

SARASOTA MEMORIAL HOSPITAL
PLANNED ~~COMMERCIAL~~ ^{PUBLIC}
~~HOSPITAL~~ ^(PPH)
~~DEVELOPMENT (PCD)~~

BINDING MASTER PLAN

25- ??

PETITION NO. ~~18-09RZ~~

1. ARCHITECTURAL CONTROL NARRATIVE
2. SITE LIGHTING NARRATIVE
3. SIGN NARRATIVE
4. CIVIL AND LANDSCAPE DESIGN NARRATIVE
5. PLAN MAPS
 - a. PARKING SECTIONS
 - b. SECTIONS
 - c. CONCEPTUAL SITE PLAN
 - d. PARKING SECTIONS WITH AUTO TURN
 - e. PRELIMINARY SIGN LOCATING
6. Code Modifications

Architectural Control

General principals and intent

These Architectural Standards serve to establish a cohesive character that is reflective of a healthcare setting and encourage a high caliber, lasting quality of the campus.

The standards that follow define more specific requirements for compliance. They are intended to provide some flexibility, providing that the project meets the general intent.

Building height

The height of the building will not exceed ¹⁵⁰~~85~~ feet to the top of structure, further defined as the elevation of the primary roof deck above the highest occupied floor level. At any sloped roofs, the highest point of the slope will be used. Other non-occupied spaces such as building penthouses, which may include, but are not limited to elevator overruns, parapets, stair access, Utility and mechanical equipment/systems, screening, aircraft warning devices, antennas and other elements shall not be included in the calculation of the building height.

Building articulation - INTENT

The building exterior shall be reflective and complement a healthcare environment. The exterior expression should be a direct reflection of the patient care function within the interior environment. Patient care is further assisted using daylighting and by providing views of the surrounding natural elements. An expression such as the following character images:



Building articulation - SPECIFICS

The façade shall be comprised of colors that reflect simplicity and a consistency amongst the difference buildings and be primarily of white. Variations of white shall be allowed to accommodate for various building materials. Up to 35% accent colors shall be allowed to accommodate for specialty materials. Exclusions from this requirement include as previously defined, facades adjacent to spaces requiring screening for Utility and mechanical equipment, including louvers.

The building shall have not less than 30% fenestration on the façade. The fenestration is defined as the window assembly including the mullions, glass and other elements as part of the window assembly system. Other non-occupied buildings such as lift stations, parking garages, Central Energy Plants, Utility and mechanical equipment screenings and other elements shall not be included in the fenestration requirement.

Building material

Exterior materials shall be of high quality and shall meet the latest standards and requirements for hurricane durability. Buildings within the campus shall use materials that are compatible with, or similar to, nearby buildings on the campus. Materials such as precast, metal panel, terracotta, stucco, brick, stone, CMU block are examples of high-quality materials, but not limited to these.

Allowances for variances through the approval process

The architectural control shall allow for flexibility within the Site and Development approval process, should the project be issued construction permits prior to the completion of plan review and approval. This is to allow for the development and evolution of the building components still in development. Minimal changes of the building massing will be allowed.

The Zoning Administrator has the ability to consider and approve any variations to the exterior architectural features of the building. The Zoning Administrator may refer proposed changes to the Planning Commission if it is deemed necessary.

Sarasota Memorial Hospital - Venice Site Lighting Narrative

The Sarasota Memorial Hospital Laurel Road facility will utilize a family of lighting elements to illuminate typical areas as they occur around the site. These typical areas include the parking lots, the main entry drive, entry canopies, building perimeter, and select specialty landscape areas where applicable. All lighting will be selected and designed to minimize light trespass beyond the property line.

The parking lot and perimeter drive areas that comprise most of the site will be illuminated by pole mount luminaires with direct, full cut-off illumination. Luminaires will be mounted on maximum 25' high poles. The LED arrays in these luminaires will have a color temperature of 3500-4000K. At the parking garage, LED luminaires will be located within structural bays to provide uniform illumination, using low brightness luminaires. At the top deck of the parking garage, lighting poles will match those at the surface parking areas. All parking garage lighting will respond to ambient daylight to reduce energy as appropriate. After hours, the output of parking lot pole mount lighting will be reduced to 50% output. Upon sensing motion, motion sensors located at each pole will bring lights to full.

Post top luminaires with luminous elements, located along the main entry drive will provide a visual element to delineate the drive as it leads to the main entry of the hospital. Additional luminaires of this design/family will be located along the sidewalks that access the hospital from the parking areas located around the perimeter of the building.

Where egress illumination is required around the building perimeter, a combination of wall mount luminaires and/or bollards will be used. Wall mount luminaires will be kept to a minimum and bollards or landscape lighting will be used wherever possible to provide the illumination levels required.

Although varying in size, the entry canopies for the main hospital entry and discharge, MOB, and Emergency Department entries will be designed to create a warm inviting destination. Uplight located within the canopy structure will illuminate the underside of the canopy and provide architectural accent on these surfaces that can be seen from a distance to aid in wayfinding. Downlight will be used to accent architectural features and provide the illumination levels required for active pedestrian traffic areas.

Sign Narrative

The Sarasota Memorial Hospital wayfinding and signage program will be designed to provide patients and visitors with the information they need to reach their destination. Exterior signage on a hospital campus is necessary to help patients and visitors navigate the site safely, make decisions at intersections, identify the buildings, locate their entrance or drop-off point, access parking, and depart. Due to the patient and visitor's potentially agitated state of mind, situational urgency, and complexity of the surroundings, hospital sites tend to require a higher number of sign locations and larger sign area than a standard retail or commercial site. Building and ground mounted signs will be placed at sites which reflect the most desirable location for the effectiveness of the overall wayfinding package. Actual sign placement may shift slightly, if necessary, to account for underground encumbrances or other line-of-site obstructions, so long as the alteration does not decrease the effectiveness of the wayfinding program.

The intent of the exterior signage design is to complement the building's design and architectural details. Finishes used on the signage may be the same as the architectural materials, or be faux finishes to mimic or balance the architectural materials. Construction will follow industry standards for architectural signage. Primary construction material will be aluminum that is painted and finished. Other materials may include, but are not limited to: structural steel, acrylic, vinyl, LED lighting, concrete, limestone, terracotta, and precast.

Sign types used on this site may include the following:

Primary Monument Signs

Two primary monument signs may be placed along the frontage of the property, at site access points or boundary points.

1. Each primary monument sign will be single-sided or double-sided with a maximum Sign Face Area of 180 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
2. Maximum sign height will be 20 feet tall from grade, not including curb height.
Each primary monument sign may include changeable copy signs covering up to 50% of the maximum Sign Face Area. Changeable copy signs will follow Section 86-402.e subsections 3-10. Changeable copy sign standards will include the following:
 - a. Timing of message change: messaging shall be static text characters or static graphic images, displayed for at least one minute without a change of message. Change from one message to the next will happen within a one-to-two second interval.
 - b. Size of text: text on static graphic images or messaging will not be any smaller than three inches in letter height.
 - c. Use of graphics and/or video: no video, animated, scrolling or otherwise moving changeable message will be used. Static graphics are allowed.
 - d. Illumination: changeable copy displays are to include an automatic dimmer control mechanism to account for varying natural light conditions.

