DEPARTMENT OF CITY PLANNING

RECOMMENDATION REPORT

City Planning Commission

Date: January 25, 2018
Time: After 8:30 a.m.*
Place: Van Nuys City Hall
14410 Sylvan Street, Room 201
Van Nuys CA 91401

Public Hearing: November 14, 2017
Appeal Status: General Plan Amendment and Specific Plan Amendment not appealable. The Vesting Zone Change and Height District Change are appealable only by the Applicant to City Council if disapproved in whole or in part. All other actions are appealable to the City Council per LAMC Section 12.36-C.
Expiration Date: January 25, 2018 (Pursuant to Extension)

Multiple Approvals: General Plan Amendment; Vesting Zone Change; Height District Change; Specific Plan Amendment; Conditional Use; Zone Variance; and Waiver of Dedications and Improvements.

Case No.: CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI
CEQA No.: ENV-2016-1662-EIR (Sch. No. 2016071041)
Incidental Cases: N/A
Related Cases: VTT-74314
Council No.: 3 – Blumenfield
Plan Area: Encino-Tarzana
Specific Plan: Ventura-Cahuenga Boulevard Corridor Specific Plan
Certified NC: Tarzana
GPLU: Community Commercial
Zone: *Existing:* [Q]C2-1L, C2-1, P-1
Proposed: [T][Q]C2-1

Applicant: Jeremy Stremme
Representative: Latham & Watkins LLP
Cindy Starrett/Beth Gordie

PROJECT LOCATION: 18321 W. Clark Street; 18365 W. Clark Street; 18411 W. Clark Street; 18370 W. Burbank Boulevard; 18410 W. Burbank Boulevard; 18420 W. Burbank Boulevard; APN 2160010035

PROPOSED PROJECT: Providence Health System–Southern California, the Project Applicant, proposes new and improved facilities and improved access to care at the Providence Tarzana Medical Center as part of the Providence Tarzana Medical Center Project (Project). The Project will be implemented on the existing Providence Tarzana Medical Center (Project Site) located in the Encino-Tarzana community of the City of Los Angeles. The Project Site comprises approximately 13 acres and is currently improved with four permanent buildings, eight modular buildings, a parking structure, and surface parking areas. The Project proposes upgrades and enhancements to the Hospital on the Project Site, including enhancing the existing Hospital lobby (Lobby Enhancement), expanding the diagnostic and treatment areas (D&T Expansion), constructing a new central utility plant in the basement of the D&T Expansion, and constructing a new patient wing (New Patient Wing). The Project would also include the construction of a new above grade six-level parking structure that would provide approximately 565 parking spaces. To provide for the proposed improvements, the Project would include removal of the existing pharmacy within the Hospital, eight modular buildings,

and the MRI Building. The uses in these existing buildings to be removed, including the pharmacy, would be relocated within the Hospital. Overall, the Project would remove approximately 17,948 square feet of existing floor area and construct approximately 292,000 square feet of new floor area, resulting in a net increase of approximately 274,052 square feet of net new floor area within the Project Site. The Project would require excavations up to 23 feet below ground surface.

REQUESTED ACTIONS:

ENV-2016-1662-EIR

1. The City Planning Commission consider, based on the whole of the administrative record, that the Project was accessed in the previously certified Providence Tarzana Medical Center Project EIR No. ENV-2016-1662-EIR, SCH No. 2016071041; and associated Statement of Overriding Considerations, accompanying mitigation measures, and Mitigation Monitoring Program, and no subsequent EIR or addendum is required for approval of the Project;

CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI

2. Pursuant to LAMC Section 11.5.6, **a General Plan Amendment** to amend the General Plan Land Use Map, Encino-Tarzana Community Plan to add a new Footnote 19 to Community Commercial Land Use to allow Height District No. 1, to permit the New Patient Wing height of six stories and 120 feet, with cooling towers on the New Patient Wing that would reach 125 feet in height, in lieu of the maximum height of 45 feet;

3. Pursuant to LAMC Section 11.5.7 G, a **Specific Plan Amendment** to the Ventura/Cahuenga Boulevard Corridor Specific Plan to amend the Specific Plan boundary Designations, Map 5—Tarzana Section and Pedestrian Oriented Areas, Exhibit B—Tarzana Section to exclude the Project Site;

4. Pursuant to LAMC Sections 12.32 F and 12.32 Q, a **Vesting Zone and Height District Change** from [Q]C2-1L, C2-1, and P-1 to [T][Q]C2-1, subject to the conditions established in the ordinance implementing the Project approvals, CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI, to permit the New Patient Wing height of six stories and 120 feet, with cooling towers on the New Patient Wing that would reach 125 feet in height, and the New Parking Structure, which would have a height of six levels and approximately 60 feet;

5. Pursuant to LAMC Section 12.24.U.14, a **Major Development Project Conditional Use Permit** for a development that creates 100,000 square feet of floor area or more in the C2 zone;

6. Pursuant to Charter Section 562 and Los Angeles Municipal Code Section 12.27, a **Zone Variance** from LAMC Section 14.4.2 and Section 14.4.8.B for a monument sign with a vertical dimension greater than its horizontal dimension and with a height of more than eight feet above grade, and LAMC Sec. 14.4.10.A. 1 and 2 for a wall sign which exceeds its permitted sign area; and

7. Pursuant to LAMC Section 12.37.I.3., a **Wavier of Street Improvements and Dedications** on Burbank Boulevard and Etiwanda Avenue adjacent to the project site.

