20 be made --  
 00:25 21 MR. GIOIA: Well --  
 00:25 22 MS. PRICE: -- under the version. I  
 00:25 23 just wanted you to understand that because that was  
 00:25 24 in the -- in the last revision that was specifically  
 00:25 25 inserted that a municipality cannot condition an

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00:26 1 Valley Hospital and the Village of Ridgewood?  
 00:26 2 I don't expect you to have those  
 00:26 3 answers tonight; is that correct?  
 00:26 4 CHAIRMAN NICHOLSON: I'm sorry.  
 00:26 5 MR. GIOIA: You don't have that answer  
 00:26 6 tonight?  
 00:26 7 CHAIRMAN NICHOLSON: No.  
 00:26 8 MR. GIOIA: Okay.  
 00:26 9 I would expect donations, fees, usage  
 00:26 10 fees, are there health benefits or anything that  
 00:26 11 don't get --  
 00:26 12 CHAIRMAN NICHOLSON: We'll be able to  
 00:26 13 tell you if the Village (sic) pays the municipality  
 00:27 14 for any of the services.  
 00:27 15 MS. PRICE: The Hospital.  
 00:27 16 CHAIRMAN NICHOLSON: I'm sorry.  
 00:27 17 MS. PRICE: The Hospital.  
 00:27 18 CHAIRMAN NICHOLSON: If Valley Hospital  
 00:27 19 pays the Village for any other services.  
 00:27 20 But we're not going to be able to tell  
 00:27 21 you the extent of their charitable work.  
 00:27 22 MR. GIOIA: Yes, I can appreciate that.  
 00:27 23 But other than services and fees, that's it.  
 00:27 24 And then I think it was two years ago  
 00:27 25 when the members of the Planning Board, and I think

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00:27 **1** it was you people, I'm not sure, it's been a while,  
 00:27 **2** talked about their-- their different affiliations or  
 00:27 **3** relationships with Valley. If we could just maybe  
 00:27 **4** reacquaint the record, unless it's on the record, I  
 00:27 **5** can go back and look at it, what people's  
 00:27 **6** relationships are with Valley, if any. I think  
 00:27 **7** everyone pretty much has stated their relationship  
 00:27 **8** and/or I think maybe Mr. Pucciarelli recused himself.  
 00:28 **9** I can't remember what the -- if anyone had any --  
 00:28 **10** just from a conflicts perspective.  
 00:28 **11** CHAIRMAN NICHOLSON: All the members  
 00:28 **12** sitting on this Board have previously stated they  
 00:28 **13** have no conflicts and that's why they're still here.  
 00:28 **14** MR. GIOIA: There's one who's not here.  
 00:28 **15** CHAIRMAN NICHOLSON: We can affirm that  
 00:28 **16** for you.  
 00:28 **17** MR. GIOIA: Okay.  
 00:28 **18** If you can just help me with when the  
 00:28 **19** date was? I don't know if it was on the record or  
 00:28 **20** not, but I could go back and find out what the --  
 00:28 **21** what they specifically -- because I knew there was a  
 00:28 **22** couple of people that talked about having some  
 00:28 **23** relationships or people they had -- they knew had  
 00:28 **24** relationship or what have you so...  
 00:28 **25** CHAIRMAN NICHOLSON: I would recommend

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00:29 **1** for this -- in this town for over 12 years and I  
 00:29 **2** would expect, actually demand, that our elected  
 00:29 **3** officials on this Board more vigorously question  
 00:29 **4** Valley's management as to why they think -- why they  
 00:29 **5** do not think they can accomplish their goals of  
 00:29 **6** better health care for the community without creating  
 00:29 **7** havoc in the Village.  
 00:29 **8** You know we cannot be complacent with  
 00:29 **9** this. We need to ask Valley to reexamine relocating  
 00:29 **10** the campus somewhere else or splitting it up because  
 00:29 **11** you know creating the havoc of all of the traffic and  
 00:29 **12** all of the construction is unacceptable to this --  
 00:30 **13** to me.  
 00:30 **14** Why should we accept that Valley needs  
 00:30 **15** to increase their size by, you pick the percentage,  
 00:30 **16** 80 percent, in our Village with --on a 15 acre lot?  
 00:30 **17** We shouldn't allow ourselves to be  
 00:30 **18** hoodwinked. If they need to convert their double  
 00:30 **19** occupancy rooms at X dollars a day to single  
 00:30 **20** occupancy rooms at two X per day. By adding only  
 00:30 **21** three more beds the economics are a pretty clear  
 00:30 **22** here. A \$750 million expansion required either  
 00:30 **23** higher room rates and/or increased patient traffic or  
 00:30 **24** both.  
 00:30 **25** I stood here in June 2007, so I'll go

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00:28 **1** you look at the records from the summer of '07.  
 00:28 **2** MR. GIOIA: June '07.  
 00:28 **3** Okay.  
 00:28 **4** I'm ready for my comment.  
 00:28 **5** Thank you for answering the question.  
 00:28 **6** MS. PRICE: Can I just swear you in?  
 00:28 **7** MR. GIOIA: Sure.  
 00:28 **8** MS. PRICE: Do you swear the testimony  
 00:28 **9** you're about to give in connection with this matter  
 00:28 **10** is the truth, the whole truth and nothing but the  
 00:28 **11** truth?  
 00:28 **12** MR. GIOIA: I do.  
 00:28 **13** D A N I E L G I O I A,  
 00:28 **14** Residing at 449 Meadowbrook Avenue, Ridgewood,  
 00:28 **15** New Jersey, having been duly sworn, testifies as  
 00:28 **16** follows:  
 00:28 **17** MS. PRICE: Okay.  
 00:28 **18** MR. GIOIA: Where do I begin with this  
 00:29 **19** comment? Maybe it's the quote of Mr. Brancheau: "If  
 00:29 **20** we knew then what we know now, we probably would have  
 00:29 **21** done it differently".  
 00:29 **22** I that that's pretty important. And  
 00:29 **23** there's no time like the present to fix past  
 00:29 **24** decisions or sins or what you have.  
 00:29 **25** You know I've been a taxpaying citizen

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00:30 **1** back and take a look at those records, and suggested  
 00:30 **2** that a responsible board of directors for a  
 00:30 **3** for-profit company would have asked -- would have had  
 00:30 **4** to consider buying Pascack Valley's assets out of  
 00:30 **5** bankruptcy. That would only cost them -- it would  
 00:30 **6** cost them less than \$100 million. But Valley choose  
 00:31 **7** not to take to advise, instead they decided to act  
 00:31 **8** like what every good community hospital would do,  
 00:31 **9** they try to buy the hospital license and to  
 00:31 **10** extinguish it, so that no one else could compete with  
 00:31 **11** them in a grandiose plans as a re -- as a  
 00:31 **12** reinvigoration. I think that's pretty interesting,  
 00:31 **13** predatory tactics for a nonprofit hospital.  
 00:31 **14** Construction zone safety and ongoing  
 00:31 **15** distractions are huge concerns.  
 00:31 **16** The traffic consultant has done a good  
 00:31 **17** job assessing to situation in numbers of trips and  
 00:31 **18** times. They haven't factored in the human factors  
 00:31 **19** that enter into a situation with seven year old to 14  
 00:31 **20** year olds walking to and from school.  
 00:31 **21** In addition, the constant noise and  
 00:31 **22** dust will be a nightmare for our children as they try  
 00:31 **23** to concentrate in school. The kids with asthma will  
 00:31 **24** be overwhelmed by the conditions. I would expect  
 00:31 **25** that the town and the Board of Ed would come up with

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00:31 1 an action plan to deal with the situation and then  
 00:31 2 transfer the asthmatic kids to the schools -- from  
 00:31 3 schools at Travell and at B.F. to the schools on the  
 00:32 4 west side and transfer those non-asthmatic kids back  
 00:32 5 to the east side so we don't have overcrowding.  
 00:32 6 So I'll end my statement the way I  
 00:32 7 started it, if we knew then what we know now, we  
 00:32 8 probably would have done it differently.  
 00:32 9 Let's not say that again in the future.  
 00:32 10 Thank you. (Applause.)  
 00:32 11 CHAIRMAN NICHOLSON: Thank you, Mr.  
 00:32 12 Gioia.  
 00:32 13 After Ms. Raftery, Marla Sherman.  
 00:32 14 Is Marla with us tonight?  
 00:32 15 Thank you.  
 00:32 16 And Beth Blair? Okay. In that order.  
 00:32 17 After Ms. Blair we're going to take a short break.  
 00:32 18 In fact we're going to take two breaks  
 00:32 19 rather than just one due to feedback from everyone.  
 00:32 20 So that's the plan.  
 00:33 21 Ms. Raftery, do you have any questions?  
 00:33 22 MS. RAFTERY DEYEAU: No, I do not.  
 00:33 23 MS. PRICE: Do you swear the testimony  
 00:33 24 you're about to give in connection with this matter  
 00:33 25 is the truth, the whole truth and nothing but the

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00:34 1 president of four of those years. I have been in  
 00:34 2 your place and have been responsible for making  
 00:34 3 decisions that impact the quality of life for all  
 00:34 4 Ridgewood residents.  
 00:34 5 I urge you to consider the views of all  
 00:34 6 Ridgewood residents and not rely solely on the views  
 00:34 7 of one group. The views of this group, while  
 00:34 8 certainly valid viewpoints, do not represent all of  
 00:34 9 Ridgewood. Indeed, not even all of the surrounding  
 00:34 10 neighborhood.  
 00:34 11 As a family and community member I have  
 00:34 12 you lived through several construction projects at  
 00:34 13 Valley and have found that Valley has lived up to its  
 00:34 14 commitments, especially regarding the safety of our  
 00:34 15 children.  
 00:34 16 As a matter of fact, Valley committed  
 00:34 17 to providing crossing guards during the duration of a  
 00:34 18 past project and those guards are still present at  
 00:34 19 this time, years later.  
 00:34 20 We must accept that facilities need to  
 00:34 21 be updated if they are to continue to provide quality  
 00:34 22 service. I don't think any of us would expect that  
 00:34 23 our schools would not be upgraded to meet the needs  
 00:34 24 of new technology and the changing ways that  
 00:34 25 education services are now provided.

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00:33 1 truth?  
 00:33 2 MS. RAFTERY DEYEAU: I do.  
 00:33 3 A N N E R A F T E R Y - D E Y E A U,  
 00:33 4 Residing at 217 North Pleasant Avenue, Ridgewood,  
 00:33 5 New Jersey, having been duly sworn, testifies as  
 00:33 6 follows:  
 00:33 7 MS. PRICE: And I'm Anne Raftery  
 00:33 8 Deyeau. Raftery R-a-f as in Frank t-e-r-y, Denyeau  
 00:33 9 is "D" as in David e-n-y-e-a-u. I live at 217 North  
 00:33 10 Pleasant Avenue in Ridgewood. Anne with an "E".  
 00:33 11 My husband and I and our two children  
 00:33 12 moved to Ridgewood in 1982 and have lived in the same  
 00:33 13 house since then.  
 00:33 14 Like so many other families we came  
 00:33 15 here because of Ridgewood's reputation of being a  
 00:33 16 wonderful place to raise the family. Our third child  
 00:33 17 was born in Valley in 1983. Much to Joe's relief  
 00:33 18 that he didn't have to worry for months about getting  
 00:33 19 me to a New York City Hospital as he had to for the  
 00:33 20 twins before that.  
 00:33 21 Our children went to Travell, B.F. and  
 00:33 22 Ridgewood High School.  
 00:33 23 As a family we've been very active in  
 00:33 24 the Ridgewood community over the years. I was a  
 00:33 25 member of the Board of Ed for six years and served as

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00:34 1 I don't think any of us would believe  
 00:34 2 we were providing a quality education, for example,  
 00:35 3 if we had not upgraded the facilities of Ridgewood  
 00:35 4 High School, especially the science labs.  
 00:35 5 My youngest son found the construction  
 00:35 6 of Ridgewood High School much more disruptive to his  
 00:35 7 education than any Valley project. Yet he understood  
 00:35 8 that it needed to be done for future students.  
 00:35 9 So we moved to Ridgewood to raise our  
 00:35 10 family. The schools may have been what we thought  
 00:35 11 most about in 1982, but over the years we learned  
 00:35 12 that you need more than excellent schools to raise a  
 00:35 13 family. You also need a strong community and other  
 00:35 14 quality services such as healthcare.  
 00:35 15 I intend to stay in Ridgewood now that  
 00:35 16 my children are raised. While I'm surprised to  
 00:35 17 realize that I'm no longer in my 30s as I was when I  
 00:35 18 moved here, the reality is that I now need to be sure  
 00:35 19 that the healthcare at Valley is as strong as the  
 00:35 20 schools.  
 00:35 21 Valley must be able to upgrade it's  
 00:35 22 service if it is to continue to provide the quality  
 00:35 23 services and care it is known for.  
 00:35 24 As a Ridgewood resident, I expect  
 00:35 25 nothing less than superior services. For that I'm

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00:35 1 willing to hear ambulance siren and live through  
 00:35 2 construction.  
 00:35 3 By the way there have been comments  
 00:36 4 that the construction will take ten years and that  
 00:36 5 there'll be heavy construction trucks on our streets  
 00:36 6 for the whole ten years. Construction will actually  
 00:36 7 be for six years and the work will be inside the new  
 00:36 8 building after 18 to 24 months.  
 00:36 9 Believe me, I am not minimizing that  
 00:36 10 six years is a very, very long time. But, I want to  
 00:36 11 correct the information that's out there about a ten  
 00:36 12 year period.  
 00:36 13 I urge to you vote for a modern  
 00:36 14 Hospital Zone which will allow Valley to function as  
 00:36 15 a modern hospital.  
 00:36 16 Thank you.  
 00:36 17 CHAIRMAN NICHOLSON: Thank you, Ms.  
 00:36 18 Raftery.  
 00:36 19 MS. PRICE: P-6.  
 00:36 20 (Whereupon, Ms. Raftery Denyeau's  
 00:36 21 Written Comments were received and marked as  
 00:36 22 Exhibit P-6 for Identification.)  
 00:36 23 CHAIRMAN NICHOLSON: Ms. Sherman.  
 00:36 24 MS. SHERMAN: Good evening.  
 00:36 25 CHAIRMAN NICHOLSON: Good evening, do

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00:37 1 I've recently figured out why, besides  
 00:37 2 it being summer vacation, I and my fellow residents  
 00:37 3 are genuinely astounded that Valley's current  
 00:37 4 proposal is even being considered by you.  
 00:37 5 Time after time I hear people say  
 00:37 6 "really, do you think it's going to pass". Or "come  
 00:37 7 on they'll never let that go" or "they'll never let  
 00:37 8 that happen". Well, here I stand to speak my piece.  
 00:37 9 Respectfully I keep coming back to a  
 00:38 10 single question posed last meeting by a fellow  
 00:38 11 resident, "what do the residents of Ridgewood gain  
 00:38 12 from changing the Master Plan for Valley Hospital".  
 00:38 13 A baseball scoreboard? A few thousand dollars in  
 00:38 14 donations? Not much in comparison to their average  
 00:38 15 \$20 million in profits.  
 00:38 16 I am completely aware of what Valley  
 00:38 17 Hospital will gain. But you are supposed to  
 00:38 18 represent the citizens of Ridgewood. And the  
 00:38 19 cost/value relationship for us does not add up.  
 00:38 20 I am very happy to have Valley Hospital  
 00:38 21 in Ridgewood. I and my children have received  
 00:38 22 excellent care from their physicians. But this has  
 00:38 23 no bearing on whether or not they so should be  
 00:38 24 allowed to expand almost 70, 80, 90 percent in their  
 00:38 25 current location.

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00:36 1 you have any questions?  
 00:36 2 MS. SHERMAN: I do. I have lots of  
 00:36 3 questions, but I'm not going to start it tonight.  
 00:37 4 CHAIRMAN NICHOLSON: Would you state  
 00:37 5 your name, spell your last name and your address for  
 00:37 6 the record.  
 00:37 7 MS. SHERMAN: Marla Sherman,  
 00:37 8 S-h-e-r-m-a-n, 321 North Pleasant Avenue.  
 00:37 9 MS. PRICE: So just a statement?  
 00:37 10 MS. SHERMAN: Just a statement.  
 00:12 11 MS. PRICE: Do you swear the testimony  
 12 you're about to give in connection with this matter  
 13 is the truth, the whole truth and nothing but the  
 14 truth?  
 15 MS. SHERMAN: I do.  
 16 M A R L A S H E R M A N,  
 00:37 17 Residing at 321 North Pleasant Avenue, Ridgewood,  
 00:37 18 New Jersey, having been duly sworn, testifies as  
 00:37 19 follows:  
 00:37 20 MS. PRICE: Okay.  
 00:37 21 MS. SHERMAN: Thank you.  
 00:37 22 I've been following the proposed H-Zone  
 00:37 23 changes for about a year. And I'm truly baffled that  
 00:37 24 this room is not filled to capacity with "Stop  
 00:37 25 Valley" supporters.

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00:38 1 Again, respectfully, Valley's fiscal  
 00:38 2 viability should not be your concern.  
 00:38 3 The quality of life of the residents of  
 00:38 4 this Village or.  
 00:38 5 Valley can try to fool us by calling it  
 00:39 6 a Renewal. Valley can try to outsmart us by asking  
 00:39 7 for an H-Zone change before disclosing the variances  
 00:39 8 they would require. Valley can try to lie to us and  
 00:39 9 tell us that despite spending almost three years and  
 00:39 10 millions of dollars on a public support campaign that  
 00:39 11 they don't expect an increase in patient volume,  
 00:39 12 traffic or services from our Village.  
 00:39 13 But we know the truth. And this does  
 00:39 14 not change the fact that what they are asking for  
 00:39 15 does not belong in our Village.  
 00:39 16 Valley Hospital deserves to be able to  
 00:39 17 upgrade their facilities, but the residents of  
 00:39 18 Ridgewood deserve a plan B that fits within the  
 00:39 19 current H-Zone.  
 00:39 20 Thank you. (Applause).  
 00:40 21 MS. PRICE: Ms. Sherman, are you going  
 00:40 22 to leave a copy of your statement.  
 00:40 23 MS. SHERMAN: Not at this time.  
 00:40 24 MS. PRICE: Do you want to get us a  
 00:40 25 copy.