3. Primary monument signs will be internally illuminated such that the logo will glow at night, identification of Emergency, if included, will glow red with white copy, and destination names, arrows and symbols are cut-out/push through copy that glows at night.
4. Signage will most likely relate to the architectural themes of the building and its materials. As such, primary monument signs may or may not include a base, cap and columns.
5. See plan for conceptual placements, understanding that the location and quantity may change.

Secondary Monument Signs

Secondary monument signs may be placed at site access points along primary frontage roads.

1. Each secondary monument sign will be single-sided or double-sided with a maximum Sign Face Area of 120 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
2. Maximum sign height will be 15 feet tall from grade, not including curb height.
3. Secondary monument signs will be internally illuminated such that the logo will glow at night, identification of Emergency, if included, will glow red with white copy, and destination names, arrows and symbols are cut-out/push through copy that glows at night.
4. See plan for conceptual placements, understanding that the location and quantity may change.

Building Identification Logo

Building identification logo(s) may be placed on the primary facades of the building to provide optimal visibility and line of site from the site access points.

1. Primary facades are those elevations of the building that have visibility along main roads/thoroughfares or from primary vehicular access points.
2. Each building identification logo will be a maximum sign area of 300 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
3. Logos will be installed on the building facade with or without a backer panel.
4. Logos will be internally illuminated.

Building Identification Logo facing I-75 Frontage

A building identification logo may be placed on the building facade along the I-75 corridor or ramp.

1. Building identification logo facing I-75 frontage will be a maximum sign area of 500 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
2. Logo will be installed on the building facade with or without a backer panel.
3. Logo will be internally illuminated.

Ground Vehicular Guide and Parking Identification Signs

Additional directional/guide and parking identification signs are to be placed as needed within the site boundaries. These signs are used to provide directions to visitors entering, navigating, and leaving the site and to identify parking opportunities.

1. Guide and parking signs will be located at decision points or parking entrance locations, and sized according to the space available.
2. Each guide and parking sign will be single-sided or double-sided with a maximum Sign Face Area of 24 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
3. Maximum sign height will be 9 feet tall from grade, not including curb height.
4. Guide and parking signs may be internally illuminated such that identification of Emergency, if included, will glow red with white copy, and destination names, arrows and symbols are cut-out/push through copy that glows at night.
5. Non-illuminated signs may use reflective vinyl with or without an external light source.
6. Signs may include the site logo.
7. Design of guide and parking signs will be more simplistic than monument signs, including a base, but not necessarily side column or cap details.

Above-grade Entrance and Parking Identification Signs

Identification signs for building entrances and parking garages are intended to provide visibility from a distance and help distinguish entrances clearly, so patients and visitors are able to use the correct entrance and clearly identify the parking structure from a distance.

1. Entrance identification signs will be located on the canopy of the drop-off point, near the physical entrance, or within line-of-site from the main vehicular drives and parking.
2. Public entrances may have two identification signs to provide visibility from parking and visibility from the drop-off lane.
3. Emergency may have three identification signs to provide visibility from parking, from the inner circulation loop, and from the drop-off lane.
4. Each entrance identification sign will have a maximum Sign Face Area of 40 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
5. Entrance and parking identification signs may be internally illuminated, externally illuminated or non-illuminated.
6. Non-illuminated signs may use reflective vinyl with or without an external light source.
7. Emergency signs will have individual letters that glow red at night, or a cabinet that glows red with white copy at night.

Regulatory Signs

General information such as no smoking or patient drop-off zones can be shared through the use of smaller regulatory signs or through vinyl applications on glass.

1. Regulatory signs will be placed as needed throughout the site.

2. Each regulatory sign will be single-sided or double-sided with a maximum Sign Face Area of 10 sq. ft. as calculated using Section 86-402.h Calculation of sign dimensions.
3. Regulatory signs may be reflective or non-reflective with no external illumination.
4. Regulatory signs will be directly mounted to wall surfaces or to simple painted posts.

Civil and Landscape Design Zoning Control Narrative

General principals and intent

These Standards serve to establish a cohesive character that is reflective of a healthcare setting and encourage a high caliber, lasting quality of the campus.

The standards that follow define more specific requirements for compliance. They are intended to provide some flexibility, providing that the project meets the general intent.

The Binding Master plan, coupled with the Zoning Control Narratives for Architectural Design, Signage, Lighting, Landscape and Civil Design are intended to establish the zoning requirements for the PCD for SMH-Venice.

The Tree list has been updated to reflect the trees in three tree types, Palm, Canopy and Understory/Accent. The intent of this added clarity is to provide for the ability to interchange like trees for like trees if the need were to arise. An example of this would be the following: The S&D plan reflects a "Bucida Buceras", but due to lack of availability of the tree, or the desire to accommodate a different type of canopy tree, the final plan or Certification of Occupancy could accept the swap out of another Canopy Tree, such as the "Bursera Simaruba".

Excerpt from the Tree List:

Bucida buceras	Black Olive Tree	Canopy
Bucida buceras 'Shady Lady'	Shady Lady Black Olive	Canopy
Bursera simaruba	Gumbo Limbo	Canopy

In furtherance of the interpretation authority granted by the City of Venice Comprehensive Plan and Land Development code, the Zoning Administrator shall have the authority to administratively approve minor modifications to the standards contained with the SMH – Venice PCD, excluding standards related to Density, Building Height, Property Line Buffer Widths, and the addition of permitting uses. Reasonable mitigation measures may be imposed by the Zoning Administrator to limit impacts from the requested adjustment of the standards. Where the PCD master plan identifies areas for hospital/medical uses the developer shall have the option to convert such hospital/medical uses areas to open space uses.

Examples of minor modifications:

- a) Adjust location of ADA ramps to meet sign, lighting, engineering or landscape design needs
- b) Parking stall/tiers circulation and layout of the parking field location in relation to the building would not change, but the circulation and layout of the parking lot could be revised as a minor modification as long as it met the binding master plan landscape and parking details
- c) Adjustments of sidewalks to accommodate above ground features, such as but not limited to, backflow preventers, FPL transformer pads, landscape, lighting, engineering and signage design

The above are listed as examples to qualify the intent of a minor modification.

NOTES

DEVELOPMENT DATA:

- 1 TOTAL PROJECT AREA: 65.44± AC.
- 2 THE SITE IS IN THE MUC FLUC MAX. POTENTIAL
F.A.R. IS $\pm 0 (2,856,566 \pm \text{SQ. FT.}) \pm 3.0 (8,551,699) \text{ SQ. FT.}$

F.A.R.