RECOMMENDED ACTIONS:

ENV-2016-1662-EIR

1. **FIND,** based on the independent judgement of the decision-maker, after consideration of the whole of the administrative record, the Project was assessed in the Providence Tarzana Medical Center EIR No. ENV-2016-1662-EIR, SCH No. 2016071041, and associated Statement of Overriding Considerations, accompanying mitigation measures, and Mitigation Monitoring Program, certified on December 5, 2017; and pursuant to CEQA Guidelines, Sections 15162 and 15164, no subsequent EIR or addendum is required for approval of this Project.

CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI

2. **Recommend** that the City Council **Approve** a **General Plan Amendment** to add a site-specific footnote to the Encino-Tarzana Community Plan to read as follows: "Height District 1. The use of this property shall be limited to Height District 1 and as established in the ordinance implementing CPC-2016-2248-GPA-VZV-HD-SP-CU-ZV-WDI."
3. **Recommend** that the City Council **Adopt** a **Specific Plan Amendment** to the Ventura-Cahuenga Boulevard Corridor Specific Plan to exclude the Project Site from Map 5—Tarzana Section and Pedestrian Oriented Areas, Exhibit B—Tarzana Section to exclude the Project Site, attached as Exhibit C and D ;
4. **Recommend** that the City Council approve a **Vesting Zone Change** and **Height District Change** from [Q]C2-1L, C2-1 and P-1 to [T][Q]C2-1, subject to the attached conditions of approval;
5. **Approve** a **Conditional Use Permit** for a **Major Development Project** that creates 100,000 square feet of non-residential floor area in the C2 Zone;
6. **Approve** a **Zone Variance** to allow a monument sign with a vertical dimension greater than its horizontal dimension and with a height of more than eight feet above grade, and a wall sign which exceeds its permitted sign area, subject to the attached conditions of approval;
7. **Dismiss a Wavier of Dedications and Improvements** as no longer necessary pursuant to the Advisory Agency's action on December 5, 2017 for related case VTT-74314;
8. **Adopt** the attached Findings;
9. **Advise** the applicant that, pursuant to California State Public Resources Code Section 21081.6, the City shall monitor or require evidence that mitigation conditions are implemented and maintained throughout the life of the project and the City may require any necessary fees to cover the cost of such monitoring;
10. **Advise** the applicant that pursuant to State Fish and Game Code Section 711.4, a Fish and Game Fee and/or Certificate of Fee Exemption may be required to be submitted to the County Clerk prior to or concurrent with the Environmental Notice of Determination ("NOD") filing; and
11. **Advise** the applicant that the approved Vesting Tentative Tract Map may require modification as a result of this determination.

VINCENT P. BERTONI, AICP
Director of Planning

Charles J. Rausch, Jr.
Interim Chief Zoning Administrator

Luciralia Ibarra,
Senior City Planner

Elva Nuño-O'Donnell, City Planner
Telephone: (818) 374-5066
Email: elva.nuno-odonnell@lacity.org

ADVICE TO PUBLIC: *The exact time this report will be considered during the meeting is uncertain since there may be several other items on the agenda. Written communications may be mailed to the Commission Secretariat, 200 North Spring Street, Room 532, Los Angeles, CA 90012 (Phone No. 213-978-1300). While all written communications are given to the Commission for consideration, the initial packets are sent to the week prior to the Commission's meeting date. If you challenge these agenda items in court, you may be limited to raising only those issues you or someone else raised at the public hearing agendized herein, or in written correspondence on these matters delivered to this agency at or prior to the public hearing. As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability, and upon request, will provide reasonable accommodation to ensure equal access to this programs, services and activities. Sign language interpreters, assistive listening devices, or other auxiliary aids and/or other services may be provided upon request. To ensure availability of services, please make your request not later than three working days (72 hours) prior to the meeting by calling the Commission Secretariat at (213) 978-1300.

TABLE OF CONTENTS

Exhibits:

Environmental Impact Report link:

https://planning.lacity.org/eir/ProvidenceTarzanaMedicalCtr/ProvidenceTarzanaCoverPg.html

[THIS PAGE INTENTIONALLY LEFT BLANK]

PROJECT ANALYSIS

Project Location and Existing Uses

The Applicant, Providence Health System Southern California, is proposing to renovate and construct new facilities at their existing Providence Tarzana Medical campus located at 18321 W. Clark Street (18365 W. Clark Street; 18411 W. Clark Street; 18370 W. Burbank Boulevard; 18310 W. Burbank Boulevard; 18420 W. Burbank Boulevard and APN No. 2160010035). The site is bound by Burbank Boulevard to the north, on the south by Clark Street, beyond an intervening medical plaza on the east by Etiwanda Avenue and beyond intervening commercial uses to the west by Reseda Boulevard, within the Encino-Tarzana Community Plan.

The 13 net-acre Project Site consists of seven contiguous, irregular shaped parcels currently improved with four buildings, including the Providence Tarzana Medical Center, a 249-bed hospital, eight modular buildings, a four-level parking structure, an MRI Center, the Tarzana Garden Plaza, and Cube Medical Office Building (not operated by the Project Applicant, but leased from the Applicant).