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00:40 1 MS. SHERMAN: I can.  
 00:40 2 MS. PRICE: All right. I'm going to  
 00:40 3 mark it for the record then with an exhibit number.  
 00:40 4 And then if you can get it to the Board Secretary,  
 00:40 5 that would be great.  
 00:40 6 MS. SHERMAN: Absolutely.  
 00:40 7 MS. PRICE: Okay. So we'll mark it as  
 00:40 8 O-9 for the record.  
 00:40 9 (Whereupon, Ms. Sherman's Written  
 00:40 10 Comments were received and marked as Exhibit  
 00:40 11 O-9 for Identification.)  
 00:40 12 CHAIRMAN NICHOLSON: Do you have any  
 00:40 13 questions, Ms. Blair?  
 00:40 14 MS. BLAIR: I do.  
 00:40 15 At some of the past meetings it's been  
 00:40 16 said that a formal application has not been submitted  
 00:40 17 by the Hospital.  
 00:40 18 Can you just expand on that and confirm  
 00:40 19 whether or not that's true?  
 00:40 20 MS. PRICE: Under the Municipal Land  
 00:40 21 Use Law a development application is different than a  
 00:40 22 request for a Master Plan Amendment. And when  
 00:40 23 reference was made that an application was not been  
 00:41 24 filed, that was -- it was with regard to a  
 00:41 25 development application. So we don't have a site  
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00:42 1 MS. PRICE: Okay. This is a formal --  
 00:42 2 this is a formal proceeding. This is the public  
 00:42 3 hearing process under the Municipal Land Use Law for  
 00:42 4 consideration of the proposal to the Master Plan.  
 00:42 5 We don't know how the Board is going to  
 00:42 6 rule on that request for the proposal.  
 00:42 7 Assuming that there is a positive  
 00:42 8 action on the Master Plan Amendment in September,  
 00:42 9 October, November, whenever these proceedings  
 00:42 10 conclude, at that point this matter would then shift  
 00:42 11 to the governing body because nothing that is  
 00:42 12 contained in the Master Plan could be implemented  
 00:42 13 without an ordinance change.  
 00:42 14 And this body is not the body that is  
 00:42 15 vested by the Land Use Law with the authority to  
 00:42 16 adopt Zoning Ordinance amendments, only the governing  
 00:42 17 body can do that.  
 00:42 18 So an ordinance would have to be  
 00:42 19 drafted that would mirror the items that are  
 00:42 20 contained in any Master Plan Amendment. It would  
 00:43 21 need be in introduced on first reading, by the  
 00:43 22 governing body, referred back to this Board for  
 00:43 23 review and recommendation as to whether it is  
 00:43 24 consistent with any Master Plan Amendment that would  
 00:43 25 have been adopted. And then it goes back to the  
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00:41 1 plan application or a concrete request for any kind  
 00:41 2 of construction before us. It's an -- it's a  
 00:41 3 proposal to amend the Master Plan.  
 00:41 4 So that was the -- that was what we  
 00:41 5 were trying to distinguish for the record.  
 00:41 6 MS. BLAIR: So just to follow up on  
 00:41 7 that can you tell us a little bit more about what  
 00:41 8 happens next? And the reason why I ask is because I  
 00:41 9 have been coming to these meetings since the  
 00:41 10 inception.  
 00:41 11 MS. PRICE: Yes.  
 00:41 12 MS. BLAIR: And, you know, at one of  
 00:41 13 the meetings it was stated that everything that we  
 00:41 14 had done prior to that was just to gather  
 00:41 15 information.  
 00:41 16 So here we're still here talking about  
 00:41 17 this. And yet no formal application has been formed.  
 00:41 18 And I think I and a lot of other people are just  
 00:41 19 confused about what comes next.  
 00:41 20 MS. PRICE: Sure.  
 00:41 21 MS. BLAIR: What's the end game? And  
 00:41 22 then where do we go from there?  
 00:41 23 MS. PRICE: Sure. Do you want to do  
 00:41 24 it?  
 00:41 25 CHAIRMAN NICHOLSON: No, you can do it.  
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00:43 1 governing body for a formal public hearing.  
 00:43 2 So there would be another proceeding,  
 00:43 3 similar to the type that has been going on here, with  
 00:43 4 an opportunity for everyone to be heard on the  
 00:43 5 ordinances, which would be the document that would be  
 00:43 6 much more specific and detailed concerning any of the  
 00:43 7 bulk regulations pertaining to the H-Zone.  
 00:43 8 And that all presupposes the formal  
 00:43 9 action by this Board on an amendment.  
 00:43 10 If that were to be adopted, only at  
 00:43 11 that point in time, and after a situation in which no  
 00:43 12 appeal were filed and that the ordinances were valid,  
 00:44 13 only then could a site plan application for a  
 00:44 14 development come before this Board.  
 00:44 15 So there are many steps involved before  
 00:44 16 that actual land development application that's  
 00:44 17 defined by the statute could be heard.  
 00:44 18 MS. BLAIR: And when you say the  
 00:44 19 governing body?  
 00:44 20 MS. PRICE: The Mayor and Council.  
 00:44 21 MS. BLAIR: Okay.  
 00:44 22 MS. PRICE: The Village Mayor and  
 00:44 23 Council.  
 00:44 24 MS. BLAIR: Okay.  
 00:44 25 So does this Planning Board then have a  
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00:44 **1** vote and it's either a yes or a no?  
 00:44 **2** MS. PRICE: Yes.  
 00:44 **3** MS. BLAIR: Okay.  
 00:44 **4** MS. PRICE: On the Master Plan  
 00:44 **5** Amendment.  
 00:44 **6** MS. BLAIR: Okay.  
 00:44 **7** MS. PRICE: But the Village Mayor and  
 00:44 **8** Council is the authority that has the power to adopt  
 00:44 **9** any Zoning ordinance change.  
 00:44 **10** MS. BLAIR: And just remind me, how  
 00:44 **11** much overlap there between the Planning Board and the  
 00:44 **12** Council.  
 00:44 **13** MS. PRICE: Two.  
 00:44 **14** MS. BLAIR: Okay.  
 00:44 **15** MS. PRICE: We have the Mayor and the  
 00:44 **16** Council liaison.  
 00:44 **17** MS. BLAIR: Okay. Thank you.  
 00:45 **18** Another question is, just about the  
 00:45 **19** discussion about Phase I and Phase II, because I've  
 00:45 **20** -- on Valley's website they refer to Phase I as three  
 00:45 **21** years and then they tack on another 1.5 years for the  
 00:45 **22** parking garage. It doesn't say if those two things  
 00:45 **23** are going to happen at the same time. And yet  
 00:45 **24** there's nothing to be said about Phase II.  
 00:45 **25** So I just like some clarity as far as

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00:46 **1** MS. BLAIR: Thank you.  
 00:46 **2** CHAIRMAN NICHOLSON: -- and advise.  
 00:46 **3** MS. BLAIR: Because I believe on  
 00:46 **4** Valley's website they do lay out plans for Phase II.  
 00:46 **5** MR. BRANCHEAU: Oh, yes. And this  
 00:46 **6** Master Plan talks about the full Phase II build-out  
 00:46 **7** not just the Phase I. So, yes, we're -- there is two  
 00:46 **8** phases, but as to whether Phase II ever really  
 00:46 **9** happens or not, I guess, is still up in the air.  
 00:46 **10** MS. BLAIR: I think it's fairly certain  
 00:46 **11** that the last part is done.  
 00:46 **12** Let me just ask about the affordable  
 00:47 **13** housing issue. I know you've said 60 affordable  
 00:47 **14** housing units is the answer.  
 00:47 **15** And when I was at the Board of Ed  
 00:47 **16** meeting, I guess it was in May or June, when this  
 00:47 **17** whole issue was discussed, the question came up as to  
 00:47 **18** what would this do to our schools if, let's say, 60  
 00:47 **19** affordable housing units were built.  
 00:47 **20** Have any of you given any thought to  
 00:47 **21** that as far as the burden that it would put on our  
 00:47 **22** school system, our school budget, the infrastructure?  
 00:47 **23** MR. BRANCHEAU: Do you want me to speak  
 00:47 **24** to that?  
 00:47 **25** MS. PRICE: Yes.

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00:45 **1** how long are they proposing that Phase I will take?  
 00:45 **2** How long are they proposing Phase II will take? And  
 00:45 **3** I believe the consistent number I've seen for the gap  
 00:45 **4** in between is ten years.  
 00:45 **5** MS. PRICE: Is that a Blais question?  
 00:45 **6** CHAIRMAN NICHOLSON: Well, Blais, do  
 00:45 **7** you recall what the Hospital stated in that regard or  
 00:45 **8** should we go back into the record and advise at a  
 00:45 **9** later date?  
 00:45 **10** MR. BRANCHEAU: I don't recall. I do  
 00:45 **11** recall regarding the Phase II that Phase II is more  
 00:45 **12** conjectural than Phase I and that the timing and then  
 00:45 **13** the actual completion of Phase II is uncertain at  
 00:46 **14** this time.  
 00:46 **15** And that's one of the reasons for the  
 00:46 **16** potentially long gap is Phase II is -- my  
 00:46 **17** recollection anyway is that Phase II is not a  
 00:46 **18** certainty at all at this point in time.  
 00:46 **19** As for the timing of construction of  
 00:46 **20** Phase I, I don't recollect the specifics. I don't  
 00:46 **21** know if those are known with certainty. But I really  
 00:46 **22** don't remember.  
 00:46 **23** MS. PRICE: We can look back.  
 00:46 **24** CHAIRMAN NICHOLSON: We'll look back  
 00:46 **25** into the record --

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00:47 **1** CHAIRMAN NICHOLSON: Yes.  
 00:47 **2** MR. BRANCHEAU: I think the impact of  
 00:47 **3** that would really depend upon how those units were  
 00:47 **4** addressed and where those units were located.  
 00:47 **5** For example, if the Village were to do  
 00:47 **6** an inclusionary zoning solution whereby a builder  
 00:47 **7** builds market rate units and includes within that  
 00:48 **8** development a percentage of affordable units then you  
 00:48 **9** could actually see, let's just say for the sake of  
 00:48 **10** argument, 250 to 300 units built, not 60. You'd need  
 00:48 **11** -- let's just say 240 market rate units plus 60  
 00:48 **12** affordable units for a total of 300 to address the  
 00:48 **13** obligation.  
 00:48 **14** That obviously would have a far  
 00:48 **15** different impact on the school system than if the  
 00:48 **16** Village were to work with a nonprofit or governmental  
 00:48 **17** agency to just bill 60 affordable units. You're  
 00:48 **18** talking five times as many under one solution than  
 00:48 **19** you are on the other.  
 00:48 **20** Another way in which the impact would  
 00:48 **21** vary would be whether those units were all built in  
 00:48 **22** one location or whether those units were built in  
 00:48 **23** different locations such that the school children, if  
 00:49 **24** it was all built in one location, would pretty much  
 00:49 **25** all go to one school and could have a potentially

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00:49 **1** greater impact than if the children were distributed  
 00:49 **2** amongst several elementary schools and the high  
 00:49 **3** school.  
 00:49 **4** So the answer to your question in short  
 00:49 **5** is it really would depend upon the solution. In  
 00:49 **6** other words, how we would address those 60 units of  
 00:49 **7** obligation. There would be some impact, no question,  
 00:49 **8** but the actual amount of impact is -- depends upon  
 00:49 **9** those factors.

00:49 **10** MS. BLAIR: Well, I think in my  
 00:49 **11** commentary I'll address some thoughts on that so if I  
 00:49 **12** can be sworn in?

00:49 **13** MS. PRICE: Okay. Do you swear the  
 00:49 **14** testimony you're about to give in connection with  
 00:49 **15** this matter is the truth, the whole truth and nothing  
 00:12 **16** but the truth?

00:12 **17** MS. BLAIR: I do.

00:12 **18** E L I Z A B E T H B L A I R,  
 00:49 **19** Residing at 78 North Van Dien Avenue, Ridgewood,  
 00:49 **20** New Jersey, having been duly sworn, testifies as  
 00:49 **21** follows:

00:49 **22** MS. PRICE: Could you just state your  
 00:49 **23** full name and your address --

00:49 **24** MS. BLAIR: Sure.

00:49 **25** MS. PRICE: -- for the record.

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00:51 **1** on North Van Dien; the Graydon pool project;  
 00:51 **2** installing AstroTurf on so many of our playing  
 00:51 **3** fields; and Valley's proposal to build what I think  
 00:51 **4** is now being talked about 1.5 million square feet of  
 00:51 **5** hospital on 15.4 acres.

00:51 **6** And I'll tell you, I think most of us  
 00:51 **7** are really tired of fighting. But when it comes to  
 00:51 **8** our children and when our children are affected  
 00:51 **9** either directly or indirectly we fight for them.

00:51 **10** I am an advocate a for my children. We  
 00:51 **11** are all advocates for our children. My primary  
 00:51 **12** concern is that Sheila Brogan from the Board of Ed  
 00:51 **13** remarked at our last meeting: "To protect the  
 00:51 **14** integrity and the learning environment of our  
 00:51 **15** children."

00:51 **16** And this proposed construction would be  
 00:51 **17** too close to this school, right here where we are,  
 00:51 **18** where my three kids will spend their middle school  
 00:51 **19** careers.

00:51 **20** It's time we all spent more time with  
 00:51 **21** our families and put this behind us.

00:51 **22** And I am not asking for concessions.  
 00:51 **23** I'm not asking for crossing guards. I'm not asking  
 00:51 **24** for air filtration systems. I'm not asking for any  
 00:52 **25** of that. I am simply asking for you to say no to

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00:49 **1** MS. BLAIR: Elizabeth Blair, B-l-a-i-r,  
 00:49 **2** 78 North Van Dien Avenue.  
 00:49 **3** MS. PRICE: Thank you.  
 00:50 **4** MS. BLAIR: Just to follow up on that  
 00:50 **5** comment that we just had about the affordable housing  
 00:50 **6** units, you know we were talking before about whether  
 00:50 **7** or not Valley would consider helping to pay for those  
 00:50 **8** affordable housing units, but I think what -- what  
 00:50 **9** folks are missing, even in the discussion, is just  
 00:50 **10** simply that it's not so much the building of the  
 00:50 **11** units that's the issue, it's the repercussions that  
 00:50 **12** follow.

00:50 **13** And it's the same thing with the  
 00:50 **14** construction of the hospital. It's not just the  
 00:50 **15** building it's the repercussions that will follow.  
 00:50 **16** And we've discussed them all ad nauseam  
 00:50 **17** so I won't list them.

00:50 **18** But I do want to say that the people of  
 00:50 **19** this town are very angry about so many things. You  
 00:50 **20** know we moved to the bucolic town thinking that  
 00:50 **21** everything was perfect, and I'll tell you ignorance  
 00:50 **22** is bliss, because we have had to deal with things  
 00:50 **23** like: The Baker housing development; the parking  
 00:50 **24** garage in the Central Business District; a tax  
 00:50 **25** revaluation; the continued use of the commercial deli

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00:52 **1** this Renewal.

00:52 **2** Thank you. (Applause.)

00:52 **3** CHAIRMAN NICHOLSON: Thank you, Ms.  
 00:52 **4** Blair.

00:52 **5** We are going to go on break. We will  
 00:52 **6** reconvene at 9:20.

00:52 **7** (Whereupon, a brief recess is taken  
 00:52 **8** from 9:13 p.m. to 9:20 p.m.)

00:52 **9** CHAIRMAN NICHOLSON: Ladies and  
 01:01 **10** gentlemen, if you can take your seats we'll get  
 01:01 **11** restarted. Thank you.

01:02 **12** Member of the Board, could you take  
 01:02 **13** your seats?

01:02 **14** Is Lorraine Reynolds with us tonight?

01:03 **15** Lorraine, you're next but -- and come  
 01:03 **16** up here, but don't start. Come on up, but let's make  
 01:03 **17** sure everybody settles in first.

01:03 **18** After Ms. Reynolds is Ann Marie Snyder.

01:03 **19** Is Ms. Snyder here? Yes.

01:03 **20** And Michael Walsh. Is Michael Walsh  
 01:03 **21** with us tonight?

01:03 **22** (NO RESPONSE.)

01:03 **23** CHAIRMAN NICHOLSON: After Ms. Snyder  
 01:03 **24** then would be Lisa Kender.

01:03 **25** Is Ms. Kender here tonight?

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01:03 1 (NO RESPONSE.)  
 01:03 2 CHAIRMAN NICHOLSON: Then Mr. Hoffman,  
 01:03 3 Bill Hoffman? Mr. Hoffman?  
 01:03 4 (NO RESPONSE.)  
 01:03 5 CHAIRMAN NICHOLSON: Ms. Reynolds, do  
 01:03 6 you have any questions?  
 01:03 7 MS. REYNOLDS: Yes, I do.  
 01:03 8 Okay. The first one is about these  
 01:03 9 affordable housing units because tonight we all --  
 01:04 10 everybody talked about 60, but in previous meetings I  
 01:04 11 had heard a range of 60 to 120. Why was there ever  
 01:04 12 -- I mean is it 60? Could it be more than 60?  
 01:04 13 CHAIRMAN NICHOLSON: The regulations  
 01:04 14 and the law are in such flux in Trenton concerning  
 01:04 15 this issue that it literally changes every month.  
 01:04 16 MS. REYNOLDS: Okay.  
 01:04 17 MR. BRANCHEAU: Mr. Chairman, I can  
 01:04 18 respond to that also.  
 01:04 19 CHAIRMAN NICHOLSON: Please, also.  
 01:04 20 More precisely than I can.  
 01:04 21 MR. BRANCHEAU: The reasons we cannot  
 01:04 22 give a precise calculation, if you'd like for a  
 01:04 23 future meeting I can try to do a more precise with  
 01:04 24 certain assumptions.  
 01:04 25 But they're just -- it's just that,

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01:06 1 plan with real numbers of what the floor area would  
 01:06 2 be, we don't know.  
 01:06 3 But if you'd like I can -- assuming  
 01:06 4 what the numbers that are in the Master Plan and what  
 01:06 5 we know at the moment of the floor area, and using  
 01:06 6 current ratios and assuming that all of it were to be  
 01:06 7 built by the 2018 we can come up with a better number  
 01:06 8 than that. And I'll be happy to do that.  
 01:06 9 MS. REYNOLDS: Okay. I would  
 01:06 10 appreciate that.  
 01:06 11 The other question, where does this  
 01:06 12 requirement come from? Is it the State of New  
 01:06 13 Jersey? Is it -- it is the State of New Jersey  
 01:06 14 requires this? Okay.  
 01:06 15 And has there been any talk about where  
 01:06 16 these units would possibly go? I mean I can't even  
 01:06 17 think of any place in Ridgewood where you could  
 01:06 18 possibly put 60, 100, 120 units.  
 01:06 19 MR. BRANCHEAU: They're -- it's a  
 01:06 20 difficult question, no question about that.  
 01:06 21 And it -- again, it depends upon where  
 01:07 22 and what type of units we're talking. Whether we're  
 01:07 23 talking -- because you can do it in single family  
 01:07 24 homes. You can address it with apartments. You can  
 01:07 25 address it with townhouses. You can address it with

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01:04 1 it's just a guess. The reason being is the actual  
 01:04 2 obligation depends upon the net increase in floor  
 01:04 3 area. And it also depends upon the actual use group  
 01:04 4 assigned to both demolition of existing buildings and  
 01:05 5 the use group -- under the building code that is --  
 01:05 6 of the construction of new buildings.  
 01:05 7 And it -- you use a factor, you divide  
 01:05 8 the floor area by like jobs ratio to come up with  
 01:05 9 what the obligation is.  
 01:05 10 The problem is is -- and it also has to  
 01:05 11 do with construction that receives a certificate of  
 01:05 12 occupancy by the end of 2018.  
 01:05 13 So to give a highly accurate number,  
 01:05 14 we'd have to know, A, when is the construction  
 01:05 15 anticipated to be completed? How much will be  
 01:05 16 completed by that date? What is the use group of the  
 01:05 17 buildings being demolished or portions of buildings  
 01:05 18 being demolished? And in some cases there's multiple  
 01:05 19 use groups that are assigned to a single building and  
 01:05 20 you have to factor in how much of the building is one  
 01:05 21 use group versus another use group?  
 01:05 22 It's -- it's not a simple calculation.  
 01:05 23 That's why we haven't tried to come up with a precise  
 01:05 24 number. We've made some guesses.