	NUMBER OF ACRES	AREA WIDE F.A.R.	MIN. DEV. %	MAX. DEV. %	MIN. SQFT	MAX. SQFT	EXISTING AS OF 1/1/17
MUC	290 *	0.5 *	75% *	80% *	4,284,185 *	5,450,998 *	132,251

* PER LU - LR 111 MIXED USE CORRIDOR / AUG

	PHASE 1a	PHASE 1b	PHASE 2	TOTAL
HOSPITAL	363,741 SF (80 BEDS)		2,286,825 SF (BEDS TBD)	
MOB	80,000 SF	140,000 SF		2,850,566 SF
TOTAL	423,741 SF	140,000 SF	2,286,825 SF	

- 3 EXISTING & PROPOSED ZONING IS PEB, PPH
- 4 MAXIMUM STRUCTURAL HEIGHT OF HOSPITAL/MEDICAL OFFICE STRUCTURES SHALL NOT EXCEED 65' * (SEE DESIGN 150' STANDARDS CONTAINED IN THE REZONE APPLICATION REPORT.)
- 5 OPEN SPACE:
MINIMUM OF 20% LANDSCAPED OPEN SPACE SHALL BE REQUIRED FOR THE ENTIRE PROJECT. LANDSCAPED OPEN SPACE MAY INCLUDE BUT SHALL NOT BE LIMITED TO LAKES, WETLANDS, WETLAND BUFFERS, LANDSCAPE BUFFERS, PARKING LOT LANDSCAPING, FOUNDATION LANDSCAPING. (20% OPEN SPACE IS PROVIDED AND SHOWN WITHIN PHASE 1 - (PPL EASEMENT, LANDSCAPE BUFFER, FOUNDATION LANDSCAPE AND PARKING LANDSCAPE))
- 6 SETBACKS: PERIMETER
SETBACKS
FRONT 15
REAR 15
SIDE 15
- 7 SIGNAGE:
NOTE: ALL SIGNS SHALL COMPLY WITH THE DESIGN STANDARDS CONTAINED IN THE REZONE APPLICATION REPORT.
- 8 PROPOSED LAND USE(S):
PHASE 1
 - HOSPITAL (80 ACUTE CARE BEDS)
 - 150,000 GSF MEDICAL OFFICE BUILDING
 - 1,200,000 GSF PER TRAFFIC IMPROVEMENT
- FUTURE POTENTIAL PHASES
 - HOSPITAL
 - HEALTHCARE RELATED FACILITY
 - MEDICAL OFFICE
 - HURRICANE SHELTER
 - MEDICAL, DENTAL AND VETERINARY OFFICE OR CLINIC
- 9 PROHIBITED USES:
 - RESIDENTIAL SINGLE FAMILY AND MULTIFAMILY DWELLINGS
 - OFF-SITE SIGNS
 - ADULT ENTERTAINMENT ESTABLISHMENTS
 - RV, AUTOMOBILE OR TRUCK SALES (NEW AND/OR USED)
- 10 PARKING:
HOSPITAL: 1.5 SPACES PER BED (1.5 x 80) = 120 SPACES
MEDICAL OFFICE: 1 SPACE PER 150 SQFT OF NON STORAGE FLOOR AREA (80,000 / 150) = 533 SPACES
TOTAL REQUIRED PHASE 1a PARKING = 653 SPACES
- 11 STANDARDS:
PPH
IF A STANDARD IS NOT SHOWN OR INCLUDED IN THE PEB, STANDARDS OF THE CITY'S LAND DEVELOPMENT CODE WILL APPLY.

SARASOTA MEMORIAL HOSPITAL - VENICE

PART OF SECTION 35, TOWNSHIP 38 SOUTH, RANGE 19 EAST,
SARASOTA COUNTY, FLORIDA

A DEVELOPMENT BY
**SARASOTA COUNTY
PUBLIC HOSPITAL BOARD**

1700 SOUTH TAMiami TRAIL
SARASOTA, FLORIDA, 34239
(941) 917-2048



LOCATION MAP



SITE MAP

LAND USE	AREA AS SHOWN (SHEET #0)	% AS SHOWN (SHEET #0)	REQUIRED AREA (SHEET #0)	REQUIRED % (SHEET #0)
HOSPITAL/MOB/PARKING			52.36	80%
PHASE 1 **	48.34	74%		
PHASE 2	17.10	26%		
PHASE 1 OPEN SPACE TOTAL			13.08	20%
WETLANDS/PL EASEMENT	11.83	18%		
LAKES	4.50	7%		
DRY DETENTION	2.15	3%		
OTHER OPEN SPACE ***	9.69	15%		
TOTAL PCD	63.44	100%	65.44	100%

** PHASE 1 DEVELOPABLE AREA IS GREATER THAN PHASE 1 AREA IN THIS TABLE
*** SEE NOTE #0

INDEX TO SHEETS

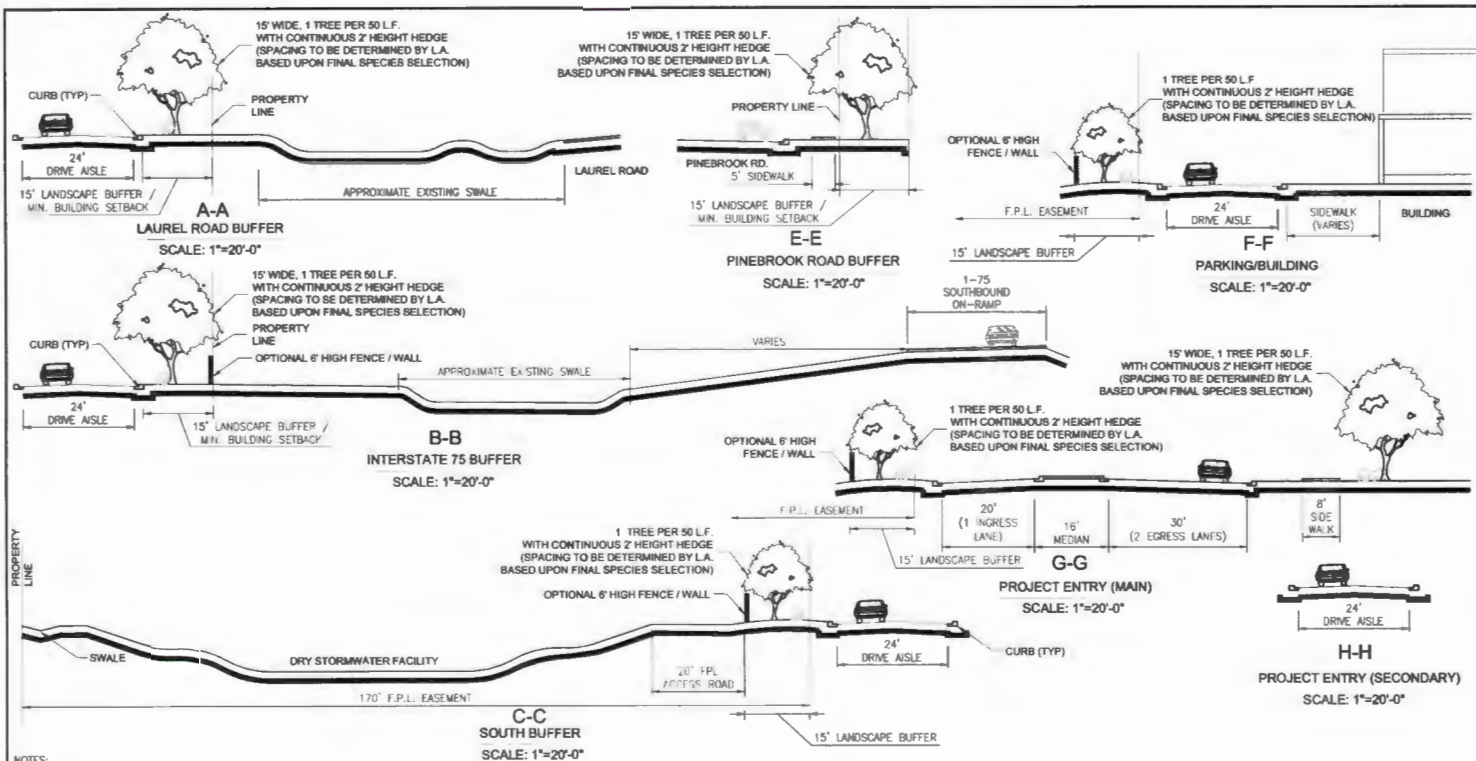
SHEET NO.	DESCRIPTION
1	COVER SHEET
2	CONCEPTUAL SITE PLAN
3	SECTIONS
4	PARKING SECTIONS
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STATUS : REVISIONS		
PROJECT SURVEYOR	PROJECT PLANNER	PROJECT MANAGER
Robert S. Cunningham	KATE LABRIN, AICP	WILLIAM D. LABRIN, AICP, PLS
PAGE NUMBER		FLORIDA LICENSE NO. 79447
DATE:	CHECKED BY:	



