Memo

DATE: September 24, 2010

TO: City Manager

FROM: Community Sustainability Division

APPLICATION: OCP10-0008 / TA10-0007 / Z10-0040

LOCATED AT: 2149, 2159, 2169, 2179, 2189 Pandosy Street

John Balla APPLICANT: Site 360 Consulting Inc. (Andrew Bruce)

OWNER: John & Alana Marrington

City of

Kelow

PURPOSE: To amend the Official Community Plan (OCP) to add the Health District as a new Future Land Use designation and to amend the Future Land Use for the subject properties from Multiple Unit Residential - Low Density and Single Two Unit Residential to the new Health District designation in order to accommodate the proposed mixed use development;

To consider a Text Amendment to add a new zone proposed to be the HD1 - Health District 1 Zone and to add the "Retail Stores, Health Products" definition to Zoning Bylaw No. 8000 and to add the HD1 - Health District 1 zone to Sign Bylaw No. 8235;

To rezone the subject properties from RU6 - Two Dwelling Housing to a new HD1 - Health District 1 zone in order to accommodate the proposed mixed use development.

EXISTING OCP DESIGNATION:Multiple Unit Residential - Low DensityPROPOSED OCP DESIGNATION:Health District (new designation under consideration)

EXISTING ZONE:RU6 - Two Dwelling HousingPROPOSED ZONE:HD1 - Health District 1 (new zone under consideration)

REPORT PREPARED BY: Alec Warrender

1.0 <u>RECOMMENDATION</u>

THAT OCP Bylaw Amendment No. OCP10-0008 to amend Map 19.1 of the *Kelowna 2020* - Official Community Plan Bylaw No. 7600 by adding Health District as a new designation and by changing the Future Land Use designation of Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, ODYD, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L.14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. from the Multiple Unit Residential - Low Density and the Single Two Unit Residential designations to the Health District, as shown on Map "A" attached to the report of the Land Use Management Department, dated September 24, 2010, <u>not</u> be considered by Council;

AND THAT Text Amendment No. TA10-0007 to add the proposed HD1 - Health District 1 zone and the Retail Stores, Health Products definition Zoning Bylaw No. 8000 as outlined in

Schedule "A" of the report of the Land Use Management Department dated September 24, 2010 <u>not</u> be considered by Council;

AND THAT Text Amendment No. TA10-0007 to add the HD1 - Health District 1 zone to Sign Bylaw No. 8235 as outlined in Schedule "A" of the report of the Land Use Management Department dated September 24, 2010 <u>not</u> be considered by Council;

AND FURTHER THAT Rezoning Application No. Z10-0040 to amend the City of Kelowna Zoning Bylaw No. 8000 by changing the zoning classification of Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, ODYD, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L.14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. from the RU6 - Two Dwelling Housing zone to the HD1 - Health District 1 zone <u>not</u> be considered by Council;

2.0 SUMMARY

The applicant has made application for an Official Community Plan amendment to change the future land use designation of the subject properties from the existing Multiple Unit Residential - Low Density and Single Two Unit Residential designation to the newly proposed "Health District" designation. A Text Amendment application has been submitted in order to add the proposed HD1 - Health District 1 to Zoning Bylaw No. 8000. The applicant has also applied to rezone the subject properties from the existing RU6 - Two Dwelling Housing zone to the proposed HD1 - Health District zone in order to permit the construction of the proposed mixed-use development. A Development Permit for the form and character of the proposed land use receive favourable consideration.

3.0 ADVISORY PLANNING COMMISSION

At a meeting held on August 17th, 2010 the APC passed the following motion:

THAT the Advisory Planning Commission support Official Community Plan Bylaw Amendment Application No. OCP09-0008 for 2149, 2159, 2169, 2179 & 2189 Pandosy Street to amend the Official Community Plan to add the Health District as a new Future Land Use designation and to amend the Future Land Use for the subject properties from Multiple Unit Residential - Low Density and Single Two Unit Residential to Health District in order to accommodate the proposed mixed use development.

THAT the Advisory Planning Commission support Text Amendment Application No. TA10,0007 for 2149, 2159, 2169, 2179 & 2189 Pandosy Street to add the proposed HD1 - Health District 1 Zone and the "Retail Stores, Health Products" definition to Zoning Bylaw No. 8000.

THAT the Advisory Planning Commission support Rezoning Application No. Z10-0040 for 2149, 2159, 2169, 2179 & 2189 Pandosy Street in order to rezone the subject properties from RU6 - Two Dwelling Housing to HD1 - Health District 1 in order to accommodate the proposed mixed use development.

Anecdotal Comment

While the APC supports the OCP Amendment, they would like the Applicant and City to have further discussion on the density increase in terms of supportive housing. Members of the Public referenced the Ronald McDonald House and the APC would like to see those who come

here for a need to be accommodated in a similar manner. Furthermore, as the Health District designation develops, to further explore consideration for expansion of the current boundary; expanding northwards to Springfield, Cadder and Richter to connect the east and west roads. While the Advisory Planning Commission supports the Rezoning Application, they would like the Applicant and City to address the above-noted items.

4.0 COMMUNITY HERITAGE COMMISSION

While formal comment from the CHC is not required for this application, the development proposal was reviewed at the September 9th, 2010 CHC meeting as one of the properties is on the City's Heritage Register. The following comment was provided by the CHC:

- Prefer that the house be preserved in its original location but liked that the heritage house will be incorporated in the project as noted in the plan.
- Raised concern with the projects massing and how it will be dealt with and how it will relate to the Abbott Street Heritage Conservation Area.
- Additional control on setbacks are important to provide a significant setback from the streets and adjoining neighbourhood as significant massing is proposed.
- Indicated that while development is anticipated in this area a more sensitive height profile to the Abbott Street Heritage Conservation and the adjacent neighbourhood would be appropriate.
- Commented that they were pleased to see this application presented to them for input prior to the project commencing.

5.0 BACKGROUND - DRAFT 2030 OCP HEALTH DISTRICT

As part of the 2030 OCP review process a 'Health District' is being contemplated, although it does not encompass the subject properties. The proposed Future Land Use change considered in the Draft OCP would be from a Residential designation to a Health District designation.



The intent is to allow health related uses in this area including health services such as clinics and labs, institutional uses related to the hospital, temporary accommodation (such as a Ronald McDonald House) and multi unit residential uses. The Health District as proposed in the Draft OCP would be located as shown in light blue on the above noted map.

6.0 PROPOSAL

The applicant is proposing to develop the subject properties with a 4 storey mixed use building with 43 residential units and approximately 1152m² of commercial space located on the ground floor. The proposed development would provide a mix of ownership and rental units, and the rental units would be for both short and long term tenants. The applicant has indicated that the commercial component of the project consists of 7 Commercial Retail Units (CRU's) and a Food Primary Area with a maximum of 32 seats. The applicant's intention is to provide a range of health related commercial uses within the main floor of the proposed development. Notably, the property located at 2189 Pandosy Street is on the City of Kelowna's Heritage Register, and this proposal aims to incorporate the heritage home into the project build-out.

The proposed purpose of the HD1 - Health District 1 zone, (which if adopted will potentially be available to other properties within the City), is to create a zone that provides services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs that include staff, clients, patients and their families. This zone will provide for a range of institutional, commercial and residential uses. In particular the proposed zone includes the following commercial uses: Personal Service Establishments, Emergency and Protective Services, Extended Medical Treatment Facilities, Health Services, Retail Stores, Health Products, Food Primary, Apartment Hotel and Hotel.

The HD1 zone contemplates a maximum Floor Area Ratio (FAR) of 1.5, which is a density profile similar to the RM5 - Medium Density Multiple Housing Zone and the C4 - Urban Centre Commercial Zone. The proposed height of 16.5m / 4 storeys would also be comparable to a RM5 or C4 form of development. The underground / under-building parking access will be from Royal Avenue, while the loading area will be accessed from the rear lane. The parking podium will be partially underground and above ground and envelope the entire site.

A 'Zoning Comparison Table' is attached that compares the proposed development to the RM3 - Low Density Multiple Housing zone, the RM5 - Medium Density Multiple Housing zone and C4 - Urban Centre Commercial zone. This provides the opportunity to compare the proposed development and the Health District 1 zone to the City's existing zones.

6.1 Site Context

The subject properties are located along Pandosy Street directly across from the Abbott Street Heritage Conservation Area adjacent to an established Single Two / Unit Neighbourhood. The South Pandosy Town Centre is located approximately 1 km to the South and the Hospital is located to the SW of the property and the future hospital expansion is to the South. The adjacent land uses are as follows:

Direction	Zoning Designation	Land Use
North	RU6 - Two Dwelling Housing	Residential
East	RU6 - Two Dwelling Housing	Residential

South	RU6 - Two Dwelling Housing	Residential
	P1 - Major Institutional	Future Hospital
West	RU1 - Large Lot Housing	Residential

6.2 <u>Subject Property Map</u>

Royal / Pandosy / Glenwood



7.0 CURRENT DEVELOPMENT POLICY

Staff recommends that the APC public process should be considered appropriate consultation for the purpose of Section 879 of the *Local Government Act*, and that the process is sufficiently early and does not need to be further ongoing in this case. Furthermore, additional consultation with the Regional District of Central Okanagan is not required in this case.

Staff have reviewed this application and do not have the information required to determine if the application can proceed without affecting the City's financial plan plan. To adequately assess the impact of this project a Traffic Impact Study is required. At this point Staff are in a position to state that the application may <u>NOT</u> move forward without affecting either the City's financial plan or waste management plan.

7.1 Considerations in Reviewing Development Applications (OCP Chapter 9 - Commercial)¹

Location of New Commercial. Direct new commercial ventures to locate in areas designated for commercial purposes (see Map 19.1);

Urban Centre Focus. Encourage new retail, service, office, hotel/motel, and entertainment facilities to locate within the Urban Centres, in accordance with the provisions of Map 6.2 and the policies of Chapter 6;

Commercial Uses within Heritage Buildings. Consider commercial uses within heritage buildings located in areas not designated as Commercial on Future Land Use Map 19.1, provided that a Heritage Revitalization Agreement is negotiated with the City and provided that the project meets the criteria established for sensitive neighbourhood integration;

Office Building Locations. Encourage office buildings providing more than 929 m² (10,000 sq. ft.) of leasable space to locate in the City Centre or the Town Centres. This policy does not include offices integral to business park / industrial uses and "corporate offices" allowable under relevant industrial zones;

Transportation Impacts of Large-scale Commercial. Require that necessary transportation system improvements be developed in conjunction with large new commercial facilities, while recognizing that in some instances transportation constraints may preclude the introduction of new facilities;

Objectives for Commercial Development (OCP Chapter 9)²

- All development should be an appropriate response to its physical context, or anticipated future context where an area is designated for increased density or land use transition in the OCP.
- All development should provide visual interest and human scale.
- All development should contribute to a sense of community identity and sense of place (integration of development within larger community, belonging, community cohesiveness).
- All development should facilitate access by, and minimize conflicts among pedestrian, bicycle, and vehicular modes of transportation (access, mobility).
- All development should promote safety and security of persons and property within the urban environment (CPTED).

7.2 Considerations in Reviewing Development Applications (OCP Chapter 8 - Housing)³

Housing Agreements. Support the use of housing agreements to assist in creating affordable and special needs housing.

Rezoning to Higher Densities. Consider supporting an OCP amendment and rezoning application for residential densities greater than those provided for on the Generalized

¹ Official Community Plan, Pages 9-2 - 9-4

² Official Community Plan, Page 9-8

³ Official Community Plan, Pages 8-4 - 8-7

Future Land Use Map 19.1 where a portion of the proposed units are available for affordable, special needs or rental housing identified to be in short supply (guaranteed through a Housing Agreement). To mitigate the neighbourhood impact of higher densities, it is important that:

- supporting infrastructure and park land is sufficient to accommodate the proposed development (or the developer is prepared to upgrade the necessary infrastructure and park land); and
- the proposed densities do not exceed the densities provided for on Map 19.1 by more than one increment (e.g. medium density multiple units might be entertained where low-density has been provided for, and low-density multiple units might be entertained where single/two unit residential densities have been provided for); and
- the project be sensitively integrated into the surrounding neighbourhood, with no more than a one-storey height gain between the proposed development and the
- height permitted within land use designations assigned to adjacent parcels (Where the property being proposed for redevelopment is large, consideration may be given to providing greater heights at the centre of the property provided that the new building is sensitively integrated with the surrounding neighbourhood); and
- approval of the project not destabilize the surrounding neighbourhood or threaten viability of existing neighbourhood facilities (e.g. schools, commercial operations etc.).

Density Profile. Support a land use approach where residential densities increase as proximity to the core of Urban Centres increases, as shown on Future Land Use Map 19.1;

Apartments and Townhouses. Encourage development to contribute to the City's goal of, over the 2000 - 2020 timeframe, having 53% of new residential units be in the form of apartments, townhouses (and cluster housing), or other multiple unit buildings;

Housing Variety. Encourage the development of a variety of housing forms to ensure that the housing supply meets the needs of Kelowna's diverse population and satisfies a range of lifestyle choices;

Integration. Encourage the sensitive integration of different housing forms in the various sectors of the City, in support of neighbourhood diversity and healthy communities;

Objectives for Multiple Unit Residential Development⁴

- All development should be an appropriate response to its physical context, or anticipated future context where an area is designated for increased density or land use transition in the OCP.
- All development should contribute to a sense of community identity and sense of place (integration of development within larger community, belonging, community cohesiveness).
- All development should facilitate access by, and minimize conflicts among pedestrian, bicycle, and vehicular modes of transportation (access, mobility).

⁴ Official Community Plan, Page 8-13

• All development should promote safety and security of persons and property within the urban environment (CPTED).

7.3 Heritage Policies - OCP Chapter 16⁵

Heritage Protection. Encourage owners of properties listed in the Kelowna Heritage Register to voluntarily provide long-term heritage protection to their properties through the use of a Heritage Designation Bylaw or a Heritage Conservation Covenant.

Heritage Register. Use the Kelowna Heritage Register as the City's official list of properties having heritage value to allow for more fully informed decision making;

Municipal Heritage Designation. Explore available conservation tools when considering development applications that have an impact on properties identified in the Kelowna Heritage Register;

7.4 Considerations in Reviewing Development Applications (Chapter 18 - Institutional)⁶

Urban Centre Focus. Encourage an Urban Centre focus for health care and social services;

8.0 TECHNICAL COMMENTS

- 8.1 Building & Permitting
 - 1) A minimum Geodetic Elevation of 343.66 meters is required for all habitable spaces including the parking garage(s). This minimum geodetic elevation may dictate that the building changes from 4 to 5 stories in height as defined by the 2006 edition of the British Columbia Building Code (BCBC 06), if the parking garage is lifted to be above the minimum Okanagan lake flood level. Depending on the BCBC' 06 classification, this may require firewall(s) in the building or the building be constructed as non combustible construction.
 - 2) Potential spatial separation issues at the bridge connection area between the Activity building and the Main Building Structure which may affect the form and character. A code analysis would be required to define the fire resistance ratings and required separations along with spatial calculation for unprotected openings.
 - 3) Building Exiting analysis required for the Activity Building structure to be reviewed by the Building Department prior to the release of the Development Permit. If exiting stairwell location(s) may be required to change, this would affect the form and character of the building. The exiting analysis is to define: (limiting distances, exit thru lobby and protection of exit path(s) which may affect the form and character of the building.
 - 4) Are any of the residential units intended to have medical supervision, if so the requirements of B2 may need to be addressed. B2 designation as defined by BCBC'06 has specific requirements that may affect the building as shown in the Development Permit drawings. The classification of the building should be determined by the Architect prior to release of the Development Permit.

⁵ Official Community Plan, Pages 16-1-16-3

⁶ Official Community Plan, Pages 8-4 - 8-7

- 5) Geotechnical and Structural pier review(s) may be required prior to issuance of any Building permits. Requirements to be established at time of Building Permit application.
- 6) Is the potential landscaped roof area designed as an occupied area?
- 8.2 <u>Development Engineering Branch</u> See Attached.
- 8.3 Fire Department

Fire department access, fire flows of 150ltr/sec, and hydrants as per the BC Building Code and City of Kelowna Subdivision Bylaw #7900. No Parking signs are to be provided along all lanes.

9.0 LAND USE MANAGEMENT DEPARTMENT

There are elements of the project that have the potential to support the Kelowna General Hospital (KGH) as it continues to grow as a regional medical and cancer treatment centre. The applicant's intent is to provide a mix of housing and commercial options that would be ancillary to KGH. However, there are a number of components that do not fit within current and anticipated future City policy.

Land Use Implications

The subject property is currently designated as Multiple Unit Residential - Low Density and Single Two Unit Residential in the current OCP. The applicant is applying to create a new OCP designation and a new zone in advance of the current OCP review process. This proposal is located to the north of the City's draft OCP Health District boundary and would result in a larger Health District area that would have a broader impact and possibly de-stabilize adjoining neighbourhoods and character. Full build out of the City's proposed Health District would take considerable time before there would be a need to expand beyond the area considered in the Draft 2030 OCP.

In terms of use, it has long been the City's position that commercial uses oriented to medical / dental or hospital support should be located within the nearby Pandosy Town Centre. In recognition of an expanding presence of hospital related uses likely to occur in the future, Staff have suggested in the draft OCP that it may be appropriate to consider complimentary health care related uses and associated residential accommodation in the proposed Health District. The proposed Health District intentionally does not include lands north of Royal Avenue, providing a more appropriate configuration. The purpose of the configuration would be to strengthen the east - west transportation linkages, particularly along Rose Avenue, to other IHA facilities on Ethel Street (IHA administration; Cottonwoods Extended Care). However, the draft OCP has not been approved by Council and at this time there is no such policy direction.

A 'Zoning Comparison Table' comparing the proposed development to the RM3 - Low Density Multiple Housing zone, the RM5 - Medium Density Multiple Housing Zone and C4 - Urban Centre Commercial Zone is attached. This provides the opportunity to compare the proposed development to the City's existing zones. As shown in this table, the proposed development is most consistent with a C4 - Urban Centre Commercial development located in one of the Urban Centres.

Height & Density

The proposed building density and height is not consistent with the existing OCP and anticipated zoning. Permitted building heights would be 2.5 storeys in order to compare with the allowable building height in adjacent single detached residential areas. The RM3 zone would also ensure that the properties can be adequately serviced and achieve a sensitive height profile that does not destabilize the surrounding neighbourhood. The current OCP designation is intended to acknowledge the intensity of traffic along Pandosy Street and attempts to buffer existing residential uses to the east by allowing slightly higher density forms as a transition along Pandosy Street. In accordance with the OCP designation, RM3 - Low Density Multiple Housing would be the appropriate zone to meet the land use goals for the subject properties.

Housing Agreement

As the applicant is proposing an OCP amendment resulting in an increase in density, an affordable Housing Agreement or cash-in-lieu of affordable housing should be provided as part of the proposed development package. As indicated in the 'Planning Brief" attached to this report, the applicant is proposing to commit to the following through a Housing Agreement:

- At least three units would be made available for KGH patients for short to medium term stays at the same or comparable rates as provided by the BC Cancer Society Lodge.
- Four units on the main floor will be constructed for wheelchair accessible occupancy.
- All units in the project will have "accessible friendly" floor plans but may not be fully equipped with accessibility furnishings and fixtures.

The density under the existing OCP designation, permitted through the RM3 - Low Density Multiple Housing Zone, would be 0.70 with under-building parking. As this would be equivalent to a one increment bump in the OCP's future land use designation, policy requires that 50% of the density bonus should be secured for affordable housing through a Housing Agreement. Taking this into consideration, as the proposed FAR is approximately 1.3 FAR the total density bonus would be approximately 0.6 FAR / 2,728m², and 50% of this would be approximately 0.3 FAR / 1364m². In order to satisfy OCP Section 8.1.31, 1364m² must be secured for affordable housing as defined in the OCP. At this point, it is not clear that the proposal will satisfy this requirement.

The applicant has indicated that the proposed development would provide a range of residential units that could be purchased, or rented by the day, week or month. Ownership units could be added to the rental stock and managed by on site staff. However, beyond what the applicant has indicated (above) there is no guarantee that this will occur. The proposed development will function as a for-profit operation and will not be comparable to a charitable organization such as the Ronald McDonald house. The applicant has indicated that of the 42 units being contemplated, only 3 units will be secured for short to medium term stays at the same or comparable rates as provided by the BC Cancer Society Lodge.

Transportation Infrastructure

There is concern about loading additional and unplanned for density and commercial uses that may trigger required upgrades to Pandosy Street. In addition, the Royal Avenue / Pandosy Street intersection will be increasingly compromised with already anticipated increase in KGH

traffic and allowing more intensive growth at this intersection could be problematic. Focusing development to the east along Rose Avenue, as proposed by the Draft OCP, provides an opportunity to re-direct traffic to other adjacent roads and thereby reduce the need to widen Pandosy. This has influenced Staff's decision to recommend that the Draft 2030 OCP provide for a Health District bordered by Pandosy / Richter Streets and Royal / Christleton Avenues, and not extending further north as proposed by this application.