And, of course, without a real site  
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01:07 1 group homes, where the number of bedrooms counts,  
 01:07 2 instead of the number of units. So if you had a six  
 01:07 3 bedroom group home that would count as six units  
 01:07 4 against that number.  
 01:07 5 Depending on what it was, would  
 01:07 6 determine where it would go.  
 01:07 7 I agree that if you were to talk about  
 01:07 8 building 300 single family homes in the Village of  
 01:07 9 Ridgewood, that would be pretty much a practical  
 01:07 10 impossibility.  
 01:07 11 If you're talking about building group  
 01:07 12 homes, those could fit on fairly small lots. If  
 01:07 13 you're talking about building apartments, that could  
 01:07 14 have happen. For example, above stores, in the  
 01:07 15 downtown area.  
 01:07 16 If you're talking about apartments or  
 01:07 17 townhouses on their own lots there are a few  
 01:08 18 opportunities, not many, in the Village. It's a  
 01:08 19 difficult question, but those are just conceptually  
 01:08 20 the ideas that, you know, would be considered if and  
 01:08 21 when that time came.  
 01:08 22 MS. REYNOLDS: Okay. Has the Board  
 01:08 23 ever asked Valley to look for off-site locations  
 01:08 24 where they can meet their growing needs? Has that  
 01:08 25 ever been asked or it's taboo? What -- you know.

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01:08 1 MR. BRANCHEAU: We did. The -- forgive  
01:08 2 me, but this has been going on for two-and-a-half  
01:08 3 years at least.

01:08 4 And I think in 2007 we, meaning the  
01:08 5 Village engineer to my left and the Board attorney  
01:08 6 and myself, had a series of meetings with Valley  
01:08 7 Hospital, more of a factfinding thing that we were  
01:08 8 asking: Did you consider this alternative; did you  
01:08 9 look at this; did you look at that. And that was one  
01:09 10 of the questions that was asked. And, essentially,  
01:09 11 the answer was that there will be -- there has been  
01:09 12 some relocation of facilities off-site. And there  
01:09 13 will continue to be some. But as far as what's  
01:09 14 needed at this site, it's Valley's position that what  
01:09 15 they're asking for is -- is the minimum that they  
01:09 16 feel they can do at this point in time.

01:09 17 MS. REYNOLDS: Oh, okay. Last meeting  
01:09 18 it was brought up that there's been no Environmental  
01:09 19 Impact Study done and that there was no plan to ask  
01:09 20 for one.

01:09 21 With everything that's been brought up,  
01:09 22 up with kids have asthma and health issues that could  
01:09 23 come up, has the Board ever -- since the last meeting  
01:09 24 have they discussed this and maybe possibly decided  
01:09 25 that they think it might be a good idea to have an

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01:11 1 It's about a business.

01:11 2 For the residents of Ridgewood, I can't  
01:11 3 figure out any benefit.

01:11 4 Do you guys -- can you guys tell me  
01:11 5 what benefit it would be? When you can go ten  
01:11 6 minutes, 20 minutes down the road and have anything  
01:11 7 you want, why do we have to have the most updated  
01:11 8 medical facility in our backyard?

01:11 9 CHAIRMAN NICHOLSON: The answer to that  
01:11 10 question is what we've been considering for two years  
01:11 11 and continue to consider this public hearing is a  
01:11 12 part of that --

01:11 13 MS. REYNOLDS: Okay.

01:12 14 CHAIRMAN NICHOLSON: -- thinking  
01:12 15 propose.

01:12 16 MS. REYNOLDS: Is there a benefit or  
01:12 17 isn't there? That's the whole -- okay.

01:12 18 CHAIRMAN NICHOLSON: That's one of the  
01:12 19 factors that we're charged in weighing in making our  
01:12 20 decision.

01:12 21 MS. REYNOLDS: Okay.

01:12 22 And then the last question I have is,  
01:12 23 is there any way, if any, you know with what the  
01:12 24 public is saying, what the Board of Ed says, will  
01:12 25 that weigh or influence your opinion? Do you really

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01:09 1 Environmental Impact Study done before they make a  
01:09 2 decision?

01:10 3 MR. BRANCHEAU: Mr. Chairman, I'll be  
01:10 4 happy to try to answer that.

01:10 5 CHAIRMAN NICHOLSON: As Blais answered  
01:10 6 either the last evening or the evening before, the  
01:10 7 studies, many parts of an Environmental Impact  
01:10 8 Statement or study have been preformed as part of  
01:10 9 this exercise.

01:10 10 We have not specifically looked at the  
01:10 11 impact of hospital construction on asthma, for  
01:10 12 example. But we have also identified the fact that  
01:10 13 -- that while we're looking at a Master Plan, a  
01:10 14 policy document, there are opportunities and  
01:10 15 legislation that would follow to be more specific  
01:10 16 about environment studies that may or may not have to  
01:11 17 be done as part of the site plan application.

01:11 18 The imposition of a detailed  
01:11 19 Environment Impact Statement at a Master Plan level  
01:11 20 is not necessary.

01:11 21 MS. REYNOLDS: Okay.

01:11 22 And then the -- let's see, one other  
01:11 23 question, personally I can't see any benefit to this  
01:11 24 whatsoever. I -- I mean I understand it's a benefit  
01:11 25 to Valley. It's about money. It's about profit.

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01:12 1 listen to us? Is there a value in us coming here  
01:12 2 every time?

01:12 3 CHAIRMAN NICHOLSON: Absolutely.

01:12 4 MS. REYNOLDS: Okay.

01:12 5 CHAIRMAN NICHOLSON: You know I said it  
01:12 6 in November of 2007, that the informal process, I  
01:12 7 thought, was invaluable.

01:12 8 Most of the Members of the Board had  
01:12 9 not sat on the zoning hearing boards that heard  
01:12 10 hospital variances in the past.

01:12 11 Although we're all long time residents  
01:12 12 of Ridgewood, the detail we didn't know. And the  
01:12 13 informal process was very educational for us. And,  
01:12 14 in fact, this process has well as.

01:13 15 MS. REYNOLDS: For myself as well.

01:13 16 Okay. I'm ready.

01:13 17 MS. PRICE: Do you swear the testimony  
01:13 18 you're about to give in connection with this matter  
01:13 19 is the truth, the whole truth and nothing but the  
01:13 20 truth?

01:13 21 MS. REYNOLDS: I do.

01:13 22 L O R R A I N E R E Y N O L D S,  
01:13 23 Residing at 550 Windemere Avenue, Ridgewood, New  
01:13 24 Jersey, having been duly sworn, testifies as  
01:13 25 follows:

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01:13 1 MS. REYNOLDS: I didn't spell my name  
 01:13 2 or anything.  
 01:13 3 MS. PRICE: I know. If you could do  
 01:13 4 that for the record.  
 01:13 5 MS. REYNOLDS: Lorraine Reynolds,  
 01:13 6 R-e-y-n-o-l-d-s, 550 Windemere Avenue.  
 01:13 7 Okay. My husband and I moved to the  
 01:13 8 Village of Ridgewood 19 years ago. I grew up in near  
 01:13 9 by Fair Lawn had always loved coming to Ridgewood to  
 01:13 10 go out to dinner, shopping or to the movies when I  
 01:13 11 was a kid. When we began looking at houses,  
 01:13 12 Ridgewood was where we wanted to live and hoped our  
 01:13 13 future children would go.  
 01:13 14 I am sorry to say I feel my children  
 01:13 15 are now in jeopardy of being exposed to years of  
 01:13 16 dust, noise, traffic, pollution and a very poor  
 01:13 17 learning environment, not to mention the many other  
 01:13 18 dangers that this Renewal will bring for years to  
 01:13 19 come.  
 01:13 20 Recently, my block has undergone a  
 01:13 21 replacement of the curb on either side of the street.  
 01:13 22 The kids could not play outside. It  
 01:14 23 was too noisy and too dusty during this. The entire  
 01:14 24 block was coated with dust.  
 01:14 25 This is going to sound disgusting but

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01:14 1 when we blew our noses, black stuff came out of it  
 01:14 2 for days. Okay? This construction lasted for four  
 01:14 3 days. I can't even imagine what would happen for ten  
 01:14 4 years.  
 01:14 5 It's been discussed that Valley could  
 01:14 6 get preferential -- should get preferential status  
 01:14 7 because they're a hospital. They have already  
 01:14 8 received preferential status time and time again.  
 01:14 9 During the 1996 expansion proposal they  
 01:14 10 promised the Board if it passed they would not come  
 01:14 11 back and ask to expand again. Here we are just ten  
 01:14 12 years -- less than ten years later they were asking  
 01:14 13 to almost double its size. This is the time to say  
 01:14 14 no. It's time for the community to receive some  
 01:14 15 consideration as to what this Renewal would do to our  
 01:14 16 lives, how it would affect our health, our schools,  
 01:14 17 our children, and even our sanity.  
 01:14 18 It would affect our every day lives.  
 01:14 19 Just having kids play outside would change. I would  
 01:15 20 be based on how loud or dusty construction is that  
 01:15 21 particular day, and which way the wind is blowing.  
 01:15 22 That's a sad way to live. I don't want  
 01:15 23 my kids to live that way. And I don't think you  
 01:15 24 would want yours either.  
 01:15 25 Valley is asking us to endure far too

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01:15 1 much and get nothing in return. The size, scope and  
 01:15 2 duration of this project is completely unacceptable  
 01:15 3 for a residential neighborhood.  
 01:15 4 Valley Hospital is a hospital that was  
 01:15 5 supposed to serve the needs of the community and it  
 01:15 6 has done so very well. Only six percent of Valley's  
 01:15 7 patients are from Ridgewood. Valley does not need to  
 01:15 8 renew for the community's sake. It wants to renew  
 01:15 9 for their own sake.  
 01:15 10 Valley will continue to prosper whether  
 01:15 11 the Board says yes or no. If Valley wants to become  
 01:15 12 a regional medical center it should find a piece of  
 01:15 13 property suitable to built what is necessary.  
 01:15 14 The 15 acres in the middle of North Van  
 01:15 15 Dien, next to a middle school and across from  
 01:15 16 residential houses cannot accommodate what Valley  
 01:15 17 wants and at the same time maintain the integrity of  
 01:15 18 our wonderful town. The McMansion law was passed in  
 01:16 19 order to keep homeowners from overbuilding on their  
 01:16 20 land.  
 01:16 21 The Board needs to make sure that  
 01:16 22 Valley Hospital cannot over build any more than it  
 01:16 23 has already.  
 01:16 24 Enough is enough. It should be as  
 01:16 25 simple as that. I don't know why this is even being

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01:16 1 considered. It should be a clear cut no for many,  
 01:16 2 many reasons. The most important being the health  
 01:16 3 and education of our children.  
 01:16 4 You can't convince me that ten, 20 or  
 01:16 5 even 30 years don't the road our children won't have  
 01:16 6 medical issues due to all the years of noise, dust,  
 01:16 7 water and exhaust pollution caused by this Renewal if  
 01:16 8 it passes.  
 01:16 9 I ask your common sense to reject this  
 01:16 10 proposal and keep us a village not turn us into a  
 01:16 11 city.  
 01:16 12 If I wanted to live in a city I would  
 01:16 13 have moved to Hackensack.  
 01:16 14 Thank you. (Applause).  
 01:16 15 CHAIRMAN NICHOLSON: Thank you, Ms.  
 01:16 16 Reynolds.  
 01:16 17 MS. PRICE: Mrs. Reynolds statement is  
 01:17 18 O-10 for the record.  
 01:17 19 (Whereupon, MS. Reynold's Written  
 01:17 20 Comments were received and marked as Exhibit  
 01:17 21 O-10 for Identification.)  
 01:17 22 CHAIRMAN NICHOLSON: Ms. Snyder?  
 01:17 23 MS. SNYDER: Yes.  
 01:17 24 CHAIRMAN NICHOLSON: Do you have any  
 01:17 25 questions?

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01:17 1 MS. SNYDER: I do not.  
 01:17 2 MS. PRICE: Do you swear the testimony  
 01:17 3 you're about to give is the truth, the whole truth  
 01:17 4 and nothing but the truth?  
 01:17 5 MS. SNYDER: I do.  
 01:17 6 A N N M A R I E S N Y D E R,  
 01:17 7 Residing at 379 Shelbourne Terrace, Ridgewood,  
 01:17 8 New Jersey, having been duly sworn, testifies as  
 01:17 9 follows:  
 01:17 10 MS. PRICE: Could you just state your  
 01:17 11 full name and spell your last and give your address  
 01:17 12 for the record?  
 01:17 13 MS. SNYDER: Ann Marie Snyder,  
 01:17 14 S-n-y-d-e-r, 379 Shelbourne Terrace, Ridgewood.  
 01:17 15 I also own a ental property at 217  
 01:17 16 Stielen Avenue. My family has lived in Ridgewood  
 01:17 17 since 1971.  
 01:17 18 I would like to thank the members of  
 01:17 19 the Planning Board and all the Village of Ridgewood  
 01:17 20 employees who have invested so much time and effort  
 01:17 21 in this process.  
 01:17 22 I have attended the majority of these  
 01:17 23 special meetings over the past two years and have  
 01:17 24 found the process fascinating. Slow, but still  
 01:17 25 fascinating.

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01:17 1 I had no idea the amount of work done  
 01:17 2 and the hours comitted by all of you. Thank you.  
 01:17 3 I believe that most homes and  
 01:17 4 businesses in Ridgewood have made changes to or  
 01:18 5 modernized their bathrooms, kitchens, electrical  
 01:18 6 systems, plumbing, heating, air conditioning, et  
 01:18 7 cetera, over the past 50 years.  
 01:18 8 Most of the time the modernizing can be  
 01:18 9 done as a renovation to the existing space. But  
 01:18 10 there are times when the existing home or business is  
 01:18 11 too old or out of date and must be replaced for the  
 01:18 12 modernization.  
 01:18 13 Hospitals are no different. Buildings,  
 01:18 14 equipment, systems, need to be modernized to provide  
 01:18 15 the level of care and types of care expected and  
 01:18 16 required today and in the future.  
 01:18 17 Renovation and rebuilding are a  
 01:18 18 necessary process when modernization is required.  
 01:18 19 Do I look forward to a long term  
 01:18 20 construction project in our Village? No.  
 01:18 21 Do I look forward to a state-of-the-art  
 01:18 22 hospital in our Village? Yes.  
 01:18 23 I support the Valley Renewal and feel  
 01:18 24 that it will enhance Ridgewood.  
 01:18 25 Thank you.

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01:18 1 CHAIRMAN NICHOLSON: Thank you.  
 01:18 2 MS. PRICE: For the record that  
 01:18 3 statement is P-7.  
 01:18 4 (Whereupon, Ms. Snyder's Written  
 01:18 5 Comments were received and marked as Exhibit  
 01:18 6 P-7 for Identification.)  
 01:18 7 CHAIRMAN NICHOLSON: Is Michael Walsh  
 01:18 8 with us tonight?  
 01:18 9 (NO RESPONSE.)  
 01:19 10 CHAIRMAN NICHOLSON: Is Lisa Kender  
 01:19 11 with us tonight?  
 01:19 12 (NO RESPONSE.)  
 01:19 13 CHAIRMAN NICHOLSON: Is Mr. Hoffman  
 01:19 14 with us tonight?  
 01:19 15 (NO RESPONSE.)  
 01:19 16 CHAIRMAN NICHOLSON: How about Jerry  
 01:19 17 D'Andrea?  
 01:19 18 Mr. D'Andrea, did I get that right?  
 01:19 19 MR. D'ANDREA: Yes, that's right.  
 01:19 20 Good evening.  
 01:19 21 CHAIRMAN NICHOLSON: Good evening. You  
 01:19 22 have --  
 01:19 23 MR. D'ANDREA: Do you need my name now  
 01:19 24 or --  
 01:19 25 CHAIRMAN NICHOLSON: Yes, please.

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01:19 1 MR. D'ANDREA: Not a problem. Jerry  
 01:19 2 J-e-r-r-y, D'Andrea, D ' A-n-d-r-e-a. I live at 340  
 01:19 3 North Van Dien.  
 01:19 4 CHAIRMAN NICHOLSON: Do you have any  
 01:19 5 questions, Mr. D'Andrea?  
 01:19 6 MR. D'ANDREA: Yes, just to -- one to  
 01:19 7 clarify a statement that was made in the beginning of  
 01:19 8 today's meeting.  
 01:19 9 And that's in regards to the  
 01:20 10 contingency plan in the event that there's a  
 01:20 11 catastrophic emergency at Valley and the children in  
 01:20 12 B.F. would be displaced, I guess. And I guess the  
 01:20 13 primary location would be Travell.  
 01:20 14 CHIEF BOMBACE: That -- there we go.  
 01:20 15 That would be the initial location.  
 01:20 16 Certainly depending upon the circumstances and what  
 01:20 17 was going on, it's not out of the question that some  
 01:20 18 students could be moved to Ridgewood High School,  
 01:20 19 Somerville and Hawes.  
 01:20 20 MR. D'ANDREA: So in the event that  
 01:20 21 it's other locations besides Travell, which is around  
 01:20 22 the corner.  
 01:20 23 CHIEF BOMBACE: Right.  
 01:20 24 MR. D'ANDREA: How would they be moved  
 01:20 25 there? Would they have to walk? Would there buses

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01:20 1 available?  
 01:20 2 CHIEF BOMBACE: Well, walking is  
 01:20 3 certainly the preferred way of getting them from one  
 01:20 4 location to the other.  
 01:20 5 However, the Hawes School District is  
 01:20 6 quiet a distance away and we may have to accommodate  
 01:20 7 them by bus transportation.  
 01:21 8 Travell is a walking distance.  
 01:21 9 Ridgewood High School is a walking distance. And  
 01:21 10 Somerville School is a walking distance.  
 01:21 11 MR. D'ANDREA: But for them to walk  
 01:21 12 there they would have to go by the site that's in  
 01:21 13 emergency right now.  
 01:21 14 So I guess they would have to move down  
 01:21 15 -- I guess, the blocks that they would have to travel  
 01:21 16 would be away from the site and then --  
 01:21 17 CHIEF BOMBACE: Well, they could  
 01:21 18 certainly walk the eastern portion of Glen Avenue,  
 01:21 19 passed South Pleasant, and then go down South  
 01:21 20 Pleasant towards Somerville School.  
 01:21 21 They don't have to go past the hospital  
 01:21 22 facility --  
 01:21 23 MR. D'ANDREA: Okay.  
 01:21 24 CHIEF BOMBACE: -- to get to Somerville  
 01:21 25 School.