Project Description

The Project proposes to renovate and construct new facilities at the Providence Tarzana Medical Center as part of the Providence Tarzana Medical Center Project (Project). The Project Site is currently improved with four permanent buildings, eight modular buildings, a parking structure, and surface parking areas. The Project proposes upgrades and enhancements to the Hospital on the Project Site, including replacing the Hospital's Main Building (Main Building Replacement) and new canopy, improvement of the Emergency Department and Walk-in canopy, expanding the diagnostic and treatment areas (D&T Expansion) and adding a new canopy, constructing a new central utility plant in the basement of the New Patient Wing, and constructing a new patient wing (New Patient Wing). The Project will result in a slight decrease in the number of acute care inpatient beds from 249 to 244 at the Hospital. The Project would also include the construction of a new above-grade, six-level parking structure that would provide approximately 565 parking spaces, for a total of 1,500 parking spaces on-site.

To provide for the proposed improvements, the Project would include removal of the existing pharmacy within the Hospital, eight modular buildings, and the MRI Building. The uses in these existing buildings, including the pharmacy, would be relocated within the Hospital. Overall, the Project would remove approximately 37,198 square feet of existing floor area and construct approximately 294,000 square feet of new floor area, resulting in a net increase of approximately 256,802 square feet of net new floor area within the Project Site. At buildout, the Project Site would include a total of 579,744 square feet of floor area with 1,500 automobile parking spaces and 78 bicycle spaces. A maximum height of 120 feet is proposed for the New Patient Wing, with an additional 5 feet for the proposed cooling towers. The Project includes the removal and replacement of 115 trees on the Property, none of which are considered protected trees as defined by the City's Protected Tree ordinance, for a total of 187 trees on-site. Upon approval, the Project anticipates to begin construction in 2018, with the removal of the modular buildings and MRI Center, followed by the New Parking Structure, Main Building Replacement, New Patient Wing, and the D&T Expansion. Construction could be completed as early as 2022 and as late as 2025.

Table 1. Existing and Proposed Building Summary

Building	Existing (sf)	Proposed Demolition (sf)	Proposed Construction (sf)	Net New (sf)	Total with Project (sf)
Hospital	204,097	(23,250)	294,000	270,750	474,847
MRI Center	2,560	(2,560)	0	(2,560)	0
Tarzana Garden Plaza	39,019	0	0	0	39,019
Cube Medical Office Building	65,878	0	0	0	65,878
Modular Buildings	11,388	(11,388)	0	(11,388)	0
Total	**322,942**	**(37,198)**	**294,000**	**256,802**	**579,744**

Parking

There are currently 1,259 parking spaces located throughout the Project Site, including 596 spaces located within a 4-level parking structure and 663 surface parking located in various locations on-site. Upon completion of the Project, 1,251 parking spaces would be required under LAMC requirements. However, the Project will provide 1,500 parking spaces, including 565 parking spaces in the proposed six-level New Parking Structure. In addition, bicycle parking would include 26 short-term parking, located near pedestrian entrances to the Main Building Replacement and Emergency Department Walk-In Canopy entrance of the New Patient Wing, and 52 long-term bicycle parking spaces located on the ground level of the New Parking Structure.

Although the Project as proposed exceeds LAMC requirements by 249 parking spaces, the hospital use demands more than Code requirements for its daily operations. In terms of a hospital use, there is a direct correlation between availability of parking and prompt access to medical care. Emergency situations call upon experts in a particular specialty that may be

called in from satellite locations. Transit would not be an option in these types of circumstances. In addition, during catastrophic emergencies such as earthquakes and mass casualty situations, parking areas often become areas of triage and mobilizing medical staff to necessary locations, with adequate parking, is imperative in the pursuit of providing life-saving measures. In addition, the Hospital currently provides limited off-site parking for employees. The additional parking would allow the employees to park on-site. As such, the Code is not reflective of hospital operations and the proposed parking would appropriate for the use.

Table 2. Vehicle Parking Requirements

Land Use	Size	Method 1: LAMC	Method 2: Ventura-Cahuenga Specific Plan
Parking Requirement Rates			
Hospital		2 per bed	2.5 per bed
Medical Office Building		1 per 200 sf	1 per 250 sf
Office		1 per 500 sf	1 per 300 sf
Existing Parking Requirement			
Main Hospital	249 beds	498	623
Cube Medical Office Building	65,878 sf	329	264
Tarzana Garden Plaza	39,019 sf	23	38
Modular Buildings	(11,388)	195	156
Total Existing Requirement		**1,045**	**1,081**
Net Increase in Project Parking Requirement			
Main Hospital	35 beds	70	88
Cube Medical Office Building	0	0	0
Tarzana Garden Plaza	0	0	0
Modular Office Buildings	(11,388 sf)	(23)	(38)
Existing Patient Building (Ancillary & Support)	79,680 sf	159	266
Increase in Parking Requirement		**206**	**316**
Existing + Project Requirements		**1,251**	**1,397**
Total Project Parking Provided		**1,500**	**1,500**