Due to the size and type of the proposed development and its critical location, a detailed traffic impact study will be required. The traffic impact study will need to consider the movement of motor vehicles, transit, cyclists and pedestrian movements (particularly across Pandosy Street). The transportation model shows that Pandosy Street will be congested in the future. Specifically, the model shows over capacity by 2030, and intersections including Pandosy / Christleton, Pandosy /Royal, and Richter / Rose will be failing. With the location of the Hospital emergency entrance on Royal Ave, the efficient operation of this intersection is critical.

For this reason, Staff cannot conclude that there will be no Servicing or Financial impacts to the City associated with this OCP amendment. A detailed transportation analysis is required to fully understand the full implications associated with the proposed development. Should the proposed development proceed, additional road connections in the area will be triggered to include the possible connection of Royal Avenue between Pandosy & Richter and the extension of Speer Street to Glenwood Avenue. The requirements would be confirmed following the completion of a traffic impact study. The draft OCP shows a Hospital precinct along Rose Avenue. It is Staff's aim to strengthen the east west connection between Pandosy, Richter, Gordon and Benvoulin by upgrading Rose Avenue to an arterial standard, allowing improved access to the Hospital area.

Summary

In summary, while recognizing the merit of the health-services related housing and commercial aspects of this project, the land use implications and servicing issues associated with this project are too significant to provide support for the proposed project in this location. Through continued discussions with the proponent over the last number of years, Staff have consistently indicated that a project of this magnitude cannot be supported in this location.

9.0 ALTERNATE RECOMMENDATION

If Council chooses to support the proposed development, the following recommendations will be required:

THAT OCP Amendment No. OCP10-0008 to amend Section 19 of the Official Community Plan to add the Health District designation as a new Future Land Use Designation for Development that supports the operations of the Kelowna General Hospital or other health administration, health education, patient services or care facility operation. Other uses may include multiple unit residential uses generally consistent with the RM3, RM4 or RM5 zones of the Zoning Bylaw. Limited health and service related commercial uses may be supported. A Development Permit is required for Health District designated properties, the appropriate Development Permit Guidelines for the Form and Character of Commercial or Multiple Unit Development will be applied., be considered by Council;

AND THAT OCP Bylaw Amendment No. OCP10-0008 to amend Map 19.1 of the *Kelowna 2020* - Official Community Plan Bylaw No. 7600 by adding Health District as a new designation and by changing the Future Land Use designation of Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, ODYD, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L.14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. from the Multiple Unit Residential - Low Density and the Single Two Unit Residential designations to the Health District, as shown on Map "A" attached to the report of the Land Use Management Department, dated September 24, 2010, be considered by Council;

AND THAT Council considers the APC public process to be appropriate consultation for the purpose of Section 879 of the *Local Government Act*, as outlined in the report of the Community Sustainability Division dated September 24, 2010;

AND THAT Text Amendment No. TA10-0007 to add the proposed HD1 - Health District 1 zone and the Retail Stores, Health Products definition Zoning Bylaw No. 8000 as outlined in Schedule "A" of the report of the Land Use Management Department dated September 24, 2010 be considered by Council;

AND THAT Text Amendment No. TA10-0007 to add the HD1 - Health District 1 zone to Sign Bylaw No. 8235 as outlined in Schedule "A" of the report of the Land Use Management Department dated September 24, 2010 be considered by Council;

AND THAT Rezoning Application No. Z10-0040 to amend the City of Kelowna Zoning Bylaw No. 8000 by changing the zoning classification of Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L.14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. from the RU6 - Two Dwelling Housing zone to the HD1 - Health District 1 zone be considered by Council;

AND THAT the OCP Bylaw Amendment No. OCP08-0027, Text Amendment No. TA10-0007 and the zone amending bylaw be forwarded to a Public Hearing for further consideration subsequent to the applicant completing a Traffic Impact Study and a comprehensive assessment of supporting infrastructure regarding potential impact of the proposed development and the cost to provide required upgrades, to the satisfaction of the Development Engineering Branch;

AND THAT Council forward a Bylaw authorizing a Housing Agreement between the City of Kelowna and John and Alana Marrington and John Balla subsequent to the applicant providing a Housing Agreement that conforms with OCP Section 8.1.31 on Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L.14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. for reading consideration;

AND THAT final adoption of the zone amending bylaw be considered subsequent to the execution of the Housing Agreement;

AND THAT final adoption of the zone amending bylaw be considered in conjunction with Council's consideration of a Development Permit on the subject properties;

AND THAT final adoption of the zone amending bylaw be considered subsequent to the requirements of the Development Engineering Branch being completed to their satisfaction;

AND FURTHER THAT final adoption of the zone amending bylaw be considered subsequent to the registration of a plan of subdivision to consolidate the properties into one title.

Shelley Gambacort Land Use Management, Director





Jim Paterson General Manager, Community Sustainability

Attachments

- Location Map
- Applicants Letter of Rationale
- Site Plan & Elevations
- Landscape Plan



MAP "A"





Subject Properties to have Future Land Use designation changed from "MUTIPLE UNIT RESIDENTIAL - LOW DENSITY" and "SINGLE / TWO UNIT RESIDENTIAL" to "HEALTH DISTRICT"

1 222122 222	Bicycle Parking	Vehicle Parking Foor Tot	Open Space 2		Rear yard (N)	Side vard 8.	Front yard (S)	Height	Site Coverage	Floor Area Ratio (FAR)		Site Area	Site Depth	Site Width		Criteria Pro	
1 ctall	None Proposed	42 units = 42 stalls 2m² Leasable = 19 stalls d Pri (32 seats) = 8 stalls al provided = 70 Stalls	8m ² provided (Avg.)		3.26m with lane	5m- >12.0m Building 4m- <12.0m Building	4.5m	14.5m - 4 Storey	50.4%	1.3		4519m ²	32.8m	95.26m		posed Development	
$1 \text{ ner } 1.900 \text{m}^2 = 1 \text{ stall}$	Class I: 24 Class II: 12	1 per residential unit 1.75 per 100m² Leasable 1 per 4 seats - Food Primary 0 required for amenity space	22m ²	Other	3.0m with lane 6.0m without lane	4.5m- <12.0m Building 6.0m- >12.0m Building	4.5m	16.5m	55%	1.3 Base FAR 0.1 Housing Agreement 0.1 Under Building Parking 1.5 Max FAR	Developm	460m ²	30.0m	13.0m	Subdivisi	Proposed HD-1 Zone	Louing Comparison
Commercial not permitted	Class I: 24 Class II: 12	7 bachelor units = 7 stalls 3 - 1 Bedroom = 4 stalls 32 - 2 Bedroom = 48 stalls Residential = 59 stalls 691m ² Health Serv = 34.55 Food P (32 seats) = 8 Pharmacy (retail) = 6 Commercial = 50 stalls Total Req. = 109 Stalls	22m ² Required (Avg.)	' Regulations	7.5m	4.5m	4.5m	9.5m or 2 ½ storeys	50% - Buildings etc	0.5 Base FAR 0.05 Housing Agreement 0.2 Under Building Parking 0.75 Max FAR	ent Regulations	900m ²	30.0m	30.0m	on Regulations	RM3 - Low Density Multiple Housing (Consistent with OCP)	I able (bylaw IND. ou
Commercial not permitted	Class II: 12	 / bachelor units = / stalls 3 - 1 Bedroom = 4 stalls 32 - 2 Bedroom = 48 stalls Residential = 59 stalls 691m² Health Ser = 34.55 Food P (32 seats) = 8 Pharmacy (retail) = 6 Commercial = 50 stalls Total Req. = 109 Stalls 	22m ² Required (Avg.)		7.5m	7.5m	6.0m	16.5m or 4 storeys	60% - Buildings etc	1.1 Base FAR 0.1 Housing Agreement 0.2 Under Building Parking 1.4 Max FAR		1400m ⁴	35.0m	30.0m		RM5 - Medium Density Multiple Housing	
1 per 1,900m ² = 1 stall	Class II: 12	42 res. units = 42 stalls 1,052m ² Leasable = 19 100m ² Food Pri. = 8 stalls Total Req. = 70 Stalls	14m ² Required (Avg.)		6.0m adjacent to residential	4.5m adjacent to residential	0.0m	15m or 4 storeys	75%	1.3 Mixed Use project 0.1 Housing Agreement 0.2 Under Building Parking 1.6 Max FAR *		460 m*	30.0m	13.0m		C4 - Urban Centre Commercial	

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		Table of Contents	Section	
	Section 18: Effect Schedule A Zonir Schedule B Com	Section 16: P 16.1 P1 16.2 P2 16.3 P3 16.3 P3 16.4 P4 16.5 P5 16.5 P5 16.7 W2 Section 17: CD		
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Schedule "A" Text Amendment No. TA10-0007 - Proposed Text Amendments

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\$2.3.3 General Definitions	Section 2 - Interpretation						2										Section 1.3.1		Administration	Section 1 - General															
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					Comprehensive University Development	Vintage Landing Comprehensive Resort Development	Mixed Use Commercial - High Density	Airport buistless Park Bingo and Gaming	Comprehensive High Tech Business Campus		Airport (Liquor Primary/Retail Liquor Sales)	Airport	Heritage Commercial		Heritage Industrial (Liquor Primary/Retail Liquor Sales)	Heritage Industrial	Comprehensive Residential Golf Resort (Liquor Primary)	Comprehensive Residential Golf Resort	Multi-Purnose Facility (Liquor Primary)	Multi-Durnose Facility	Comprehensive Small Lot Residential	Kettle valley Comprehensive Residential Development	Comprehensive Development Une	17 - Comprehensive Development Zones		Intensive Water Use	Recreational Water Use	Municipal District Park (Liquor Primary)	Municipal District Park	Utilities	Parks and Open Space (Liquor Primary)	Education and Millor instructionat	Education and Minor Institutional	Major Institutional	6 - Public and Institutional Zones
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es, health food stores, naturopathic stores, uniform mited convenience retail is permitted as a secondary use.	yres, Health Products means a retail outlet where related to the health industry are sold, rented, custom repaired. Such uses include but are not limited to	Comprehensive University Development	Vintage Landing Comprehensive Resort Development	Mixed Use Commercial - High Density	Bingo and Gaming	Airport Buisness Park	Comprehensive High Tech Business Campus		Airport Airport (Liquor Primary/Retail Liquor Sales)	Heritage Cultural	Heritage Commercial		Heritage Industrial (Liguor Primary/Retail Liguor Sales)	Completions residentiat out result (Endow Frinkers)	Comprehensive Residential Golf Besort (Lighton Drimany)	Multi-Purpose Facility (Liquor Primary)	Multi-Purpose Facility	Comprehensive Small Lot Residential	Comprehensive Development Three	Kettle Valley Comprehensive Residential Development	Comprehensive Development One	18 - Comprehensive Development Zones		Recreation Water lies	Multicipat visu icc raix (Eiquor ritiniary)	Municipal District Park	Utilities	Parks and Open Space (Liquor Primary)	Parks and Open Space	Education and Minor Institutional	Major Institutional (Liquor Primary)	Major Institutional	7 - Public and Institutional Zones	Health District I Zone	6 - Health District Zones

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Section 16 - Public & Institutional Zones	Table 7.1 Minimum Landscape Buffer Treatment Schedule
Section 16 - Public & Institutional Zones	Commercial Zones C1, C2, C3, C4, C5, C6, C7, C8, C9, C2rls, C3lp, C3rls, C3lp/rls, C4lp, C4rls, C4lp/rls, C6lp, C6rls, C6lp/rls, C7lp, C7rls, C7lp/rls, C8lp, C9lp, C9rls, C9lp/rls, C10, C10lp, C10rls, C10lp/rls
Section 16 - Health District Zones Section 16.1 HD1 - Health District 1 (See Schedule "A" - Attachment #1)	Commercial Zones C1, C2, C3, C4, C5, C6, C7, C8, C9, C2rls, C3lp, C3rls, C3lp/rls, C4lp, C4rls, C4lp/rls, C6lp, C6rls, C6lp/rls, C7lp, C7rls, C7lp/rls, C8lp, C9lp, C9rls, C9lp/rls, C10, C10lp, C10rls, C10lp/rls, HD1

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	No.	Section	Existing Text	Proposed Text
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	1	Section 6.1	Higher Density Residential Zones (RM1, RM2, RM3, RM4, RM5,	Higher Density Residential Zones (RM1, RM2, RM3, RM4, RM5,
			RM6 and RM7)*	RM6. RM7 and HD1)*
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Schedule "A" - Attachment #1

HD1 – Health District One Zone

1.1 Purpose

The purpose is to provide a zone for the development of buildings that provide services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, UBC Medical Programs including staff, clients, patients and their families. This zone will provide for a range of institutional, commercial and residential uses.

1.2 Principle Uses

- (a) Multiple Dwelling Housing
- (b) Personal Service Establishments
- (c) Emergency and Protective Services
- (d) Care Centre
- (e) Congregate Housing
- (f) Extended Medical Treatment Facilities
- (g) Health Services

1.3 Secondary Uses

- (a) Retail Stores, Health Products
- (b) Food Primary
- (c) Apartment Hotel
- (d) Hotel
- (e) Community Recreation Services
- (f) Single Dwelling Residential
- (g) **Two Dwelling Residential**

1.4 Subdivision Regulations

- (a) The minimum **lot width** is 13.0 m
- (b) The minimum **lot depth** is 30.0 m
- (c) The minimum lot area is 460 m^2

1.5 Development Regulations

(a) The maximum floor area ratio is 1.3, except it is 0.1 with a housing agreement pursuant to the provisions of Section 6.9. Where parking spaces are provided totally beneath habitable space of a principal building or beneath useable common amenity areas providing that in all cases, the parking spaces are screened from view, an amount may be added to the floor area ratio equal to 0.1 multiplied by the ratio of such parking spaces to the total required parking spaces, but in no case shall this amount exceed 0.1. The total maximum **floor area ratio** shall not exceed 1.5.

- (b) The maximum site coverage is 55%. Parking structures that are less than 2.0 m above finished grade and are surfaced with landscaping or useable open space shall not be included in the calculation of site coverage.
- (c) The maximum **height** is 16.5 m.
- (d) The minimum site **front yard** is 4.5 m.
- (e) The minimum site **side yard** is 4.5 m for a **building** less than 12.0 m in **height** and 6.0 m for portions of a **building** greater than 12.0 m in **height**.
- (f) The minimum site **rear yard** is 6.0 m except it is 3.0 m where the **rear yard** abuts a **lane**.
- (g) Notwithstanding the site setback requirements, a parking structure that is partially below grade may be located no less than 1.5 m from any property line provided that it is less than 2.0 m in height above finished grade and that a minimum horizontal measurement of 2.0 m on the top surface to the parking structure is either landscaped of made available as useable open space between the furthest project of the structure and the building face. All building setbacks otherwise apply.

1.6 Parking Regulations specific to the HD-1 Zone

The parking regulations that are specific to this zone for the purpose of calculating the number of stalls required are as follows:

- (a) All accommodation and residential uses shall be calculated as 1 stall per unit. For clarity, a unit is considered any arrangement of rooms typically used for residential or transient accommodation that share a single entry way directly to the exterior of a building, to a common hallway or entry foyer.
- (b) Leasable areas that are not used for residential or transient accommodation shall be calculated as requiring 1.75 stalls per 100 m2 of gross leasable space. Common Amenity areas and areas exclusively used for building administration are exempt from parking requirements.
- (c) Food Primary uses shall be calculated as requiring 1 stall per 4 seating spaces.
- (d) Amenity space that is ancillary to **principal use** space shall not require off-street parking.

1.7 Other Regulations

(a) In addition to the regulation listed in this section, other regulations apply. These include, where not consistent with the provisions of this section, the general **development** regulations of Section 6, the **landscaping** and fencing regulations of Section 7, the parking and loading regulations of Section 8 (except as specified by section 1.6 of this zone), and the specific use regulations of Section 9 of Zoning Bylaw No. 8000.

- (b) Secondary uses can only be present where a principle use is established and in continuous use.
- (c) Offices are limited to those related to Health Services or those that can demonstrate a direct support role for the Kelowna General Hospital, Cottonwoods Care Facility or Interior Health Authority.
- (d) Retail Stores, Health Products shall be limited to a floor space not greater than 500 m² per zoned site.
- (e) Apartment Hotel and Hotel use shall only be permitted when secondary to multiple unit residential housing or congregate housing.
- (f) A minimum area of 7.5 m² of private open space shall be provided per bachelor dwelling, congregate housing bedroom or group home bedroom, 15.0 m² of private open space shall be provided per 1 bedroom dwelling, and 25.0 m² of private open space shall be provided per dwelling with more than 1 bedroom.
- (g) Level 3 landscape buffers are required in all side and rear yard setback areas as determined by the HD-1 zone.
- (h) Drive Through Services are not permitted in this zone.



Certain layers such as lots, zoning and dp areas are updated bi-weekly. This map is for general information only. The City of Kelowna does not guarantee its accuracy. All information should be verified.

Planning Brief Proposed Health District Zone for Pandosy Street Developments Ltd.

Revised September 2010

Prepared for Submission to the City of Kelowna in support of applications to amend the Official Community Plan and Zoning Bylaw No. 8000

304-0453

1.0 Introduction

Pandosy Street Developments Ltd. (Ross and Alana Marrington) have accumulated five properties along the east side of Pandosy Street between Royal Avenue and Glenwood Avenue over the past ten years. They have tried to advance a proposed development that would cater to hospital related uses for the past eight years with no support from City Planning. The current Draft Official Community Plan (OCP) has introduced the proposed change within the neighbourhood to designate a significant amount of property as a Health District. Unfortunately, the proposed Health District land use designation stops on the south side of Royal Avenue, right across the street from the Marrington's land holdings.

The Marringtons are now applying to amend the OCP land use designation of their properties to the proposed Health District designation. They are also applying to create a new zone that would be applied to their properties but would also be able to be used throughout the Health District area by other property owners/developers. The proposed zone is tentatively called HD-1 Health District One Zone and is proposed to be considered a neighbourhood revitalisation area for the purpose of inclusion within a Development Permit Area in the OCP. The rationale for the proposed land use change is laid out in the following sections of this brief.

2.0 Site and Area Context

2.1 Subject Properties

The following properties are the subject of this application:

Civic Address	Legal Description
2149 Pandosy Street	Lot 1, DL 14, ODYD, Plan 3216
2159 Pandosy Street	Lot 2, DL 14, ODYD, Plan 3216
2169 Pandosy Street	Lot 3, DL 14, ODYD, Plan 3216
2179 Pandosy Street	Lot 1, DL 14, ODYD, Plan 5973
2189 Pandosy Street	Lot 2, DL 14, ODYD, Plan 5973

As a consolidated site, the surrounding land uses are, to the;

- North Glenwood Avenue, Single and Two Unit Residential
- South Royal Avenue/Speer Street, IHA temporary parking lot, Single and Two Unit Residential (significant ownership by IHA)
- East Single and Two Unit Residential
- West Pandosy Street, Kelowna General Hospital, Thoracic Surgery (office only), Single and Two Unit Residential

2.2 Kelowna General Hospital and City Planning

In general terms, the site is within an area that is best described as being directly influenced by the operation of Kelowna General Hospital. Over the years, the City has respected organised neighbourhood opposition to hospital encroachment into the surrounding residential neighbourhoods. Yet the KGH campus has grown to the west, south and, most recently, to the east side of Pandosy Street from its original site. The recent addition to the facilities will undoubtedly create more impacts to the neighbourhood as the level of health services, including training and education, grow to fill the expanded facility. Interior Health Authority, Kelowna General Hospital and now UBC Okanagan have taken measures to create a true regional health centre which should be commended and valued by our community.

Unfortunately, the planning for the area surrounding the hospital is lagging far behind the need for supportive uses to the hospital and the hospital users. This has been the result of the City trying to ensure that surrounding neighbourhoods would not be impacted by the growth needs of IHA at the KGH campus. Past planning exercises have been focused on putting a tight boundary around hospital uses and separating them from the residential community rather than finding ways to integrate the KGH campus into the neighbourhood. The current draft OCP has taken the first step in planning for a Health District which is long overdue. Now that this issue is being discussed in a public forum, it is timely to look at the full range of options, not just those that have been suggested by the Draft OCP.



Current Draft Official Community Plan

2.3 IHA Influence

The major land assets in the immediate area that are owned by IHA are the KGH Campus, Cottonwoods Care Facility, and the previous Burnett's Nursery site. These major holdings are all located within a corridor bounded generally by Glenwood Avenue to the north, Rose Avenue to the south, Abbott Street to the West and Gordon Drive to the east. Recent expansion at the KGH campus has incorporated the previous alignment of Rose Avenue including the properties north of the lane between Christleton and Rose Avenues. Land that had been assembled for a private residential development on the east side of Pandosy has also been acquired by IHA and is now planned for a three storey Clinical Support Building which will be linked with a pedestrian overpass across Pandosy Street

Cottonwoods and the KGH campus are the "anchors" at the east and west ends of the corridor. The existing land uses between the two anchors are dominated by single and two unit residential with typical accessory uses such as care centres, bed and breakfast, home based businesses etc. The majority of the housing stock in this area was built between the 1940's and 1960's. Renovations and infill housing with secondary suites has been a common trend over the past twenty years as well as a few complete demolition and reconstruction projects.