6900 Professional Parkway East, Sarasota, FL 34240-8414
Phone 941-907-6900 • Fax 941-907-6910
Certificate of Authorization #27013 • www.stantec.com

PROJECT NUMBER	INDEX NUMBER
215614375	
DATE	
11/2018	
PAGE 14	
CD-215614375-002-R202CY	

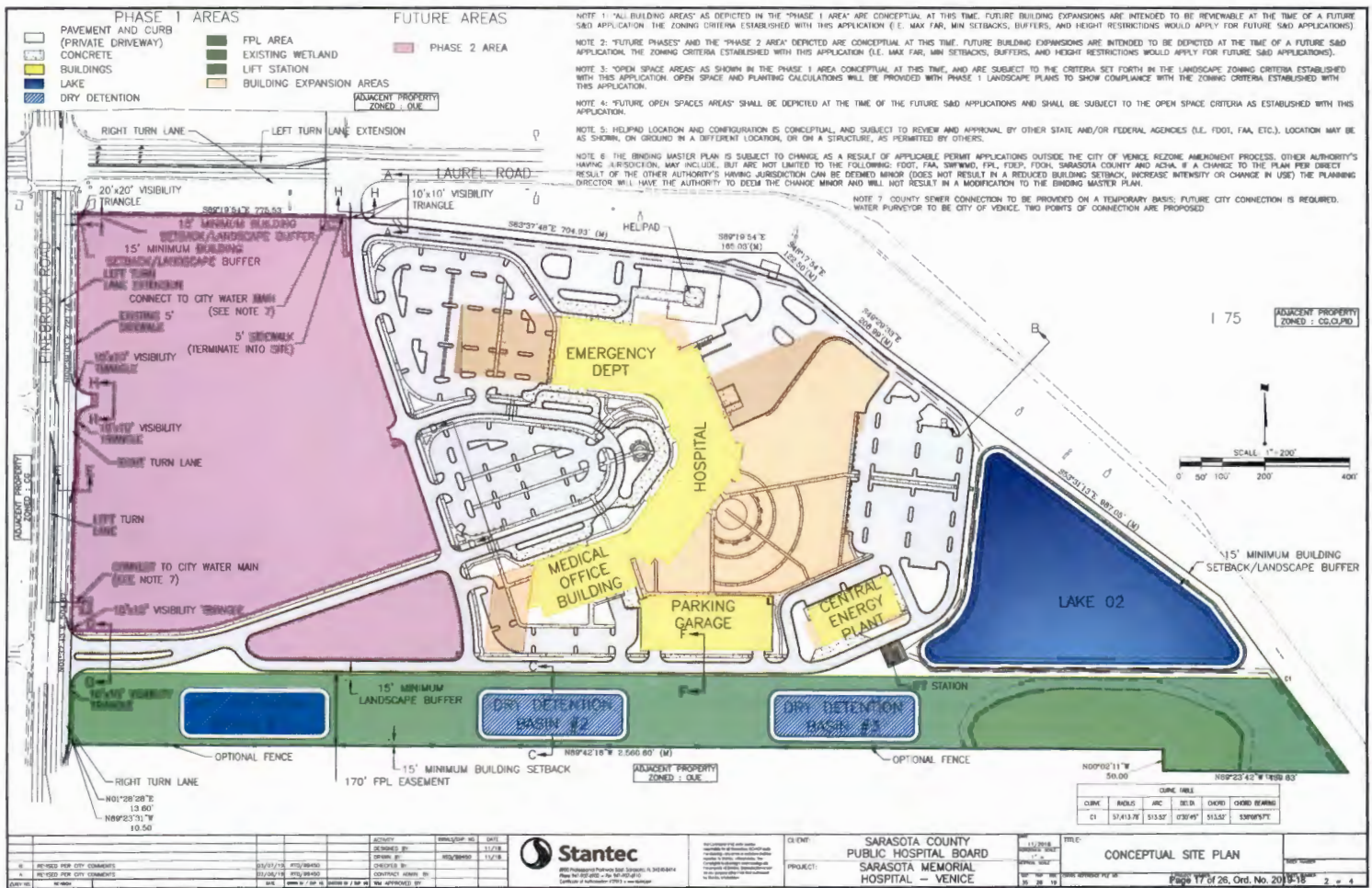


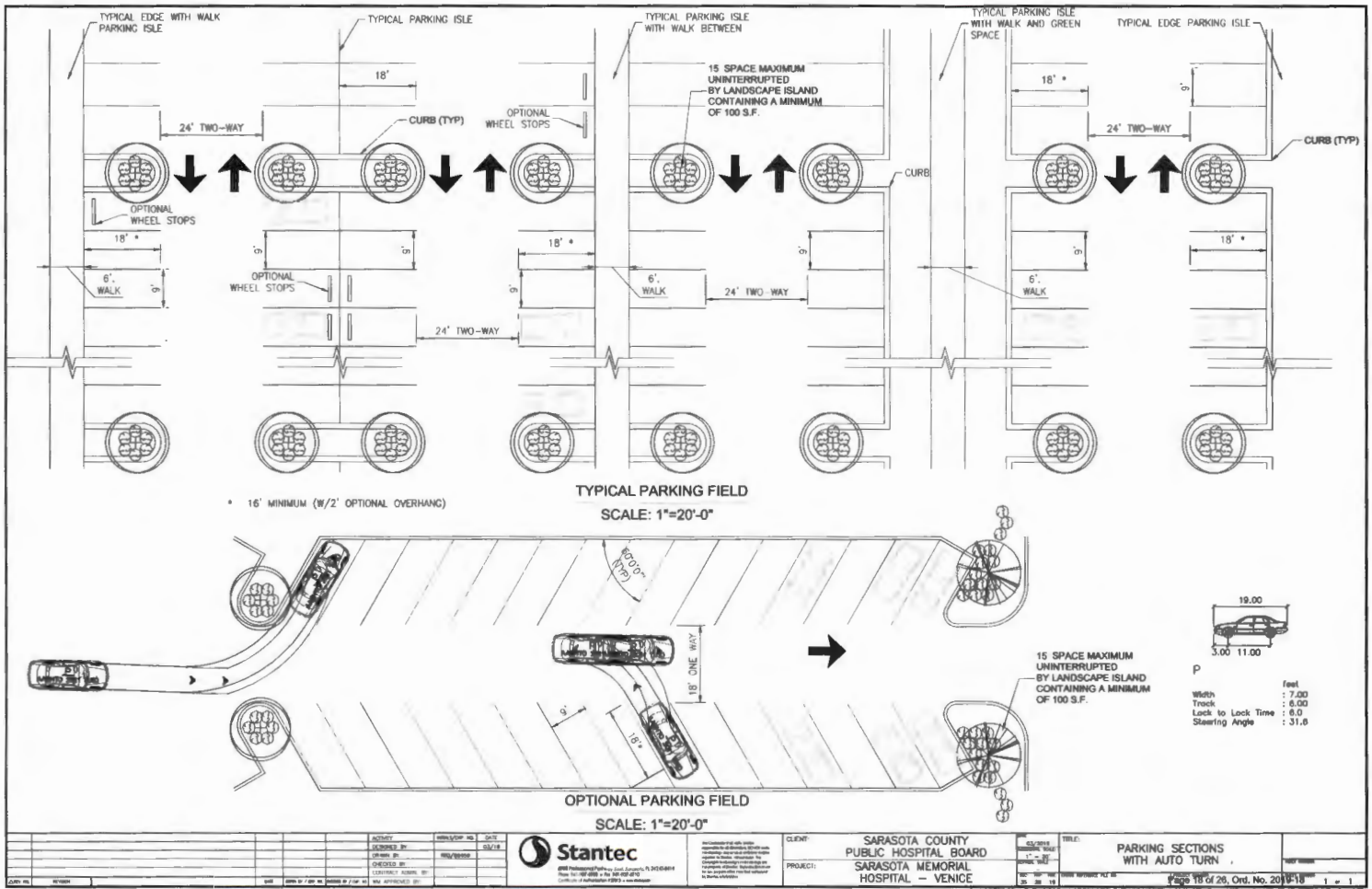
NOTES:

- PLANT QUANTITIES NOTED WITHIN THESE BUFFER CROSS SECTIONS MAY BE AVERAGED OVER THE ENTIRE BUFFER LENGTH TO ALLOW FOR CLUSTERING OF REQUIRED MATERIALS.
- ANY MULTI TRUNK TREE MEETING THE 10' HEIGHT SHALL COUNT AS A REQUIRED OR REPLACEMENT TREE.
- PALMS SHALL COUNT AS REQUIRED TREES WITH REPLACEMENT TREES WITHIN ALL AREAS INTERIOR TO PERIMETER BUFFERS TO FULFILL THE REQUIREMENTS OF SECTION 54-509 (SARASOTA COUNTY) AT A 1:1 RATIO.
- PLANTINGS WITHIN 6' OF CITY OF VENICE PUBLIC WORKS SHALL COMPLY WITH SECTION 86-431(b).