Vehicular Access

The Project Site currently provides access from multiple driveways on Burbank Boulevard and Clark Street. Access will continue to be provided along Burbank Boulevard and Clark Street. Specifically, along Burbank Boulevard, the primary public (non-emergency and emergency) access would continue to be provided from the western driveway. As part of the Project, this driveway would be modified to include a traffic signal control, with an exclusive left- turn outbound lane from the Project Site onto westbound Burbank Boulevard. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US-101 Southbound on-ramp to the east. Furthermore, a pedestrian crosswalk would be installed across Burbank Boulevard on the

west side of the driveway. The eastern driveway along Burbank Boulevard, which would continue to provide emergency access, would be modified to lead directly to the new Emergency Department on the northeastern edge of the Project Site. The central driveway along Clark Street, adjacent to the Existing Patient Building, would continue to provide primary public (non-emergency) and service access, and would also provide public (emergency) access. The two western driveways located along Clark Street would continue to provide secondary public (non-emergency) and access to the Tarzana Garden Plaza surface parking area and the Cube Medical Office Building surface parking area. In addition, the eastern driveway located along Clark Street, adjacent to the eastern portion of the Hospital, would continue to provide service access. The easternmost driveway located along Clark Street would no longer provide public (non-emergency and emergency) access, but would be modified to serve emergency vehicles only. Lastly, the driveway located on the western edge of the Project Site, which currently provides employee access, would be removed.

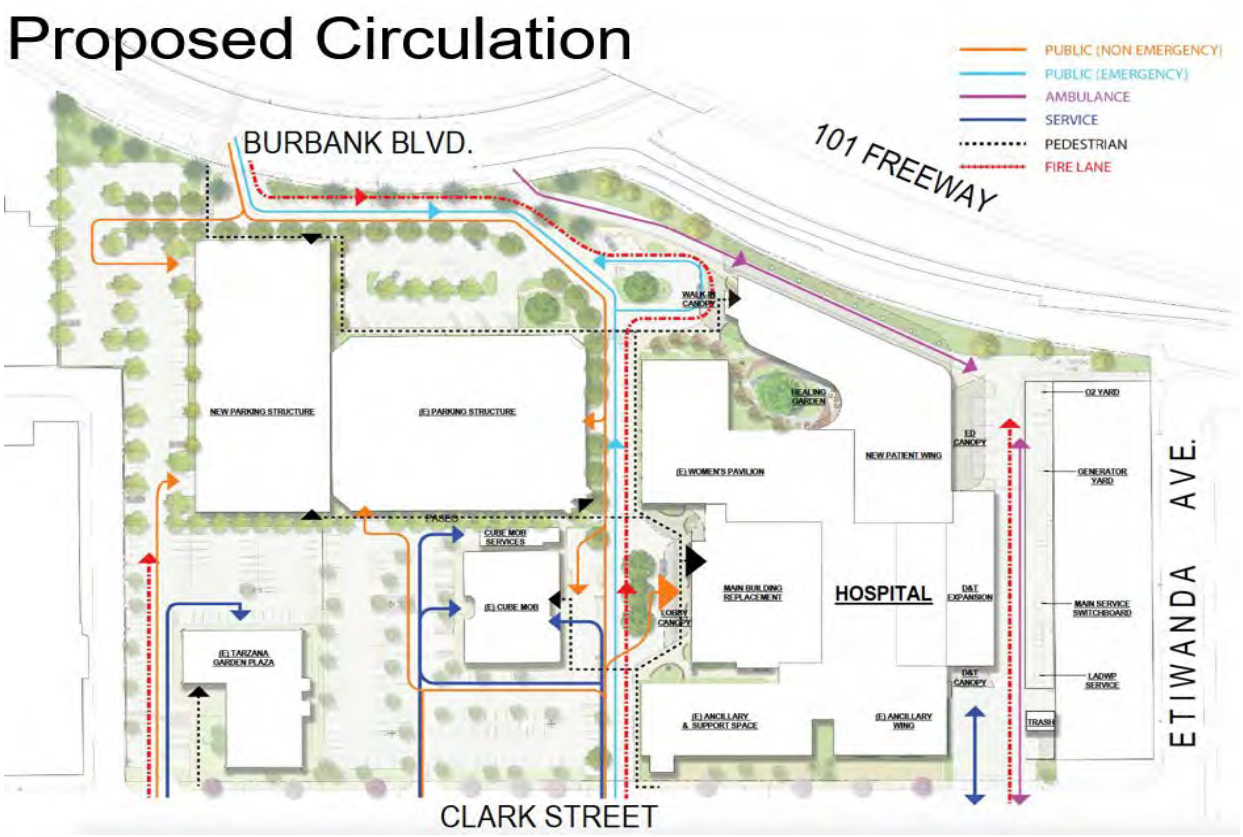
Hospital and Receiving Service Areas (Trash and Loading Areas)

Access to service areas and the utility yard will be via the easterly driveway accessible on Clark Street. Services have been consolidated and relocated to the eastern property line. A new trash facility will be enclosed on three sides by a block wall, with heights proposed at 14 feet. The enclosure will include a canopy that would primarily cover the area where trash is deposited into two proposed trash compactors. The opening of the trash enclosure will face the D&T Expansion, on the western side of the trash enclosure internal to the site. The LADWP substation will be relocated directly north of the trash enclosure which would be enclosed on four sides by 14-foot walls and open to the sky.