Current Official Community Plan

The OCP has designated some lands within the corridor as suitable for low density multiple unit residential since at least the 1986 version, yet there have been no successful redevelopment projects for this land use category. The closest attempt was by Troika Developments along the east side of Pandosy Street across from the hospital. Troika received Council support for medium density multiple unit residential prior to selling the land to IHA for the current temporary parking lot. The other land use change occurred when IHA purchased the old Burnett's Nursery site on Ethel Street adjacent to the Cottonwoods facility. This site was originally intended to be the site of a hospice, then an IHA administration building but has yet to redevelop. Institutional zoning is in place for this site.

IHA has also been acquiring individual properties east of Pandosy Street, although the exact amount is difficult to establish. Without considering the acquisition of individual lots, IHA already owns approximately 40% of the approximate100 acres of the previously defined corridor.

2.4 Transportation Network

One aspect that has been identified as a deficiency of the broader corridor by City of Kelowna Planning staff is the lack of connectivity of Royal Avenue between Pandosy and Richter Streets. The history is unknown as to why the road network was designed with this flaw but it is evident that the road grid changes from and east-west orientation to a north-south for that portion of the corridor between Pandosy Street and Ethel Street.

We believe the solution to this situation requires a review of the broader corridor as previously described. We are aware that the City has required transportation studies of IHA and we are confident that by going to the same consultant as IHA has used, the impact of our proposed development can be quickly determined.

3.0 The Proposal

The proposed development combines a number of uses into a facility that provides key support services to the community and specifically, those members of the community who are associated with the use and operation of Kelowna General Hospital. The combination of uses will serve as a Wellness Centre and would also cater to the growing sector of Medical Tourism.

3.1 Residential Accommodation

There is an identified lack of supportive residential accommodation associated with the hospital. The Cancer Lodge does provide these facilities specifically for patients under care at the Cancer Centre but most families or relatives of patients to the hospital who are from out of town are left to find private accommodations. The proposed development would provide a range of residential units that can be purchased, or rented by the day week or month. Ownership units would be able to be added to the rental stock and managed by on site staff. The proposed building would include a minimum of two fully accessible and two accessible friendly designed units on the main floor where they can achieve ingress and egress from the building without assistance. The remainder of the residential units would be located on the second, third and fourth floors of the building. The residential units are designed to achieve maximum flexibility, including lock-off rooms. The units can be easily adjusted to be suitable for a short term stay for one person to a fully functioning apartment for monthly or permanent residency.

3.2 Health Related Office Space

The rest of the main floor would contain office space for medical related office uses, therapeutic facilities such as massage therapy, physiotherapy, acupuncture, medical supply rental and sales (crutches, prosthetics, etc) and a site administration/management office. There would also potentially be a small pharmacy. The total leasable area on the main floor would not exceed 11,000 square feet.

3.3 Affordable Housing/Special Needs Housing

It is recognised that the City regularly seeks a commitment to affordable housing by way of a Housing Agreement when applications proposed to increase the density for a site over what is currently permitted by the OCP. For the proposed project, it is difficult to predict how much of the residential will be used for permanent or long term residents. This is due to the need for flexibility as the project moves forward. However, the applicant is willing to commit that there are some measures that address affordability and special needs housing demands.

The applicant is therefore proposing to commit through a Housing Agreement, the following:

- At least three units will be made available for short to medium term stays at the same or comparable rates as provided by the BC Cancer Society Lodge.
- Four units on the main floor will be constructed for accessible occupancy.
- All units in the project will have "accessible friendly" floor plans but may not be fully equipped with accessibility furnishings and fixtures.

The applicant is prepared to re-visit other options for affordability and special needs at a later stage in the development process. However, until appropriate zoning for the project has been secured, the financial implications for further commitments cannot be determined.

3.4 Other Uses

In response to City concerns regarding the existing Collett Manor house which is listed on the City of Kelowna Heritage inventory but is not currently protected, the site plan includes either preserving and relocating or replicating the house in a slightly revised location and orientation facing Royal Avenue. An addition would be made to the rear of the building which houses a food primary business with a doctor's retreat (lounge/library) in the front portion that was the old house. Additional space in the building would be utilised for a care centre for either children or adults.

4.0 Rationale for Application

It is recognised that the City has taken a bold step towards sanctioning health related uses in the vicinity of the Kelowna General Hospital by creating the Health District designation in the current draft Official Community Plan. The current designation in the plan is a small portion of the logical area for this land use to occur. Based on the major IHA land holdings and facilities in the general area and the existing road network, it is logical to at least include the area up to Glenwood Avenue.

The specific site and building plans for the subject property address two main support services for the Kelowna General Hospital – Residential Accommodation and Office related uses that benefit from proximity to the hospital but are not integral to be included within the formal KGH campus. The Residential Accommodation has been designed to be flexible and scalable with regard to the length of occupancy and the number of tenants and has been inclusive by providing fully accessible units.

The Marrington's have been collecting support for this project ever since they first thought of the concept. More recently, they have launched an email and web campaign where they already have over 410 positive responses from people within the community. Within the immediate vicinity of the proposal, there have been 65 letters of support and only three letters of opposition returned. Many of those who support the concept have had direct or indirect experiences with having to travel for medical treatment. There are many major medical "destinations" around the world where services such as what are proposed by this development are available at a much larger scale. They serve those who need to travel to receive the care they need by providing residential and medical support facilities in close proximity to the main hospital.

Kelowna already provides regional facilities and with the ongoing partnership with UBCO, and the Cancer Clinic, this trend will only continue to grow. Supportive services are necessary in close proximity to the KGH campus as already

recognised by the City of Kelowna in their Draft OCP. This proposal merely enforces that the area for consideration should be marginally expanded.

5.0 Regulatory Framework

The relationship between the proposal and the Draft OCP work has been reviewed in the previous sections. The application includes an OCP Amendment to designate the subject properties as Health District. A case has been made to expand this designation to a larger area, however, this application only addresses the subject properties. New terminology will also have to be added to the OCP to define the Health District land use category in such a way as to preclude the exemption for Development Permits for Institutional uses.

Finally, a new zone will need to be added to the Zoning Bylaw. A draft zone has been included with this application that addresses all of the intended uses for the subject property and some additional uses that are not contemplated for this proposal but would be appropriate for other properties within the Health District.

6.0 Proposed HD (Health District) Zone

The following draft of the HD Zone could be adopted as a Commercial, Institutional, or CD zone. However, if the City wants to be able to control form and character through a Development Permit process, an Institutional zoning may not be appropriate as this class of use is exempted from form and character development permits under the Local Government Act.

HD1 – Health District One Zone

1.1 Purpose

The purpose is to provide a zone for the development of buildings that provide services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, UBC Medical Programs including staff, clients, patients and their families. This zone will provide for a range of institutional, commercial and residential uses.

1.2 Principle Uses

- (a) Multiple Dwelling Housing
- (b) Personal Service Establishments
- (c) Emergency and Protective Services
- (d) Care Centre
- (e) Congregate Housing
- (f) Extended Medical Treatment Facilities
- (g) Health Services

1.3 Secondary Uses

- (a) Retail Stores, Health Products
- (b) Food Primary
- (c) Apartment Hotel
- (d) Hotel
- (e) Community Recreation Services
- (f) Single Dwelling Residential
- (g) Two Dwelling Residential
- 1.4 Subdivision Regulations
 - (a) The minimum lot width is 13.0 m
 - (b) The minimum lot depth is 30.0 m
 - (c) The minimum lot area is 460 m^2
- 1.5 Development Regulations
 - (a) The maximum floor area ratio is 1.3, except it is 0.1 with a housing agreement pursuant to the provisions of Section 6.9. Where parking spaces are provided totally beneath habitable space of a principal building or beneath useable common amenity areas providing that in all cases, the parking spaces are screened from view, an amount

may be added to the floor area ratio equal to 0.1 multiplied by the ratio of such parking spaces to the total required parking spaces, but in no case shall this amount exceed 0.1. The total maximum floor area ratio shall not exceed 1.5.

- (b) The maximum site coverage is 55%. Parking structures that are less than 2.0 m above finished grade and are surfaced with landscaping or useable open space shall not be included in the calculation of site coverage.
- (c) The maximum height is 16.5 m
- (d) The minimum site front yard is 4.5 m
- (e) The minimum site side yard is 4.5 m for a building less than 12.0 m in height and 6.0 m for portions of a building greater than 12.0 m in height
- (f) The minimum site rear yard is 6.0 m except it is 3.0 m where the rear yard abuts a lane
- (g) Notwithstanding the site setback requirements, a parking structure that is partially below grade may be located no less than 1.5 m from any property boundary provided that it is less than 2.0 m in height above finished grade and that a minimum horizontal measurement of 2.0 m on the top surface to the parking structure is either landscaped of made available as useable open space between the furthest project of the structure and the building face. All building setbacks otherwise apply.
- 1.6 Parking Regulations specific to the HD-1 Zone

The parking regulations that are specific to this zone for the purpose of calculating the number of stalls required are as follows:

- (a) All accommodation and residential uses shall be calculated as 1 stall per unit. For clarity, a unit is considered any arrangement of rooms typically used for residential or transient accommodation that share a single entry way directly to the exterior of a building, to a common hallway or entry foyer.
- (b) Leasable areas that are not used for residential or transient accommodation shall be calculated as requiring 1.75 stalls per 100 m2 of gross leasable space. Common Amenity areas and areas exclusively used for building administration are exempt from parking requirements.
- (c) Food Primary uses shall be calculated as requiring 1 stall per 4 seating spaces.
- (d) Amenity space that is ancillary to principal use space shall not require off-street parking.

1.7	Other	Regulations
	(a)	In addition to the regulation listed in this section, other regulations apply. These include, where not consistent with the provisions of this section, the general development regulations of Section 6, the landscaping and fencing regulations of Section 7, the parking and loading regulations of Section 8 (except as specified by section 1.6 of this zone), and the specific use regulations of Section 9 of Zoning Bylaw No. 8000.
	(b)	Secondary uses can only be present where a principle use is established and in continuous use.
	(c)	Offices are limited to those related to Health Services or those that can demonstrate a direct support role for the Kelowna General Hospital, Cottonwoods Care Facility or Interior Health Authority.
	(d)	Retail Stores, Health Products shall be limited to a floor space not greater than 500 m ² per zoned site.
	(e)	Apartment Hotel and Hotel use shall only be permitted when secondary to multiple unit residential housing or congregate housing.
	(f)	A minimum area of 7.5 m ² of private open space shall be provided per bachelor dwelling, congregate housing bedroom or group home bedroom, 15.0 m ² of private open space shall be provided per 1 bedroom dwelling, and 25.0 m ² of private open space shall be provided per dwelling with more than 1 bedroom.
	(g)	Level 3 landscape buffers are required in all side and rear yard setback areas as determined by the HD-1 zone.
	(h)	Drive Through Services are not permitted in this zone.

New Definition required for Retail Stores, Health Products:

Retail Stores, Health Products: means a retail outlet where products related to the health industry are sold, rented, custom fitted or repaired. Such uses include but are not limited to pharmacies, health food stores, naturopathic stores, uniform stores. Limited convenience retail is permitted as a secondary use.

7.0 Specific Applications

The above material has been compiled in order to support three specific requested changes to official City of Kelowna bylaws;

- OCP Amendment: to amend the OCP Future Land Use Designation for the five subject properties to the contemplated Health District designation that is currently under consideration in the Draft OCP. Also, the five subject properties, once designated, would be considered as requiring a Development Permit for either multiple dwelling residential or commercial or mixed use commercial as they current front a major collector road (Pandosy Street). In either case, the City may want to include some amendments to clarify the development permit designation for the proposed Health District.
- ii) Zoning Bylaw 8000 Text Amendment: to amend Zoning Bylaw 8000 to add the proposed HD-1 Health District One Zone. To add to Section 2 the proposed definition Retail Stores, Health Products as described in Section 6 of this brief.
- iii) Rezone the subject properties: to rezone the five subject properties from RU6 to the proposed HD1 Zone.



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HUNTER HOUSE GTA ARCHITECTURE

2100 BLK. PANDOSY STREET

CITY OF KELOWNA

MEMORANDUM

Date: File No.:	ate: June 28, 2010 ile No.: Z10-0040 OCP10-0008 TA10-0007		
To: From:	Land Use Management Department (AW) Development Engineering Manager (SM)		
Subject:	Pandosy St Royal Ave	Marrington Development	

Development Engineering Services have the following comments and requirements associated with this application to rezone to HD1.

The proposed development is located on Pandosy Street between Royal Avenue and Glenwood Avenue. Due to the size of the development and its critical location a detailed traffic impact study will be required. The traffic impact study will need to consider the movement of motor vehicles, transit, cyclists and pedestrian movements particularly across Pandosy Street.

The transportation model shows that Pandosy Street will be at congested in the future. The model shows over capacity by 2030 Intersections including Pandosy / Christleton, Pandosy /Royal, and Richter / Rose will be failing. With the location of the Hospital emergency entrance on Royal Ave the efficient operation of this intersection is critical.

Should this proposed development proceed we will require some additional road connections in the area. Possibly the connection of Royal Avenue between Pandosy & Richter and the extension of Speer Street to Glenwood Avenue. The requirements would be confirmed following the completion of a traffic impact study.

The draft OCP shows a Hospital precinct along Rose Avenue. It is our aim to strengthen the east west connection between Pandosy, Richter, Gordon and Benvoulin by upgrading Rose Avenue to an Arterial, allowing improved access to the Hospital area.

Steve Muenz, P. Eng. Development Engineering Manager JF

Men	10
	City of Kelowna
Date:	October 14, 2011
То:	City Manager
From:	Land Use Management, Community Sustainability (AW)
Application:	OCP10-0008 / TA10-0007 / Z10-0040 Owner: John & Alana Marrington John Balla
Address:	2149, 2159, 2169, 2179, 2189 Pandosy St. Applicant: Site 360 Consulting Inc.
Subject:	OCP Amendment, Text Amendment & Rezoning - Supplemental Report
Existing OCP D Proposed OCP	Designation: Multiple Unit Residential - Low Density Designation: Health District
Existing Zone: Proposed Zone	RU6 - Two Dwelling Housing e: HD2 - Hospital & Health Support Services

1XD

1.0 <u>RECOMMENDATION</u>

THAT Council receive the Supplemental Report from the Land Use Management Department dated October 14th, 2011 for information;

THAT Council forward a Bylaw authorizing Housing Agreement Bylaw No. 10624 between the City of Kelowna and John & Alana Marrington & John Balla which requires the owner(s) to designate 3 short term rental units dedicated to hospital and cancer patients at a rate equivalent to the Southern Interior Cancer Centre as established by the Ministry of Health Services on Lot 1, D.L. 14, ODYD, Plan 3216 located at 2149 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 3216 located at 2159 Pandosy Street, Lot 3, D.L. 14, ODYD, Plan 3216 located at 2169 Pandosy Street, Lot 1, D.L. 14, ODYD, Plan 5973 located at 2179 Pandosy Street, Lot 2, D.L. 14, ODYD, Plan 5973 located at 2189 Pandosy Street, Kelowna, B.C. for reading consideration.

2.0 BACKGROUND

Council originally considered the development proposal at their regular meeting of October 18, 2010 and requested that the applicant proceed with the required infrastructure impact analysis, specifically to embark on a transportation impact assessment. This report provides the supplemental information and an updated Development Engineering memorandum outlining the specific infrastructure requirements.

The applicant has made application for an Official Community Plan amendment to change the future land use designation of the subject properties from the existing Multiple Unit

OCP10-0008 / TA10-0007 / Z10-0040 - Page 2

Residential - Low Density and Single Two Unit Residential designations to the newly proposed "Health District" designation. A Text Amendment application has been submitted in order to add the proposed HD2 - Hospital & Health Support Services to Zoning Bylaw No. 8000. Accordingly, the development proposes to rezone the subject properties from the existing RU6 - Two Dwelling Housing zone to the proposed HD2 - Hospital & Health Support Services zone in order to facilitate the proposed mixed-use development.

3.0 PROPOSAL

The proposed HD2 zone will create a zone that provides services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs that include staff, clients, patients and their families. This zone will provide for a range of institutional, commercial and residential uses. In particular the proposed zone includes the following commercial uses: Personal Service Establishments, Emergency and Protective Services, Extended Medical Treatment Facilities, Health Services, Retail Stores, Health Products, Food Primary, Apartment Hotel and Hotel.

The HD2 zone contemplates a maximum Floor Area Ratio (FAR) of 1.4, which is a density profile similar to the RM5 - Medium Density Multiple Housing Zone and the C4 - Urban Centre Commercial Zone. The proposed height of 16.5m / 4 storeys would also be comparable to a RM5 or C4 form of development. The underground / under-building parking access will be from Royal Avenue, while the loading area will be accessed from the rear lane. The parking podium will be partially underground and cover the entire site.

Although the comprehensive project details will change due to site and design revisions, the original concept proposed a 4 storey mixed use building with 43 residential units and approximately 1152m² of commercial space located on the ground floor. The proposed development would provide a mix of ownership and rental units, and the rental units would be for both short and long term tenants. The applicant has indicated that the commercial component of the project consists of 7 commercial retail units (CRU's) and a Food Primary Area with a maximum of 32 seats. The applicant's intention is to provide a range of health related commercial uses within the main floor of the proposed development. Notably, the property located at 2189 Pandosy Street is on the City of Kelowna's Heritage Register, and the current concept proposes to incorporate the heritage home into the project build-out.

4.0 SUPPLEMENTAL INFORMATION

A comprehensive Transportation Impact Assessment and a subsequent review of this assessment have been completed to summarize the directly attributable transportation and infrastructure issues associated with the proposed development. As part of this undertaking, the appropriate road widenings and infrastructure contributions have now been agreed upon. The applicant will be contributing to a signalized pedestrian crossing at the corner of Pandosy Street and Royal Avenue in addition to dedicating land along the Royal Avenue frontage of the property. Road realignment and urbanization of Royal Avenue has also been finalized in addition to final Glenwood Avenue and public laneway improvements. As such, the infrastructure details that were outstanding at the initial Council meeting have now been confirmed.

OCP10-0008 / TA10-0007 / Z10-0040 - Page 3

Since this application was initially reviewed by Council, revisions have been made to the proposed HD2 zone. While most of the regulations for the proposed development are relatively unchanged, Staff have worked with the applicant to introduce another category within the zone that allows smaller lots to be converted to smaller scale health/medical-related uses. Therefore the HD2 zone will be able to accommodate both significant redevelopments when the appropriate lot consolidations have been made and smaller conversions for single lots.

Staff have also been working with the applicant to secure 3 rental units (1,400ft²) with the intention of exclusive use for Cancer Centre and KGH patients and their families and caregivers at a rate equivalent to that of the BC Cancer Lodge (determined by the BC Ministry of Health). It should be noted that Staff would have preferred to have seen more units of this nature secured in the agreement, as the applicant has indicated that this is the underlying motivation for pursuing this development concept.

Report prepared by:

Alec Warrender, Urban Land Use Planner

Reviewed by:

Danielle Noble, Urban Land Use Manager

Approved for inclusion:

Shelley Gambacort, Director of Land Use Management

Attachments

- Location Map
- Development Engineering Memorandum (revised)
- Housing Agreement



Certain layers such as lots, zoning and dp areas are updated bi-weekly. This map is for general information only. The City of Kelowna does not guarantee its accuracy. All information should be verified.

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Schedule "A" - Attachment #1

HD2 – Hospital and Health Support Services

1.1 Purpose

The purpose is to provide a zone for the conversion and new development of buildings that provide services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs including staff, clients, patients and their families. This zone will provide for a range of institutional, medical-related commercial and complimentary residential uses within the Official Community Plan Health District future land use designation.

1.2 Principle Uses

- 1.2.1 The **principle uses** for properties with a **lot area** of 900m² or more are:
 - (a) multiple dwelling housing
 - (b) personal service establishments
 - (c) emergency and protective services
 - (d) care centre, major
 - (e) congregate housing
 - (f) extended medical treatment facilities
 - (g) health services
- 1.2.2 The **principle uses** for properties with a **lot area** of less than 900m² are:
 - (a) single dwelling housing
 - (b) care centre, minor
 - (c) health services
- 1.3 Secondary Uses
- 1.3.1 The **secondary uses** for properties with a **lot area** of 900m² or more are:
 - (a) retail stores, health products
 - (b) food primary establishment
 - (c) apartment hotel
 - (d) hotel
 - (e) community recreation services
- 1.3.2 The secondary uses for properties with a lot area of less than 900m² are:
 - (a) bed and breakfast homes
 - (b) home based business, major
 - (c) home based businesses, minor
 - (d) secondary suites
- 1.4 Subdivision Regulations

- 1.4.1 The subdivision regulations for properties with a lot area of 900m² or more are:
 - (a) The minimum **lot width** is 30.0 m
 - (b) The minimum lot depth is 30.0 m
 - (c) The minimum lot area is 900 m^2
- 1.4.2 The subdivision regulations for properties with a lot area of less than 900m² are:
 - (a) The minimum lot width is 13.0 m.
 - (b) The minimum **lot depth** is 30.0 m.
 - (c) The minimum **lot area** is 490 m².