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01:22 1 CHIEF BOMBACE: And the same holds true  
 01:22 2 with -- with the high school has a small auditorium.  
 01:22 3 They've got gym areas.  
 01:22 4 I believe the schools could easily  
 01:22 5 accommodate, particularly if they were broken into  
 01:22 6 categories or smaller groups, going to each of those  
 01:22 7 schools.  
 01:22 8 MR. D'ANDREA: Okay.  
 01:22 9 My next question is in regards to  
 01:22 10 there's been a few questions in regards to the  
 01:22 11 housing and how -- the affordable housing, would it  
 01:23 12 be possible or as -- would Valley be able to put in a  
 01:23 13 waiver, a hardship waiver, actually requesting that  
 01:23 14 the housing, that they could not have to apply for  
 01:23 15 this housing?  
 01:23 16 Is that something that is possible,  
 01:23 17 that Valley may be able to put on the table? Or do  
 01:23 18 they have to comply to the housing?  
 01:23 19 MS. PRICE: No. Blais you want to  
 01:23 20 answer that?  
 01:23 21 MR. BRANCHEAU: It think it should be  
 01:23 22 clear that Valley has to do nothing.  
 01:23 23 MS. PRICE: Right.  
 01:23 24 MR. BRANCHEAU: If anyone does anything  
 01:23 25 it would be the Village would have to do that.

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01:21 1 Ridgewood High School, again, you know,  
 01:21 2 they could walk westbound and then cut down  
 01:21 3 Meadowbrook or some of the side streets to get there.  
 01:21 4 MR. D'ANDREA: Okay. Now, these --  
 01:21 5 these buildings, if I'm -- do they have a maximum  
 01:21 6 capacity?  
 01:21 7 CHIEF BOMBACE: Well, the --  
 01:22 8 MR. D'ANDREA: I'm just curious, how  
 01:22 9 many -- there's 630 kids in this school  
 01:22 10 approximately.  
 01:22 11 CHIEF BOMBACE: Right.  
 01:22 12 MR. D'ANDREA: How many kids could  
 01:22 13 actually be displaced from here and moved into --  
 01:22 14 CHIEF BOMBACE: Well, you have --  
 01:22 15 MR. D'ANDREA: -- Travell.  
 01:22 16 CHIEF BOMBACE: -- right here, as an  
 01:22 17 example, this auditorium, as a general purpose  
 01:22 18 auditorium, can have, I believe, somewhere in the  
 01:22 19 neighborhood of 700 people.  
 01:22 20 MR. D'ANDREA: Okay.  
 01:22 21 CHIEF BOMBACE: We don't hold classes,  
 01:22 22 to the best of my knowledge, in this room. So if  
 01:22 23 this room was not being occupied, you could put 700  
 01:22 24 students in here.  
 01:22 25 MR. D'ANDREA: Okay. All right.

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01:23 1 And to your -- to the point of your  
 01:23 2 question, could Ridgewood apply to COAH or to the  
 01:23 3 rulemaking body of COAH, to either amend its rule or  
 01:23 4 to seek a waiver of the obligation? Yes, of course  
 01:23 5 we could ask for that.  
 01:23 6 I'm sure the follow up question is how  
 01:23 7 likely would we be to get an answer that would be  
 01:24 8 acceptable. It's difficult to say.  
 01:24 9 My own feeling is, is that if they did  
 01:24 10 it for Ridgewood, they'd have to do it for every  
 01:24 11 municipality in the state that had a hospital.  
 01:24 12 And if they did it for hospitals,  
 01:24 13 they'd have to do it for other institutional uses  
 01:24 14 like schools, even jails generate an affordable  
 01:24 15 housing obligation. All public buildings do.  
 01:24 16 My guess is that it would become a huge  
 01:24 17 policy issue, that while I think it should be  
 01:24 18 addressed, I don't think it would be addressed in the  
 01:24 19 context of one municipality making a request.  
 01:24 20 My guess is that if there's any way of  
 01:24 21 relief for the Village, it's going to have to be done  
 01:24 22 statewide as either a legislature or rulemaking  
 01:24 23 amendment.  
 01:24 24 MR. D'ANDREA: Okay. Thank you.  
 01:24 25 I have no further questions, just a

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01:24 1 statement.  
 01:24 2 MS. PRICE: Statement.  
 01:24 3 Do you swear the testimony you're about  
 01:24 4 to give in connection with this matter is the truth,  
 01:24 5 the whole truth and nothing but the truth?  
 01:24 6 MR. D'ANDREA: I do.  
 01:24 7 J E R R Y D ' A N D R E A,  
 01:19 8 Residing at 340 North Van Dien, Ridgewood, New  
 01:19 9 Jersey, having been duly sworn, testifies as  
 01:19 10 follows:  
 01:25 11 MR. D'ANDREA: I would like to go on  
 01:25 12 record stating that I am against Valley Hospital's  
 01:25 13 expansion. Any additional growth to the Hospital  
 01:25 14 would depreciate the character of this town and  
 01:25 15 create a negative impact on our quality of life.  
 01:25 16 After this listening to the expert  
 01:25 17 testimony, it is clear that Ridgewood's  
 01:25 18 infrastructure cannot accommodate this expansion.  
 01:25 19 Any additional growth to the Hospital  
 01:25 20 would create undue hardship to our community and  
 01:25 21 compromise the safety of our children.  
 01:25 22 Throughout the course of these meetings  
 01:25 23 I have been perplexed with the amount of leeway the  
 01:25 24 Planning Board has provided Valley Hospital.  
 01:25 25 I would have to -- I would have thought  
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01:25 1 that Valley's request would have been dismissed long  
 01:25 2 ago.  
 01:25 3 The impression that I see shows the  
 01:25 4 Planning Board continuing to entertain the Hospital's  
 01:25 5 needs before their community.  
 01:25 6 Yes, Valley Hospital provides a  
 01:25 7 service. But they also receive payment for those  
 01:25 8 services. The Hospital lives in our Village free of  
 01:26 9 charge at our, the taxpayers', expense.  
 01:26 10 In closing, I am respectfully  
 01:26 11 requesting that the Planning Board deny Valley  
 01:26 12 Hospital's request to amend the H-Zone Master Plan.  
 01:26 13 Thank you very much for your time.  
 01:26 14 CHAIRMAN NICHOLSON: Thank you, Mr.  
 01:26 15 D'Andrea.  
 01:26 16 MS. PRICE: Mr. D'Andrea?  
 01:26 17 MR. D'ANDREA: Yes.  
 01:26 18 MS. PRICE: Do you want to give your  
 01:26 19 statement for the record?  
 01:26 20 MR. D'ANDREA: Sure can.  
 01:26 21 MS. PRICE: Okay. Thank you. That  
 01:26 22 will be O-11.  
 01:26 23 (Whereupon, Mr. D'Andrea's Written  
 01:26 24 Comments were received and marked as Exhibit  
 01:26 25 O-11 for Identification.)  
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01:26 1 CHAIRMAN NICHOLSON: Mr. McKenna?  
 01:26 2 After Mr. McKenna is Mr. Carroll. Is  
 01:26 3 Mr. Carroll with us tonight?  
 01:26 4 (NO RESPONSE.)  
 01:26 5 CHAIRMAN NICHOLSON: Is Ms. Maureen  
 01:26 6 Wolfson with us tonight?  
 01:26 7 MS. WOLFSON: Yes.  
 01:26 8 CHAIRMAN NICHOLSON: You'll be after  
 01:26 9 Mr. McKenna then.  
 01:26 10 MR. MCKENNA: Hi, Peter McKenna, M-c  
 01:26 11 K-e-n-n-a, 420 Meadowbrook Avenue.  
 01:26 12 I do have quite a few questions. I  
 01:27 13 apologize to the Board in advance for the number, but  
 01:27 14 I've sat here for two-and-a-half years, and I have a  
 01:27 15 lot of questions.  
 01:27 16 CHAIRMAN NICHOLSON: Shoot.  
 01:27 17 MR. MCKENNA: When I'm done I'm going  
 01:27 18 to ask that my wife join me for a joint statement so  
 01:27 19 I think I'm a little longer than three minutes rather  
 01:27 20 than get in the way of that we'll go to six and  
 01:27 21 hopefully be done earlier.  
 01:27 22 So my first series of questions are  
 01:27 23 around traffic. Unfortunately Mr. Staigar's not  
 01:27 24 here. So I'll address them to Mr. Brancheau to  
 01:27 25 start, and then if the answers can't be forthcoming  
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01:27 1 till next time I understand.  
 01:27 2 The first questions, is at the last  
 01:27 3 time, Mr. Brancheau, you said that the Hospital's  
 01:27 4 current traffic generation is consistent to the  
 01:27 5 projections from the last major expansion.  
 01:27 6 When I looked at the numbers I  
 01:27 7 calculated them differently. And I saw a 37 percent  
 01:27 8 growth rate in traffic from the site, from the '93  
 01:27 9 as-is condition, and a 24 percent growth rate from  
 01:27 10 the projected volumes.  
 01:28 11 I discussed that with Mr. Staigar at  
 01:28 12 the end of last meeting, so as you're -- as you're  
 01:28 13 doing the math this would be another percentage  
 01:28 14 difference to look at.  
 01:28 15 MR. BRANCHEAU: Yes, I -- when I made  
 01:28 16 that statement it was based upon Mr. Staigar's  
 01:28 17 comment to me on an earlier question on that. So I  
 01:28 18 have to defer to Mr. Staigar to explain the basis for  
 01:28 19 his statement to me, which I relied on in making that  
 01:28 20 statement.  
 01:28 21 MR. MCKENNA: Yes.  
 01:28 22 His -- what he explained to me was that  
 01:28 23 it was based on the assumption that traffic growth  
 01:28 24 naturally grows by 2 percent a year, but I don't  
 01:28 25 think that should be a foregone conclusion for a site  
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01:28 1 such as this.  
 01:28 2                    So if you could get me the percentage  
 01:28 3 increase, relative to the projections, that would be  
 01:28 4 helpful.  
 01:28 5                    MR. BRANCHEAU: I could ask for --  
 01:28 6                    MS. PRICE: Well, I think --  
 01:28 7                    MR. BRANCHEAU: I think -- I think Mr.  
 01:28 8 Staigar would have to do that.  
 01:28 9                    MS. PRICE: -- I think that would be  
 01:28 10 Mr. Staigar -- I think Mr. Staigar needs to  
 01:28 11 clarify -- you know, answer that question for the  
 01:28 12 record.  
 01:28 13                    So I'll note that for the record for  
 01:28 14 him for the next meeting.  
 01:28 15                    MR. McKENNA: And then a follow on  
 01:28 16 question from that is, if that represents a 24  
 01:29 17 percent increase in traffic relative to those  
 01:29 18 projected volumes, how does this measure compared to  
 01:29 19 Hospital's planned parking increase.  
 01:29 20                    So to the extent the parking is being  
 01:29 21 increased by about 50 percent if I -- 40 to 50  
 01:29 22 percent based on your earlier statement, it would be  
 01:29 23 the relationship in parking growth to that traffic  
 01:29 24 growth.  
 01:29 25                    MR. BRANCHEAU: I don't know that there

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01:30 1 Hospital during that timeframe?  
 01:30 2                    MR. BRANCHEAU: To be honest, I don't  
 01:30 3 remember at this point in time.  
 01:30 4                    I know I cited in my history of all the  
 01:30 5 various approvals the number of beds at -- I think  
 01:30 6 the '90 -- the approval in the mid '90s what the beds  
 01:31 7 were and the projection for ultimately there to be  
 01:31 8 more than 500 beds, which has obviously since been  
 01:31 9 revised downwards.  
 01:31 10                    But as to the actual number of beds  
 01:31 11 that it was approved for versus what there is now,  
 01:31 12 I'd have to check the records on that.  
 01:31 13                    MR. McKENNA: And also as it related --  
 01:31 14 again, I think, once you have the data you can answer  
 01:31 15 this question which is, when we look at that  
 01:31 16 relationship of what I consider to be no bed growth  
 01:31 17 versus a 24 percent growth in traffic, does -- if  
 01:31 18 that fact pattern holds, does it call into question  
 01:31 19 the assertion the Hospital's making that no -- that  
 01:31 20 the increase of three beds will mean no increase in  
 01:31 21 traffic.  
 01:31 22                    So I think it's a fundamental flaw in  
 01:31 23 the Hospital's logic, if that -- if we can show that  
 01:31 24 the growth in traffic is significant despite no  
 01:31 25 increase in beds.

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01:29 1 is necessarily a direct correlation. It depends on  
 01:29 2 how long people are staying at the hospital site and  
 01:29 3 what times they're coming. If -- if it's all peak  
 01:29 4 hour increase in traffic, and if there's any length  
 01:29 5 of stay, then you might think that there is some  
 01:29 6 correlation, there should -- there was more parking.  
 01:29 7                    But that can be more easily answered, I  
 01:29 8 think, in looking at the various parking testimony  
 01:29 9 and studies that were done as part of the prior  
 01:29 10 approvals, in comparing them with the parking  
 01:30 11 analysis that has -- was done as part of this  
 01:30 12 proposal, I don't have answers on that.  
 01:30 13                    But I don't know that you can  
 01:30 14 necessarily have a direct correlation between  
 01:30 15 increased traffic and increased parking.  
 01:30 16                    MR. McKENNA: Okay.  
 01:30 17                    I do think we need to address that  
 01:30 18 because I -- it's an important point because I think  
 01:30 19 the spill-over effect into the neighbor of parking  
 01:30 20 and the fact that the Hospital has its employees  
 01:30 21 being parked off-site already is partially a function  
 01:30 22 of this traffic increase, is my laymen's  
 01:30 23 understanding of this.  
 01:30 24                    With this 24 percent increase in  
 01:30 25 traffic, has the number of beds increased at the

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01:31 1                    MR. BRANCHEAU: I have to defer to the  
 01:31 2 traffic consultant on that one.  
 01:31 3                    MR. McKENNA: Okay.  
 01:31 4                    MR. BRANCHEAU: I just ask that that  
 01:32 5 question be posed to him when he's here.  
 01:32 6                    MR. McKENNA: Okay.  
 01:32 7                    CHAIRMAN NICHOLSON: Well, have  
 01:32 8 Mr. Staigar back in September, Mr. McKenna, to  
 01:32 9 address your questions.  
 01:32 10                    MR. McKENNA: Okay. Well, I have a few  
 01:32 11 more for him.  
 01:32 12                    The -- how do Valley's parking and trip  
 01:32 13 generation needs -- I have a printed out version of  
 01:32 14 this, I can leave with you as well.  
 01:32 15                    MS. PRICE: Okay.  
 01:32 16                    MR. McKENNA: How do Valley's parking  
 01:32 17 an trip generation needs compare to the average  
 01:32 18 hospital as measured by the standard ITE? And,  
 01:32 19 again, I looked at it that -- so that's one question.  
 01:32 20                    A follow up question then is, relative  
 01:32 21 to that, the Hospital does generate more trips per  
 01:32 22 square foot of hospital space than the average  
 01:32 23 hospital. It's about 1.09 times an average hospital.  
 01:32 24 That is logical -- that is a logical number relative  
 01:32 25 to the Hospital asserting that it is not right sized

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01:32 1 and by getting bigger it will make -- it will  
 01:33 2 generate a lower, compared to the averages.  
 01:33 3 But what doesn't quite jive with me is  
 01:33 4 that the Hospital also generates above average trips  
 01:33 5 per employee and trips per bed.  
 01:33 6 And Mr. Staigar's data will back that  
 01:33 7 up.  
 01:33 8 So I'd like to understand what is it  
 01:33 9 about this hospital that makes it so different from  
 01:33 10 an average hospital in the number of trips generated?  
 01:33 11 MS. PRICE: I know that Mr. Staigar  
 01:33 12 considered the ITE numbers in his report and analyzed  
 01:33 13 that. So we'll ask him to follow up on your  
 01:33 14 questions.  
 01:33 15 MR. McKENNA: Okay.  
 01:33 16 And then the last question on traffic  
 01:33 17 is at what traffic levels does a site bounded by two  
 01:33 18 lane roads become too big to function effectively?  
 01:33 19 Like is there -- is there a tipping  
 01:33 20 point?  
 01:33 21 MS. PRICE: On the level of service  
 01:33 22 that was testified to? In terms of the existing  
 01:33 23 levels of service or projected levels of service?  
 01:33 24 MR. McKENNA: Well, it's the -- it's  
 01:33 25 relative -- those levels to service were relative to

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01:35 1 nature of those conditions. We can find out.  
 01:35 2 MR. McKENNA: Okay. Because from the  
 01:35 3 Ridgewood News article that I had submitted to this  
 01:35 4 Board back in a package at one of the hearings  
 01:35 5 earlier, they had stated that it was a condition of  
 01:35 6 that approval was that they remove the Kraft House on  
 01:35 7 the basis that the bulk at the site would just be too  
 01:35 8 great with this hospital building and that 21,000  
 01:35 9 square foot Kraft Building.  
 01:35 10 So I just want to understand if that  
 01:35 11 was a condition and that was the thinking, just to  
 01:35 12 clarify that.  
 01:35 13 This is -- well, this is a question  
 01:35 14 around land use law for Mr. -- or land use for Mr.  
 01:35 15 Brancheau.  
 01:35 16 Is it fair to say that hospitals  
 01:35 17 already enjoy extraordinary latitude in New Jersey  
 01:36 18 Land Use Law relative to other property owners  
 01:36 19 because they provide a public good?  
 01:36 20 Is that a fair summary of what you had  
 01:36 21 said before?  
 01:36 22 MR. BRANCHEAU: Yes.  
 01:36 23 MR. McKENNA: Thank you.  
 01:36 24 Given that the Hospital's already had  
 01:36 25 so much latitude in the law, are there many

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01:34 1 the intersection.  
 01:34 2 MS. PRICE: Right.  
 01:34 3 MR. McKENNA: I'm just asking whether a  
 01:34 4 site generating, like it's projected that the site  
 01:34 5 will -- today, generates 920-car trips at peak.  
 01:34 6 And the question is is there a limit to  
 01:34 7 how much a site bounded by two lane roads can handle?  
 01:34 8 Like is it a thousand trips? Is it 1500 trips? Is  
 01:34 9 it infinite as compared to a site bounded by four  
 01:34 10 lane roads, say -- or six lane roads out on the  
 01:34 11 highway.  
 01:34 12 MS. PRICE: Okay.  
 01:34 13 MR. McKENNA: So that's the nature of  
 01:34 14 that question.  
 01:34 15 And, again, apologies these questions  
 01:34 16 will be similar to some of the ones asked, but I have  
 01:34 17 -- they're being asked specifically for a reason.  
 01:34 18 Do we know -- this is for Mr.  
 01:34 19 Brancheau, were there any specific conditions placed  
 01:34 20 on the Hospital by the Board of Adjustment to gain  
 01:34 21 approval of the 1996 expansion?  
 01:34 22 I'm specifically concerned about the  
 01:34 23 Kraft House demolition.  
 01:35 24 MR. BRANCHEAU: I know there were  
 01:35 25 conditions. I don't recollect specifically the