In order to minimize disruption to the adjoining medical office plaza located directly east of the Project Site, the Project has been conditioned to only operate one trash compactor at a time minimizing noise the nearest sensitive receptor (multi-family) south of Clark Street. Further, in accordance with DOT assessment letter, the Applicant is required to submit a Driveway Access and Circulation Plan which requires all delivery truck loading and unloading to take place on-site. However, vehicles which must back into the public-right-of-way via any Project driveways are permitted to do so with a flagman to direct the vehicles ensuring that delivery vehicles do not impact the traffic flow on Clark Street.

Pedestrian Access

Existing pedestrian access would be enhanced with direct linkages to on Project Site. The space between the existing parking structure and the New Parking Structure would be improved with a 5-foot pedestrian walkway. The design provides direct paths of travel for pedestrian destinations within the Property creating safe, easily accessible and short distances from transit stops. Wayfinding signage will be incorporated within the site to readily direct patients and visitors to appropriate locations and services. Low-level lighting will further enhance the pedestrian walkways and paseos. A “boulevard” would be provided on the southern edge of the New Parking Structure and existing parking structure to provide for a shaded pedestrian link to the main entrance of the hospital. As referenced above, all service areas would be consolidated to the eastern property line maintaining a clear separation from public access areas.



Open Space

The Project proposes a total of 106,710 square feet of open space comprised of 68,100 square feet of landscaping, including a 5,700 square-foot outdoor garden (Healing Garden) and 38,610 square feet of pedestrian paving. Various landscaped pedestrian paseos will facilitate pedestrian access to various parking structures and buildings on the Project Site. As part of the proposed landscaping, 115 replacement trees will be planted and 72 existing trees will remain, resulting in a total of 187 trees on-site. A variety of tree species are proposed that include Crepe Myrtles, Canary Pines, Chinese Elms, African Sumacs, Toyons, Laurel Bays, Holly Oaks, Southern Magnolia Oaks. The grouping of these trees will provide varying textures and colors to the green space environment. In addition, given the existing parking structure is setback 160 feet from the property edge along Burbank Boulevard and approximately 300 feet from Clark Street, and the New Parking Structure would be set back approximately 70 feet from Burbank Boulevard and 300 feet from Clark Street, the grouping of these trees, combined with the landscaped paseos will be provide focal points from the public right-of-way.

PROJECT BACKGROUND

The Project Site is located at 18321 Clark Street, in the community of Tarzana, approximately 18 miles northwest of downtown Los Angeles. The Project Site is approximately 13-acres and is bounded by Burbank Boulevard and the eastbound on-ramp to the Ventura Freeway (US-101) on the north, a medical plaza on the east, Clark Street on the south, and commercial uses on the west. Beyond the intervening medical plaza is Etiwanda Avenue to the east. Beyond the intervening commercial uses is Reseda Boulevard to the west. Primary regional access is

provided by the Ventura Freeway, which runs northeasterly of the Project Site. The Encino-Tarzana Community Plan designates the property Community Commercial land use with corresponding zones of CR, C2, C4, and RAS-3. The Project Site is currently zoned [Q]C2-1L, C2-1, and P-1.

The Project Site is further located within the Ventura-Cahuenga Boulevard Corridor Specific Plan (Specific Plan). The Specific Plan also designates the project site as Community Commercial with a restricted height of 45 feet. The Hospital, which originally opened in 1973, predates the Specific Plan and is requesting a specific plan amendment to be excluded from the Specific Plan boundary.

Office of Statewide Health Planning Development

The renovation, expansion, or construction of medical facilities is under the jurisdiction of the Office of Statewide Health Planning Development (OSHPD). The City of Los Angeles has limited review over the Project buildings which is basically restricted to the New Parking Structure, and other regulations such as on-site stormwater infiltration, site grading and site retaining walls (not part of any medical facilities), and landscaping, as well as required entitlements and relevant environmental clearance. Nevertheless, OSHPD requires sign-off from local jurisdictions verifying the Project is consistent with local ordinances.