1.5 Development Regulations

- 1.5.1 Development Regulations for properties with a lot area of 900m² or more are:
 - (a) The maximum floor area ratio is 1.2, except it is 1.3 with a housing agreement pursuant to the provisions of Section 6.9. Where parking spaces are provided totally beneath habitable space of a principal building or beneath useable common amenity areas providing that in all cases, the parking spaces are screened from view, an amount may be added to the floor area ratio equal to 0.1 multiplied by the ratio of such parking spaces to the total required parking spaces, but in no case shall this amount exceed 0.1. The total maximum floor area ratio shall not exceed 1.4.
 - (b) The maximum **site coverage** is 55%. Parking structures that are less than 2.0 m above finished grade and are surfaced with **landscaping** or useable open space shall not be included in the calculation of **site coverage**.
 - (c) The maximum height is 16.5 m.
 - (d) The minimum site **front yard** is 4.5 m.
 - (e) The minimum site **side yard** is 4.5 m for a **building** less than 12.0 m in **height** and 6.0 m for portions of a **building** greater than 12.0 m in **height**.
 - (f) The minimum site **rear yard** is 6.0 m except it is 3.0 m where the **rear yard** abuts a **lane.**
 - (g) Notwithstanding the site setback requirements, a parking structure that is partially below grade may be located no less than 1.5 m from any property line provided that it is less than 2.0 m in height above natural grade and that a minimum horizontal measurement of 2.0 m on the top surface to the parking structure is either landscaped or made available as useable open space between the furthest project of the structure and the building face. All building setbacks otherwise apply. Where a parking structure is located within the building setbacks consistent with this section, the space between the structure and the property line shall be treated with a high level of landscaping with a landscaped berm to screen the exposed outer wall of the structure.
- 1.5.2 Development Regulations for properties with a lot area of less than 900m² are:
 - (a) The maximum **site** coverage is 55%.
 - (b) The maximum **height** is the lesser of 9.5 m or 2 ½ **storeys**, except it is 4.5m for **accessory buildings**.
 - (c) The minimum **front yard** is 4.5 m.

- (d) The minimum **side yard** is 2.0 m for a 1 or 1½ **storey building** and 2.3 m for a 2 or 2½ storey building, except it is 4.5 m from a **flanking street**.
- (e) The minimum **rear yard** is 6.0 m except it is 3.0 m where the rear yard abuts a lane and it is 1.5 m for **accessory buildings**.

1.6 Parking Regulations specific to the HD-2 Zone

The parking regulations that are specific to this zone for the purpose of calculating the number of **parking spaces** required are as follows:

- (a) All residential, residential related uses, **apartment hotel** and **hotel** uses shall be calculated as 1 **parking space** per **dwelling** unit.
- (b) Leasable areas that are not used for residential, residential related, apartment hotel and hotel uses shall be calculated as requiring 1.75 stalls per 100 m² of gross floor area.
- (c) Health Services shall be calculated as 2.5 stalls per 100 m² of gross floor area.
- (d) **Food primary establishment** uses shall be calculated as requiring 1 **parking space** per 4 seating spaces.

1.7 Other Regulations

- (a) In addition to the regulations listed in this section, other regulations apply. These include, where not consistent with the provisions of this section, the general **development** regulations of Section 6, the **landscaping** and fencing regulations of Section 7, the parking and loading regulations of Section 8 (except as specified by section 1.6 of this zone), and the specific use regulations of Section 9 of Zoning Bylaw No. 8000.
- (b) **Secondary uses** can only be present where a **principle use** is established and in continuous use.
- (c) **Offices** are limited to those related to **health services** or those that can demonstrate a direct support role for the Kelowna General Hospital, Cottonwoods Care Facility or Interior Health Authority.
- (d) Retail stores, health products shall be limited to a floor area not greater than 350 m² per lot.
- (e) When permitted, **food primary establishments** shall be limited to a total capacity of 40 seats.
- (f) **Apartment hotel** and **hotel** use shall only be permitted when secondary to **multiple dwelling housing** or **congregate housing**.
- (g) A minimum area of 7.5 m² of private open space shall be provided per bachelor dwelling, congregate housing bedroom or group home bedroom, 15.0 m² of private open space shall be provided per 1 bedroom dwelling, and 25.0 m² of private open space shall be provided per dwelling with more than 1 bedroom.
- (h) Level 2 landscape buffers are required for the **front yard** and Level 3 landscape buffers are required in all **side** and **rear yard** setback areas.
- (i) Vehicle-oriented or drive through services are not permitted in this zone.
- (j) All **vehicle** access must be from the rear **lane**.
- (k) Signage shall be in accordance with the regulations of the Sign Bylaw.
- (I) A free standing sign with a maximum height of 1.5 m and a sign area of 3.0m² is permitted

Schedule "A" Text Amendment No. TA10-0007 - Proposed Text Amendments

		Sign Bylaw No. 8235	
No.	Section	Existing Text	Dronored Tevt
			rioposed lext
	Section 6.1	Higher Density Residential Zones (RM1, RM2, RM3, RM4,	Higher Density Residential Zones (RM1_RM2_RM3_RM4
		DAAR DAAC SSA BAATY*	
			KMD, KMD, KM/ AND HUT)"

CITY OF KELOWNA

MEMORANDUM

Date: August 22, 2011 File No.: Z10-0040

To: Land Use Management Department (AW)

From: Development Engineering Manager (SM) (Revision 2 Comments)

Subject:Pandosy St, Royal Ave, Glenwood Ave Plan 5973 Lots 1,2 Plan 3216 Lots 1,2,3
Proposed Multi Use DevelopmentMARRINGTON

Development Engineering has the following comments and requirements associated with this application. The road and utility upgrading requirements outlined in this report will be a requirement of this application.

The Development Engineering Technologist for this project is John Filipenko. AScT

1. Domestic Water and Fire Protection

- (a) The proposed development site is currently serviced with small diameter water services. The developer's consulting mechanical engineer will determine the domestic and fire protection requirements of this proposed development and establish hydrant requirements and service needs.
- (b) Only one service will be permitted for this development. The applicant, at his cost, will arrange for the disconnection of all existing services at the mains and the installation of hydrants and a new larger metered water service from the proposed new main within Royal Avenue (latecomer agreement pending) or alternatively, the existing 150mm main within Glenwood Ave. The estimated cost of this construction for bonding purposes is \$50,000.00

If it is determined that additional upgrades to the existing water distribution system must be made to achieve the required fire flows, additional bonding will be required.

- (c) The developer must obtain the necessary permits and have all existing utility services disconnected prior to removing or demolishing the existing structures. The City of Kelowna water meter contractor must salvage existing water meters, prior to building demolition. If water meters are not salvaged, the developer will be invoiced for the meters.
- 2. <u>Sanitary Sewer</u>
 - (a) Our records indicate that this proposed development site is connected with small diameter sewer services. The developer's consulting mechanical engineer will determine the development requirements of this proposed development and establish the service needs.

(b) The applicant, at his cost, will arrange for the installation of one larger service from Glenwood Avenue, as well as the capping of all existing services at the mains. Only one service will be permitted for this development. The estimated cost of construction for bonding purposes is \$35,000.00

3. <u>Storm Drainage</u>

- (a) It will be necessary for the developer to modify storm drainage facilities on Royal Avenue, Glenwood Avenue and lane as required to provide street drainage and an overflow storm drainage relief for the proposed development site. The cost of these works will be included in the road upgrading and road construction items.
- (b) It must be understood that the storm drainage systems in this vicinity are relatively shallow as the level of Okanagan Lake influences drainage. The drainage systems are inundated in water at times of high lake levels.

4. <u>Road Improvements</u>

- (a) Pandosy Street: The Pandosy Street frontage is fully urbanized. Access modifications will necessitate driveway ramp removals, curb replacement and boulevard restoration. Stamped concrete is the preferred surface treatment between the curb and the sidewalk. Service disconnects will also require road cuts with pavement and sidewalk restoration. Replacement of damaged works will also be at the developer's expense. The extent of the restoration works will be determined by the City Engineer. The estimated cost of this construction for bonding purposes is \$55,000.00
- (b) Royal Avenue: The urbanization and realignment of Royal Avenue fronting this proposed development will require the realignment of the barrier curb and gutter, catch basin installation, pavement widening, concrete sidewalk. Also required is a landscaped boulevard complete with underground irrigation system, street trees and the re-location of lamp standards as well as the adjustment of utility appurtenances, as required to accommodate the upgrading construction. The estimated cost of this construction for bonding purposes is \$70,000.00
- (c) Glenwood Avenue: It will be necessary to reconstruct the curb return, transition the gutter line alignment, construct a separate 2.05m sidewalk, modify the storm drainage facilities and provide a fillet pavement. Also required is a landscaped boulevard complete with underground irrigation system, and re-location or adjustment of utility appurtenances if required to accommodate the upgrading construction.
 Only the separate sidewalk and landscaped boulevard with underground irrigation needs to be completed at this time. The City wishes to defer the remainder of the upgrades to the Glenwood Avenue frontage. Therefore, cash-in-lieu of immediate construction is required. The cash-in-lieu amount is determined to be \$35,000.00

The estimated cost of the sidewalk and boulevard construction for bonding purposes is **\$10,000.00**

(d) Public Lane: Site access shall be provided from the rear lane. It will be necessary to widen and reconstruct the lane to a commercial paved standard for the full frontage length of this development. Upgrades may also include the removal, relocation or adjustment of existing utility appurtenances to accommodate this development. The estimated cost for this construction for bonding purposes is \$20,000.00.

5. Transportation Related Requirements

- (a) A pedestrian signal at Pandosy Street and Royal Ave. This will be coordinated with the signals at Pandosy Street / Cadder Avenue and Pandosy Street / Rose Avenue intersections. The price for a pedestrian signal similar to the one on Bernard Ave and Bertram St is estimated at **\$150,000**.
- (b) KGH will contribute \$75,000 towards the cost of the signal installation. The cost for a pre-emptive signal for emergency vehicles would be attributed to KGH.
- (c) Deleted
- (d) A 3m road dedication along the full frontage of Glenwood Ave complete with a 6m radius corner rounding. The ultimate road right-of-way width shall be18.0m.
- (e) A 5m road dedication along the full frontage of Royal Ave. The dedication is to line up the intersection on both the east and west side benefiting the pedestrian crossing and to avoid conflict with the vehicles turning left from the west leg of the intersection. The Pandosy St, Royal Ave intersection will be restricted to right in; right out, left in on the easterly portion. The installation of a raised concrete pork chop with signage will to be required. The estimated cost for this construction for bonding purposes is \$20,000
- (f) Truck access to the rear of this development shall be via Pandosy Street, from Glenwood Ave. A frock turn-around shall be provided. Trucks would enter from Glenwood Ave and exit back to Glenwood Avenue and then Pandosy Street.

6. <u>Road Dedication and Subdivision Requirements</u>

- (a) Royal Avenue: Dedicate a highway allowance widening of 5.0m along the full frontage length.
- (b) Glenwood Avenue: Dedicate an additional road allowance widening of 3.0m along the full frontage.
- (c) Provide corner rounding dedications of 6m radius at the property corner intersections of Pandosy St / Royal Ave, Pandosy St / Glenwood Ave.
- (d) Lane: Dedicate an additional road allowance widening along the full frontage of the Lane to achieve a commercial right-of-way width of 7.6 meters.
- (e) If any road dedication affects lands encumbered by a Utility right-of-way (such as FortisBC, Gas, etc.) please obtain the approval of the utility prior to application for final subdivision approval. Any works required by the utility as a consequence of the road dedication or closer must be incorporated in the construction drawings submitted to the City's Development Manager.
- (f) Provide all necessary Statutory Rights-of-Way for any utility corridors required, including those on proposed or existing City Lands.
- (g) Lot consolidation

7. <u>Electric Power and Telecommunication Services</u>

The electrical and telecommunication services to this building must be installed in an underground duct system, and the building must be connected by an underground service. It is the developer's responsibility to make a servicing application with the respective electric power, telephone and cable transmission companies to arrange for these services, which would be at the applicant's cost.

8. Engineering

Road and utility construction design, construction supervision, and quality control supervision of all off-site and site services including on-site ground recharge drainage collection and disposal systems, must be performed by an approved consulting civil engineer. Designs must be submitted to the City Engineering Department for review and marked "issued for construction" by the City Engineer before construction may begin.

9. Survey Monuments and Iron Pins

If any legal survey monuments or property iron pins are removed or disturbed during construction, the developer will be invoiced a flat sum of \$1,200.00 per incident to cover the cost of replacement and legal registration. Security bonding will not be released until restitution is made.

10. Bonding and Levy Summary

(a) <u>Bonding</u>

Water servicing and hydrant installation	\$ 50,000.00
Sanitary Sewer service upgrades	\$ 35,000.00
Pandosy Street road frontage restoration	\$ 55,000.00
Royal Avenue frontage improvements	\$ 70,000.00
Pedestrian signal	\$150,000.00
Pandosy / royal Raised Median	\$ 20,000.00
Glenwood Avenue frontage improvements	\$ 10,000.00
Lane frontage improvements	\$ 20,000.00

Total Bonding

\$410,000.00

<u>NOTE</u>: The bonding amounts shown above are comprised of estimated construction costs escalated by 140% to include engineering design and contingency protection and are provided for information purposes only. The owner should engage a consulting civil engineer to provide detailed designs and obtain actual tendered construction costs if he wishes to do so. Bonding for required off-site construction must be provided and may be in the form of cash or an irrevocable letter of credit, in an approved format.

The owner must also enter into a servicing agreement in a form provided by the City.

- (b) <u>Levies</u>
 - (i) Glenwood Rd Frontage improvements

One-time cash payment for future urban upgrading. \$35,000.00

11. Administration Charge

An administration charge will be assessed for processing of this application, review and approval of engineering designs and construction inspection. The administration charge is calculated as (3% of Total Off-Site Construction Cost plus HST) **\$9,844.80** (\$ 8,790.00 + 1,054.80 HST)

Steve Muenz, P. Eng. Development Engineering Manager JF/jf

Collett Manor Transportation Impact Assessment Pandosy Street Developments Ltd.



Opus International Consultants (Canada) Limited Suite 255-1715 Dickson Avenue Peter Kortegast – Business Manager T: 250 868 4925 F: 250 868 4923 E: peter.kortegast@opusinternational.ca THIS PAGE IS LEFT INTENTIONALLY BLANK

Prepared By

Greg Cockburn B.APSc, EIT Transportation Engineer

Reviewed By

P Kortegast BE(Civil) Transportation Consultant Business Manager Kelowna 11 FebruaryOpus2011Limit

11 February

2011

Opus International Consultants(Canada) Limited

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Date: 11 February 2011 Reference: G/global/jobs/H-90240/ /technical/reports/full report Status: Final THIS PAGE IS LEFT INTENTIONALLY BLANK

EXECUTIVE SUMMARY

This report has assessed the transportation impact of the Collett Manor Development. This development work is expected to be complete and fully operational by 2015.

This report has had some updates from the previous draft, which are highlighted as red text, following discussions and feedback from City of Kelowna Brain Oliveira, to provide more clarity on aspects of this report. This does not imply agreement by the City of Kelowna but rather has been completed to assist in the understanding of this impact assessment.

The Collett Manor development is a four storey mix-use development with a residential curb appearance. It will contain a mix of residential units, medical support facilities, medical equipment retail, sandwich bar, meeting area, and pharmacy. The full development details are shown in Table ES-1 below.

Land-Use Description	Number of Units	Gross Floor Area (m ²)
Bachelor/Studio	7	
1-Bedroom	3	4,705
2-Bedroom	33	
Pharmacy	1	272
Medical Ancillary Lease Space	5	780
Food Primary	1	100
Amenity Area (indoor)	N/A	484
Private Useable Open Space	N/A	1,219
Underground Parking Lot	68	4,539
Collett Manor Full Development		12,099

Table ES-1: Collett Manor Development Details

The traffic models prepared for Collett Manor included future Kelowna General Hospital expansion and clearly show that in future year of 2015, the Pandosy Street/ Royal Avenue and Richter Street/Rose Avenue intersections will have deterioration in level of service below level D. In the future year of 2030, the Pandosy Street/Cadder Avenue and Richter Street/Cadder Avenue intersections will also have deterioration in level of service below level D under base traffic conditions.

The introduction of additional Collett Manor traffic pushes the horizon year of one intersection approach that experiences deterioration to a level of service below D by 2020, up to 2015. No new intersections experience deterioration in level of service below D in the horizon year 2030 with the addition of Collett Manor traffic. Traffic issues are driven by network growth along the restricted north south Pandosy Street corridor. There are 6 separate measures suggested in this report to mitigate and improve the network operation. The key network upgrades to ensure safety and efficiency of the overall network are signalization of the Richter Street/Rose Avenue intersection; dedicated right turn lanes at some intersection approaches at the Pandosy Street / Royal Avenue, Pandosy Street/Cadder Avenue, Richter Street/Cadder Avenue intersections; and advance left turn signal phasing at the Richter Street/Cadder Avenue intersection.

It has been calculated the Collett Manor will require 70 off-street parking with 3 loading zones. Additionally, 24 class I and 11 class II bicycle parking facilities are required.

In conclusion the 12,099m² gross floor area of the proposed Collett Manor, with the anticipation of high pedestrian and internal trips, will have no more than minor adverse transportation effects on the surrounding road network and may reduce outside trips to the adjacent Kelowna General Hospital, further reducing the effect of Collett Manor traffic on the surrounding network.

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1 INTRODUCTION

1.1 Study Purpose

The purpose of this report is to assess the transportation affects that the proposed Collett Manor will have on the surrounding road network, including vehicular, pedestrian, and cycle traffic as well as parking demands and any related safety concerns.

With the increasing capabilities of Kelowna General Hospital, a wider array of patients is travelling to the Kelowna region to receive specialized treatments. Due to the nature of patients' visits, they have unique housing requirements, and are quite different from tourists. These unique needs may include characteristics such as special accessibility needs; accessibility to medical supply stores on a regular basis; unlikelihood of attending tourist destinations; and the need to meet with doctors and/or family members regularly. As a result, there is a demand for appropriate short- and long-term lodging for travelling patients above what local hotels can provide. To better serve the unique needs of travelling patients, Pandosy Developments Ltd. is proposing a wellness facility entitled Collett Manor.

This Transportation Impact Assessment has been prepared for the City of Kelowna and will form part of the planning and building permit approval application for this development.

1.2 Description of the Collett Manor Site

Due to the medical requirements of the patients, a location adjacent to Kelowna General Hospital has been chosen as the ideal location, as shown in Figure 1.



Figure 1: Kelowna General Hospital Site Location

The proposed Collett Manor would house a range of land use types, including apartments for short and longterm stay, a pharmacy, health professional offices, various medical equipment retail stores, a sandwich bar, and various lounge areas to meet with doctors and family members. This wide array of services is tailored to the needs of travelling patients to help render them more comfortable for the duration of their treatment.



Figure 2 below illustrates the proposed Collett Manor development plan and layout.

Figure 2: Collett Manor Development

Table 1 below shows a breakdown of the various uses within the development and the associated floor areas and unit numbers.

Collect Manor is a 4 storey development with a basement parkade. It has been designed to have a residential street frontage appearance and a rear loading area accessed by a narrow public lane.

The detailed development floor plans are included in Appendix B.

The development has 66 off-street parking stalls and 3 loading zones.

Land-Use Description	Number of Units	Gross Floor Area (m²)
Bachelor/Studio	7	
1-Bedroom	3	4,705
2-Bedroom	33	
Pharmacy	1	272
Medical Ancillary Lease Space	5	780
Food Primary	1	100
Amenity Area (indoor)	N/A	484
Private Useable Open Space	N/A	1,219
Underground Parking Lot	68	4,539
Collett Manor Full Development		12,099

Table 1: Collett Manor Development Scope

1.3 Transportation Impact Assessment Terms of Reference

A detailed Terms of Reference for the Transportation study was developed with Pandosy Developments Ltd. The terms of reference are included with this report as Appendix A.

The key horizon years, growth rates and sensitivity scenarios used for this Transportation study are:

- 2015 Horizon year with partial future Kelowna General Hospital build out, with and without full Collett Manor build out with base traffic factored up using compounding 1.5% annual growth.
- 2030 Horizon year with the future Kelowna General Hospital build out, with and without Collett Manor Build out, with base traffic factored up to 2030 using compounding 1.5% annual growth.
- 2030 Horizon year sensitivity '*worst case scenario*' with the future Kelowna General Hospital build out, with base traffic factored up to 2030 using compounding 1.5% annual growth, 100% new gross floor area utilisation.

The network and 7 key intersections, analysed in this transportation study by Synchro Analysis package were:

- 1. Cadder Avenue / Pandosy Street
- 2. Cadder Avenue / Richter Street
- 3. Royal Avenue / Pandosy Street
- 4. Rose Avenue / Pandosy Street
- 5. Glenwood Avenue / Pandosy Street
- 6. Rose Avenue / Richter Street
- 7. Rose Avenue / Speer Street

2 BASE TRANSPORT NETWORK WITH HOSPITAL GROWTH

2.1 Studied Transport Network

The base network intersections which have been analyzed are:

- 1. Cadder Avenue and Pandosy Street
- 2. Cadder Avenue Richter Street
- 3. Rose Avenue and Pandosy Street
- 4. Rose Avenue and Richter Street
- 5. Rose Avenue and Speer Street
- 6. Royal Avenue and Pandosy Street
- 7. Glenwood Avenue and Pandosy Street

The study intersections were evaluated by calculating the intersection and approach vehicular delays, as indicated by levels of service (LOS). LOS A and B represent an excellent operating condition with minimal or no delays. LOS C and D are typical operating levels when some delays occur. LOS E indicates congested levels, and LOS F indicates a need for improvements to be considered. The road layout for the area surrounding the site, along with the current laning configuration and traffic control for the study intersections, is illustrated in Figure 3.