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01:36 1 municipalities you're aware of in New Jersey that  
 01:36 2 have given specific consideration the hospitals in  
 01:36 3 their Master Plan?  
 01:36 4 MR. BRANCHEAU: I would say they have  
 01:36 5 given, yes.  
 01:36 6 MR. McKENNA: And are those Master Plan  
 01:36 7 Amendments in favor of giving the Hospital greater  
 01:36 8 authority or restricting the Hospital's authority  
 01:36 9 relative to the surrounding --  
 01:36 10 MR. BRANCHEAU: Giving them authority,  
 01:36 11 I don't think giving them the ability to expand or do  
 01:36 12 you mean giving them the rights to expand? I mean is  
 01:36 13 that what your question is?  
 01:36 14 MR. McKENNA: Yes.  
 01:37 15 MR. BRANCHEAU: I really can't answer  
 01:37 16 that. I don't know the answer.  
 01:37 17 MR. McKENNA: Okay.  
 01:37 18 MR. BRANCHEAU: Some cases I'm sure it  
 01:37 19 does do that.  
 01:37 20 MR. McKENNA: Okay. Because that would  
 01:37 21 be interesting for me to know because I -- my sense  
 01:37 22 is that it's an unfair playing field already and this  
 01:37 23 Master Plan Amendment has the potential to make it  
 01:37 24 even more unfair.  
 01:37 25 Another -- another question around the

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01:37 1 square footage, sorry for the -- another math  
 01:37 2 question, but the -- when you're doing your  
 01:37 3 comparison of the existing to the proposed and the  
 01:37 4 Master Plan proposed, if you could do a comparison of  
 01:37 5 the 378,000 square feet of inpatient and outpatient  
 01:37 6 diagnostic space relative to the amount of space  
 01:37 7 devoted to that in the current hospital.  
 01:37 8 MR. BRANCHEAU: I think I have that.  
 01:37 9 MR. McKENNA: Okay.  
 01:38 10 MR. BRANCHEAU: I have about 236,000 --  
 01:38 11 well, you're just talking inpatient/outpatient.  
 01:38 12 MR. McKENNA: Well, it -- whatever the  
 01:38 13 comparable figure is to the 378,000 square feet.  
 01:38 14 MR. BRANCHEAU: All right. Then --  
 01:38 15 yeah, then that's what I gave you. What it is today  
 01:38 16 was -- I forget the number already, but -- 236,000  
 01:38 17 compared to the 300 and --  
 01:38 18 MR. McKENNA: Seventy-eight.  
 01:38 19 MR. BRANCHEAU: -- and 78.  
 01:38 20 MR. McKENNA: And that 236 then doesn't  
 01:38 21 include the patient rooms? That's --  
 01:38 22 MR. BRANCHEAU: That's correct.  
 01:38 23 MR. McKENNA: Okay. Thank you.  
 01:38 24 Okay. So as we know the operating for  
 01:39 25 hospitals changes over time. What -- what safeguards

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01:39 1 are in place in this Master Plan Amendment to prevent  
 01:39 2 Valley from converting these larger single patient  
 01:39 3 rooms back into doubles at a future date, either by  
 01:39 4 choice or by government mandate?  
 01:39 5 MR. BRANCHEAU: Well, the Master Plan  
 01:39 6 calls for a limit on the number of beds.  
 01:39 7 It does allow for a higher number than  
 01:39 8 we've specified, but only if the Hospital can  
 01:39 9 demonstrate a corresponding reduction in intensity  
 01:39 10 through some other change.  
 01:39 11 And the specifics of how that would be  
 01:39 12 done would have to be worked in the ordinance, but  
 01:39 13 the general guiding rule is that no increase in  
 01:39 14 intensity above those levels.  
 01:39 15 So if you can increase beds and reduce,  
 01:39 16 for example, outpatient area, so that you have the  
 01:39 17 same parking needs, the same amount of trip  
 01:39 18 generation, and the same floor area than the Master  
 01:39 19 Plan envisions, yes, that's -- that's equivalent.  
 01:40 20 The details have to be worked out in an ordinance.  
 01:40 21 MR. McKENNA: Uhhmm, are -- do we need  
 01:40 22 to put safeguards in this Master Plan to prevent  
 01:40 23 Valley from establishing a Level One Trauma Center at  
 01:40 24 the site, i.e. putting in a helipad, a medical  
 01:40 25 helipad?

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01:40 1 MR. BRANCHEAU: I think that would be  
 01:40 2 appropriate.  
 01:40 3 Obviously, if -- you know, the Hospital  
 01:40 4 would always have the opportunity to either seek a  
 01:40 5 variance or to seek further amendments to either the  
 01:40 6 plan and/or the ordinance, if there were some  
 01:40 7 compelling need for that. That would have be dealt  
 01:40 8 with at the time. I -- I know that this plan does  
 01:40 9 not envision that. And -- and I think an ordinance  
 01:40 10 restriction on prohibiting helistops would be  
 01:40 11 appropriate.  
 01:40 12 MR. McKENNA: Now, will that -- will  
 01:40 13 this information be fed to the Village Council for  
 01:40 14 them to consider in their ordinances or we have to  
 01:41 15 reintroduce it then?  
 01:41 16 MR. BRANCHEAU: This -- well, this  
 01:41 17 Board would either draft that ordinance if we got to  
 01:41 18 that point or it would respond to the Council's  
 01:41 19 referral of that ordinance if the Council prepares  
 01:41 20 the ordinance.  
 01:41 21 Either way, this Board's involved in  
 01:41 22 that. And it would be up to this Board to either  
 01:41 23 incorporate it in an original draft or to make a  
 01:41 24 comment to the Council in the referral of a draft.  
 01:41 25 CHAIRMAN NICHOLSON: Mr. McKenna, can I

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01:41 1 just interrupt for a follow up question to Blais?  
 01:41 2 MR. BRANCHEAU: Yes.  
 01:41 3 CHAIRMAN NICHOLSON: Blais, is a  
 01:41 4 helicopter a landing facility a permitted use in the  
 01:41 5 Village now under any of our regulations or is it  
 01:41 6 specifically prohibited?  
 01:41 7 MR. BRANCHEAU: It's not specifically  
 01:41 8 prohibited to my knowledge. It's certainly not  
 01:41 9 specifically prohibited in the Hospital Zone at this  
 01:41 10 time. I checked that. And that -- and it's not to  
 01:41 11 Case.  
 01:41 12 Whether there's something somewhere  
 01:41 13 else in the general section of the code, I do know  
 01:41 14 that in the Land Use Ordinance I'm not aware of any  
 01:42 15 prohibition of the helicopter landing site.  
 01:42 16 CHAIRMAN NICHOLSON: Thank you, Blais.  
 01:42 17 Sorry for the interruption.  
 01:42 18 MR. McKENNA: It's quite all right. No  
 01:42 19 harm.  
 01:42 20 This wasn't on my original questions,  
 01:42 21 but a lot of people seem to be asking questions  
 01:42 22 around COAH and I -- for the benefit of some who  
 01:42 23 might not have been here when you discussed it  
 01:42 24 previously, an you talk a little bit -- can you  
 01:42 25 repeat the gist of what you said around the risk that

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01:42 1 we currently run because Ridgewood has a current COAH  
01:42 2 deficit that is unmet. And the risk of -- what risk  
01:42 3 we run by allowing increased development within the  
01:42 4 Village, and what the risks to the Village are if  
01:42 5 that current deficit -- if that existing deficit sort  
01:42 6 of becomes current and due.

01:42 7 MR. BRANCHEAU: All right.

01:42 8 Briefly, the way the current rules or  
01:42 9 at the state that apply to all municipalities are  
01:42 10 that as communities grow the need for affordable  
01:42 11 housing grows as well because people working jobs  
01:42 12 that go along with growth or people living in homes  
01:43 13 that go along with growth, a certain percentage of  
01:43 14 them or of low or moderate income and thy need  
01:43 15 housing that thy can afford.

01:43 16 The state has said then that as  
01:43 17 municipalities grow they need to have a plan to  
01:43 18 provide a reasonable opportunity for affordable  
01:43 19 housing. Towns don't have to built the houses  
01:43 20 themselves, but they have to have a plan that  
01:43 21 provides a reasonable opportunity for someone to  
01:43 22 build that housing.

01:43 23 The way they've done it, they've  
01:43 24 basically said that for every 16 jobs that a town  
01:43 25 grows by it must provide one affordable housing unit

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01:45 1 Hospital.

01:45 2 If the state approves that there'll be  
01:45 3 no deficit other than we received five, six years  
01:45 4 ago, an approval of our last housing plan which the  
01:45 5 Village received what's called a vacant land  
01:45 6 adjustment, which recognized that the Village does  
01:45 7 not have sufficient land to address the full  
01:45 8 obligation from going back. And that number was  
01:45 9 adjusted downwards. So when you talk about a  
01:45 10 deficit, that deficit is out there, but the Village  
01:45 11 has already received a plan that -- approval for a  
01:45 12 plan that will address that deficit.

01:45 13 The new plan that we adopted last  
01:46 14 December and sent to the state is addressing future  
01:46 15 growth in the Village. Again, exclusive of Valley  
01:46 16 Hospital.

01:46 17 So assuming the growth does not exceed  
01:46 18 what our plan calls for, then there should be no  
01:46 19 issue of a deficit.

01:46 20 If our growth does exceed what the plan  
01:46 21 recognizes as likely to occur in the Village then the  
01:46 22 Village would have to amend its plan to address that  
01:46 23 additional growth that we didn't anticipate, which  
01:46 24 would include Valley Hospital.

01:46 25 MR. McKENNA: Okay. The -- is there  
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01:43 1 in its planning documents. For every four market  
01:43 2 rate homes that are built, there must similarly be a  
01:43 3 plan for one affordable housing unit.

01:43 4 Preliminary calculations that we did,  
01:43 5 based upon the expanded floor area and using the  
01:43 6 institutional use group and COAH's regulations,  
01:44 7 projected a certain number of jobs.

01:44 8 Based upon that we estimated roughly,  
01:44 9 very roughly 60 affordable housing units that the  
01:44 10 Village would have to provide in its planning  
01:44 11 documents and in its ordinances a reasonable  
01:44 12 opportunity for those to be built by somebody.  
01:44 13 Whether it's a developer? Whether it's a nonprofit?  
01:44 14 Whether it's a governmental agency? That would --  
01:44 15 the -- our zoning regulations and other regulations  
01:44 16 could not have the effect of preventing or  
01:44 17 frustrating that from happening.

01:44 18 MR. McKENNA: But my question was more  
01:44 19 around the fact that we currently, regardless of that  
01:44 20 Hospital's site for a moment -- to start with. The  
01:44 21 Village currently has a deficit, if I recall,  
01:44 22 somewhere in the hundred to 180 unit range?

01:45 23 MR. BRANCHEAU: Well, briefly, we have  
01:45 24 a plan currently before COAH for approval that would  
01:45 25 address the Village's growth, excluding Valley

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01:46 1 any risk to the Village that our -- our assertion  
01:46 2 that there's too little vacant land to actually  
01:46 3 develop affordable housing, is there any risk that  
01:46 4 that would be rescinded, if we start I -- I  
01:46 5 interrupted your statement's previously that if we  
01:46 6 allowed the parking garage to develop; if we allowed  
01:46 7 Valley Hospital to expand and we allowed the storage  
01:47 8 facility down on Chestnut I believe it was. If we  
01:47 9 allowed all of those developments to go at one time  
01:47 10 it sort of undermines our assertion that we were  
01:47 11 fully developed and could not, because we had no  
01:47 12 vacant land, we could not build the affordable  
01:47 13 housing that our -- that we were mandated to build.

01:47 14 MR. BRANCHEAU: No, that's -- that --  
01:47 15 not -- none of those -- none of these situations ar3e  
01:47 16 dealing with vacant land. They're redevelopment of  
01:47 17 already developed parcels, and so I don't think it  
01:47 18 undermines our assertion that we don't have  
01:47 19 sufficient vacant land.

01:47 20 What it would undermine is our  
01:47 21 projection of growth that we said we're going to grow  
01:47 22 so much by the end of 2018. And that includes --  
01:47 23 that factors in redevelopment of existing parcels.

01:47 24 Just so you know the -- the mechanism  
01:47 25 that we used to calculate growth is fixed by state

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01:48 1 rule. And we followed that mechanism in calculating  
 01:48 2 and projecting future growth.  
 01:48 3 Our projected growth was significantly  
 01:48 4 less than the State's projected growth and that is  
 01:48 5 one component of our request to the State to approve  
 01:48 6 our housing plan to accept that lower obligation.  
 01:48 7 MR. McKENNA: Thank you.  
 01:48 8 A couple of questions for the Village  
 01:48 9 engineer.  
 01:48 10 You talked about the -- that the water  
 01:48 11 treatment plant has sufficient capacity to handle  
 01:48 12 what the Hospital is likely to generate with this 80  
 01:48 13 percent, 70 percent increase in square footage. Is  
 01:48 14 that accurate?  
 01:48 15 MR. RUTISHAUSER: Yes, that's correct.  
 01:48 16 With the upgrade that was completed, I think, three  
 01:48 17 to four years ago.  
 01:48 18 MR. McKENNA: Now, as I recall when the  
 01:48 19 Village did that we got kudos from the rating  
 01:48 20 agencies and everybody else for being so forward  
 01:48 21 thinking and building it and financing it in advance  
 01:49 22 and all that. When that was done how much of that  
 01:49 23 capital expenditure, how much of the capital expense  
 01:49 24 was paid for by the taxpayers and how much of that  
 01:49 25 was paid for by Valley Hospital?

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01:49 1 MR. RUTISHAUSER: That is supported  
 01:49 2 entirely by the taxpayers. We have a loan of the New  
 01:49 3 Jersey Environmental Infrastructure Trust Fund. It's  
 01:49 4 at a rate, I think, around one or two percent. We  
 01:49 5 are paying that back now over time.  
 01:49 6 MR. McKENNA: Okay. And the -- in  
 01:49 7 terms of -- that seems to be a lot of -- a lot of  
 01:49 8 excess capacity to have built, to be able to take  
 01:49 9 this much capacity in without it affecting service  
 01:49 10 levels.  
 01:49 11 Why -- is there a reason why so much  
 01:49 12 excess capacity was built in? Was there other  
 01:49 13 contingencies you were planning for when it was  
 01:49 14 built?  
 01:49 15 MR. RUTISHAUSER: I was not involved in  
 01:49 16 the planning or of the design of the upgrade.  
 01:49 17 I do know that the plan was sized for  
 01:49 18 anticipated growth -- excuse me -- we do have parcels  
 01:49 19 from outside the Village that discharge into our  
 01:50 20 plant.  
 01:50 21 There are areas of vacant land in  
 01:50 22 Washington Township, for example, that have  
 01:50 23 approached the Village, that if they were developed  
 01:50 24 they could direct their flow to the plant.  
 01:50 25 MR. McKENNA: And that was --

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01:50 1 MR. RUTISHAUSER: That was taken into  
 01:50 2 account.  
 01:50 3 Was the Valley project that's before  
 01:50 4 the Board right now taken into account? I do not  
 01:50 5 believe so.  
 01:50 6 MR. McKENNA: When -- if Washington  
 01:50 7 Township were to use that capacity, would they have  
 01:50 8 to pay Ridgewood something for that capacity?  
 01:50 9 MR. RUTISHAUSER: Yes they have to pay  
 01:50 10 a connection fee per dwelling unit and then they  
 01:50 11 would also get billed from annual use per year.  
 01:50 12 MR. McKENNA: Okay. So that would be  
 01:50 13 revenue generator for the Village should we use  
 01:50 14 capacity for them rather than for the Hospital.  
 01:50 15 MR. RUTISHAUSER: Can be for either  
 01:50 16 one.  
 01:50 17 MR. McKENNA: Okay.  
 01:50 18 You answered the questions on water  
 01:50 19 already.  
 01:50 20 I think -- well, one thing on the water  
 01:50 21 front the -- I know we don't have a site plan, so you  
 01:50 22 can't specifically estimate how much the water demand  
 01:50 23 will be from the -- from the expanded hospital, but  
 01:51 24 would it be -- could it -- are there any rules of  
 01:51 25 thumb if its -- if they're converting say, 175,

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01:51 1 double bedrooms to 350 single bedrooms, and that's  
 01:51 2 adding 175 commodes, 175 sinks, would that be a way  
 01:51 3 to estimate that -- in a ball park fashion, how much  
 01:51 4 water they're going to use? Would it be if they're  
 01:51 5 increasing the square -- the square footage by 80  
 01:51 6 percent, there would be an 80 percent increase?  
 01:51 7 Are there any ways we can estimate what  
 01:51 8 the water demand of this big a hospital would be?  
 01:51 9 MR. RUTISHAUSER: I think there are  
 01:51 10 tools that you can create an estimate. I don't think  
 01:51 11 the rationale you presented would be valid. In a  
 01:51 12 current double room occupancy, if you had two  
 01:51 13 patients and they had to use one bathroom they just  
 01:51 14 flush twice.  
 01:51 15 MR. McKENNA: Yes.  
 01:51 16 MR. BRANCHEAU: Compared to a single  
 01:51 17 room where there just might be one flush. It's still  
 01:51 18 a flush.  
 01:51 19 We'd have to see if the uses they  
 01:51 20 propose for the additional space would be significant  
 01:51 21 water consumers or not.  
 01:52 22 MR. McKENNA: Okay. So there's no  
 01:52 23 quick and easy way to do it?  
 01:52 24 MR. BRANCHEAU: No. There's not a  
 01:52 25 quick and easy way. I mean we have the historical

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01:52 1 records for the water company that shows how much  
 01:52 2 water they use and as one of the other questioners  
 01:52 3 tonight asked and which I will provide an answer for,  
 01:52 4 is if we have the capacity in the system for the  
 01:52 5 proposed or anticipated growth of Valley.  
 01:52 6 MR. McKENNA: Then on -- one other  
 01:52 7 additional question on the water if you could add it  
 01:52 8 to your stack is, how does the -- the volume of water  
 01:52 9 that Valley uses compare to the amount of water we  
 01:52 10 purchase from United Water on an annual basis?  
 01:52 11 MR. RUTISHAUSER: That I'd also have to  
 01:52 12 ask the water company.  
 01:52 13 MR. McKENNA: Okay.  
 01:52 14 MR. RUTISHAUSER: You want a percentage  
 01:52 15 of --  
 01:52 16 MR. McKENNA: Well, the -- how does the  
 01:52 17 amount of water that Valley uses compare to the  
 01:52 18 amount of water we have to bring in to the system  
 01:52 19 from United Water?  
 01:52 20 MR. RUTISHAUSER: Okay.  
 01:52 21 MR. McKENNA: The next question I think  
 01:52 22 might be best answered by Ms. Price or if you guys  
 01:52 23 feel differently, I'm happy for anybody to answer.  
 01:53 24 Do you see passage of this Master Plan  
 01:53 25 Amendment having any negative impacts on the Village