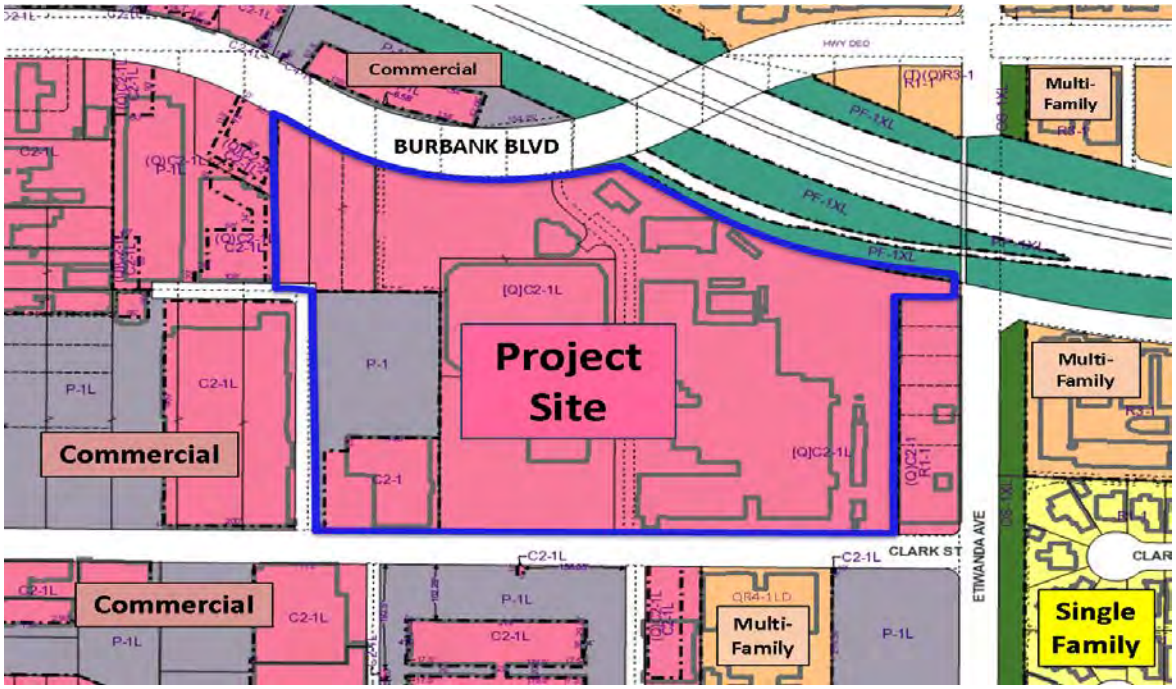
Providence Tarzana Medical Center (PTMC) is currently in process with OSHPD to retrofit Building 2 and Building 3 to comply with certain seismic safety requirements of the Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1994 (Senate Bill 1953). Hospitals as defined in Health & Safety Code Section 129725 and licensed pursuant to Health & Safety Code Section 1250(a) are required to comply with the regulations developed by OSHPD as mandated by Senate Bill 1953 to be completed by 2020. On September 28, 2017, Governor Brown signed into law AB 908 to extend the 2020 seismic retrofitting deadline until October 1, 2022 in order to obtain a certificate of occupancy from OSHPD for the replacement building, i.e. the New Patient Wing for the Providence Tarzana Medical Center.

Table 3. Summary of OSHPD and City Jurisdictions for Buildings

OSHPD Jurisdiction	**Proposed Project -Buildings**	
Seismic Upgrades (Compliance with SB1953)	**OSHPD** Jurisdiction-Building Permits	**City of Los Angeles** Jurisdiction
-Main Building Demolition -Existing Patient Building -Ancillary Wing	-Main Building Replacement -New Patient Wing -D&T Expansion	-New Parking Structure -Landscaping
		CEQA, Entitlements and Relevant Permits

Current Zoning and Land Uses

The site is currently zoned [Q]C2-1L, C2-1, and P-1 with a General Plan Land Use designation of Community Commercial, consistent with the Community Commercial designation of the Ventura-Cahuenga Boulevard Corridor Specific Plan. The C2 Zoning and Community Commercial land use designation permits the use of the existing hospital and accessory uses. However, the P-Zoned portion of the Project Site would prohibit any above-grade structures.



The Project Site is furthered governed by Ordinance No.165,846, adopted by City Council on April 30, 1990 as part of a zone change and general plan amendment to allow the construction and maintenance of a medical facility and related parking structure on-site. The Project Site is limited to medical and parking uses, and development is currently restricted to a total gross floor area not to exceed 286,000 square feet, a maximum height of 45 feet, and a minimum of 1,140 parking spaces.

The 13-acre Project Site is currently developed with a hospital campus consisting of seven contiguous parcels currently improved with four permanent buildings, eight modular buildings, a parking structure, and surface parking areas. The Hospital building originally opened in 1973 and was expanded in 1975, 1981, 1989, and 1992. The Hospital contains approximately 204,097 square feet of floor area is approximately 82 feet three inches in height. The Hospital consists of several connected areas referred to as the Main Building, the Ancillary Wing, the Existing Patient Building and the Women's Pavilion. The Hospital further includes the Emergency Department. The main Building contains 21 acute care beds in the NICU, as well as operating rooms, the Imaging Department and Laboratory. The Existing Patient Building contains 195 acute care beds. The Ancillary Wing contains diagnostics and treatment areas, the Pediatric Intense Care Unit and the Hospital's pharmacy. The Hospital's Women's Pavilion has 33 acute beds and contains Women's Perinatal Services. A Magnetic Resonance Imaging (MRI) Center is a free-standing building located in the northern area of the Project Site along with eight modular buildings occupied with additional hospital administrative uses. The Hospital provides for a total of 249 beds consisting of 171 single-occupancy rooms, 36 double-occupancy rooms, and two triple-occupancy rooms. The current Hospital practice is to typically only admit one patient in a room due to age differences, patient sex, disease process, and increasing concerns of privacy due to advancing technologies. As a result, the Hospital often operates the double and triple occupancy rooms as single-occupancy rooms. Thus, the Hospital provides for 209 "effective beds" in regular use.

The Property also includes the Tarzana Garden Plaza (Plaza), a medical office building containing medical and dental office and a pharmacy, operated by Providence Tarzana Medical Center (PTMC). The Plaza contains 39,019 square feet of floor area and is 44 feet, five inches in height. A second medical office building, referred to as the Cube Medical Office Building (Cube MOB), not operated by the Hospital, is subject to a ground lease to a third party to the year 2050. The Cube MOB contains 65,878 square feet of floor area and is 100 feet, eight inches in height.