Figure 3: Study Intersections

2.2 Collett Manor Access Points

The Collett Manor primary access point is on Royal Avenue approximately 57m east of Pandosy Street, as shown in Figure 4.



Figure 4: Collett Manor Access Point

All movements are permitted both into the site and out of the site. Royal Avenue is a local street with some onstreet parking and no sidewalks. Currently the only accesses adjacent to the site are residential; however, the Clinical Support Building for Kelowna General Hospital is planned to go opposite Collett Manor south of Royal Avenue. There is also a residential lane located to the South, across Royal Avenue, opposite Collett Manor that accesses some houses.

Running behind Collett Manor is a narrow 5.2m wide local lane that serves as garbage pickup for some houses as well as rear accesses for some houses. This lane will be used as a loading zone access with infrequent, light use. Service vehicles will be light trucks and delivery vans only. The City of Kelowna development standards for a commercial lane access is 7.6m. It is acknowledged that the lane access is below this standard and it is proposed to provide lane widening to assist in upgrading the access lane along the development frontage.

2.3 Traffic Volumes Survey Information

Turning movement counts were conducted on Thursday 11th October 2007 from 0600 to 0900 hours and 1430 to 1700 hours as part of a previous study at four of the seven intersections. The survey day was chosen as being representative of a typical weekday for the region. No special events or circumstances were observed and weather conditions were good. The survey results therefore represent values that can be expected to occur on a typical weekday. Based on the results of turning counts, the weekday am and pm peaks occur between 0800 and 0900 hours and 1600 and 1700 hours.

Turning movement counts for two more intersections were conducted in 2010 as part of a previous project, with City of Kelowna staff providing counts for the remaining intersection of Cadder Avenue and Richter Street.

2.3.1 2015 Base Traffic Volumes

The future 2015 traffic volumes were calculated by applying an annual growth factor of 1.5 percent, compounded annually, (annual growth of 1.5% was agreed with City of Kelowna staff) to all the count data from previous years. Additionally, the traffic generated by Kelowna General Hospital expansion up to the 2015 horizon year was added to the study intersections. Figure 5 shows the future traffic volumes at each of the study intersections during the peak hours in 2015 under base conditions.



Figure 5: 2015 Future Build out Intersection Volumes (New Hospital Services Added)

2.3.2 2015 Base Traffic Patterns and Level of Service

The traffic volumes were then added to Synchro 7 software, by Trafficware, and analysis was run to determine the LOS at each of the intersections according to Highway Capacity Manual. The resulting LOS for each of the study intersections can be seen in Figure 6.



Figure 6: 2015 Base Intersection Level of Service

Most of the study intersections experience adequate LOS under 2015 base conditions. The exceptions are the eastbound and westbound Rose Avenue approaches at Richter Street and the eastbound approach of Royal Avenue at Pandosy Street under PM peak. The single-lane Rose Avenue approaches experience a poor LOS due to the high through volumes on Richter Street that prevent through and left-turn movements from finding adequate gaps to cross or turn left, resulting in long delays for all the Rose Avenue movements. This is an existing problem which the City needs to address. Likewise, the eastbound approach of Royal Avenue at Pandosy Street experiences low LOS under PM peak hour due to high through movements on Pandosy Street

preventing the left turn movements, subsequently blocking through and right-turn movements. As shown in Table 2, the queue lengths along Pandosy Street are such that they block adjacent intersections.

		В	ase Cor	nditions	5
Intersection Approach	Available Queuing Distance (m)	Que Lengt	eue h (m)	Que Len (ve	eue gth h)
		AM	PM	AM	PM
Cadder Avenue and Par	ndosy Street				
Northbound	83	204	235	27	31
Southbound	101	87	73	12	10
Eastbound	208	21	24	3	4
Westbound	194	24	33	4	5
Cadder Avenue & Richt	er Street				
Northbound	79	127	170	17	23
Southbound	87	79	144	11	19
Eastbound	194	55	72	8	10
Westbound	375	72	80	10	11
Rose Avenue and Pand	osy Street				
Northbound	93	90	111	12	15
Southbound	166	73	94	10	13
Eastbound	N/A	13	15	2	2
Westbound	83	25	11	4	2

Table 2: 2015 Queue Lengths at Signalized Study Intersections

The recommended solutions to alleviate the poor LOS movements will be discussed in Section 8 of this report.

2.3.3 2030 Base Traffic Volumes

The base traffic volumes of 2015 were further grown to 2030 by applying a 1.5 percent annual compounding growth rate. Additionally, the traffic generated by the full expansion of Kelowna General Hospital was added to the study intersections. Figure 7 shows the future traffic volumes at each of the study intersections during the peak hours in 2030 under base conditions.



Figure 7: 2030 Base Traffic Intersection Volumes

2.3.4 2030 Base Conditions Intersection Level of Service

The traffic volumes were then analyzed using the Synchro 7 software, by Trafficware. The resulting LOS for each of the study intersections under 2030 base conditions are shown in Figure 8.



Figure 8: 2030 Base Intersection Level of Service

As expected, the intersection approaches that were experiencing poor LOS under 2015 base conditions continue to operate with long delays. The eastbound approach of Royal Avenue at Pandosy Street experiences a LOS E under AM peak conditions in addition to the PM peak, again caused by high through volumes preventing left-turn movements. Two additional intersections experience poor LOS under 2030 base conditions, with the following movements expected to experience LOS E or worse:

- Northbound through/right approach of Cadder Avenue/Pandosy Street under both AM and PM peak;
- Northbound through/right approach of Cadder Avenue/Richter Street under PM peak; and,
- Southbound left approach of Cadder Avenue/Richter Street under PM peak.

The northbound through/right approaches of both Cadder Avenue/Pandosy Street and Cadder Avenue/Richter Street experience poor LOS due to the high number of right turn movements. With the shared through/right lane laning, the delays to the right turn also impact the northbound through movement. The Southbound left

approach of Cadder Avenue/Richter Street experiences poor LOS largely due to the high conflicting through volumes on Richter Street. As to be expected, the queue lengths at the signalized intersection approaches increase under base 2030 conditions, further compounding the existing network problems. Table 3 below shows the queue lengths under 2030 base conditions.

		В	ase Cor	nditions	5
Intersection Approach	Available Queuing Distance (m)	Que Lengt	eue h (m)	Que Len (ve	eue gth eh)
		AM	PM	AM	PM
Cadder Avenue and Par	ndosy Street				
Northbound	83	271	300	36	40
Southbound	101	120	99	16	14
Eastbound	208	26	29	4	4
Westbound	194	31	44	5	6
Cadder Avenue & Richt	er Street				
Northbound	79	213	257	29	34
Southbound	87	114	212	15	28
Eastbound	194	65	84	9	12
Westbound	375	85	98	12	13
Rose Avenue and Pand	osy Street				
Northbound	93	170	178	23	24
Southbound	166	113	148	15	20
Eastbound	N/A	13	16	2	3
Westbound	83	26	12	4	2

Table 3: 2030 Queue Lengths at Signalized Study Intersections

As with the 2015 base analysis, mitigation measures will be discussed in section 8 of this report.

3 DEVELOPMENT TRAFFIC IMPACT

Due to the unique land uses within the Collett Manor, a site specific approach was taken for trip generation purposes.

Through discussions with the client, it was determined that the ITE Trip Generation manual would be used as a reference, but adjusted slightly according to planned usage.

The seven bachelor/studio suites were taken to have five vehicular trips per day. First-principle logic for this is that these units have single person occupancy with a single work trip and 1 to 2 recreation trips. It is assumed that no children or siblings would live in these units.

The one-bedroom suites are estimated to generate six vehicular trips per day. The first-principle logic for this is that these units have a possible two person occupancy with two work trips and 1 recreational trip. It is also assumed that no children or siblings would live in these units.

For the two bedroom suites, it is recognized that some will be leased out as full residential apartments and will have a higher number of daily trips than the units reserved for non-residents. As a result, one third of the thirty three units had eight vehicular trips per day rate applied and the remaining two thirds of the units had five vehicular trips per day rate applied to capture to mixed use. This results in a total of 198 vehicular trips per day for the residential units, without any discounting of trips for mixed use, as shown in Table 4.

	11	Trips		ITE Reference Rate
Land Use Type	Unit Numbers	Weekday		
	Numbers	Rate	Total	
Bachelor/Studio	7	5	36	Pg 327, land use 220, ITE version 8, 6.65 trips/day
1-Bedroom Suite	3	6	18	Pg 327, land use 220, ITE version 8, 6.65 trips/day
2-Bedroom Suite	33	11 @ 8/day & 22 @ 5/day	198	Pg 327, land use 220, ITE version 8, 6.65 trips/day

Table 4: Residential Units Trip Generation

For the remaining land uses, a combination of surveyed data, consultation with the developer, and Institute of Transportation Engineers Trip Generation Rates were used. Due to the proximity to the hospital and mixed use facility, the ITE trip generation rate for Pharmacy without Drive-through was not deemed to be representative of the true trip generation. As a result, a local pharmacy that has similar usage characteristics was surveyed, resulting in an estimate of 250 filled prescriptions per day being used. For the sandwich bar, the expected seating capacity was discussed with the developer and it was determined that it would seat approximately thirty customers. Using this and knowing that there would be a significant number of take-out customers, it is anticipated that during the lunch hour peak, approximately fifty customers would frequent the sandwich bar. To extrapolate this to a full weekday, the peak lunch hour traffic is estimated to account for 40% of the daily

customers, resulting in a total of 125 daily customers. Finally, the anticipated uses for the Medical Ancillary Leasable Area were discussed in detail with the developer. This resulted in the conclusion that two of the units would be used as medical offices and the remaining three as medical supply retailers. The resulting floor areas were then used with ITE rates to generate the weekday trips. The total weekday trips generated by the non-residential land uses within Collett Manor are detailed in Table 5.

Land Use Type	Floor Area	Customers Weekday		ITE Rate or Reference
	(10)	Rate	Total	
Pharmacy	2927	250 Scripts/day	500	From local Pharmacy
Medical Retail	6070	44.32	270	Pg 1387, land use 814, ITE version 8
Medical Office	2327	36.13	86	Pg 1238, land use 720, ITE version 8
Food Primary (Sandwich Bar)	1076	50 in peak lunch hour (40% of total)	250	Based on seating capacity and 125 customers daily.

Table 5: Non-Residential Land Use Trip Generation

After generating the total number of trips that Collett Manor would generate, it was necessary to determine the number of trips that would be either internal within the development or pedestrian trips to the adjacent Kelowna General Hospital. This was done with significant consultation with the developer who has knowledge of other similar facilities.

The bachelor/studio and one bedroom apartment units had a 20% discount applied for pedestrian and internal trips, as a number of these will be used or leased for temporary hospital staff accommodation. The two bedroom units are expected to be largely used by visitors receiving treatment at Kelowna General Hospital; therefore a larger discount of 33% was applied. Similarly, for the medical offices and medical retail stores, it is anticipated that a significant portion of the trips would be by residents or users of Kelowna General Hospital. This resulted in a rate of 33% being applied to the medical retail and medical office land use trips. Finally, due to the close proximity to Kelowna General Hospital, it is envisaged that a large portion of the pharmacy customers would be coming from the hospital or would be residents. As a result, a discount of 50% was applied. Furthermore, through discussion with the surveyed pharmacy, a large number of prescriptions were sent electronically or by telephone and delivered by staff at the pharmacy. Although it is not believed that as many will be delivered at the proposed pharmacy, it is believed that some will be filled by delivery; a discount of 20% was applied with 10 delivery trips per day. The resulting trip generation details can be seen in Table 6.

Land Use Type	Floor Area (ft ²)/ Unit Numbers	Trips/Cust Weekc	omers lay	Pedestrian or Internal Trips Weekday	Sp	ecial ekday	Net Weekday Trips
		Rate	Total Trips	Total Trips	Total Trips	Comment	
Bachelor/ Studio	7	5	36	6	0		30
1-Bedroom Suite	3	6	18	2	0		16
2-Bedroom Suite	33	11 @ 8/day & 22 @ 5/day	198	66	0		132
Pharmacy	2927	250 Scripts/day	500	250	100	Electronic or Phone Order (10 delivery trips/day)	160
Medical Retail	6070	44.32	270	88	0		182
Medical Office	2327	36.13	86	28	0		58
Food Primary (Sandwich Bar)	1076	50 in peak lunch hour (40% of total)	250	200	0		50
Total			1358	640	100	10	628

Table 6: Collett Manor Total Weekday Trip Generation

As shown in Table 4, the total vehicular trips in and out of the Collett Manor site are estimated to be 628 trips for a full weekday with a 50/50 in/out directional split.

As the above traffic volumes are weekday volumes, it was necessary to estimate the peak hour generated volumes. Each of the AM and PM peak hours were taken to be 15% of the weekday traffic. This peak hour % is conservative with City of Kelowna indicating a rate closer to 10%. Using 15% introduces a factor of safety to this ratio estimate. The directional split for the AM peak was taken to be 70% inbound and 30% outbound, and the PM peak to be 30% inbound and 70% outbound. The peak hour trips can be seen in Table 7.

Total Weekday Trins	AM	Peak	PM Peak	
Total weekday mps	Inbound	Outbound	Inbound	Outbound
(38	70%	30%	30%	70%
628	66	28	28	66

Table 7: Total Peak Hour Trips

The resulting trips were then distributed throughout the study intersections based on attractions and population densities in the surrounding areas, as shown in Figure 9.



Figure 9: Collett Manor Trip Assignment

3.1 2015 Peak Hour Traffic Volumes

The traffic generated by the proposed Collett Manor were added to the previous base 2015 traffic volumes to generate the volumes shown in Figure 10.



Figure 10: 2015 Future Build out Intersection Volumes

3.2 2015 Network Level of Service Traffic Conditions

The capacity of the development build out traffic volumes were analyzed with Synchro 7. The resulting LOS for each of the study intersections under 2015 conditions can be seen in Figure 11.



Figure 11: 2015 Future Build out Intersection Level of Service

When compared to the base 2015 analysis results, only one intersection experiences a drop in level of service from D to E for pm peak only, and this is for the northbound approach of the Cadder Avenue/Pandosy Street intersection. This drop in level of service is largely due to the increase in northbound through and right-turn movements. Forty-three additional vehicles are estimated to turn right from Royal Avenue at pm peak which is one every 80 seconds. The return cycle time for the Cadder Pandosy intersection for northbound vehicles is every 45 seconds with a total cycle time of 80 seconds. This reduction in level of service will increase the pm peak queue length by about 2 vehicles or 15m. This effect could be compounding but will be self governing as exiting vehicles will be restricted by intersection no stopping clear zone. This cumulative delay in real terms is minor. In general, the analysis indicates that the poor LOS is mainly due to the additional hospital traffic and/or growth in the base traffic.

3.3 2030 Traffic Volumes Peak Hour Traffic Volumes

Much like the previous 2015 scenario, the generated trips for the Collett Manor were added to the 2030 base volumes, resulting in the turning movements shown in Figure 12.



Figure 12: 2030 Future Build out Intersection Volumes

3.4 2030 Network Level of Service Traffic Conditions

The capacity with the anticipated 2030 combined traffic volumes were reviewed using Synchro 7, and the resulting LOS for each of the study intersections under 2030 conditions can be seen in Figure 13.



Figure 13: 2030 Future Build out Intersection Level of Service

When compared to the 2030 base levels of service, there is no significant reduction in LOS on any of the approaches of the study intersections. The impact of the additional traffic due to Collett Manor is expected to be minor. The poor LOS is therefore mainly due to growth in the base traffic.

3.5 Sensitivity Analysis (100% Kelowna General Hospital Growth 2030)

Through discussion with staff at the City of Kelowna and the client, it was determined that there is a need to test the sensitivity of the study intersections to future Hospital use scenarios. It was agreed to consider the 2030 horizon year with 100% use of the 47,900m² new gross floor area of Kelowna General Hospital.

It is important for the reader to note that the scenario is not envisaged to be representative of the true scenario.

The future scenario with 100% new facilities was only examined for the pm peak hour in the horizon year of 2030. The resulting volumes were analyzed using Synchro. Figure 14 shows the turning movements and LOS, as reported by Synchro, for the 2030 base scenario with 100% new facilities at Kelowna General Hospital.



Figure 14: Base 2030 Sensitivity Analysis Volumes and Traffic Conditions

When compared to the expected 2030 base levels of service, the analysis indicates little difference in the LOS for all approaches to the study intersections. The additional Collett Manor traffic appears to not have a significant impact on the local road network or at the study intersections.

Once the study intersections were analyzed with 100% new facilities at Kelowna General Hospital, the Collett Manor trips were added to the network and the analysis run again. Figure 15 shows the turning movements and levels of service through the study intersections.



Figure 15: Total 2030 Sensitivity Analysis Volumes and Traffic Conditions

When compared to the base 2030 scenario and the base 2030 sensitivity analysis, only one intersection approach experiences a significant drop in level of service. The westbound approach of Royal Avenue at Pandosy Street drops from a LOS D, under planned hospital growth, to a LOS E. This is due to the higher through volumes on Pandosy Street resulting in insufficient gaps to allow for westbound vehicles. For this scenario, the impact of the additional traffic due to Collett Manor is therefore expected to be minor. Section 8 of this report will discuss mitigation measures to improve the level of service at problem intersections.

4 SAFETY AND ACCESS

An important part of this Transportation Impact Assessment is to complete a safety review throughout the study area including not only the vehicular corridors, but also cycling and pedestrian corridors. To complete the safety review portion of the study, the Opus team conducted the following tasks:

- Analyzed ICBC collision claims data from 2000 to 2009 for the following two intersections:
 - Pandosy Street and Rose Avenue
 - Pandosy Street and Royal Avenue
- Completed a detailed site review, making observations of geometric characteristics and driver behaviour impacting safety

4.1 Collision Analysis

Collision data from 1st January 2000 to 31st December 2009 was provided by City of Kelowna staff for two of the intersections within the study area. A total of 100 collisions were reported, averaging 10 collisions per year. Table 8 shows summary of the collisions.

Collision Location	Main Collision Type	Total Number of Collisions
Pandosy Street/Rose Avenue	Rear end on Pandosy Street	77
Pandosy Street/Royal Avenue	Rear end on Pandosy Street	23

Table 8: Intersection Collision History

The intersections of Pandosy Street/Rose Avenue and Pandosy Street/Royal Avenue have a high number of reported rear end collisions. Upon further investigation, no clear trend in time of day or day of the year was discovered. As a result, alternative causes were investigated to explain the high number of rear end collisions. Further review of the collision descriptions indicated that often the driver of the rear ending vehicle was not expecting the vehicle in front to stop. This leads to the conclusion that drivers are being forced to stop unexpectedly or are unsure which path to take and are driving erratically.

It was determined that clear signage is necessary to improve safety along the Pandosy corridor, including way finding signage to access the Hospital and side streets. It is also possible that the sudden stopping at the Pandosy Street/Rose Avenue may be due to signal inconspicuousness; improvements such as larger secondary signals or additional overhead primary signals would address these safety issues.

Finally, installing clear zone markings at intersections along Pandosy Street would ensure that vehicles do not block the intersections and are made aware that queue lengths may extend to adjacent intersections. This would make drivers aware to the possibility that they may have to stop unexpectedly and would help to reduce the number of rear-end collisions along the Pandosy Street corridor.

4.2 Site Walkthrough

Once the collision history from ICBC was analyzed, a walkthrough of the study area was conducted to determine other potential problem areas.

In addition to marking crossings on side streets, the crossing of Pandosy Street at Royal Avenue was seen as a significant potential safety concern due to the expected high number of pedestrians travelling from Collett Manor to and from Kelowna General Hospital. Although there is a marked crosswalk, vehicles were seen travelling through the intersection while pedestrians were in the act of crossing the intersection. Furthermore, with the high through volumes on Pandosy Street, pedestrians were observed taking more risk than normal by attempting to cross with smaller crossing gaps in traffic. The existing crossing on Pandosy Street will be removed as part of the CSB project by the City of Kelowna. The Collett Manor development will be served by pedestrians walking down Pandosy and crossing at the Rose Avenue Traffic Signals.

In addition to pedestrian safety, cyclist safety was highlighted as an important consideration. To this end, it is recommended that Rose Avenue be improved such that cyclists coming from the east will be redirected to travel along Cadder Avenue to Richter Street, go south on Richter Street and west on Rose Avenue to Speer Street. As Pandosy Street has little available width for the addition of cycle facilities, this is seen as the safest route for cyclist travelling to and from the site. Currently, Cadder Avenue is the main east-west cross street that provides good cycle facilities with few other options for cyclists coming from the east.