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01:54 1 MS. PRICE: Under the Municipal Land  
 01:54 2 Use Law the Planning Board is vested with the  
 01:54 3 authority to adopt and amend the Master Plan.  
 01:54 4 MR. McKENNA: So if this Master Plan  
 01:54 5 Amendment were passed and five years from now it's in  
 01:54 6 place and we're all going about our regular business,  
 01:54 7 if the Village Council were to determine at that --  
 01:54 8 that they feel the site is over built or that the  
 01:54 9 site is at saturation point, would they have a higher  
 01:54 10 burden to -- would the burden be higher on them from  
 01:54 11 a legal perspective to say no to the Valley Hospital  
 01:54 12 with this Master Plan Amendment in place, than it  
 01:54 13 would be if this Master Plan Amendment were not in  
 01:54 14 place.  
 01:54 15 MS. PRICE: They would need to make a  
 01:54 16 determination as to the appropriateness for adopting  
 01:55 17 or denying the ordinance amendment and the  
 01:55 18 consistency or lack thereof with the Master Plan  
 01:55 19 would be a consideration for sure.  
 01:55 20 MR. McKENNA: But if they were to write  
 01:55 21 ordinances that were inconsistent --  
 01:55 22 MS. PRICE: Inconsistent.  
 01:55 23 MR. McKENNA: -- with the Master Plan?  
 01:55 24 MS. PRICE: Right.  
 01:55 25 MR. McKENNA: They would likely to be

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01:53 1 Council's Authority and legal standing relative to  
 01:53 2 the Valley Hospital Corporation?  
 01:53 3 MS. PRICE: I'm not in a position to  
 01:53 4 answer that question.  
 01:53 5 First of all, I can't opine in terms of  
 01:53 6 what impacts that the Council might have. We have to  
 01:53 7 operate as the Planning Board. And it's two separate  
 01:53 8 and distinct actions. The Master Plan Amendment is a  
 01:53 9 policy statement. And then the ordinances, if acted  
 01:53 10 upon by the Council would be the amendment to the  
 01:53 11 Zoning Ordinance. So it's really two separate --  
 01:53 12 MR. McKENNA: Okay. The maybe --  
 01:53 13 MS. PRICE: -- actions.  
 01:53 14 MR. McKENNA: - maybe if I ask it in a  
 01:53 15 hypothetical.  
 01:53 16 I understand what you're saying, but  
 01:53 17 what I'm wondering about is, if -- if this amendment  
 01:53 18 -- proposed amendment goes through as written, let's  
 01:54 19 say it goes through and it becomes part of the Master  
 01:54 20 Plan, my understanding is that the Village Council  
 01:54 21 does -- this Board can unilaterally change the Master  
 01:54 22 Plan it does not have to be ratified by the Village  
 01:54 23 Council?  
 01:54 24 MS. PRICE: That's correct.  
 01:54 25 MR. McKENNA: Okay.

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01:55 1 overturned on appeal.  
 01:55 2 MS. PRICE: I can't, you know -- I  
 01:55 3 can't opine on that sitting here because there could  
 01:55 4 be a lot of different factors that would go into  
 01:55 5 that.  
 01:55 6 But consistency with the Master Plan is  
 01:55 7 certainly something that is always strived for and  
 01:55 8 has certainly been discussed by our judicial system  
 01:55 9 this is something that is sought under the Land Use  
 01:55 10 Law.  
 01:55 11 But there are certainly a lot of  
 01:55 12 different cases in the State where there are  
 01:55 13 inconsistencies present.  
 01:55 14 But there has to be a formal  
 01:55 15 recognition by the governing body as to why that  
 01:55 16 inconsistency exists.  
 01:56 17 MR. McKENNA: So is it fair to say like  
 01:56 18 a -- I'm not an attorney so I'm trying to sort this  
 01:56 19 out.  
 01:56 20 MS. PRICE: That's okay. That's okay.  
 01:56 21 MR. McKENNA: Is it fair to say that it  
 01:56 22 does limit their flexibility if this is passed?  
 01:56 23 MS. PRICE: No, I don't think so.  
 01:56 24 MR. McKENNA: You don't believe so?  
 01:56 25 Okay.

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01:56 1 MS. PRICE: I mean the Master Plan is a  
 01:56 2 policy statement. It doesn't do anything other than  
 01:56 3 recognize determination on planning. It does not  
 01:56 4 implement any rules or regulations relative to that  
 01:56 5 planning determination.  
 01:56 6 So it's only policy based and that's  
 01:56 7 recognized in the Municipal Land Use Law that this  
 01:56 8 Board only has that authority. And then it's the  
 01:56 9 governing body in any municipality that has the  
 01:56 10 actual power to act upon any changes by way of the  
 01:56 11 Zoning Ordinance.  
 01:56 12 So you know our authority here is to  
 01:56 13 just limited to that planning direction.  
 01:57 14 MR. McKENNA: On a -- the question --  
 01:57 15 this is a question, again, around the amendment.  
 01:57 16 Corporations can and do change their management and  
 01:57 17 ownership structure regularly. That's part of what  
 01:57 18 corporations are set up to do.  
 01:57 19 Should there be safeguards in this  
 01:57 20 Master Plan to guard against any changes in hospital  
 01:57 21 management or, more importantly, hospital ownership?  
 01:57 22 Can we put anything in the Master Plan  
 01:57 23 change -- Master Plan Amendment to guard against  
 01:57 24 that? Because I think although we may trust this  
 01:57 25 management team and we may trust what they're saying

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01:58 1 Village if a business changes ownership we don't  
 01:58 2 regulate their use. We don't regulate the change in  
 01:58 3 homeownership.  
 01:58 4 MS. PRICE: Right.  
 01:58 5 MR. BRANCHEAU: And, you know, what we  
 01:58 6 do regulate is what occurs on the site.  
 01:58 7 So I don't really see the need to  
 01:58 8 regulate who owns what. It's generally not done  
 01:59 9 anywhere.  
 01:59 10 MR. McKENNA: Okay.  
 01:59 11 One question, a follow up question on  
 01:59 12 the expert that is being hired, is the hospital  
 01:59 13 expert you're hiring, is their expertise in Master  
 01:59 14 Plans and hospitals or land use or specifically  
 01:59 15 around hospital operations?  
 01:59 16 CHAIRMAN NICHOLSON: I would  
 01:59 17 characterize his expertise in the knowledge of modern  
 01:59 18 hospital criteria and planning.  
 01:59 19 And our goal in bringing him on is to  
 01:59 20 answer questions like what, in fact, is the  
 01:59 21 appropriate size for a hospital with 432 beds? And  
 01:59 22 is it, in fact, advisable, necessary, required, any  
 01:59 23 one of those three words for floor to floor heights  
 01:59 24 to be 15 feet and is a hundred-thousand square feet a  
 01:59 25 reasonable allocation for an imagining department

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01:57 1 is accurate, I fear that a big conglomerate would  
 01:57 2 potentially at some point in the future buy Valley  
 01:57 3 Hospital Corporation and the latitude that we're  
 01:57 4 giving them in this Master Plan Amendment would then  
 01:57 5 cede to some giant healthcare conglomerate rather  
 01:58 6 than the local entity we know now.  
 01:58 7 MR. BRANCHEAU: I don't think generally  
 01:58 8 we --  
 01:58 9 MS. PRICE: I don't -- yes.  
 01:58 10 MR. BRANCHEAU: -- we deal with  
 01:58 11 ownership --  
 01:58 12 MS. PRICE: Right.  
 01:58 13 MR. BRANCHEAU: -- of property.  
 01:58 14 MS. PRICE: Right.  
 01:58 15 MR. BRANCHEAU: You know, I'll leave  
 01:58 16 the attorney to speak as to the legality of that.  
 01:58 17 But I would say the only basis for  
 01:58 18 doing that would be if they -- if that would  
 01:58 19 translate into some tangible result that we're  
 01:58 20 already not regulating. And I think the simple  
 01:58 21 answer to that is if you're concerned that a change  
 01:58 22 in ownership would result in a different building or  
 01:58 23 a different use, the simple solution is to regulate  
 01:58 24 the building and the use. And whoever owns it would  
 01:58 25 have to deal with it, just like anywhere else in the

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02:00 1 with X number of machines. That's his expertise.  
 02:00 2 MR. McKENNA: Okay.  
 02:00 3 Well, then I would pose the question to  
 02:00 4 the Board that you consider -- and I brought it up  
 02:00 5 before -- potentially getting expert witnesses or  
 02:00 6 testimony relative to the land use in the New Jersey  
 02:00 7 Municipal Land Use Law and around -- because we're  
 02:00 8 taking, as you've said yourself, Mr. Chairman, this  
 02:00 9 is the biggest decision this Board will face.  
 02:00 10 I am concerned with the permanent  
 02:00 11 nature of this amendment. I'm concerned with the --  
 02:00 12 the unprecedented latitude you're giving the Hospital  
 02:00 13 in this proposed amendment. I think I -- I would I  
 02:00 14 feel more comfortable if the Board was getting -- no  
 02:00 15 offense to Mr. Brancheau, if we were getting other  
 02:00 16 expert witnesses telling us what the potential  
 02:00 17 implications of changing the Master Plan, this  
 02:00 18 specifically, might be.  
 02:00 19 Because I don't -- I don't get the  
 02:00 20 sense that we fully explored what this could do to  
 02:00 21 us. It's my sense.  
 02:00 22 I'm -- similar to the Environmental  
 02:01 23 Impact Statement it's what could this do to this  
 02:01 24 Village if we allow a hospital this much latitude to  
 02:01 25 grow at this location.

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02:01 1 CHAIRMAN NICHOLSON: How are you doing  
 02:01 2 with your list of questions, Mr. McKenna?  
 02:01 3 MR. McKENNA: I am done for now.  
 02:01 4 (Applause). So...  
 02:01 5 CHAIRMAN NICHOLSON: We have other  
 02:01 6 people anxious to speak.  
 02:01 7 MR. McKENNA: I appreciate that. I  
 02:01 8 apologize for -- if it --  
 02:01 9 CHAIRMAN NICHOLSON: No, they were all  
 02:01 10 very good questions.  
 02:01 11 MR. McKENNA: Okay. And --  
 02:01 12 CHAIRMAN NICHOLSON: Are you ready to  
 02:01 13 move to your statement?  
 02:01 14 MR. McKENNA: Yes.  
 02:01 15 CHAIRMAN NICHOLSON: As we have before  
 02:01 16 with husband and wife teams we have allowed them to  
 02:01 17 gang their time.  
 02:01 18 But, please, Mr. McKenna, only six  
 02:01 19 minutes.  
 02:01 20 MR. McKENNA: I didn't bring the three  
 02:01 21 kids so ...  
 02:01 22 MS. PRICE: Do you swear the testimony  
 02:01 23 you're about to give in connection with this matter  
 02:01 24 is the truth, the whole truth and nothing but the  
 00:12 25 truth?

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-10:-46 1 a 15 acre site.  
 -10:-46 2 Despite abandoning -- demanding --  
 -10:-46 3 demanding, I'm sorry, an abandonment of the Master  
 -10:-46 4 Plan's stated focus on single family residences, the  
 -10:-46 5 Valley Corporate representatives have not disclosed  
 -10:-46 6 many relevant key business and land use points to  
 -10:-45 7 this Board. Corporate financial projections are not  
 -10:-45 8 land use items. But in exchange for this much  
 -10:-45 9 latitude, Valley needs to tell you what will go on at  
 -10:-45 10 the site to pay for all of this.  
 -10:-45 11 They have personnel projections that  
 -10:-45 12 say they'll need 34 new custodians for the space, but  
 -10:-45 13 won't tell you how they're going to use the same  
 -10:-45 14 space those custodian will be cleaning.  
 -10:-45 15 To those to whom much is given, much is  
 -10:-45 16 expected.  
 -10:-45 17 They've known the site was built to its  
 -10:-45 18 maximum since the mid '90s, yet cramming this down  
 -10:-45 19 our throats is their most creative solution to solve  
 -10:-45 20 this situation.  
 -10:-45 21 Chairman Nicholson has said that this  
 -10:-44 22 is the most important decision this Board will have  
 -10:-44 23 to make. I completely agree and think the actions of  
 -10:-44 24 the Zoning Board of Adjustment, assuming that the  
 -10:-44 25 Kraft House had to be removed as a condition of the

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00:12 1 MR. McKENNA: I do.  
 00:12 2 P E T E R M c K E N N A,  
 00:12 3 Residing at 420 Meadowbrook Avenue, Ridgewood,  
 00:12 4 New Jersey, having been duly sworn, testifies as  
 00:12 5 follows:  
 02:01 6 MR. McKENNA: This is my wife Terri,  
 02:01 7 T-e-r-r-i.  
 02:01 8 MS. PRICE: Okay.  
 02:01 9 MR. McKENNA: Okay. Here's my  
 02:01 10 statement.  
 02:01 11 So since the initial presentations by  
 02:01 12 Valley I have been under-whelmed by the land use  
 -10:-47 13 arguments they've provided you to support a change to  
 -10:-47 14 the Master Plan of this significance.  
 -10:-47 15 They stated that they are not A.I.A.  
 -10:-47 16 compliant, but most of Ridgewood is not A.I.A.  
 -10:-47 17 compliant at any point in time.  
 -10:-46 18 They stated Ridgewood was more  
 -10:-46 19 restrictive than 20 similar towns, but we've seen  
 -10:-46 20 evidence that those sites were not in fact similar.  
 -10:-46 21 They stated that a "Greenfield" site or  
 -10:-46 22 a split campus was not a viable option, but provided  
 -10:-46 23 no support.  
 -10:-46 24 They need 30 acres to operate  
 -10:-46 25 effectively and they're trying to cram much of it on

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-10:-44 1 last expansion, indicate that the proverbial "tipping  
 -10:-44 2 point" that Blais referenced was reached when Valley  
 -10:-44 3 was told to remove the Kraft House.  
 -10:-44 4 When each of you votes on this, you  
 -10:-44 5 need to ask yourself if you've been convinced by the  
 -10:-44 6 testimony we've all heard, that this Master Plan  
 -10:-44 7 change is in the best interest of Ridgewood, and that  
 -10:-44 8 you have heard enough evidence that you feel  
 -10:-44 9 comfortable overturning the decision of your  
 -10:-44 10 colleagues on the Zoning Board from the mid '90s.  
 -10:-44 11 I urge you to reject this amendment for  
 -10:-43 12 the following reasons: Valley's reluctance to share  
 -10:-43 13 with you its full plans, the Hospital already has  
 -10:-43 14 preferential status in New Jersey Municipal Land Use  
 -10:-43 15 Laws and this amendment strips rights and authority  
 -10:-43 16 from residents and their elected representatives; no  
 -10:-43 17 outside experts on land use and Master Plan have been  
 -10:-43 18 consulted; no specific testimony on the long term  
 -10:-43 19 impacts a hospital of this size will have on the  
 -10:-43 20 community have been heard; the weak arguments Valley  
 -10:-43 21 has put forth to support this change.  
 -10:-43 22 This Master Plan Amendment is in  
 -10:-43 23 direction contradiction to everything else in the  
 -10:-43 24 Master Plan as I read it. It will legally "tie the  
 -10:-43 25 hands" of the Village Council, is my assertion, to

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-10:-43 **1** control development at this site. The acreage of the  
-10:-42 **2** site remains the same. So the "bulk" is already at  
-10:-42 **3** capacity. And this perpetuates an unworkable  
-10:-42 **4** situation rather than fixing it.  
-10:-42 **5** I urge you to reject this proposal as  
-10:-42 **6** too large, too many bulk for this site and simply  
-10:-42 **7** put, not right for Ridgewood.  
-10:-42 **8** The stated reason for amending the  
-10:-42 **9** Master Plan was to provide the Hospital and the  
-10:-42 **10** community with a degree of certainty that the current  
-10:-42 **11** situation doesn't provide.  
-10:-42 **12** Since the Hospital already has such  
-10:-42 **13** preferred status, it is already significantly  
-10:-41 **14** encroaching on the rights of property owners in the  
-10:-41 **15** area. And so, obviously, needs significantly more  
-10:-41 **16** room to grow than this site could ever provide, I  
-10:-41 **17** urge you to reject this proposed amendment to the  
-10:-41 **18** Master Plan.  
-10:-41 **19** I suggest the Master Plan be amended to  
-10:-41 **20** state that the current conditions are marginally  
-10:-41 **21** acceptable, but that any incremental development on  
-10:-41 **22** this site will have an unacceptable, negative impact  
-10:-41 **23** on the neighborhood. This will provide both sides  
-10:-41 **24** with the certainty they desire, but won't give the  
-10:-41 **25** Hospital the opportunity to expand the Hospital by 80

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02:06 **1** MS. PRICE: -- because your statement  
02:06 **2** will go into the official exhibit book --  
02:06 **3** MR. McKENNA: Okay.  
02:06 **4** MS. PRICE: -- so if you could separate  
02:06 **5** out the questions that would be great.  
02:06 **6** MR. McKENNA: I will.  
02:06 **7** MS. PRICE: So your statement is O-12  
02:06 **8** for the record.  
02:06 **9** (Whereupon, Mr. McKenna's Written  
02:06 **10** Comments were received and marked as Exhibit  
02:06 **11** O-12 for Identification.)  
02:06 **12** CHAIRMAN NICHOLSON: Thank you, Mr.  
02:06 **13** McKenna.  
02:06 **14** MR. McKENNA: Thank you.  
02:06 **15** CHAIRMAN NICHOLSON: Tom, do you need a  
02:06 **16** break?  
02:06 **17** MR. RICHE: No.  
02:06 **18** CHAIRMAN NICHOLSON: Ms. Wolfson, do  
02:06 **19** you have any questions?  
02:06 **20** MS. WOLFSON: Yes, I do.  
02:07 **21** Maureen Wolfson, W-o-l-f-s-o-n, 212  
02:07 **22** Stielen Avenue.  
02:07 **23** First a follow up question, the new  
02:07 **24** consultant that you are engaging who's expert in  
02:07 **25** hospital criteria and so forth, will that expert be

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-10:-41 **1** percent.  
02:05 **2** Thank you.  
02:05 **3** CHAIRMAN NICHOLSON: Thank you, Mr.  
02:05 **4** McKenna. (Applause).  
02:05 **5** MR. McKENNA: I will -- I will submit  
02:05 **6** my -- I'll collate my stuff and hand it in at the  
02:05 **7** end.  
02:05 **8** MS. PRICE: Okay. So we're going  
02:05 **9** expect both the list of questions for Mr. Staigar  
02:06 **10** that will be one document --  
02:06 **11** MR. McKENNA: Yes.  
02:06 **12** MS. PRICE: -- that we'll get.  
02:06 **13** MR. McKENNA: Well, it's one -- on  
02:06 **14** document with all the questions and my statement.  
02:06 **15** MS. PRICE: Okay. That's all right.  
02:06 **16** Okay. Because I want to get your questions to Mr.  
02:06 **17** Staigar.  
02:06 **18** MR. McKENNA: Yes.  
02:06 **19** MS. PRICE: To make sure he understand  
02:06 **20** the extent of those.  
02:06 **21** MR. McKENNA: Okay. I'll give you  
02:06 **22** those -- I'll give you two things then.  
02:06 **23** MS. PRICE: That would be helpful  
02:06 **24** because then --  
02:06 **25** MR. McKENNA: Okay.