Proposed Land Use and Zoning

The Applicant is requesting a General Plan Amendment to the Encino-Tarzana Community Plan to add a site-specific Footnote (19) to allow Height District 1 in the Community Commercial land use designation. The Project Site is further subject to three footnotes attached to the Community Commercial land use designation: Footnote 12 (Height District No. 1VL) restricts height to three stories and 45 feet; Footnote 13 (Height District No. 1L) allows a maximum height of six stories and 75 feet, and Footnote 17 allows a maximum FAR of 2:1.

A Specific Plan Amendment is also requested to exclude the Project Site from the Ventura-Cahuenga Corridor Specific Plan for the implementation of the Project due to restrictions of height and yard setbacks.

The Applicant is also requesting a Zone Change and a Height District Change from the existing [Q]C2-1L, C2-1 and P-1 to a uniform [T][Q]C2-1 across all parcels to permit the maximum height of 120 feet (plus an additional 5 feet for the cooling tower) for the New Patient Wing otherwise restricted to 45 feet by the existing “Q” Condition and the Ventura-Cahuenga Boulevard Corridor Specific Plan, and to exceed the maximum floor area restriction of 286,000 square feet established by the “Q” Condition.

Adjacent Land Uses: The surrounding uses are as follows:

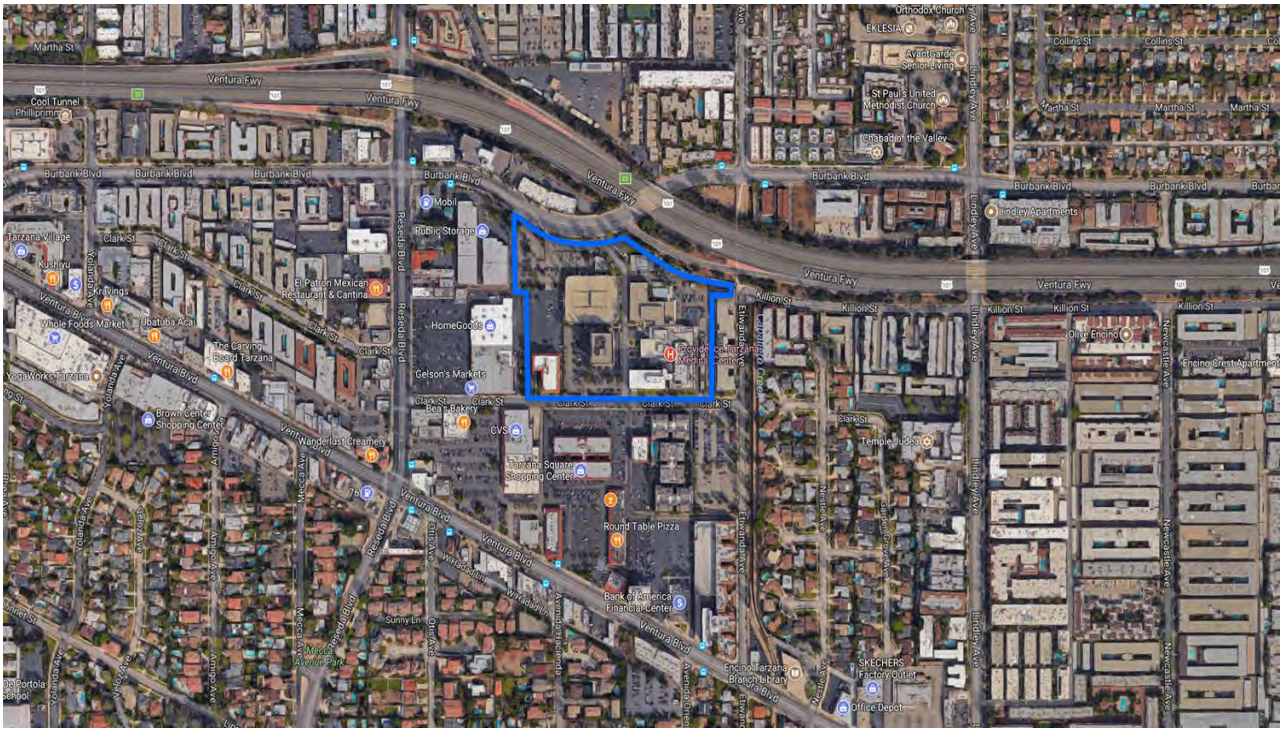
- North: The north side of the Project Site across from Burbank Boulevard, includes a two-story office building (designated Community Commercial and zoned C4-1L) and a surface parking lot (designated Automobile Parking and zoned P-1L) for the office building.

- East: Directly east of the Project is the three-story Tarzana Medical Plaza (designated Community Commercial and zoned [Q]C2-1L and R1-1. Further east of the Project Site and across Etiwanda Avenue is an intervening flood control channel, referred to as Cabrillo Creek (designated Open Space and zoned 1XL). East of the flood control channel are two-story, multi-family and one-story single-family residential uses (designated Medium Residential and Low II Residential and zoned R3-1 and R1-1, respectively).