5 PARKING IMPACTS

5.1 Proposed Parking Provisions of Development

The development has a basement mixed public and private parkade and a rear, ground level loading zone parking area. These parking areas provide:

- 3 disabled parking spaces of 3.7m x 6m, two for residents and one for visitors, this complies with parking bylaw No 8000, section 8.1.7, section 8.1.11(c), BC building code requires 1 disabled space per 100 lots.
- 24 small car parking spaces which make up 37% of all (66 total parks) of 2.5m x 5m, this complies with parking bylaw No 8000, section 8.1.11(a), Where the parked vehicle doors are adjacent to columns, the spaces are required to be widened to 2.7m width in accordance with section 8.1.11(b). No spaces have this issue apart from the end spaces adjacent the walls. These will be widened accordingly.
- 39 standard size parking spaces of 2.5m x 6m this complies with parking bylaw No 8000, section 8.1.11(a), Where the parked vehicle doors are adjacent columns, the spaces are required to be widened to 2.7m width in accordance with section 8.1.11(b), No spaces have this issue apart from the end spaces adjacent the walls. These will be widened accordingly.
- 3 loading zone spaces with a minimum width of 3m accessed from the lane of a width of 5.2m. It is proposed to provide land and widen the lane on one side to permit half the lane widening of 1.2m.
- The lane access permitted to have reversing vehicles.
- 24 Basement class 1 bicycle parking spaces.
- 11 class II bicycle parking spaces at the main entrance.

The total onsite parking summary is:

- 66 parking spaces (including with 3 disabled parks)
- 3 loading zone spaces
- 24 Class 1 bicycle parking spaces
- 11 Class II bicycle parking spaces

5.2 City of Kelowna Bylaw 8000 Parking Assessment

An assessment has been undertaken assessing the number of parks required under the Bylaw 8000 requirements Table 8.1, 8.2 and 8.3. This is shown in Table 9 below.

Land-Use Description	Number of Units	Gross Floor Area (m ²)	Parking	Loading	Bicycle
Bachelor/Studio	7		7		
1-Bedroom	3	4,705	1	1.69	Class $1 = 21.5$
2-Bedroom	33		33		Class II =4.5
Pharmacy	1				Class 1 –2 1
Medical Ancillary Lease Space	5	1052	19	0.55	Class II =6.3
Food Primary (32seats)	1	100	8	0.04	Class 1 =0.1
Amenity Area (indoor)	N/A	484	2	n/a	n/a
Private Useable Open Space	N/A	1,219	n/a	n/a	n/a
то			70		Class 1 =24
10	IALS		70	3	Class II =11

Table 9: Parking Bylaw No 8000 Calculations for parking

The development meets the requirements for bicycle parking and loading. It has a minor shortfall in the general parking supply by 4 parking spaces or 6%. This is considered acceptable when we consider that all the provided retail, café, amenity area are targeted at internal residential use rather than general public. As well, a number of users will be walking to the site from the adjacent hospital, and would not require parking. Also the combination of facilities will have differing peak parking demand, which will allow for reciprocal parking demand. It is also expected that the minor offsite parking shortfall will have minimal to no adverse effect on the local transportation network.

6 MULTI-MODAL TRANSPORT ISSUES

6.1 Modal Split of Collett Manor Users

Collett Manor is a unique development to the Kelowna area and hosts a range of uses. As a result, the modal split of the users is difficult to estimate and is likely to be different from other developments in Kelowna. Furthermore, due to the proximity to Kelowna General Hospital and the strong synergy between the two structures, it is envisaged that the Collett Manor trips will have a higher percentage of pedestrians and internal trips. As shown in Table 10, the total expected trips that will be pedestrian or internal trips approaches 50% of the total trips to and from the site.

	Floor Area	Trips/Customers	Pedestrian/Internal	
Land Use Type	and Use Type (sqft)/ Unit		Wee	kday
	Numbers	Total	Percentage	Total
Bachelor/Studio	7	36	20%	6
1-Bedroom Suite	3	18	20%	2
2-Bedroom Suite	33	198	33%	66
Pharmacy	2927	500	50%	250
Medical Retail	6070	270	33%	88
Medical Office	2327	86	33%	28
Food Primary (Sandwich Bar)	1076	250	80%	200
Total		1358	47%	640

Table 10: Collett Manor Pedestrian/Internal Trips

Due to the high number of pedestrian and internal trips, this will significantly reduce the traffic effect and assist in achieving the City of Kelowna's higher transportation objectives of reduced vehicle trips.

This development will provide a reduction in vehicle trips to the adjacent Kelowna General Hospital, by providing nearby accommodation so users obtaining treatment can walk directly to their appointment. It will also assist in addressing any parking shortfall for the new hospital expansion by preventing vehicle trips and reducing Hospital parking demand.

6.2 Cycling

It is not expected that Collett Manor will have significant bicycle trips, as many of the users will be seeking treatment at Kelowna General Hospital and are not likely to be able to use cycling as a mode of transportation. However, some of the staff, patients requiring recreation and long-term residents may cycle to and from the site. As a result of the walkthrough the study area, it was determined that bicycle infrastructure on the surrounding streets is lacking. More specifically, there are no designated bicycle facilities along Pandosy Street and no east-west connection from Richter Street south of Cadder Avenue. This renders accessing the site by bicycle difficult and forces cyclists to use roads that do not have cycle infrastructure. In line with the City of Kelowna's plan to upgrade Rose Avenue to an arterial road, the addition of bicycle lanes on Rose Avenue will allow for users to travel on Richter Street to Rose Avenue and travel down Rose Avenue to Speer Street and access the site rather than travelling down the busy Pandosy Street and make a dangerous left turn at Royal Avenue.

It is recommended that protected bicycle parking be provided in the underground parking lot. This would be an enclosed area reserved in the parking lot that would provide safe, long-term parking for bicycles. Also, quick access bicycle racks on street level for short-term visitors is recommended.

6.3 Walking

As close to 50% of the trips to Collett Manor are anticipated to be by pedestrians or internal, pedestrian safety throughout the study area is a significant concern. The most significant pedestrian issue is the crossing of Pandosy Street at Royal Avenue by pedestrians travelling to and from Kelowna General Hospital.

The existing current signed and marked pedestrian zebra crossing was installed sometime between February and May 2007, by the City of Kelowna Operations Department, following public complaints regarding crossing difficulties. This was triggered in part by a temporary hospital parking lot being established on the CSB building site (south east corner of Pandosy and Royal Avenue). This parking was removed in 2009 when the CSB building site preloading was placed over the parking lot.

In May 2007 pedestrian crossing movements were recorded by field survey, finding 26 pedestrian per hour in pm peak with conflicting pm peak vehicle volume at 1,400 veh/hr. This meets the current Pedestrian Crossing Warrant (Pedestrian crossing Control manual BC April 1994), which requires 20 or more pedestrian per hour and greater than 1000/veh/hr for a signed and marked pedestrian crossing.

Opus has become aware that the City intends to remove the existing marked and signed crossing on Pandosy at Royal Avenue as the CSB parking removal has reduced the demand and the warrant criteria for the current crossing facility.

It is estimated that this development will increase the peak pedestrian volume above the 20 pedestrian/hour again and require the reinstatement of the marked crossing. The pedestrian volumes are estimated to be in the order of 260 pedestrian crossings of Pandosy a day or 26 pedestrian trips in pm peak. This would not trigger the need for amber flashing signal or traffic signals but would meet the warrant for a signed and marked zebra crossing. It is accepted that the City will remove the marked crossing and pedestrians will be encouraged to walk to Rose Avenue to cross Pandosy Street.

Mobility impaired users will also be common on the site. All access points will be fully accessible. Within the accommodation units there will be specifically designed areas for mobility scooter storage. With the café there will also be mobility impaired service areas. It is recommended that the crosswalk on Royal Avenue on the

corner of this property be upgraded and the sidewalk and pedestrian ramp and sidewalk landing area be upgraded to accommodate mobility scooter access. A sidewalk should be provided along the entire property frontage. Additionally, on-site observations indicate that the on-street lighting along Speer Street, Royal Avenue, and Glenwood Avenue adjacent to the site was limited and should be improved to increase safety to all road users after nightfall.

6.4 Transit

Currently, only transit route services the study area, the number1 Lakeshore route. It has northbound and southbound stops on Pandosy Street at Rose Avenue and a southbound stop on Pandosy Street between Glenwood Avenue and Cadder Avenue. As the transit stops at Rose Avenue are larger stops and only 200m from the site, transit access is not seen as a significant issue.

7 ROYAL AND ROSE NETWORK CHANGES IMPACTS

Two possible network improvements have been considered as part of this network study. In particular whether or not these improvements improve traffic conditions and reduce the adverse Level of Service at key intersections. The two improvements considered are:

- 1. Royal Avenue extension to the east connecting it through to Richter Street.
- 2. Rose Avenue complete upgrade to an arterial west east connector and signalization of intersections.

7.1 Royal Avenue Extension

The proposed connection of Royal Avenue from Richter Street to Pandosy Street is not seen as a benefit to the road network within the study area. This is largely because it is not expected that it will have significant impact on the level of service for any of the intersection approaches, and the residential units on the Richter Street portion of Royal Avenue would experience a significant impact as much of the traffic that is expected to travel down Speer Road would instead use Royal Avenue. With no further connectivity beyond Richter Street, vehicles would be making left and right turns onto Richter Street only. With the high through volumes on Richter Street, there would be insufficient gaps to allow for the turning movements. Furthermore, signalization is not a recommended option due to the close proximity to Cadder Avenue and Rose Avenue.

7.2 Rose Avenue Upgrade

The proposed upgrade of Rose Avenue to an arterial classification and subsequent signalization of major intersections along Rose Avenue is seen as a significant improvement to the study area. As shown in section 2 and 3 previously, the intersection of Rose Avenue and Richter Street will experience poor LOS under all study conditions. As will be discussed in further detail in section 8 following, the signalization of Rose Avenue and Richter Street intersection is seen as the most appropriate mitigation measure to the delays on the Rose Avenue approaches. Furthermore, if Rose Avenue were upgraded to arterial classification, it would provide a much safer corridor for pedestrians and cyclists travelling in the area which currently do not have sidewalks or bicycle lanes. Finally, the upgrade of Rose Avenue would result in some traffic volume using Rose Avenue to connect to other north/south routes to the east, rather than using Pandosy Street to get to Cadder Avenue, effectively reducing the volumes on Cadder Avenue and Pandosy Street and subsequently improving levels of service. It is noted that further study is required to determine the exact extent of this impact.

8 MITIGATION MEASURES

8.1 2015 Horizon Year Mitigation Measures

Of the seven study intersections, 3 experience low levels of service in 2015 under base conditions, that is without the building of Collett Manor. These include the following:

- 1. Royal Avenue & Pandosy Street Eastbound approach, PM Peak
- 2. Rose Avenue & Richter Street Eastbound approach, AM and PM Peak
- 3. Rose Avenue & Richter Street Westbound approach, AM and PM Peak

The Royal Avenue eastbound approach at Pandosy Street is the result of high left-turn movements off Royal Avenue and high through volumes on Pandosy Street. The addition of a channelized right-turn lane to the eastbound approach of Royal Avenue will improve the level of service to an acceptable level. For the Rose Avenue & Richter Street intersection, the proposed signalization of the intersection by staff at the City of Kelowna was deemed to be the most appropriate mitigation measure.

With the construction of the proposed Collett Manor, only one intersection approach decreases to an unacceptable LOS, the northbound through/right approach of Pandosy Street at Cadder Avenue. This intersection approach experiences a poor LOS under 2030 base traffic conditions, and it is also known from previous network analysis that this intersection has poor LOS at 2020 under base traffic condition. With the construction of Collett Manor, the poor LOS is experienced earlier in 2015. To alleviate the poor LOS, an additional dedicated right-turn lane to the northbound approach of Pandosy Street is recommended. In summary, although this improvement is required under base traffic conditions, the Collett Manor development results in the improvement being required five years earlier.

This intersection experiences existing queuing delays in pm peak and is an existing problem. The 2015 Collett Manor traffic increases this queue length by only two vehicles at pm peak. This net increase is of a minor nature.

Figure 16 shows the levels of service through the study intersections with the discussed improvement measures under 2015 conditions with both Kelowna General Hospital expansion and Collett Manor traffic.



Figure 16: 2015 Total Level of Service with Mitigation Measures

8.2 2030 Horizon Year Mitigation Measures

For the 2030 horizon year, two additional intersection approaches experience low levels of service. Additionally, two intersection approaches that previously experienced low levels of service under PM peak now experience low levels of service under AM peak as well. All of the approaches experience the low level of service under 2030 base conditions; this is to say without the proposed Collett Manor traffic. The additional intersection approaches are:

- 1. Cadder Avenue & Pandosy Street Northbound approach, AM Peak
- 2. Royal Avenue & Pandosy Street Eastbound approach, AM Peak
- 3. Cadder Avenue & Richter Street Northbound approach, PM Peak
- 4. Cadder Avenue & Richter Street Southbound approach, PM Peak

As previously discussed, the poor LOS on the northbound approach of Pandosy Street at Cadder Avenue can be alleviated by the addition of a dedicated right-turn lane. Furthermore, the eastbound approach of Royal Avenue at Pandosy Street experiences a poor LOS under AM peak as well as PM peak; the recommended dedicated right-turn lane will improve the LOS to acceptable levels.

The northbound approach of Richter Street at Cadder Avenue experiences poor LOS under PM peak conditions due to the high number of right-turn movements, and as such a dedicated right-turn lane improves the LOS to acceptable levels. The southbound left-turn movement of Richter Street at Cadder Avenue experiences poor LOS as a result of the high northbound through volumes on Richter Street. With the addition of a southbound advanced left-turn phase to the signal timing, the LOS can be improved to acceptable levels while maintaining adequate LOS for other intersection movements.

Figure 17 shows the levels of service through the study intersections with the discussed improvement measures under 2030 conditions with both Kelowna General Hospital expansion and Collett Manor traffic.



Figure 17: 2030 Total Level of Service with Mitigation Measures

9 CONCLUSIONS

This report has assessed the full transportation impact of the proposed Collett Manor development. The proposed Collett Manor would function as a support facility to Kelowna General Hospital in that it would house patients receiving short- and long-term treatment at the hospital as well as offer support services such as a pharmacy, medical retail stores, and medical services not offered at the hospital.

Due to the unique nature of the Collett Manor, a combination of surveyed data, discussion with the client, and Institute of Transportation Engineers Trip Generation manual were used to generate the peak hour volumes. Additionally, the modal split discounts were added to the generated trips to determine the final peak hour trips. The subsequent trips were distributed throughout the seven study intersections and Synchro 7 analysis software was used to determine the levels of service for each of the intersections approaches, based on the Highway Capacity Manual methodology. The appropriate Kelowna General Hospital expansion related traffic was included in the two horizon years of 2015 and 2030. The results of the analysis highlighted several intersection approaches that is expected to experience poor levels of service. However, all of the intersections that will experience a poor level of service will do so under base conditions; this is to say regardless of whether Collett Manor is constructed or not. In fact, the traffic generated by Collett Manor will not have a significant impact on the study intersections, except the northbound approach of Pandosy Street at Cadder Avenue. This will experience a low level of service earlier at 2015 rather than 2020 if Collett Manor were not built.

Intersection	Approach	Horizon Year	Mitigation Measure
Royal Avenue & Pandosy Street	Eastbound	2015	Dedicated Right-turn lane
Rose Avenue & Richter Street	Eastbound and Westbound	2015	Signalization
Cadder Avenue & Pandosy Street	Northbound	2015	Dedicated Right-turn lane
Cadder Avenue & Richter Street	Southbound	2030	Dedicated Right-turn lane
Cadder Avenue & Richter Street	Southbound	2030	Advance left-turn signal phase
Cadder Avenue & Richter Street	Northbound	2030	Dedicated Right-turn lane

Measures were investigated to mitigate the low levels of service, and the measures that best resolve the problems can be seen in Table 11.

Table 11: Study Intersections Mitigations Measures Summary Table

Although most of the intersection approaches that experience a poor level of service were able to be improved, most of the poor levels of service are the result of traffic volumes approaching or exceeding intersection capacity. As a result, it is recommended that network wide measure be investigated to increase capacity at intersections or re-route traffic to alternate intersections with higher capacity.

The primary safety concern throughout the study area is the pedestrian crossing of Pandosy Street at Royal Avenue. As there is expected to be many pedestrians from Collett Manor visiting Kelowna General Hospital, it is necessary that the pedestrian crossing infrastructure at Royal Avenue (the nearest intersection to Collett Manor and the intersection where pedestrians to and from Collett Manor are anticipated to use to cross Pandosy Street) be retained for pedestrian safety. It will meet the pedestrian crossing warrant and will not introduce

undue delays on Pandosy Street. Additionally, on-street lighting on Speer Street, Royal Avenue, and Glenwood Avenue adjacent to the site should be improved to increase safety to all road users after nightfall. It is accepted that the City will remove the existing pedestrian crossing on Pandosy Street and users of the proposed Collett Manor will cross Pandosy Street at the Rose Avenue Traffic Signals.

A sidewalk upgrade should be undertaken along the Collett Manor frontage along Royal Avenue. The crosswalk across Royal Avenue and pedestrian ramps should also be upgraded.

This net discounted traffic affect has not been modelled explicitly and to the total cumulative effects of this development on top of the Hospital traffic has been considered as a worst case scenario.

Furthermore, when compared to the proposed new zoning for this applicants land in the newest Official Community Plan, which has the lots as Low Density Multiple Family Development, the incremental impact of the proposed development is small. Using the proposed Low Density Multiple Family Development, it has been estimated that approximately 40 units could be built on the lots under consideration, based on the RM3 zone. The maximum density that could be developed under the RM3 zone is a Floor Area Ratio of 0.75. That means that you could construct a net floor area equal to 0.75 times the area of the subject properties. The site is is 4519 square metres so the maximum floor area would be 3389 square metres or 36,481 square feet. If you considered a building with an average of 900 square foot units, this would allow you about 40 units and would require about 60 parking stalls.

Using the trip generation rate applied to the 2-bedroom in this report, 8 trips per day per unit, general use not related to the hospital, the trips generated is estimated at 320 daily trips. Taking 15% of the daily trips being in the peak hours, this translates to 48 trips in the peak hours. When compared to the trips generated by the proposed Collett Manor, estimated at 94 trips in the peak hour, it is clear that the cumulative network impact of the proposed Collett Manor is not large. To this end, under the Ministry of Transportation's <u>Site Impact Analysis</u> <u>Requirements Manual</u>, proposed uses exceeding approximately 100 trips constitute noticeable traffic impact. Since the trip generation for the proposed use and the additional increase over what is permitted being just 46 veh/hour is less than this threshold, the adjacent road network is likely able to handle the additional traffic and the traffic impact should be indiscernible to the current traffic conditions at build-out.

Finally, through discussion with staff at the City of Kelowna, some question regarding the discount applied to the trip generation. As a result, a discussion was held by which new discounts were agreed upon. A further analysis was completed applying an ITE generation of 6.7 veh/unit to all 33 units as if they operated as full private residential units. The agreed upon trips can be seen in Table 12 following with a comparison to the trips used in this report.

Total Weekday Trins		AM	Peak	PM	Peak
Total wee	Kuay mps	Inbound	Outbound	Inbound	Outbound
Original	639	70%	30%	30%	70%
Original	028	66	28	28	66
Updated	654	69	29	29	69

Table 12: Discussed Trip Generation

As can be seen, the net peak hour trip increase is only 4 trips per hour. This increase has very little effect on the study intersections, only one intersection approach has a change in LOS, the southbound through movement of Pandosy Street and Cadder Avenue under 2015 AM peak conditions drops to a LOS B, all other intersection approaches have the same levels of service.

The overall impact of the proposed Collett Manor to the surrounding transportation network is minimal. The additional trips on the network will be a small portion of the existing traffic and with the close proximity to Kelowna General Hospital and supporting services; it will reduce the trips to and from the hospital site, although this was not explicitly accounted for. If we consider the net overall effect of reduced hospital vehicle trips and reduced hospital parking demand, the Collett manor facility may well have a beneficial effect to the hospital area traffic flows.

Appendix A Terms of Reference

Terms of Reference

The proposed Terms of Reference for the Traffic Impact Assessment for the proposed Collett Manor, to be located at the 2100 block of Pandosy Street, as shown in Figure 1 below.



Figure 18: Collett Manor Site Location

The proposal is for a short term high density residential development offering accommodation for adjacent health facilities and services at Kelowna General Hospital.

This development is within the wider Kelowna General Hospital network and the previously prepared and calibrated Kelowna General Hospital traffic model will be used to analyse this development.

These terms of reference outline the analysis method and outputs that will be provided for planning and transportation impact engineering assessment.

Project Definition and Scope

The project is to develop a 4 storey multi-use short term accommodation complex with a mix of different sized apartments to provide for both patients and patient support family/friends who are undergoing treatment at the adjacent Kelowna general Hospital. There will be related health services, visitors lounge for family meeting or specialist meetings, a small pharmacy and small café, all primarily serving accommodation guests and/or hospital visitors. Figure 1 below shows an aerial schematic of the development.





The project facility breakdown is shown below in table 1 with typical traffic generation.