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02:07 **1** qualified to look at hospitals operating throughout  
02:07 **2** this country with split campuses and see how they do  
02:07 **3** it?  
02:07 **4** CHAIRMAN NICHOLSON: Yes.  
02:07 **5** MS. WOLFSON: Okay.  
02:07 **6** CHAIRMAN NICHOLSON: He has -- he has  
02:07 **7** the background of knowledge in hospitals all across  
02:07 **8** the country of all kinds and sorts.  
02:07 **9** MS. WOLFSON: Thank you.  
02:07 **10** You have been -- these question are  
02:07 **11** directed just in general to the Board.  
02:07 **12** You have engaged a traffic consultant.  
02:07 **13** Have you asked that consultant to explore traffic  
02:07 **14** minimizing methodologies?  
02:07 **15** CHAIRMAN NICHOLSON: What --  
02:07 **16** MS. PRICE: Do you have a specific --  
02:07 **17** CHAIRMAN NICHOLSON: I'm not sure what  
02:07 **18** you mean by that.  
02:07 **19** MS. PRICE: Do you have a specific  
02:07 **20** question in that regard?  
02:07 **21** MS. WOLFSON: Well, in this day and age  
02:08 **22** many hospitals are requiring off-site parking on a  
02:08 **23** permanent basis for visitors and employees. They're  
02:08 **24** using buses. They're using four -- mandated car  
02:08 **25** pools. I haven't heard anything about that. They're

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02:08 1 exploring electric hybrid buses. I haven't heard  
 02:08 2 anything about exploring use of actually minimizing  
 02:08 3 the traffic, rather than how we cope with the  
 02:08 4 increased traffic.  
 02:08 5 Has the consultant looked at that?  
 02:08 6 CHAIRMAN NICHOLSON: Well, have you had  
 02:08 7 an opportunity to read his reports and listen to his  
 02:08 8 testimony?  
 02:08 9 MS. WOLFSON: I didn't -- I've been  
 02:08 10 coming to meetings and I haven't heard anything of  
 02:08 11 that nature.  
 02:08 12 CHAIRMAN NICHOLSON: Well, we'll ask  
 02:08 13 Mr. Staigar to address your questions.  
 02:08 14 MS. WOLFSON: Okay. Thank you.  
 02:08 15 The next question, I've also been  
 02:08 16 listening, and I really haven't heard anything, have  
 02:08 17 you engaged a consultant or considered hiring a  
 02:08 18 consultant that is expert in noise abatement and  
 02:09 19 emission reduction technologies and materials?  
 02:09 20 CHAIRMAN NICHOLSON: Not at this stage.  
 02:09 21 The Master Plan Amendment does list criteria for --  
 02:09 22 for restrictions during construction and in the -- in  
 02:09 23 the as-built condition for noise abatement.  
 02:09 24 But something of such detail as the  
 02:09 25 technology to be used would be handed at the

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02:10 1 an independent third party.  
 02:10 2 MS. WOLFSON: Right. I'm not -- I mean  
 02:10 3 I am concerned with construction, but I'm concerned  
 02:10 4 with ongoing. We will be living with this facility  
 02:10 5 for a long time.  
 02:11 6 Don't -- have you considered engaging  
 02:11 7 anyone who would look at the permanent of monitoring  
 02:11 8 of noise, emissions, even perhaps video cameras to  
 02:11 9 see when deliveries are in fact being made. Thing  
 02:11 10 like that. All the technology that's available to us  
 02:11 11 today.  
 02:11 12 CHAIRMAN NICHOLSON: Well, th answer to  
 02:11 13 that question is for the permanent condition, no, we  
 02:11 14 haven't considered that.  
 02:11 15 MS. WOLFSON: Okay.  
 02:11 16 Have you consulted with anyone in terms  
 02:11 17 of water usage and storage specifically for  
 02:11 18 non-potable water usage.  
 02:11 19 CHAIRMAN NICHOLSON: Are you referring  
 02:11 20 to the implementation of a gray water system?  
 02:11 21 MS. WOLFSON: That -- that could be one  
 02:11 22 of the items. Yes. I'm concerned about the use of  
 02:11 23 water obviously. And also the water that flows  
 02:11 24 through our sewage treatment plants and why are we  
 02:11 25 treating all of the water if it doesn't all need to

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02:09 1 ordinance level.  
 02:09 2 MS. WOLFSON: Well, I don't actually  
 02:09 3 consider this a level of detail. I think it's hugely  
 02:09 4 broad. It's the whole intent of building a structure  
 02:09 5 and having a Master Plan that would mandate that it  
 02:09 6 address noise abatement and emission reduction in its  
 02:09 7 building.  
 02:09 8 CHAIRMAN NICHOLSON: The Master Plan  
 02:09 9 Amendment does call for emission control and sound  
 02:09 10 abatement both during and after construction.  
 02:10 11 MS. WOLFSON: Okay. Thank you.  
 02:10 12 Have you consulted an expert in  
 02:10 13 monitoring technologies. In other words, we talked  
 02:10 14 -- I think it was the last meeting -- about the level  
 02:10 15 that the Hospital can operate in acceptable decibels  
 02:10 16 and so forth, but how do we know at what level the  
 02:10 17 Hospital is operating even today, if we don't monitor  
 02:10 18 that?  
 02:10 19 CHAIRMAN NICHOLSON: One of the things  
 02:10 20 that the Board has considered and it is broadly  
 02:10 21 touched on in the Master Plan is, in fact, how we  
 02:10 22 would mandate the monitoring of the Hospital's  
 02:10 23 compliance with the criteria imposed upon it for  
 02:10 24 noise abatement and dust control and all those other  
 02:10 25 types of environmental aspects during construction by

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02:11 1 be potable. And what can we do to alleviate that and  
 02:12 2 also alleviate the drain on our water system.  
 02:12 3 So have we hired any expert to address  
 02:12 4 that? I -- I think this is appropriate to a Master  
 02:12 5 Plan.  
 02:12 6 CHAIRMAN NICHOLSON: We haven't  
 02:12 7 considered yet any type of imposition of -- I'll use  
 02:12 8 an over-used term "green technologies" as part of  
 02:12 9 this Master Plan Amendment, no.  
 02:12 10 MS. WOLFSON: Okay.  
 02:12 11 I am now ready for my statement.  
 02:12 12 MS. PRICE: Do you swear the testimony  
 02:12 13 you're about to give is the truth, the whole truth  
 02:12 14 and nothing but the truth?  
 02:12 15 MS. WOLFSON: Yes, I do.  
 02:12 16 M A U R E E N W O L F S O N,  
 02:12 17 Residing at 212 Stielen Avenue, Ridgewood, New  
 02:12 18 Jersey, having been duly sworn, testifies as  
 02:12 19 follows:  
 02:12 20 MS. WOLFSON: I've sat here through  
 02:12 21 repeated meetings and keep hearing the same  
 02:12 22 discussions we could have held 20 or even 30 years  
 02:12 23 ago.  
 -10:-40 24 Where is our concern about today's  
 -10:-39 25 environmental issues? And why are we not taking

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-10:39 1 advantage of the newest technologies. It's 2009 and  
-10:39 2 yet we are still counting cars, trucks and crossing  
-10:39 3 guards, just as we always did before.  
-10:39 4 In a time when other communities are  
-10:39 5 attempting to reduce traffic, we are widening roads  
-10:39 6 and building parking garages.  
-10:39 7 Where is any discussion of permanent  
-10:39 8 off-site parking; electric hybrid buses; carpooling;  
-10:38 9 et cetera.  
-10:38 10 Hospitals are enormous users of power,  
-10:38 11 resulting in significant greenhouse gas emissions.  
-10:38 12 Yet I hear no discussions of building materials and  
-10:38 13 mechanicals that could actually reduce the Hospital's  
-10:38 14 carbon footprint. Not even a mention of low energy  
-10:38 15 lighting, which everyone else seems to care about  
-10:38 16 today.  
-10:38 17 I've heard no discussion of noise  
-10:38 18 abatement, not even a mention of the simplest thing,  
-10:38 19 like enclosing dumpsters within walled areas.  
-10:37 20 Hospitals are enormous users of water,  
-10:37 21 yet many uses do not require water that is potable.  
-10:37 22 Where is any discussion of capturing water for such  
-10:37 23 purposes, so that it does not have to be fed through  
-10:37 24 our sewerage system and sewerage treatment plants?  
-10:37 25 I believe that I heard last meeting

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-10:37 1 that there is no need to test the soil before  
-10:37 2 construction. You will recall the Westbrook School  
-10:37 3 in Paramus and its toxic soil.  
-10:37 4 There has been no discussion of the  
-10:37 5 ongoing monitoring of noise and emissions. How do we  
-10:37 6 know at what noise level the Hospital is operating,  
-10:37 7 even today, if we don't monitor it? What is the  
-10:37 8 impact of a four story garage on the immediate area?  
-10:36 9 The Valley Hospital construction is not  
-10:36 10 likely to be finished before 2019. All of you on  
-10:36 11 this Board are dedicating a huge amount of time in  
-10:36 12 serving our community and in drafting this Master  
-10:36 13 Plan Amendment, and I thank you for that.  
-10:36 14 But your hardest job is to act  
-10:36 15 prudently and develop a plan that will take us years  
-10:36 16 into the future.  
-10:36 17 It scares me that the plan I hear is  
-10:36 18 for the years past. Thank you.  
02:15 19 CHAIRMAN NICHOLSON: Thank you, MS.  
02:15 20 Wolfson. (Applause).  
02:15 21 MS. PRICE: Is Mr. Marc Harris with us  
02:15 22 tonight?  
02:15 23 (NO RESPONSE.)  
02:15 24 MS. PRICE: Ms. Wolfson, do you want to  
02:15 25 leave your statement?

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02:15 1 MS. WOLFSON: Sure.  
02:15 2 MS. PRICE: Okay. That's O-13 for the  
02:15 3 record.  
02:15 4 (Whereupon, Ms. Wolfson's Written  
02:15 5 Comments were received and marked as Exhibit  
02:15 6 O-13 for Identification.)  
02:15 7 CHAIRMAN NICHOLSON: Mr. Harris?  
02:15 8 MR. HARRIS: Yes.  
02:15 9 CHAIRMAN NICHOLSON: After Mr. Harris,  
02:15 10 Tom Shea? Mr. Shea?  
02:15 11 You'll be next.  
02:15 12 Mr. Harris, do you have any questions.  
02:15 13 MR. HARRIS: I do have a few questions.  
02:16 14 Marc Harris, M-a-r-c H-a-r-r-i-s, 243  
02:16 15 Pearsall Avenue.  
02:16 16 So a few questions -- a few questions  
02:16 17 for -- for Mr. Brancheau just -- just briefly.  
02:16 18 Can you just tell me and, again, I know  
02:16 19 we're still working out the exact numbers of square  
02:16 20 footage for the underground space so, you know, ball  
02:16 21 park figures here, but you talked about the idea of  
02:16 22 600,000 square feet an 80 percent increase in the  
02:16 23 underground space potentially  
02:16 24 How would you view that as being  
02:16 25 utilized by the Hospital, just to understand it? And

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02:16 1 I put that in the context of trying to also  
02:16 2 understand how they currently use their current  
02:16 3 300,000 square feet if you have a sense of that?  
02:16 4 MR. BRANCHEAU: Well, of the current  
02:17 5 below grade space being used by the Hospital, the  
02:17 6 majority of that is used for parking.  
02:17 7 Some is used for other uses, I can get  
02:17 8 that for you, but I don't have it --  
02:17 9 MR. HARRIS: Okay.  
02:17 10 MR. BRANCHEAU: -- available right now.  
02:17 11 Some of it's used for mechanical areas  
02:17 12 I know. Some of it's used for other uses, some of  
02:17 13 which are, you know, active uses.  
02:17 14 But the precise breakdown I can get for  
02:17 15 you.  
02:17 16 MR. HARRIS: So just -- just to  
02:17 17 understand me, does that -- does that amount of  
02:17 18 expansion make sense to you for purely machinery and  
02:17 19 -- and other parking --  
02:17 20 MR. BRANCHEAU: No, it's not purely for  
02:17 21 machinery.  
02:17 22 MR. HARRIS: Okay. For parking usage  
02:17 23 and the other things you -- I mean when you -- you  
02:17 24 sort of add this together in your head, and sort of  
02:17 25 look at this, does -- does that amount of expansion

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1 make sense to you?  
 02:17 2 MR. BRANCHEAU: The amount of  
 02:18 3 mechanical space is going up by 80 or 90 percent  
 02:18 4 under the proposal.  
 02:18 5 MR. HARRIS: Can you explain what that  
 02:18 6 means? So are we talking about the space where  
 02:18 7 they're talking about having to have certain sized  
 02:18 8 footage on their floors and that's why we're having,  
 02:18 9 you know, much higher building floor area?  
 02:18 10 MR. BRANCHEAU: Well, right now I think  
 02:18 11 there's like 57,000 square feet of mechanical and  
 02:18 12 storage area.  
 02:18 13 MR. HARRIS: Right.  
 02:18 14 MR. BRANCHEAU: Proposal would result  
 02:18 15 in 103,000 of mechanical and storage are so it's not  
 02:18 16 quite doubling but --  
 02:18 17 MR. HARRIS: Right.  
 02:18 18 MR. BRANCHEAU: -- like 90 percent  
 02:18 19 increase.  
 02:18 20 MR. HARRIS: But that would be -- still  
 02:18 21 leave, you know, a good couple of hundred-thousand  
 02:18 22 square feet trying to figure out what they would be  
 02:18 23 doing with the extra space, correct?  
 02:18 24 MR. BRANCHEAU: Well, it's mechanical  
 02:18 25 space and storage, but what specifically the

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02:19 1 themselves --  
 02:19 2 MR. HARRIS: I think --  
 02:19 3 MR. BRANCHEAU: -- I'm sure they could  
 02:19 4 provide that information.  
 02:19 5 MR. HARRIS: Okay. If we could  
 02:19 6 obviously circle back on that.  
 02:19 7 A couple -- a couple of other  
 02:19 8 questions. Do you think Valley's statement -- just  
 02:19 9 going back to something you said earlier tonight, do  
 02:19 10 you think that Valley's statement to you from, I  
 02:19 11 think, you said it was 2007 that this is the minimum  
 02:19 12 that can be done on the current site and that there's  
 02:19 13 no other feasible off-site options, do you think  
 02:19 14 that's a factually accurate statement? And -- and  
 02:19 15 also can you describe what were the other options  
 02:19 16 that you gave to Valley at the time?  
 02:19 17 MR. BRANCHEAU: The -- as to whether I  
 02:19 18 think it's factually accurate, I don't know that it  
 02:20 19 -- I have no basis for thinking otherwise. But I'm  
 02:20 20 not -- to -- to answer that question either requires  
 02:20 21 an expertise in hospital planning that I do not have  
 02:20 22 or -- and/or requires some degree of knowledge of the  
 02:20 23 Hospital's internal operations that I also don't  
 02:20 24 have.

And I think you'd really almost sort of  
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02:18 1 mechanical operations are and what specifically the  
 02:18 2 storage is?  
 02:18 3 MR. HARRIS: No, you -- you just  
 02:18 4 implied there would be a doubling of the current  
 02:18 5 space for the usage as they've described it today?  
 02:18 6 MR. BRANCHEAU: Yes, not all of that is  
 02:18 7 necessarily --  
 02:18 8 MR. HARRIS: So that --  
 02:18 9 MR. BRANCHEAU: -- underground. But  
 02:18 10 I'm just talking about mechanical space.  
 02:18 11 MR. HARRIS: Right. So, again, just  
 02:18 12 going back to the original question.  
 02:19 13 Does that amount of expansion of  
 02:19 14 underground space for the purposes that they have  
 02:19 15 described it being used for, basically parking --  
 02:19 16 underground parking and mechanical, does that make  
 02:19 17 sense to you that that would be the appropriate  
 02:19 18 amount of space for that usage as described?  
 02:19 19 MR. BRANCHEAU: I really -- I think  
 02:19 20 that's a question that will be put to the Hospital  
 02:19 21 planning expert. I really can't answer that  
 02:19 22 question.  
 02:19 23 MR. HARRIS: Okay. Or to the Hospital  
 02:19 24 for themselves.

MR. BRANCHEAU: Or to the Hospital  
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02:20 1 need both. And I think that's why the Planning Board  
 02:20 2 is looking to hire that expert.  
 02:20 3 MR. HARRIS: That's fine. I think we  
 02:20 4 would just -- just to make the point I think we'd all  
 02:20 5 agree if we're going to be going forward with this  
 02:20 6 amount of expansion, even from 2007 when we maybe  
 02:20 7 started the process and we agreed to let Valley think  
 02:20 8 about doing to expansion on the site, it would have  
 02:20 9 seemingly made some sense to have considered that  
 02:20 10 point pretty earlier on. I'm glad to hear that we're  
 02:20 11 going to address it now. I do think it's pretty  
 02:20 12 important, though.  
 02:20 13 CHAIRMAN NICHOLSON: If you're making a  
 02:20 14 point then you must have started your statement.  
 02:20 15 MR. HARRIS: That's very nice of you to  
 02:20 16 point out, Mr. Nicholson. Thank you.  
 02:20 17 I have not started my statement. But I  
 02:21 18 will ask a few other questions.  
 02:21 19 A speaker earlier suggested that it's  
 02:21 20 going to be six years of construction, others have  
 02:21 21 said ten. Can you just quickly clarify, Blais, the  
 02:21 22 -- the time period of construction? Just to make  
 02:21 23 sure we're all correct.  
 02:21 24 MR. BRANCHEAU: I think I stated  
 02:21 25 earlier that I don't remember. We were going to

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02:21 1 check the records to see what --  
 02:21 2 MR. HARRIS: Okay.  
 02:21 3 MR. BRANCHEAU: -- was on the record as  
 02:21 4 to the time period.  
 02:21 5 MR. HARRIS: That's fine.  
 02:21 6 A question on the H-Zone changes, why  
 02:21 7 would the Board include changes to the H-Zone today  
 02:21 8 which accommodate the later phases of the Renewal  
 02:21 9 project, if these are only potential expansions  
 02:21 10 unlike Phase I which I'm guessing is a more likely  
 02:21 11 expansion that we've already sort of agreed that they  
 02:21 12 are going to do.  
 02:21 13 So why would we be making changes that  
 02:21 14 are based on phases that they're not even sure  
 02:21 15 they're going to do in the Master Plan overall?  
 02:21 16 MR. BRANCHEAU: I think the simple  
 02:21 17 answer is, is a -- this was proposed by the Hospital,  
 02:21 18 requested by the Hospital.  
 02:21 19 The Board considered it as a whole.  
 02:21 20 There's no real phasing requirement in the plan. And  
 02:22 21 the Board evaluated the plan on the basis of a full  
 02:22 22 build-out, whether it happens all at once or in  
 02:22 23 phases isn't really -- apart from the construction  
 02:22 24 issue, which the Master Plan touches on, isn't really  
 02:22 25 material to it. So that's a simple...