- TREE LOCATIONS AND SPECIES MAY BE MODIFIED BASED UPON FIELD CONDITIONS WITH APPROVAL BY LANDSCAPE ARCHITECT.

SEE NARRATIVE FOR TREE LIST

<p>PROJECT: SARASOTA COUNTY PUBLIC HOSPITAL BOARD SARASOTA MEMORIAL HOSPITAL - VENICE</p> <p>DATE: 11/13/2018 SCALE: 1"=20'-0"</p> <p>DESIGNED BY: [blank] CHECKED BY: [blank] DATE: 11/13/2018</p> <p>CONTRACT NO.: [blank] SHEET NO.: [blank]</p>	<p>PROJECT NO.: [blank] SHEET NO.: [blank]</p>	<p>Stantec</p> <p>10000 Highway 19, Suite 200, Venice, FL 33596 Phone: 941.201.2000 • Fax: 941.201.2001 stantec.com • stantec.com/stantec-usa</p>	<p>CLIENT: SARASOTA COUNTY PUBLIC HOSPITAL BOARD SARASOTA MEMORIAL HOSPITAL - VENICE</p> <p>PROJECT: [blank]</p>	<p>TITLE: SECTIONS</p> <p>DATE: 11/13/2018 SCALE: 1"=20'-0"</p> <p>Page 18 of 26, Ord. No. 2018-18</p>
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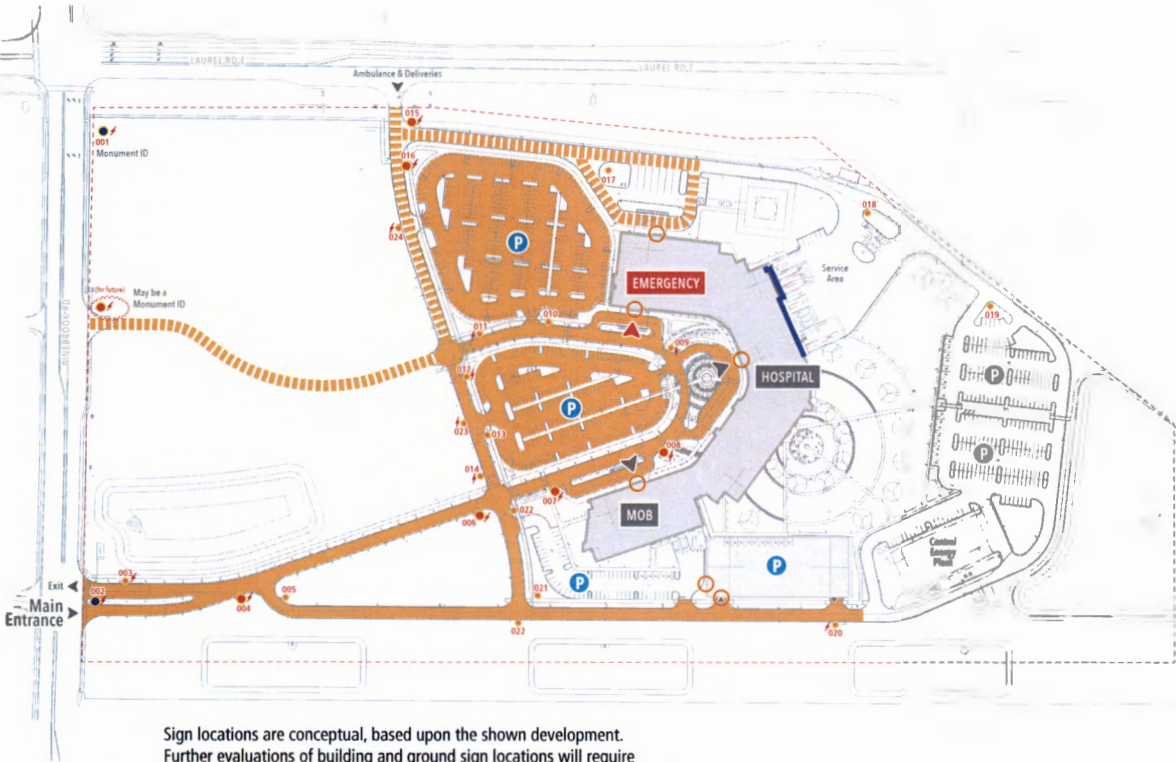
Exterior Site Plan
Preliminary Sign Locating