Land-Use Description	Number of Units	Gross Floor Area (m²)
Bachelor/Studio	7	
1-Bedroom	3	4,705
2-Bedroom	33	
Pharmacy	1	272
Medical Ancillary Lease Space	5	780
Food Primary	1	100
Amenity Area (indoor)	N/A	484
Private Useable Open Space	N/A	1,219
Underground Parking Lot	68	4,539
Collett Manor Full Development		12,099

Table 1: Land Use Details

Existing Network Considerations

The key network considerations to be reviewed by TIA:

- Minimal increase of traffic on Speer Street.
- Careful consideration of layout of Royal Avenue intersection with Pandosy and related LOS. Consideration of two lane exit from Royal Avenue.
- Traffic calming on Speer Street or limit of left turn exit from Development.
- Peak hour queuing impact on Pandosy.
- Cumulative impact on top of KGH development.

Traffic Impact

Intersection capacity analysis will be based on the methods outlined in the Highway Capacity Manual (Transportation Research Board, 2000), using Synchro 7 software and assumed to be completed for the following network intersections:

- Cadder Avenue and Pandosy Street
- Royal Avenue and Pandosy Street
- Glenwood Avenue and Pandosy Street
- Glenwood Avenue and Richter Street
- Rose Avenue and Pandosy Street
- Cadder Avenue and Richter Street

Rose Avenue and Richter Street

Three horizon years for the above seven intersections will be analyzed:

- 2015 AM and PM Peak hours (22% Hospital Growth with construction of only Centennial, CSB and UBC)
- 2030 AM and PM Peak hours (22% Hospital Growth)
- 2030 AM and PM Peak hours (100% Hospital development)

Background growth will be as used for KGH of 1.5% compounding.



Figure 2 Network Intersections Analysed
A base scenario will firstly be modelling in which the existing Two Dwelling Housing land use will be use to determine the current generated trips and the existing capacity and performance will be determined. Next, the planned future re-zoning of the lots to Low Density Multiple Housing will be analyzed to determine the incremental effect of the new zoning. Finally, the proposed land use will be analyzed for its' further incremental effect over the existing and planned land uses. It is believed that in this way the true effect of the proposed Collett Manor development will have on the network can be determined.

Trips generated by the site redevelopment proposal will be estimated based on land use information provided with a detailed breakdown of land use type within the multi-use facility. Land use types identified in the Institute of Transportation Engineers (ITE) Trip Generation, 8th Edition will be used to calculate site trips. Table 1 below shows the ITE land uses we are proposing to use:

It is believed that since the development will act as support to Kelowna General Hospital, the modal split of development related traffic will be more heavily weighted to pedestrians than typical for Kelowna. This is furthered by the intention that the facility will be primarily used by patients receiving extended treatment at the hospital or by users from out of town visiting patients at the hospital. The trip generation and modal split will be discussed with City staff prior to progressing further in the analysis. This facility will have a net reduction of trips to KGH which needs to be considered when assessing overall network effect.

Once the trips for the proposed Collett Manor are generated and an appropriate modal split is agreed upon, the trips will be distributed and assigned to the study area road network according to the number of land use and road layout scenarios to be tested.

The 2020 Model run will include full Kelowna General Hospital build out (22% growth) and the 2030 model will include 22% growth and full 100% Kelowna General Hospital growth, as worst case example.

Two additional scenarios will be tested for their affect on the network intersections including connecting Royal Avenue through to Richter Street and upgrading Rose Avenue to an arterial designation through to Ethel Street.

If it is determined from the modelling that any of the study intersections experience a Level of Service D or lower due to development related traffic, modifications to the roadway or changes to the traffic control devices will be recommended. Conceptual drawings may be provided for illustrative purposes as required; however, it is acknowledged the preparation of functional roadway designs is beyond the scope of this study.

Finally, it is understood that safety of all road users must be ensured. To this end, a high-level review of the existing and anticipated road safety issues will be conducted to ensure that the recommended capacity improvements are safe. Additionally, a detailed review of the safety associated with the site access location and geometric design will be conducted and alternatives will be suggested if deemed unsatisfactory.

The results of the traffic study will be presented in an electronic (pdf) draft report, summarizing the methodology and findings of the study. The draft report will be submitted to the client and the City for review. Following review of the draft report, a final version will be produced in hard and electronic formats. Three bound copies will be submitted.

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Permitted Baseline comparison of site

Development Traffic Generations

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Safety and Access

Parking Impacts

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Mitigation Measures

Conclusion

Appendix B Floor Plans of Development

Appendix C Synchro Outputs for 2020

Appendix D Parking Layout





Report Prepared By: David Dean, P.Eng. Paul de Leur, Ph.D., P.Eng.

2011 April 29

dcdean associates



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2011 April 29

City of Kelowna Regional Services 1435 Water Street Kelowna, BC V1Y 1J4

Attention: Ron Westlake, P.Eng. Director

Dear Sir,

Re: Review of Collett Manor Transportation Impact Assessment

The attached report documents our review of the *Collett Manor Transportation Impact Assessment Report* undertaken by Opus International Consultants (Canada) Ltd. In particular, it addresses the three outstanding issues that the City of Kelowna is considering regarding the development of Collett Manor:

- The need and configuration of a northbound right turn lane on Pandosy Street at Cadder Avenue;
- The need for a pedestrian activated signal on Pandosy Street at Royal Avenue; and
- The need and possible realignments of Royal Avenue as it intersects with Pandosy Street.

I trust the information contained herein will assist the City in the review of the transportation impacts of the development. If you have any questions, I am available to discuss the report at your convenience.

Yours truly,

D.C. DEAN ASSOCIATES INC.

David Dean, P.Eng.



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City of Kelowna

Review of Collett Manor TIA

FINAL

2011 April 29

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1. Introduction

Pandosy Developments Ltd. is proposing a wellness facility entitled Collett Manor to be located on the northeast corner of Pandosy Street and Royal Avenue, near the Kelowna General Hospital as shown in Figure 1. The proposed development uses include apartments for short and long-term stay, a pharmacy, health professional offices, various medical equipment retail stores, a sandwich bar, and various lounge areas to meet with doctors and family members.

Opus International Consultants (Canada) Limited undertook a detailed Transportation Impact Assessment for the proposed development entitled Collett Manor Transportation Impact Assessment Report dated February 2011. This report discussed the existing and future background traffic characteristics (including growth from hospital expansion)



and the impact of generating new transportation demands caused by the Collett Manor development. The report identified mobility and safety issues and recommended mitigation measures required to address the issues.

Opus International and the City of Kelowna have been discussing the conclusions of the report. Agreement has been reached on many issues, but there are a few key issues where the City is requiring further consideration. D.C. Dean Associates Inc. has therefore been retained by the City to review the report and provide an independent opinion of these issues.

2. Purpose

The purpose of this review is to provide an independent assessment of the following three key issues remaining to be resolved regarding the transportation impacts of the Collett Manor development:

- The need and configuration of a northbound right turn lane on Pandosy Street at Cadder Avenue;
- The need for a pedestrian activated signal on Pandosy Street at Royal Avenue; and
- The need and possible realignments of Royal Avenue as it intersects with Pandosy Street.

3. Background

3.1. Local Area

The proposed development is located at the northeast corner of Pandosy Street and Royal Avenue. Currently these lands, and those surrounding the hospital are zoned residential. Changes to the Figure 2

Official Community Plan are currently being considered to create a future Hospital Precinct zone as shown in Figure 2. Royal Avenue will therefore be the division between residential lands to the north and the hospital precinct to the south.



As shown in Figure 3 Pandosy Street is classified as a 2 Lane Arterial, Rose Avenue as a 2 Lane Arterial with a centre turn lane, Cadder Avenue as a 4 Lane Arterial, and Royal Avenue as a local road. With the possible expansion of the hospital precinct area, the opportunity exists to connect Royal Avenue from Pandosy Street through to Richter Street, thereby providing a local service road that effectively separates the residential lands from the hospital precinct.

Figure 3 20 Year Major Road Network



As shown in Figure 4, Active Transportation Corridors for the use of pedestrians, recreational and commuter cyclists are planned to be constructed on Ethel Street

(connecting the Casorso path to the downtown and through to the Rails with Trails, Rose Avenue (from the Ethel multi-use path to the hospital) and Abbot Street (part of the lake front multi-use corridor). Cyclists on Richter Street will continue to use the bike lanes, and those on Pandosy Street will continue to share the roadway with vehicles.



3.2. Collision History

This review concentrates on the two intersections on Pandosy Street at Royal Avenue and at Cadder Avenue. A review of the collision history from 2007 to 2009 was conducted to determine if any road safety trends are showing up in the collision characteristics. The temporal distributions of the collisions are shown in Figure 5, collision types are shown in Figure 6, and the collision diagrams in Figures 7 and 8.

It is noted that collision frequency peaks during the noon and afternoon peak traffic periods. This is reflective of increased traffic volumes causing increased congestion. The relatively high proportion of rear end collisions (64%) also suggests congestion contributes to collisions through this corridor.

For the two intersections there were 5 collisions where vulnerable users (cyclists / pedestrians) were hit. In addition, comments in some of the rear end collision reports indicated the front vehicles stopped quickly for pedestrians crossing Pandosy. These numbers support the TIA report's comments that there is an increased presence of vulnerable users near the hospital.

There has been a relatively high number of northbound rear end collisions at the Pandosy Street and Cadder Avenue intersection. This could be reflective of the queues and delays experienced northbound. Likewise, half of the collisions occurring at Pandosy Street and Royal Avenue are northbound rear end collisions.



Figure 5 Temporal Distribution

Figure 6 Types of Collisions



MUNICIPALITY: City COL INTERSECTION: Pandosy Street and Royal Avenue	INTY: <u>BC</u>		FILE: Pandosy & Royal
PERIOD: _ 4 YEARS _ 0 MONTHS FROM	M 01/01/2006	TO 31/12/2009	BY: dcd DATE: 19/04/2011
Pandosy Street			Eastbound
	29 28		Royal Avenue
	25	24	
Royal Avenue		23 26 27 30	
		Pandos	sy Street
SYMBOLS		MAN	NNER OF COLLISION
MOVING VEHICLE P PEDEST TURNING VEHICLE B BICYCLIS BACKING VEHICLE A ANIMAL PARKED VEHICLE FIXED O 999 RECORD NUMBER Fatal	RIAN ST BJECT	REAR END LEFT TURN LEFT TURN OVERTAKE OUT OF CO	HEAD ON RIGHT TURN RIGHT TURN RIGHT ANGLE SIDE SWIPE

Figure 7 Collision Diagram – Pandosy Street and Royal Avenue

MUNICIPALITY: Kelowna COUNTY: BC	FILE: Pandosy & Cadder
INTERSECTION: Pandosy Street and Cadder Avenue	CASE #:
PERIOD. 4 YEARS 0 MONTHS FROM 01/01/20	006 10 <u>31/12/2009</u> BY. <u>dcd</u> DATE. <u>19/04/2011</u>
Pandosy Street	Eastbound Eastbound Cadder Avenue
Cadder Avenue	27 44 29 45 32 48 33 50 37 52 39 43
SYMBOLS	MANNER OF COLLISION
MOVING VEHICLE P PEDESTRIAN TURNING VEHICLE B BICYCLIST BACKING VEHICLE A ANIMAL PARKED VEHICLE FIXED OBJECT 999 RECORD NUMBER Fatal	REAR END LEFT TURN LEFT TURN OVERTAKE OUT OF CONTROL

Figure 8 Collision Diagram – Pandosy Street and Cadder Avenue

4. Pandosy Street at Cadder Avenue – Northbound Right Turn Lane

The intersection of Pandosy Street and Cadder Avenue is a four legged traffic signal controlled intersection having one through lane plus one left turn lane in each direction. The traffic signal also has pedestrian activation, and crosswalks are located on each leg of the intersection. Figure 9 shows the laning configuration as it exists today.



Figure 9
Pandosy Street and Cadder Avenue

The transportation impact assessment indicates that all traffic movements at this intersection in the base 2015 scenario operate at an acceptable level of service LOS D or better. It further indicates that background traffic growth projections (without the Collett Manor development) identify a level of service LOS F for northbound through and right turn approach to the intersection for both AM and PM peak periods at the 2030 horizon.

With the addition of traffic generated from the Collett Manor development, the 2015 level of service for the northbound through and right turn approach decreases in the PM peak period to an unacceptable level of service LOS E. It is therefore advancing the deterioration of the level of service at this intersection, and improvements need to be undertaken to mitigate the resulting congestion. The TIA report recommends the addition of a northbound right turn lane. The provision of a right turn lane would not only reduce the expected delays, it would improve safety

- the Canadian Guide to In-service Road Safety Reviews identifies a collision reduction factor of 30% to 40% of rear-end collisions. With the existing traffic volumes, 12 northbound rear end collisions have occurred in the past four years.

Opus International has suggested to the City that in order to maintain the existing curb to curb width on Pandosy Street at Cadder Avenue, the provision of the northbound left turn lane can be eliminated in favour of a dedicated right turn lane. Their proposal suggests removing the northbound left turn movements on Pandosy Street at Cadder Avenue, re-lining the paint lines and signs/markings to accommodate a northbound through lane and northbound right turn lane, while maintaining a southbound left turn lane and combined southbound through/right turn lane. This is illustrated in Figure 10 (the red dashed line is the extension of the edge of the northbound through lane after narrowing lanes as much as possible).



Figure 10 Pandosy Street Northbound Right Turn Lane at Cadder Street – Opus Proposal

The City prefers the traditional way of adding a right turn lane which would necessitate the widening of the northbound approach to add a right turn lane adjacent the existing through lane. This concept would maintain all traffic movements including the northbound left turn, but would be costlier due to new construction (property acquisition would not be required as the City already owns property on the southeast corner). Figure 11 illustrates this concept.



Figure 11 Pandosy Street Northbound Right Turn Lane at Cadder Street – Traditional Approach

Relative to the traditional right-turn lane approach the Opus proposal offers the following benefits:

- The south leg width of the intersection remains within existing curb and gutter and therefore reduces construction costs;
- The pedestrian crossing width of the south leg of Pandosy remains the same for pedestrians; and
- Removing northbound left turns reduces conflicts at Pandosy and Cadder (but relocates them to other intersections which may accommodate left turns better or worse than at Cadder).

Conversely, the Opus proposal has the following negative implications:

- Mobility is restricted as northbound left turn movements are prohibited thereby creating circuitous routing that increases the number of intersection movements (although in 2030 it is projected that there will only be 26 northbound left turns per hour at Cadder Avenue / Pandosy Street);
- Unexpected non-compliance of left turn restrictions could lead to stopped vehicles in the northbound through lane, thereby increasing potential for rear end collisions;

- Non-compliant left turns create off-set left turns that restrict sight lines of through traffic in both the north and south direction, thereby increasing potential for left turn opposing collisions;
- Inconsistency of laning configurations could lead to northbound right turn lane being used as through lane, thereby increasing potential for overtaking collisions;
- Inconsistency of laning configurations could lead to southbound left-turn drivers believing vehicles in northbound through lane will be turning left, thereby increasing potential for left turn opposing collisions;
- Northbound right turn traffic reduces sight lines between westbound traffic and northbound through traffic, thereby increasing potential for angle collisions; and
- Lane widths need to be reduced to accommodate inside northbound through lane to be east of southbound left turn lane, thereby increasing potential for sideswipe collisions.

It is our view that the safety implications of the Opus proposal are significant enough to outweigh the benefits.

5. Pandosy Street at Royal Avenue – Pedestrian Signal

The transportation impact assessment identified that the Collett Manor would generate an estimated 260 pedestrian crossings a day of Pandosy Street at Royal Avenue, or 26 pedestrian trips in the PM peak hour. The assessment indicated that this warrants a marked and signed pedestrian crossing, but would not trigger the need for amber flashing signal or traffic signals.

Our review of the pedestrian crossing needs at the Pandosy / Royal intersection considers the following issues:

- Pedestrian crossing warrant analysis
- Types of pedestrian users and motorists
- Function of the Pandosy Street corridor

This review did not have access to the warrant calculations of the assessment; instead it calculates the warrant with information at hand and notes where additional information could influence the decision.

It is noted that the pedestrian volumes used in the transportation impact assessment calculations were those generated by the Collett Manor development. No traffic count was undertaken to take into consideration existing pedestrian crossing demand; however, our site observations identified existing pedestrian crossings are occurring. Observed pedestrians appeared to be hospital workers, and could be walking to nearby residences or to nearby residential parking spaces (excessive parking spaces in back lanes were observed in some

residences). A more accurate warrant analysis could be based on an existing pedestrian count, as well as consideration of the future pedestrian traffic that will be generated by the lower floors of the building currently being constructed on the old surface parking lot.

The warrant procedure in the Pedestrian Crossing Manual for British Columbia bases pedestrian volumes on Equivalent Adult Units (EAU) which addresses the relative weighting of a child, senior, or physically challenged person in relation to an adult. The factors used to convert to EAU's are:

	Factor
Children (≤12 years)	x 2.0
Seniors (≥65 years)	x 1.5
Physically	x 2.0
Challenged	x 1.0
Adults	

For the warrant analysis shown in Figure 12, it was assumed that 50% of the 26 Collett Manor pedestrians were seniors, and that 25% were physically challenged. This resulted in 39 EAU's. Figure 12 also indicates that interpolation was required to determine the crossing opportunities for a 12 metre wide road (width of Pandosy Street at Royal Avenue).

The warrant calculations based on the Collett Manor pedestrians identifies a need for a Special Crosswalk. However, it would only take an additional 16 EAU's to change the warrant result to a Pedestrian Signal. The existing pedestrian traffic together with any new pedestrian traffic from the building currently under construction could very well contribute these 16 EAU's.

The above warrant calculations take into account the issues of seniors and physically disabled pedestrians in a typical pedestrian network. Consideration should be given at this location to the special circumstances that will contribute to the pedestrian user types. In addition to the typical senior and disabled pedestrian circumstances, Collett Manor residents will require additional special accessibility needs, and could be emotionally and mentally distracted due to the reasons for their hospital visits. Area drivers may as well be distracted more than usual through the Pandosy Street corridor. Hospital destined traffic may not be familiar with Kelowna's street system and/or hospital parking facilities and may be looking for their destination as opposed to crossing pedestrians. Pedestrian crossing warrants are guidelines that allow for engineering judgement in cases such as this to provide greater crossing control.

A valid reason to not provide greater crossing control where it is not needed is the mobility impact on the road corridor and the safety impact of unexpected stopping requirements. The existing queuing from the adjacent signals through the Royal Avenue intersection reduces this concern. Indeed, the existing queuing through the intersection creates the safety concern of pedestrians crossing on the crosswalk through queued vehicles in one direction into the opposite direction travel lane where vehicles are moving at speed. The City of Kelowna



Figure 12 Pedestrian Crossing Warrant – Pandosy Street at Royal Avenue

recognizes the congestion currently occurring on Pandosy Street, and expects it to continue in the future as Pandosy remains a two lane roadway. The installation of a traffic signal on Pandosy Street at Royal Avenue would not be a violation of traffic expectation given the current conditions.

In reviewing the warrant based solely on the Collett Manor pedestrian demand, the potential for existing and future demand, and the types of pedestrian users and motorists, we believe the installation of a pedestrian signal on Pandosy Street at Royal Avenue would be an appropriate measure.

6. Pandosy Street at Royal Avenue – Realignment

The City's long term road network plan includes the connection of Royal Avenue from Richter Avenue to Pandosy Street. There would be no further connectivity beyond Richter Street thereby retaining the existing 'T' intersection at Royal and Richter. The transportation impact assessment states that this connection is not seen as a benefit to the road network within the study area. This assessment is valid from the sense of the main grid road network plan and the existing adjacent land use. However, local area plans for the area include the extension of the Hospital precinct area from Pandosy Street to Richter Street. Royal Avenue will then be an important access road to the precinct expansion area, and would serve as its boundary adjacent to the residential area. The hospital precinct expansion could generate relatively large traffic volumes including employee, visitor, and service vehicle access to the precinct buildings. Connectivity between Pandosy Street and Richter Street would provide the function of access without requiring circuitous routing on the main road system. In conjunction with the hospital precinct expansion, it is therefore considered a worthwhile connection.

Given the future plans for a connection and redevelopment of the lands south of Royal Avenue to include hospital precinct land use, consideration is given to the realignment of the Royal Avenue intersection with Pandosy Street. The conflicts associated with an off-set intersection will be described, potential concepts for realignment will be identified, and an estimate of the safety benefits of the realignment will be calculated.

6.1. Off-set Intersection Conflicts

Royal Avenue at Pandosy Street is currently off-set with the north property line west of Pandosy Street 10 metres north of the property line east of Pandosy. Figure 13 illustrates the vehicle-vehicle and vehicle-pedestrian conflicts associated with the existing off-set.

Figure 13 Off-set Intersection Conflicts

Issue		Sketch			
1.	Southbound left turning vehicles waiting for gap block eastbound left turning vehicles. This is a common route for emergency vehicles.	Royal Ave Pandosy St			
2.	Northbound left turning vehicles conflict with southbound left turning vehicles resulting in confusion as the vehicles approach one another. Some drivers would turn left in front of the opposing left turning vehicle; others would try to turn left past the other vehicle.	Royal Ave Pandosy St			
3.	Eastbound / Westbound through movements are misaligned and have the potential for sideswipe collisions, particularly if one vehicle is arriving at the intersection as the other vehicle is making its through movement.	Royal Ave Pañdosy St			
4.	Northeast and southwest corners have the Pandosy Street crosswalks off-set from Royal Avenue by approximately 6 metres, thereby reducing the visibility of the pedestrian from eastbound and westbound right turning motorists.	Royal Ave Pandosy			

There has been discussion that westbound on Royal Avenue may have an interim restriction on turning movements that would restrict the east leg to be right-in, right-out, and left-in only. This would be achieved by constructing a median on the east leg as shown in Figure 14. All conflicts identified above would remain, except the eastbound / westbound through movement conflict could become an eastbound through / westbound right turn conflict as shown in the figure.