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02:23 1 so it is not the idea that's it's not going to  
 02:23 2 happen.  
 02:23 3 MR. BRANCHEAU: -- I don't think they  
 02:23 4 will -- I don't think they would put them on unless  
 02:23 5 they were making plans for those.  
 02:23 6 All I'm saying is that the degree of  
 02:23 7 likelihood of that is less for Phase II than for  
 02:23 8 Phase I.  
 02:23 9 Is it likely? I think it probably is  
 02:23 10 likely in some form to happen. But I'm just -- as  
 02:23 11 far as the -- it was really addressed in the issue of  
 02:23 12 the timing of the construction, not whether it would  
 02:23 13 ever occur. And that's -- that's how I made that  
 02:23 14 statement initially.  
 02:23 15 I never intended to imply that it was  
 02:23 16 not likely to happen. It was just the certainty of  
 02:23 17 it happening within a certain time period after the  
 02:23 18 completion of Phase I was really up in the air.  
 02:23 19 MR. HARRIS: Okay. A quick question  
 02:23 20 for Ms. Price, if I could.  
 02:23 21 Can you share the guidance you've given  
 02:23 22 the Board, if any, on how to balance and consider the  
 02:24 23 pro and con views being expressed over this course of  
 02:24 24 these hearings. For example, how are -- how is the  
 02:24 25 Board being directed to consider the number of

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02:22 1 MR. HARRIS: But if I were, for  
 02:22 2 example, extending my house I wouldn't put in a  
 02:22 3 variance for the thing I want to do 15-years from  
 02:22 4 now, right?  
 02:22 5 MR. BRANCHEAU: Well, you could.  
 02:22 6 MR. HARRIS: Yeah, but -- but a  
 02:22 7 rational person would not choose to do that, correct?  
 02:22 8 Unless they were planning on doing those extra  
 02:22 9 phases?  
 02:22 10 MR. BRANCHEAU: Well, most people don't  
 02:22 11 plan that far out ahead --  
 02:22 12 MR. HARRIS: Okay.  
 02:22 13 MR. BRANCHEAU: Obviously in dealing  
 02:22 14 with a regional healthcare facility you try to.  
 02:22 15 But there's nothing that says you can't  
 02:22 16 get a variance and not build it immediately. There's  
 02:22 17 a -- there's a certain risk when you do so that the  
 02:22 18 laws will change and that your variance, you know,  
 02:23 19 might lapse over that time, but other than that  
 02:23 20 there's no real reason why you couldn't --  
 02:23 21 MR. HARRIS: But -- but just again to  
 02:23 22 ask the question, is it fair to say Valley plans to  
 02:23 23 make those additional phases happen?  
 02:23 24 MR. BRANCHEAU: I'm not saying --  
 02:23 25 MR. HARRIS: They are proposing this,

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02:24 1 speakers pro and con as a factor? And the weight of  
 02:24 2 membership or non-membership in the Concerned  
 02:24 3 Residents of Ridgewood organization as a factor in  
 02:24 4 taking into consideration the speakers over the  
 02:24 5 course of these many hearings?  
 02:24 6 Is that -- is that -- has that even  
 02:24 7 been discussed by you? Has there been any guidance  
 02:24 8 given to you -- by you to the Board at all on this?  
 02:24 9 MS. PRICE: There'll be instructions at  
 02:24 10 the end of hearing process in terms of certain issues  
 02:24 11 that may have arisen during the process.  
 02:24 12 But the Board will attribute weight to  
 02:24 13 the testimony and the exhibits received as it does in  
 02:24 14 every application. And individual members are free  
 02:24 15 to attribute that weight as he or she deems fit.  
 02:25 16 MR. HARRIS: Okay. So there's been no  
 02:25 17 specific guidance from you as to how to handle that  
 02:25 18 weight, how to think about membership in some of the  
 02:25 19 different organizations that are representing  
 02:25 20 different interests or anything along those lines?  
 02:25 21 MS. PRICE: No. And --  
 02:25 22 MR. HARRIS: Okay.  
 02:25 23 CHAIRMAN NICHOLSON: And all of  
 02:25 24 Mrs. Price's instructions to the Board will be done  
 02:25 25 at public meeting.

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02:25 1 MR. HARRIS: Okay.  
 02:25 2 CHAIRMAN NICHOLSON: You'll be able to  
 02:25 3 hear it.  
 02:25 4 MR. HARRIS: Fantastic.  
 02:25 5 MS. PRICE: And the Board knows that  
 02:25 6 all of its determinations are not a matter of head  
 02:25 7 counting, pro or con.  
 02:25 8 And it's an exercise pursuant to the  
 02:25 9 Municipal Land Use Law.  
 02:25 10 MR. HARRIS: Okay. Terrific.  
 02:25 11 I am ready to make my statement, Mr.  
 02:25 12 Chairman.  
 02:25 13 CHIEF BOMBACE: If I may with regard to  
 02:25 14 this question -- with regard to your question about  
 02:25 15 the basement facilities of Valley I have a limited  
 02:25 16 knowledge of what's down in the basement at Valley  
 02:25 17 Hospital having been in the building on a number of  
 02:25 18 occasions during inspections and other activities as  
 02:25 19 the Chief of the fire department.  
 02:25 20 There is a kitchen facility that  
 02:25 21 prepares the food for all the patients in the  
 02:26 22 hospital. There's also a cafeteria for people who  
 02:26 23 are visitors to hospital and also then there's a  
 02:26 24 separate cafeteria facility for those who are  
 02:26 25 employees of the hospital.

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1 M A R C H A R R I S,  
 2 Residing at 243 Pearsall Avenue, Ridgewood,  
 3 New Jersey, having been duly sworn, testifies  
 4 as follows:  
 02:27 5 MR. HARRIS: I consider myself an  
 02:27 6 actively engaged and supportive member of the  
 02:27 7 Ridgewood community. My children were born at Valley  
 02:27 8 Hospital and now attend the public schools. I pay my  
 02:27 9 taxes. I vote in each and every election. And I've  
 02:27 10 diligently attended many of these hearings over the  
 02:27 11 past year or more.  
 02:27 12 In all the years I've lived in the  
 02:27 13 village, I frankly never felt more disenfranchised  
 02:27 14 and disenheartened in my representative government  
 02:27 15 that sits before me in the form of the Planning  
 02:27 16 Board.  
 02:27 17 Valley Hospital is not a taxpayer.  
 02:27 18 It's not an individual needing the advocacy of this  
 02:27 19 Board.  
 02:27 20 Despite its stated objective of being a  
 02:27 21 nonprofit hospital serving the community, my years of  
 02:27 22 working expand as a director of research and analysis  
 02:27 23 at a large Wall Street firm make it clear that Valley  
 02:27 24 looks, acts and feels like a large and profitable  
 02:27 25 corporation looking to find its next big growth

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02:26 1 There are offices for the engineering  
 02:26 2 department that are in the basement. There is  
 02:26 3 laundry service. There are mechanical rooms.  
 02:26 4 There's waste storage. There's sterilization room.  
 02:26 5 There's an operating room in the newest wing of the  
 02:26 6 Cheel Building. There's an auditorium and meeting  
 02:26 7 rooms.  
 02:26 8 So it's -- it's not just mechanical  
 02:26 9 rooms. There are functional rooms that are currently  
 02:26 10 in the basement of the structure that are throughout,  
 02:26 11 you know, different buildings. So there are  
 02:26 12 functional things that go on in the basement.  
 02:26 13 One of the more unpopular places is the  
 02:26 14 morgue.  
 02:26 15 So you have a little better  
 02:26 16 understanding --  
 02:26 17 MR. HARRIS: No, that's very, very  
 02:27 18 helpful, Mr. Bombace. Thank you. Thank you.  
 02:27 19 Okay. I'm ready to make my statement.  
 02:27 20 MS. PRICE: Do you swear the testimony  
 02:27 21 you're about to give in connection with this matter  
 02:27 22 is the truth, the whole truth and nothing but the  
 00:12 23 truth?  
 00:12 24 MR. HARRIS: I do.  
 25

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02:27 1 vehicle. Like a publicly traded company focused on  
 02:27 2 making their shareholders happy, they're using  
 02:27 3 everything at their disposal to discourage  
 02:27 4 competition and take the most direct route to their  
 02:27 5 goals of unbridled property growth with minimal  
 02:28 6 dialogue or compromise directly with the local  
 02:28 7 residents.  
 02:28 8 If I were an investor I'd be enormously  
 02:28 9 excited to buy into Valley's upcoming IPO with its  
 02:28 10 compelling earnings growth and the endorsement of the  
 02:28 11 Planning Board clearing the path to Audrey Myers  
 02:28 12 ringing the bell on the New York Stock Exchange.  
 02:28 13 But Valley's not coming public and I'm  
 02:28 14 not an investor in the Hospital and neither is the  
 02:28 15 Board who seems to be, to some degree, endorsing the  
 02:28 16 plan for reasons that aren't immediately apparent to  
 02:28 17 any community member not employed or connected  
 02:28 18 immediately with the Hospital.  
 02:28 19 I'm a concerned member of the community  
 02:28 20 who's outraged. There are a myriad of options for  
 02:28 21 Valley to choose for the size and scale of the  
 02:28 22 facility proposed in the busy commercial districts  
 02:28 23 along Route 17 and elsewhere very near by.  
 02:28 24 How our representatives could allow it  
 02:28 25 to get to this point, a potential \$750 million

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1 project shoehorned into a residential community, next  
2 to a middle school, and two block from an elementary  
3 school in our intimate Village is beyond my  
4 imagination.

5 People move to Ridgewood for the  
6 schools and the attractive surrounding and close  
02:28 7 proximity of the conveniences of New York and other  
02:28 8 large municipalities.

02:29 9 Very few people, other than hospital  
02:29 10 employees, move to Ridgewood because of Valley  
02:29 11 Hospital. And an equally minute number of voters are  
02:29 12 staying or will come because of the excitement about  
02:29 13 Valley's massive expansion.

02:29 14 Surely, many will go.

02:29 15 As my representatives you should be  
02:29 16 standing up to say no to this massive disruption to  
02:29 17 our Village over the next five to ten years and the  
02:29 18 permanent impact beyond this of the greatly increased  
02:29 19 traffic, pollution, and industrial presence.

02:29 20 There's a place for this kind of  
02:29 21 facility and any rational person sitting in front of  
02:29 22 me on this Board would have to conclude that this  
02:29 23 place is not in the current site and not in  
02:29 24 Ridgewood.

02:29 25 How many villages do you know that  
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00:12 1 MR. SHEA: I do.

00:12 2 T H O M A S S H E A,

02:30 3 Residing at 359 Linwood Avenue, Ridgewood, New  
02:30 4 Jersey, having been duly sworn, testifies as

02:30 5 follows:

02:30 6 MS. PRICE: State your full name and  
02:30 7 address for the record.

02:30 8 MR. SHEA: Thomas Shea, 359 Linwood  
02:30 9 Avenue in Ridgewood, S-h-e-a.

02:30 10 I'm a 40 year resident of Ridgewood. I  
-10:35 11 settled in Ridgewood shortly after being married.  
-10:35 12 And for many reasons fell in love with the Ridgewood  
-10:35 13 community. The Ridgewood atmosphere, the school  
-10:35 14 system, the beautiful neighborhoods, the shopping  
-10:35 15 districts and also a fine community hospital. And  
-10:35 16 Valley has been great, where my kids have been born  
-10:35 17 and I recently occupied a bed there. And it --  
-10:35 18 actually it lacks an industrial setting.

-10:35 19 But the Valley Hospital's proposal will  
-10:35 20 increase the size of the hospital from 550,000 square  
-10:35 21 feet to approximately 1,400,000 square feet, or  
-10:34 22 approximately a 250 increase. So if Valley's main  
-10:34 23 objective is modernizing and updating technology and  
-10:34 24 improving diagnostic services, how come we need 250  
-10:34 25 percent in building size? I really don't get it.

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02:29 1 would allow a \$750 million commercial expansion smack  
02:29 2 in the middle of a residential neighborhood?

02:29 3 Perhaps we should start the rebranding  
02:29 4 of the Village of Ridgewood to the City of Ridgewood  
02:29 5 concurrent with the proposal approval.

02:29 6 I ask you to turn this down.

02:29 7 Thank you. (Applause).

02:29 8 CHAIRMAN NICHOLSON: Thank you, Mr.  
02:29 9 Harris.

02:29 10 Mr. Shea is going to be our last  
02:30 11 speaker for the evening. My regrets to those of you  
02:30 12 who have waited to be heard tonight.

02:30 13 We will look forward to hearing from  
02:30 14 you in September. And the scheduling of that will be  
02:30 15 announced as soon as we have is available.

02:30 16 I wanted to say that before Mr. Shea  
02:30 17 concluded because we'll wrap up very quickly given  
02:30 18 the hour.

02:30 19 Mr. Shea, do you have any questions?

02:30 20 MR. SHEA: No, I do not.

02:30 21 CHAIRMAN NICHOLSON: Okay.

02:30 22 MS. PRICE: Do you swear the testimony  
02:30 23 you're about to give in connection with this matter  
02:30 24 is the truth, the whole truth and nothing but the  
00:12 25 truth?

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-10:34 1 So going forward with this planned  
-10:34 2 construction would require approximately 30,000  
-10:34 3 individual truck movements during demolition and  
-10:34 4 construction, delivery, storage, removal of  
-10:34 5 construction materials and equipment.

-10:34 6 This construction will require the  
-10:34 7 large vehicles, dump trucks, everything that you  
-10:34 8 would see in a large construction site, and even  
-10:34 9 18-wheelers, which will be here in this community.  
-10:33 10 And to constantly move in and out of the hospital  
-10:33 11 area.

-10:33 12 To break down this number, during major  
-10:33 13 construction and demolition it will take 80 truck  
-10:33 14 movements and 40 bus movements per hour. That's  
-10:33 15 major area, major times.

-10:33 16 So what is this going to do? So prime  
-10:33 17 time the hospital shift occurs, coinciding with  
-10:33 18 children arriving and departing from school, will  
-10:33 19 cause major construction and congestion and danger to  
-10:33 20 all traveling areas around.

-10:33 21 At the last Planning Board meeting,  
-10:33 22 Sheila Brogan, from the Ridgewood Board of Education  
-10:33 23 president, stated that 5.7 percent of Benjamin  
-10:33 24 Franklin students have asthma as well as 8.2 percent  
-10:33 25 of Travell School students suffer from asthma.

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-10-32 1 So what effect is this major  
-10-32 2 undertaking going to have on our children,  
-10-32 3 particularly my two grandchildren.  
-10-32 4 I don't think it's going to help them.  
-10-32 5 The areas surrounding Valley Hospital,  
-10-32 6 Van Dien Avenue, Steilen, John Street, Linwood  
-10-32 7 Avenue, Glen Avenue, Meadowbrook and North Pleasant,  
-10-32 8 spilling over into the adjacent streets will not be  
-10-32 9 part of the Village of Ridgewood for a very long  
-10-32 10 time. It will turn into a massive construction site  
-10-32 11 and the City of Ridgewood at Valley Hospital. Most  
-10-32 12 of the homes in this area were constructed in the  
-10-32 13 1920s. Valley Hospital was built in 1951. The  
-10-31 14 neighborhood occupied -- accommodated a community  
-10-31 15 hospital. This site is not designed or can  
-10-31 16 accommodate a major medical center or a major  
-10-31 17 diagnostic center.  
-10-31 18 I believe in modernization and  
-10-31 19 improvement in technology, but a good thing -- but  
-10-31 20 250 percent increase in hospital size is completely  
-10-31 21 unnecessary. There are very vague points revealed in  
-10-31 22 this construction proposal which have come to light  
-10-31 23 in the last planning sessions.  
-10-31 24 The Planning Board has a very tough and  
-10-31 25 difficult complex task ahead of them in the coming

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1 O-14 for Identification.)  
2 CHAIRMAN NICHOLSON: Ladies and  
02:35 3 gentlemen, thank you very much for attending tonight.  
02:35 4 Members of the Board motion to adjourn?  
02:35 5 MR. RICHE: So moved.  
02:35 6 CHAIRMAN NICHOLSON: Second?  
02:35 7 COUNCILWOMAN ZUSY: So moved.  
02:35 8 CHAIRMAN NICHOLSON: All in favor?  
9 (Whereupon, all present Board Members  
10 respond in the affirmative.)  
11 (Whereupon, this matter will be  
12 continuing at a future date. Time noted 10:55  
13 p.m.)  
14  
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24  
25

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-10-31 1 months. The Valley Hospital proposal, in its current  
-10-31 2 form, will be the largest construction project that  
-10-31 3 the town of Ridgewood has seen in the past 50 years.  
-10-30 4 The president of the Planning Board  
-10-30 5 stated in prior meetings that he and all residents  
-10-30 6 love the Village of Ridgewood. And so do I.  
-10-30 7 So I hope and pray that when the  
-10-30 8 Planning Board members come to this important  
-10-30 9 decision regarding the current massive proposal, that  
-10-30 10 they will look in the mirror, ask themselves how will  
-10-30 11 this proposal effect and improve the Village of  
-10-30 12 Ridgewood? Or how will it benefit the business of  
-10-30 13 Valley Hospital?  
02:34 14 Thank you. (Applause.)  
02:34 15 CHAIRMAN NICHOLSON: Thank you,  
02:34 16 Mr. Shea.  
02:34 17 MS. PRICE: Mr. Shea, do you want to  
02:34 18 leave your statement?  
02:34 19 MR. SHEA: Sure.  
02:35 20 MS. PRICE: That will be O-14 for the  
21 record.  
22  
23  
24 (Whereupon, Mr. Shea's Written  
25 Comments were received and marked as Exhibit

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1  
2 C E R T I F I C A T E  
3  
4  
5 I, LAURA A. CARUCCI, C.C.R., R.P.R., a Notary  
6 Public of the State of New Jersey, Notary ID. #15855,  
7 and a Registered Professional Reporter, hereby  
8 certify that the foregoing is a verbatim record of  
9 the testimony provided under oath before any court,  
10 referee, Board, commission or other body created by  
11 statute of the State of New Jersey.  
12 I am not related to the parties  
13 involved in this action; I have no financial  
14 interest, nor am I related to an agent of or employed  
15 by anyone with a financial interest in the outcome of  
16 this action.  
17 This transcript complies with  
18 regulation 13:43-5.9 of the New Jersey Administrative  
19 Code.  
20  
21  
22  
23  
24  
25

-----  
LAURA A. CARUCCI, C.C.R., R.P.R.  
License #X102050, and Notary Public  
of New Jersey #15855, Notary  
Expiration Date March 1, 2014

Dated: \_\_\_\_\_

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