LEGEND

- Monument Sign
- Larger Wayfinding Signs
- Smaller Wayfinding Signs
- On-building Entrance Signs
- ⚡ Illumination
- ▬ Primary Pathways
- ▬ Secondary Pathways

DATE DESCRIPTION

corbindesign
People get lost. We fix that.™
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Traverse City, MI 49684
231.947.1236
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Sign locations are conceptual, based upon the shown development. Further evaluations of building and ground sign locations will require minimal flexibility due to field conditions and building orientation.

PROPOSED SMH LAUREL ROAD ACUTE CARE PCD MODIFICATION TO STANDARDS

1. A modification to the requirements of **Sec. 86-412 (a)**, concerning the minimum width of a parking space, is requested. The proposed modification is to reduce the minimum width from ten feet to nine feet.

The proposed parking space width is consistent with the minimum requirements of other nearby jurisdictions and will reduce the amount of impervious surface area in parking fields. For example, the 1220 parking spaces proposed, at 9 ft wide instead of 10, reduces the amount of impervious area by approximately 0.50 acres. The design intent for the campus is to provide valet services for the majority of visitors, especially those who may be suffering from a short term or long-term illness, and to provide convenient customer service, especially those unfamiliar with the campus. Furthermore, significant pedestrian paths are proposed in and around all parking areas to support a safe and pedestrian safe environment for all those visiting the campus.

2. A modification to the requirements of **Sec. 86-431 (b)**, concerning selection of species to use in landscape buffers and open space areas, particularly the consideration of palms as trees, is requested. The proposed modification is intended to allow for spatially appropriate species selection within the site. A list of trees to be approved with the Binding Master Plan is attached to this narrative. The selection of appropriate tree species will offer a compatible landscape solution for a built healthcare environment. All trees selected for the site will comply with the standards of Sec. 86-431(b), such as 10 feet in height and 4-foot spread at time of planting and will achieve at least a 15 foot spread.
3. A modification to the requirements of **Sec. 86-461 (2)** concerning landscaping design standards and submission of plans, is requested. The Binding Master Plan includes cross-section details for roadway buffers, perimeter buffers, and parking field planting. The requested flexibility for perimeter and interior landscaping is intended to support wayfinding within the site, promote visibility, particularly visual recognition of destinations. The proposed design alternatives are also intended to promote consistent visual orientation of structures, providing compatible landscape solutions for a built healthcare environment, while promoting exposure for open vistas from nearby travel ways to provide visual recognition of an iconic gateway to the City of Venice. The landscape theming is intended to be cohesive with, and complimentary to, hardscape elements, as well as the architecture of the hospital and medical buildings.

Sec. 86-461 (2) Screening; plant material. The area shall be so designed, planted and maintained as to be 80 percent or more opaque between two and six feet above average ground level when viewed horizontally. Plantings shall be of a size and type which will ensure the meeting of the 80 percent opacity requirement within no longer than 12 months of the date of first planting. Where questions may arise as to the suitability of proposed plant materials to meet this requirement, final determination of suitability shall be made by the director of public works.

Regarding requirements for opacity (86-461.(2)), the standards established in the Land Development Code are subjective, and have a temporal element that becomes a challenge for monitoring purposes. Additionally, according to the Code, the Public Works Director is to make the final determination of suitability. For those reasons, and in order to simplify the compliance review

process, specific planting standards are proposed for buffers, in lieu of a commitment to opacity requirements and plant heights over a twelvemonth timeframe. It is intended by the standards proposed to provide a Quantitative over Subjective Design and Review requirement.

4. **A modification to the requirements of Sec. 86-411 (8) (9) & (10)**, concerning landscaping design standards and submission of plans, is requested. The Binding Master Plan includes cross-section details for roadway buffers, perimeter buffers, and parking field planting. The requested flexibility for perimeter and interior landscaping is intended to support wayfinding within the site, promote visibility and visual recognition of destinations. The proposed design alternatives are also intended to promote a consistent visual orientation to structures, providing compatible landscape solutions for a built healthcare environment and provide open vistas from nearby travel ways to an iconic gateway to the City of Venice. The landscape theming is intended to be cohesive with, and complimentary to, hardscape elements, as well as the architecture of the hospital and medical buildings.

Sec. 86-411 (8) *Landscaping between parking tiers. Where tiers of interior parking spaces are proposed to abut one another, the facilities shall be designed so as to have an area of not less than five feet in width maintained between such tiers, which shall be landscaped in accordance with this chapter.*

Sec. 86-411 (9) *Landscaping of other areas. Facilities shall be constructed so that interior portions of off-street vehicular facilities not utilized specifically as a parking space or maneuvering, or other vehicular use area shall not be paved but shall be landscaped in accordance with this chapter.*

Sec. 86-411 (10) *Curb stops. Facilities shall have curbs or motor vehicle stops or similar devices so as to prevent vehicles from overhanging on or into adjacent property, or from encroaching into required landscaped areas.*

The design alternative proposed to Sec 86-41(8 and 9) is requested in order to provide safe and enhanced pedestrian corridors/paths between the parking tiers in lieu of pedestrians in potential conflict with vehicular movements within drive aisles. The parking areas proposed will contain a special and significant volume of patrons requiring assistance and safe access to the medical facilities proposed. Any reduction of landscape area within the “interior” landscape islands will be compensated in area through the significant buffering around the parking areas.