Figure 14
Restricted Movements on East Leg of Royal Avenue and Pandosy Street

Issue	Sketch
 Eastbound through movement may proceed straight into westbound right turn lane. 	Pandosy St

6.2. Proposed Realignment Concepts

As part of the rezoning procedure of the Collett Manor development, it has been identified by the City that a road dedication on the north side of Royal Avenue of 5 metres is required as shown in Figure 15. In addition, for future realignment needs, an additional 5 metres is required in a Road Reserve Agreement. The road dedication allows for some realignment of the Pandosy Street and Royal Avenue intersection, whereas the full 10 metre taking allows

for Royal Avenue to be taken straight through in the alignment of its east and west ends.

Figure 16 shows a concept for the realignment of Royal Avenue based on the 5 metre road dedication. Property was not available on the southwest corner of the intersection, otherwise





that would have been used to flatten out the realignment. The realignment will address to some degree the conflict issues identified in the previous section, which should result in a decreased collision potential. More conflict reduction could be achieved with further widening at either the northeast or southwest corners. The following section attempts to quantify the potential reduction.



Figure 16 Royal Avenue Realignment

6.3. Safety Modeling of Realignment

A safety modeling exercise was completed for the intersection of Pandosy Street and Royal Avenue, in order to determine the safety impact due to the Collett Manor development and the potential realignment of the intersection, which is currently misaligned. Safety modeling involves the application of collision prediction models and collision modification factors to reflect different design and operational features of a roadway facility. It is noted that safety modeling is currently the preferred method of safety analysis and is described extensively in AASHTO's recently released Highway Safety Manual (HSM).

In order to develop the safety model for the intersection of Pandosy Street and Royal Avenue, the first step was to obtain a relevant collision prediction model (CPM). Research work by the University of British Columbia produced a CPM for an urban, un-signalized intersection, with stop control on the minor leg. The model was developed using data from the City of Kamloops, so it is felt that the model would be sufficiently accurate for the intersection in Kelowna. The CPM is as follows:

Coll./yr =
$$\left(0.00078 \times V_{Major}^{0.7646} \times V_{Minor}^{0.2432} \times Exp^{-0.6671(Type)}\right)$$
3

Where:V Major= Major road traffic volume (AADT)V Minor= Minor road traffic volume (AADT)Type= Intersection type (0 for 4-Leg and 1 for T-type intersection)

As shown above, the CPM requires the AADT traffic volume. As such, the AM and PM traffic volumes were used with an adjustment factor to convert to AADT. The AM and PM traffic volumes were averaged and then a 12.5% conversion was applied (i.e., the peak hour volumes represented 12.5% of the AADT volume).

Another important consideration in developing the safety model for the Pandosy Street at Royal Avenue intersection is finding a collision modification factor (CMF) to represent the safety impacts caused by the misalignment of the intersection. A CMF specifically for urban, misaligned intersection could not be found. However, a reliable CMF for intersection skew (i.e., a skewed angle between intersecting roadways) was available in the HSM, which is assumed to be a reasonable approximation for the effects caused by intersection offset. In fact, the CMF may be somewhat conservative. The expression for the CMF for intersection skew angle is as follows:

 $CMF = e^{(0.0054 \times SKEW)}$

Where: SKEW = Skew angle between intersecting roadways

The intersection skew angle for Pandosy Street at Royal Avenue was estimated at approximately 20 degrees, which produced a CMF of 1.114. This means that the intersection skew angle (or off-set in this case) causes an increase of 11% increase in collisions at the intersection, as compared to a non-misaligned intersection.

The CPM was tested to check the validity of the model by comparing the predicted number of collisions for the existing scenario (no Collett Manor development and a misaligned intersection) with the observed / historical collision data. The CPM predicted a total of 2.03 collisions per year at the intersection (using the 2015 traffic volumes and the CMF for the misalignment), which compares very favorably with the observed collision history, which is on average, 2.0 collisions per year (based on collision records from 2006 to 2009 inclusive).

A matrix of 4 different scenarios was developed to understand the impact of the Collett Manor development and the intersection misalignment. These included the following scenarios, and it is noted that the baseline condition is shown as Scenario 3 (i.e., NO development and WITH intersection misalignment). Scenario 1: NO development and NO intersection misalignment Scenario 2: WITH development and NO intersection misalignment Scenario 3: NO development and WITH intersection misalignment (BASELINE) Scenario 4: WITH development and WITH intersection misalignment

The results were also run for two time periods, namely 2015 and 2030 since the safety model does not perform in a linear manner. The results for the 2015 time period are shown in the first table and the results for the 2030 time period are shown in the second table.

Traffic Volume	Street	Scenario 1	Scenario 2	Scenario 3	Scenario 4
Peak Hour	Pandosy Royal	1596 100	1628 133	1596 100	1628 133
AADT	Pandosy Royal	12768 800	13024 1064	12768 800	13024 1064
Collisions / Year:		1.82	1.98	2.03	2.21
% Increase wrt Baseline:		-10.2	-2.3	N/A	+8.8

 Table 1

 2015 Safety Performance Results:

Table 2
2030 Safety Performance Results:

Traffic Volume	Street	Scenario 1	Scenario 2	Scenario 3	Scenario 4
Dook Hour	Pandosy	1789	1967	1789	1967
reak noui	Royal	87	149	87	149
	Pandosy	14312	15736	14312	15736
AADT	Royal	696	1192	696	1192
Collisions / Year:		1.92	2.36	2.14	2.62
% Increase wrt Baseline:		-10.2	+10.0	N/A	+22.6

Therefore, with the development it is estimated that realigning the intersection will reduce collisions by approximately 11 to 13% over the first 15 years. It is suggested that this provides sufficient justification for the realignment of the intersection that is achievable with a 5 metre road dedication; however, the justification of further realignment based on a 10 metre wide dedication should be based on the performance of the initial realignment.

7. Summary

Based on a review of Opus International Consultants (Canada) Limited's *Collett Manor Transportation Impact Assessment*, a review of the collision history, and a site visit the following conclusions have been reached.

- The expected traffic volumes at the Pandosy Street and Cadder Avenue intersection are sufficient at the 2015 horizon (with development) to justify the addition of a northbound right turn lane. This addition will reduce delays and improve road safety. Insufficient road width exists on the north and south legs of Pandosy Street to reassign lane space to include a separate right turn lane without creating unacceptable safety concerns. The traditional approach of widening for a separate northbound right turn lane is recommended.
- Insufficient data has been used in the assessment of the pedestrian crossing control at the intersection of Pandosy Street and Royal Avenue. Analysis in this report indicates that if existing pedestrian volumes create an additional 16 equivalent adult units, a pedestrian signal is warranted. Moreover, given the potential for future pedestrian traffic, the type of pedestrian activity, and the distractions for area motorists it is recommended that engineering judgement be used to advance a pedestrian signal even if revised warrant calculations fall short of the pedestrian signal warrant.
- Improvements can be made to the off-set intersection of Pandosy Street and Royal Avenue with a 5 metre road dedication. It is estimated that the realignment would reduce collisions at the intersection by 11 to 13% over the next 15 years. The City is protecting lands for the possibility of a straight alignment connection of Royal Avenue, but the improvements would be costly and cannot be justified by the expected collision reduction at this time. It is suggested that the decision to proceed should be assisted by the performance of the initial realignment.



July 8, 2011 File No.: 1210-35

Mr. Andrew Bruce Senior Project Manager Site 360 Consulting/MMM 540 Leon Avenue Kelowna, B.C. V1Y 6J6 Email: ABruce@site360.ca

Dear Mr. Bruce:

SUBJECT: Dispute Resolution - Marrington Project File No. Z10-0040

This letter addresses the dispute resolution meeting held June 9th, 2011 regarding servicing requirements for the above project and your subsequent email of July 6, 2011. The matters in dispute were; the requirements of the City for the developer to fund a pedestrian signal at a cost of \$150,000 and the requirement for a 5.0 meter road reserve along Royal Avenue in addition to 5.0 meters for road widening. I will respond to each item separately.

- 1) Pedestrian Signal Requirement Your consultant provided considerable information indicating that this development was not the sole trigger for this infrastructure upgrade as considerable background pedestrian movement already exists. Conversely, City staff provided information that indicated that this development will trigger the need for the full pedestrian signal and consistent with City requirements are requesting full payment. After reviewing the information provided by your consultant and considering all the factors of what is occurring in this area (Hospital impacts, OCP transportation and land use plans, consideration of Royal Avenue use and extension) I do not support City staff's recommendation for full payment. There is considerable information that this full signal is also a requirement due to road network considerations and background activity. I support your consultant's recommendation that the costs be shared. My decision is that the signal costs be shared equally between the City and developer.
- 2) Requirement for a 5 meter road reserve- The City has indicated it intends to extend Royal Avenue through to Richter Street as boundary of the Hospital zone. Due to alignment issues with Royal Avenue west of Pandosy Street there is a need for a road reserve in addition to the 5 meter road dedication. Through Mr. Muenz I have requested that you provide information on whether the intersection can be done in a manner such that Royal Avenue can be constructed within the current right of way with the 5 meter dedication that your client has already agreed to. My reason for requesting this is that I believe the overall property acquisition impacts for this extension to Richter Street will be less if most of the road is kept to the south. Assuming this can be accomplished with minimal impact on your client's development I will not support the City's requirement for a 5 meter road reserve for the full frontage along Royal Avenue. If not, please advise and I will give further consideration to my decision.

Community Services 1435 Water Street Kelowna, BC V1Y 1J4 TEL 250 469-8500 FAX 250 862-3320 kelowna.ca 2

I believe the decisions given are consistent with your clients' interests and also provide the City the infrastructure to support the needs in this area. Should your clients not support my decision, please arrange the next stage in the dispute process with Mr. Jim Paterson, General Manager, Community Sustainability. Be advised that should you go that course, Mr. Paterson is not held to the decisions I have reached and may reach decision contrary to those I have made.

Should you require any clarification with my decisions, please advise.

Yours truly,

JohnVos, P. Eng. General Manager, Community Services

cc. Development Engineering Manager Regional Services Director Land Use Management Director Transportation Planning Technician

> Community Services 1435 Water Street Kelowna, BC V1Y 1J4 TEL 250 469-8500 FAX 250 862-3320 kelowna.ca

REPORT TO COUNCIL



Date:	November 1, 2011			VGION	VIId	
То:	City Manager					
From:	Land Use Management, Community	Sustainability	y (Aw)			
Application:	TA10-0007	Owner:	N/A			
Address:	N/A	Applicant: (City of Ke	lowna (LUM)		
Subject:	Text Amendment for HD2 - Hospital	& Health Sup	oport Ser	vices Zone Su	ıpplemental Rej	port

1.0 Recommendation

THAT Text Amendment No. TA10-0007 to add the proposed HD2 - Hospital & Health Support Services zone and the Retail Stores, Health Products definition Zoning Bylaw No. 8000 as outlined in Schedule "A" of the report of the Land Use Management Department dated November 1, 2011 be received by Council.

2.0 Purpose

This Text Amendment application has been submitted in order to add the proposed HD2 - Hospital & Health Support Services zone to Zoning Bylaw No. 8000.

3.0 Land Use Management

The proposed HD2 zone will create a zone that provides services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs that include staff, clients, patients and their families. This zone will provide for a range of institutional, health services, commercial and residential uses. In particular the proposed zone includes the following commercial uses: Personal Service Establishments, Emergency and Protective Services, Extended Medical Treatment Facilities, Health Services, Retail Stores, Health Products, Food Primary, Apartment Hotel and Hotel. The HD2 zone will be able to accommodate both significant redevelopments when the appropriate lot consolidations have been made and smaller conversions for single lots.

Staff have been working with a few interested parties to create a zone that allows for this form of development within the newly designated Health District Area. Staff had forwarded the HD2 with the 'Marrington' development application as that project had initiated the zone. However, this application was recently deferred until January 10th, 2012. As such, Council directed that the HD2 zone be separated from this application so that it can be considered at Public Hearing November 29, 2011.

the purpose of the HD2 zone and its adoption will allow development to take place in the Health District as envisioned in the 2030 OCP.

Report prepared by:

Alec Warrender, Land Use Planner

Reviewed by:

Danielle Noble Manager, Manager, Urban Land Use

Shelley Gambacort, Director, Land Use Management

Approved for Inclusion: Attachments: HD2 Zone

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	Schedule	Landscape Buffer	Minimum	Table 7.1	Definitions		ווונפו מרפרוסט	Section 2 -	Section 1.3.1	Administration	General	Section 1 -					Section	
Sign Rulaw No 8725	C/rts, C/tp/rts, C8tp, C9tp, C9rts, C9tp/rts, C10, C10tp, C10rts, C10tp/rts	C3lp/rls, C4lp, C4rls, C4lp/rls, C6lp, C6rls, C6lp/rls, C7lp,	C1, C2, C3, C4, C5, C6, C7, C8, C9, C2rls, C3lp, C3rls,	Commercial Zones		nı					HUT Health District 1 Zone	Section 17 - Health District Zones		וועז Kelowna General Hospital 17-1	Section 17: Health District Zones		Evicting Toyt	Zoning Bylaw No. 8000
	C7rls, C7lp/rls, C8lp, C9lp, C9rls, C9lp/rls, C10, C10lp, C10rls. C10lp/rls. HD2	C3lp/rls, C4lp, C4rls, C4lp/rls, C6lp, C6rls, C6lp/rls, C7lp,	C1. C2. C3. C4. C5. C6. C7. C8. C9. C2rle C3lp. C3rle	Commornial Zanaa	limited to pharmacies, health food stores, naturopathic	custom fitted or repaired. Such uses include but are not	products related to the health industry are sold, rented,	Retail Stores, Health Products means a retail outlet where		HD2 Hospital & Health Support Services	HD1 Health District 1 Zone	Section 17 - Health District Zones	17.2 HD2 Hospital & Health Support Services	17.1 HD1 Kelowna General Hospital 17-1	Section 17: Health District Zones	Proposed lext		

	-	2	INC.		
	Section 6.1	Continu / A		へつうすううう	
RM5, RM6, and RM7)*	Higher Density Residential Zones (RM1, RM2, RM3, RM4,				21311 Dy Iaw 140. 02.30
RM5. RM6. RM7 and HD2)*	Higher Density Residential Zones (RM1_RM2_RM3_RM4		Pronoced Text		

Schedule "A" - Attachment #1

HD2 – Hospital and Health Support Services

1.1 Purpose

The purpose is to provide a zone for the conversion and new development of buildings that provide services to the medical community associated with the Kelowna General Hospital, Interior Health Authority, and UBC Medical Programs including staff, clients, patients and their families. This zone will provide for a range of institutional, medicalrelated commercial and complimentary residential uses within the Official Community Plan Health District future land use designation.

1.2 Principle Uses

- 1.2.1 The **principle uses** for properties with a **lot area** of 900m² or more are:
 - (a) multiple dwelling housing
 - (b) personal service establishments
 - (c) emergency and protective services
 - (d) care centre, major
 - (e) congregate housing
 - (f) extended medical treatment facilities
 - (g) health services
- 1.2.2 The **principle uses** for properties with a **lot area** of less than 900m² are:
 - (a) single dwelling housing
 - (b) care centre, minor
 - (c) health services
- 1.3 Secondary Uses
- 1.3.1 The **secondary uses** for properties with a **lot area** of 900m² or more are:
 - (a) retail stores, health products
 - (b) food primary establishment
 - (c) apartment hotel
 - (d) hotel
 - (e) community recreation services
- 1.3.2 The secondary uses for properties with a lot area of less than 900m² are:
 - (a) bed and breakfast homes
 - (b) home based business, major
 - (c) home based businesses, minor
 - (d) secondary suites
- 1.4 Subdivision Regulations

- 1.4.1 The subdivision regulations for properties with a **lot area** of 900m² or more are:
 - (a) The minimum **lot width** is 30.0 m
 - (b) The minimum lot depth is 30.0 m
 - (c) The minimum lot area is 900 m^2
- 1.4.2 The subdivision regulations for properties with a lot area of less than 900m² are:
 - (a) The minimum **lot width** is 13.0 m.
 - (b) The minimum **lot depth** is 30.0 m.
 - (c) The minimum **lot area** is 490 m².

1.5 Development Regulations

- 1.5.1 Development Regulations for properties with a lot area of 900m² or more are:
 - (a) The maximum floor area ratio is 1.2, except it is 1.3 with a housing agreement pursuant to the provisions of Section 6.9. Where parking spaces are provided totally beneath habitable space of a principal building or beneath useable common amenity areas providing that in all cases, the parking spaces are screened from view, an amount may be added to the floor area ratio equal to 0.1 multiplied by the ratio of such parking spaces to the total required parking spaces, but in no case shall this amount exceed 0.1. The total maximum floor area ratio shall not exceed 1.4.
 - (b) The maximum **site coverage** is 55%. Parking structures that are less than 2.0 m above finished grade and are surfaced with **landscaping** or useable open space shall not be included in the calculation of **site coverage**.
 - (c) The maximum **height** is 16.5 m.
 - (d) The minimum site **front yard** is 4.5 m.
 - (e) The minimum site **side yard** is 4.5 m for a **building** less than 12.0 m in **height** and 6.0 m for portions of a **building** greater than 12.0 m in **height**.
 - (f) The minimum site **rear yard** is 6.0 m except it is 3.0 m where the **rear yard** abuts a **lane.**
 - (g) Notwithstanding the site setback requirements, a parking structure that is partially below grade may be located no less than 1.5 m from any property line provided that it is less than 2.0 m in height above natural grade and that a minimum horizontal measurement of 2.0 m on the top surface to the parking structure is either landscaped or made available as useable open space between the furthest project of the structure and the building face. All building setbacks otherwise apply. Where a parking structure is located within the building setbacks consistent with this section, the space between the structure and the property line shall be treated with a high level of landscaping with a landscaped berm to screen the exposed outer wall of the structure.
- 1.5.2 Development Regulations for properties with a **lot area** of less than 900m² are:
 - (a) The maximum site coverage is 55%.
 - (b) The maximum **height** is the lesser of 9.5 m or 2 ½ **storeys**, except it is 4.5m for **accessory buildings**.
 - (c) The minimum **front yard** is 4.5 m.
- (d) The minimum **side yard** is 2.0 m for a 1 or 1½ **storey building** and 2.3 m for a 2 or 2½ storey building, except it is 4.5 m from a **flanking street**.
- (e) The minimum **rear yard** is 6.0 m except it is 3.0 m where the rear yard abuts a lane and it is 1.5 m for **accessory buildings**.

1.6 Parking Regulations specific to the HD-2 Zone

The parking regulations that are specific to this zone for the purpose of calculating the number of **parking spaces** required are as follows:

- (a) All residential, residential related uses, **apartment hotel** and **hotel** uses shall be calculated as 1 **parking space** per **dwelling** unit.
- (b) Leasable areas that are not used for residential, residential related, apartment hotel and hotel uses shall be calculated as requiring 1.75 stalls per 100 m² of gross floor area.
- (c) Health Services shall be calculated as 2.5 stalls per 100 m² of gross floor area.
- (d) **Food primary establishment** uses shall be calculated as requiring 1 **parking space** per 4 seating spaces.

1.7 Other Regulations

- (a) In addition to the regulations listed in this section, other regulations apply. These include, where not consistent with the provisions of this section, the general **development** regulations of Section 6, the **landscaping** and fencing regulations of Section 7, the parking and loading regulations of Section 8 (except as specified by section 1.6 of this zone), and the specific use regulations of Section 9 of Zoning Bylaw No. 8000.
- (b) **Secondary uses** can only be present where a **principle use** is established and in continuous use.
- (c) **Offices** are limited to those related to **health services** or those that can demonstrate a direct support role for the Kelowna General Hospital, Cottonwoods Care Facility or Interior Health Authority.
- (d) Retail stores, health products shall be limited to a floor area not greater than 350 m² per lot.
- (e) When permitted, **food primary establishments** shall be limited to a total capacity of 40 seats.
- (f) **Apartment hotel** and **hotel** use shall only be permitted when secondary to **multiple dwelling housing** or **congregate housing**.
- (g) A minimum area of 7.5 m² of private open space shall be provided per bachelor dwelling, congregate housing bedroom or group home bedroom, 15.0 m² of private open space shall be provided per 1 bedroom dwelling, and 25.0 m² of private open space shall be provided per dwelling with more than 1 bedroom.
- (h) Level 2 landscape buffers are required for the **front yard** and Level 3 landscape buffers are required in all **side** and **rear yard** setback areas.
- (i) Vehicle-oriented or drive through services are not permitted in this zone.
- (j) All **vehicle** access must be from the rear **lane**.
- (k) Signage shall be in accordance with the regulations of the Sign Bylaw.
- (I) A free standing sign with a maximum height of 1.5 m and a sign area of 3.0m² is permitted