The design alternative proposed to Sec 86-41(10) is requested in order to reduce the potential tripping hazards in the parking fields proposed. As stated above, the population of visitors to the facility will contain a significant amount of injured and/or disabled pedestrians which will require specific attention to accessibility to the facilities proposed.

5. Request for a modification from **Sec. 86-438 (1 & 2)**. With the Phase 1 development of the campus, the infrastructure is intended to be extensive and service the campus for the foreseeable future.

There are many site design considerations which have been and will continue to be analyzed to accommodate the use of the Hospital and Medical campus which far exceeds the needs of a typical commercial development. For instance, instead walking through the parking aisle in a standard or typical parking lot design, safe pedestrian sidewalks and crosswalks traversing the majority of the parking fields are proposed. This site design is thoughtful of the high volume of patients and visitors

who will require a safe, and clearly marked pedestrian pathway to and from the hospital, ER and Medical office building.

Sec. 86-438 (1) *Off-street parking areas in excess of 1,500 square feet or five off-street parking spaces shall have at least ten square feet of interior landscaping for each parking space, excluding those spaces abutting a perimeter for which landscaping is required by other provisions of this division. Other vehicular use areas in excess of 1,500 square feet shall have ten square feet of landscaped area for each 500 square feet or fraction thereof of vehicular use area.*

Sec. 86-438 (2) *Each separate landscaped area shall contain a minimum of 100 square feet, with a minimum dimension of at least five feet, and shall include at least one tree, with the remaining area adequately landscaped with shrubs, ground cover or other landscaping material. The total number of trees shall not be less than one for each 100 square feet or fraction thereof of required interior landscaping area. Such landscaped areas shall be located in such a manner as to divide and break up the expanse of paving and at strategic points to guide traffic flow and direction. Where a landscaped area between abutting tiers of parking is provided, one tree shall be provided for each 50 linear feet of such landscaped area.*

Sec. 86-438 (3) *In other vehicular use areas where the strict application of this section will seriously limit the function of the area, such as off-street loading areas, the required landscaping may be located near the perimeter of the paved area. Such required interior landscaping which is relocated as provided in this subsection shall be in addition to the perimeter landscaping requirements.*

The proposed zoning standards for the parking lot design is intended to meet the intent of 86-438 (1&2) but modifies and simplifies the requirement in order to accommodate the specific needs of the hospital campus environment. Sec 86-438(3) generally provides for the mechanism of the proposed design standards and alternatives provided, but in way of which each application would require to be re-analyzed. The design standards provided as an alternative to Sec 438 (1) and (2) provide a simplistic quantitative analysis for future applications (which are likely to be often with a medical campus) whereby the minimum square footage of landscape area is consistent with Sec 86-438 (2), but with the added quantitative criteria of a maximum of 15 uninterrupted spaces. Additionally, pedestrian walks are currently proposed, as well as significant way-finding signage, lighting and healthy landscape buffers to the parking areas. In lieu of less desirable and less functional landscape islands that are not as beneficial to the maneuverability and buffering of the parking fields, the proposed zoning standard limits the maximum number of parking spaces in a row, with a minimum interior landscape island area requirement of 100 SF. This is intended to ensure significant trees can be planted in these areas.

6. Request for a modification from **Sec. 86-461 (1)** and **Sec 86-437 (1)**. This request for modification applies only to the South Property Line. The existing 170-ft wide FPL easement extends from the south property line north for 170-ft. The FPL ROW Use Guidelines would not allow for significant landscape features as the maximum heights of the plants are significantly reduced below 14 ft in height to limit future growth of vegetation in the FPL easement which may hinder access and maintenance of the Transmission lines in the future. Furthermore, the buffer location as shown would allow for the possibility of a fence to limit the visibility of features from the south property line into the campus.

Sec. 86-461 (1) Dimensions. The landscaped buffer area shall not be less than ten feet in width measured at right angles to property lines and shall be established along the entire length of and contiguous to the designated property lines.

Sec 86-437 (1) Where such area abuts property zoned or, in fact, used primarily for residential or institutional purposes, for that portion of such area not entirely screened visually by an intervening structure or existing conforming buffer from an abutting property, a landscaped buffer shall be provided in accordance with this division. **Such landscaped buffer shall be located between the common lot line and the off-street parking area or other vehicular use area exposed to the abutting property so that the purpose of screening the off-street parking area or other vehicular use area is accomplished.** The vertical requirement for such landscape buffer area may be reduced to not less than three feet by the administrative official where the only vehicular use area to be screened is a driveway not exceeding ten feet in width.

Cross section C-C of the Binding Master Plan identifies the landscape buffer adjacent to the project drive aisle, rather than at the edge of the property. This site design alternative is intended to give adjacent residents a greater sense of separation from the hospital campus. Placing the buffer closer to the use also enables the easement to remain open for use by Florida Power & Light. The provision of an optional wall is intended to provide noise and illumination spill mitigation associated with movement of people and vehicles throughout the campus.

7. **Request for a modification to Section 86-412 –** One-way parking aisle width reduced to 18 ft from 20 ft per the code. The proposed reduced aisle width does not reduce the maneuverability of the driver, but instead enhances the pedestrian experience. Furthermore the reduction of impervious area allows for additional pervious landscape areas.

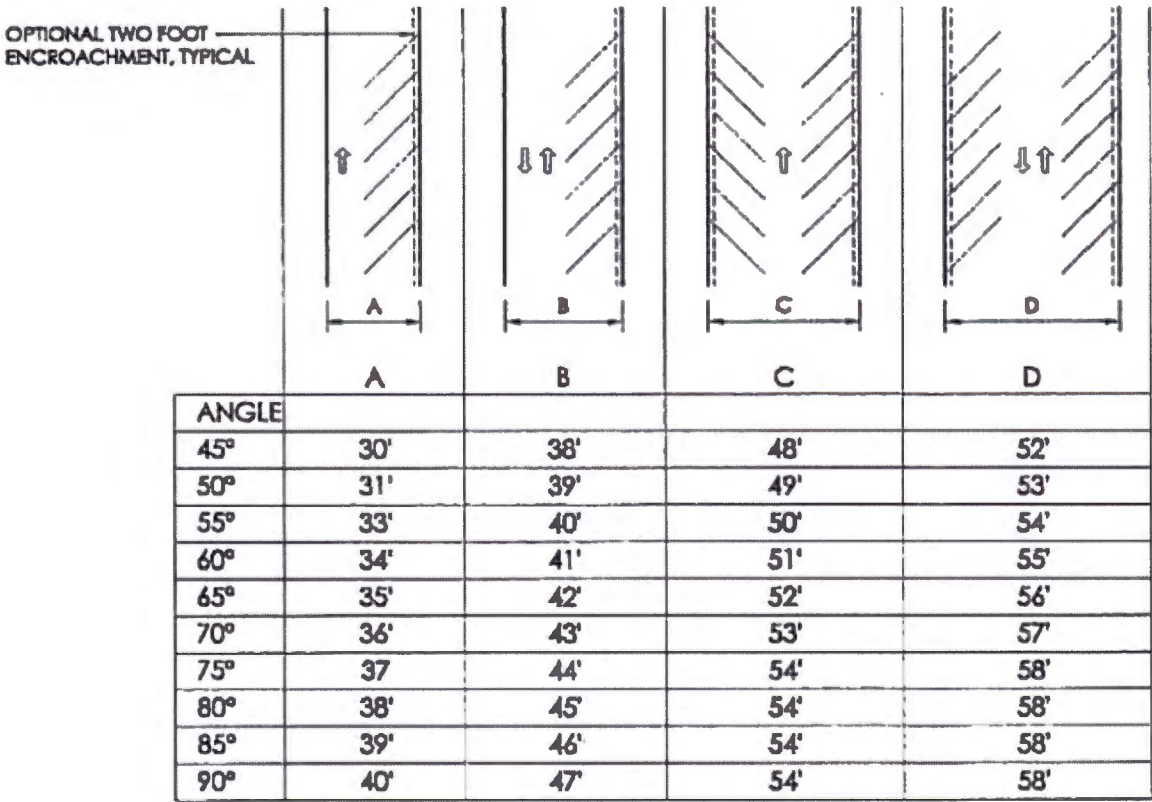
As indicated below, the only dimension standard with Code Section 86-412 requested to be modified is the one way aisle width from 20 feet to 18 feet.

Sec. 86-412. - Dimensional standards for parking areas.

(a) Each parking space shall be a minimum of ten feet in width by 18 feet in length. Handicapped parking spaces shall comply with state statutes. Minimum aisle width shall be as follows:

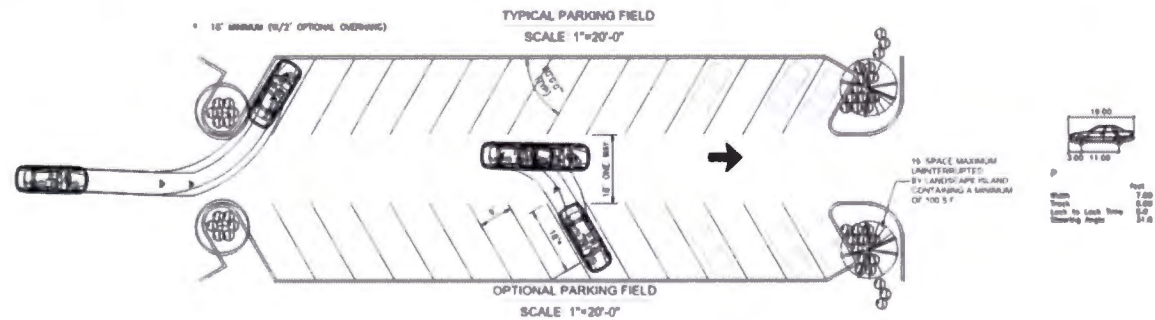
Angle of Parking	Aisle Width (feet)	
	One-Way	Two-Way
Parallel	✗ 18	20
30°	✗ 18	22
45°	✗ 18	22
60°	✗ 18	24
90°	✗ 18	24
Entrance/exit	20	24
Parking access drives	✗ 18	24

As reference the City of Sarasota Code Section-209, for a one way 45° a minimum drive aisle of 12 (48 feet total aisle width – 18 feet for each side) feet is allowed and up to a 90° a minimum 18 feet (54 feet total aisle – 18 feet for each side) is allowed.



Minimum Parking Space Dimensions

Below is a representative exhibit showing the maneuverability of a vehicle utilizing an 18-foot wide drive aisle.



8. A modification to code **Sec. 85-520.a.(1-2)** to remove the requirement to construct a sidewalk along a portion of the Property that abuts the FDOT Limited Access ROW. Approximately 1000 LF of sidewalk is not proposed to be constructed due to the safety concerns with the FDOT Limited Access and Full Access ROW. Currently, there are no plans to extend pedestrian access across the Laurel Rd Overpass. As an alternative to providing a 5ft sidewalk along this frontage, the 5-ft sidewalk is proposed to terminate into the new Hospital Campus, providing a safe terminus into the site, and limiting the potential for a Pedestrian to walk to the intersection of the I-75 SB ON-ramp.
9. Modifications to monument/ground sign designs as outlined under **Sec. 86-402(b)(1)** are requested. Standards request all signage include a base, column, and cap design. Monument signs may or may not include these details, as the signage will most likely be designed to complement the building architecture. Guide and parking signs will not necessarily include the side column or cap details as they require a more simplistic design and are typically placed in areas with tighter footprints.
10. Modifications to sign lighting standards as outlined under **Sec. 86-402(d)** are requested to allow the identification of Emergency, when included on any sign type, to be internally illuminated such that the background glows red with white text. This is a healthcare industry standard for the treatment of Emergency, increasing recognition of the destination and improving safety for navigating in an emergent situation.
11. Changeable copy sign restrictions from **Sec. 86-402(e)** have limitations regarding the timing of messages, size of text, and use of graphics. A modification to these limitations is requested allowing up to 75% of the maximum sign face area to be digital, displaying static graphic images, and messaging cap heights lower than six inches. The hospital would like to display static graphics created internally to educate the community on health-related issues and opportunities. This may include messaging smaller than 6", such as 3-4" cap heights, to not distract from the key wayfinding information that will also be displayed on the sign.
12. Modifications to placement of signs, as outlined in **Sec. 86-402(h)** are requested to allow for proper sign placement at decision points within the tight boundaries between curbs, sidewalks, and utilities. When necessary this means signs may be placed less than five feet from a driveway, curb, or edge of pavement.
13. Modifications to the hospital signage restrictions as outlined under **Sec. 86-403(b)(2)a** are requested. Alterations will allow for more flexibility to properly identify site entrances from public streets, provide directions at decision points, and unmistakably identify public and non-public building entrances and parking. Wayfinding on a hospital site requires taller sign sizes, larger message height, and more frequent sign placement to safely direct patients and visitors to their destination, keeping in mind emergency situations and a visitor's typically distracted state of mind. Sign height is increased to allow better visibility in traffic. Identification and direction giving signs may be internally illuminated to provide optimal visibility during all weather conditions and 24-hours a day. Larger on-building signs pull patients and visitors from long distances,

reconfirming their arrival point. Entrances may include multiple signs to provide visibility from the inner circulation loop, drop-off lane, and parking. Guide signs and parking identification signs need to be larger than 12 sq ft to properly list multiple destinations at decision points, using cap heights appropriate for the speed of traffic, distance away, and number of destinations on the sign.

14. Modifications to the allowable size of a sign facing the I-75 right-of-way as outlined in **Sec. 86-403(b)(2)a** are requested. Hospitals provide emergency and repeating care for local and visiting patients. Allowing properly sized logo identification on the building that is readily visible to passing and exiting traffic will improve the wayfinding and vehicular safety for patients and visitors not familiar with the area. The sign may be placed on a backer panel to allow for easier and cleaner updates, should the facility be rebranded.