- South: Land uses to the south of the Project Site, across Clark Street include three-story multi-family residential uses, a surface parking lot (designated Community Commercial and Automobile Parking and zoned [Q]C2-1L, C2-1L, QR4-1LD, and P-1L) and medical uses associated with the two-story Tarzana Medical Square and a surface parking lot (designated Community Commercial and Automobile Parking and zones C2-1L and P-1L, respectively).

- West: Directly west of the Project Site is a one-story grocery store (designated Community Commercial and zoned C2-1L), a one-story home furnishing store (designated Community

Commercial and zoned C2-1L), and a two-story public storage facility (designated Community Commercial and zoned (Q)C2-1L, C2-1L.



Streets and Circulation

Burbank Boulevard is an east-west street designated Avenue II under the Mobility Plan 2035, running east and west along the northern border of the Project Site and dedicated to a width of 86-feet half right-of-way with a 28-foot half roadway and a 15-foot sidewalk. It provides four travel lanes and a center left-turn lane. On –street metered parking is generally available, but is restricted on the southern side of the street in the vicinity of the Project Site.

Clark Street is an east-west Collector Street under the Mobility Plan 2035, running east-west and along the southern border of the Project Site and dedicated to a width 33-foot half right-of-way with a 20-foot half roadway and a 13-foot sidewalk. It provides two travel lanes. On-street parking is generally available on the northern site.

Etiwanda Avenue is a north-south street designated a Collector Street under the Mobility Plan 2035 dedicated with a 66-foot right-of-way and a roadway width of 40 feet and a 13-foot sidewalk. It generally provides two travel lanes. On-street parking is generally available.

Reseda Boulevard is a designated Boulevard II under the Mobility Plan 2035, running north and south approximately 500 feet west of the Project Site. It generally provides four travel lanes with left-turn lanes at intersections and a center left-turn lane providing for Tier 1 Protected Bicycle Lanes on the east and west side of Reseda between Ventura Boulevard and Kittridge Street. On-street parking is generally available on the eastern side. Metered two-hour on-street parking is generally available on the western side.

Ventura Freeway (US-101) runs northwest and southeast along the Project frontage. It is located immediately adjacent to the northeastern edge of the Project Site providing five travel lanes in each direction. Access to and from the US-101 is available via interchanges at Reseda Boulevard and White Oak Avenue, as well as a south/eastbound on-ramp from eastbound Burbank Boulevard adjacent to the Project Site.

Freeway Access and Public Transit

Regional access is provided to the Project Site by the Ventura Freeway (US 101) and is well served by public transit, including both bus and rail service. Public transportation is provided by Metro, the City of Los Angeles Department of Transportation Commuter Express, and the Antelope Valley Transit Authority as follows:

- Metro Local: 150, 154, 239, and 240
- Metro Rapid: 744 and 750
- Commuter Express: 422
- Antelope Valley Transit Authority: 787
- Metro Orange Line Station-Reseda Blvd./Oxnard St. (Chatsworth and Warner Center to North Hollywood)

2010 Bicycle Plan and Mobility Plan 2035

The 2010 Bicycle Plan, adopted on March 1, 2011, identifies streets near the Project Site as part of the Plan. The City's Bicycle Plan designates Reseda Boulevard (Sesnon to southerly terminus) as a Backbone Bikeway Network and existing Class II Bike Lane. The Mobility Plan 2035 further identifies this portion of Reseda as a Tier 1 Protected Bicycle Lane. The Project would provide a total of 78 on-site parking spaces. Bike lanes currently exist along White Oak Avenue and the Orange Line bike path which runs along the route of the Orange Line.

Land Use Regulations

Encino Tarzana Community Plan

The Encino-Tarzana Community Plan is one of 35 community plans established for different areas of the City to implement the policies of the Framework element. The Community Plans are intended to promote an arrangement of land uses, streets and services, which will encourage and contribute to the economic, social physical health, safety, and welfare of the people who live and work in the Community. The Community Plan further identifies a vision of the Encino-Tarzana Community plan by: improving function, design and economic vitality of the commercial corridors; preserving and enhancing positive characteristics of existing uses which provide the foundation for community identify, such as scale, height, bulk, setbacks and appearance, and planning the commercial development opportunity sites for needed job producing uses that improves the economic and physical condition of the Encino-Tarzana Community Plan.

It should be noted that the Department of City Planning is currently in the process of updating the Encino-Tarzana Community Plan, among other community plans in the Southwest San Fernando Valley. Public outreach has been initiated which included workshops and presentations to the respective neighborhood councils. The Department's anticipates the community plan update to the City Planning Commission in early 2020.

Ventura-Cahuenga Boulevard Corridor Specific Plan

The Project Site is located within The Tarzana Community of the Ventura-Cahuenga Boulevard Specific Plan (Specific Plan) adopted by City Council on February 16, 1991. The purpose of the Specific Plan is to assure equilibrium is maintained between transportation infrastructure and land use development, provide for an effective local circulation system, assure building and site design promote attractive and harmonious commercial development and commercial uses are compatible with surrounding residential development. The Specific Plan designates the Project Site as Community Commercial with a corresponding height of 45 feet and FAR of 1.25:1. The Project Site is located "off-boulevard," meaning it does not front on Ventura or Cahuenga Boulevard.

On September 19, 2017, a motion was introduced by Councilmembers Bob Blumenfield, David Ryu, Paul Krekorian, and Paul Koretz to the City Council instructing the Department of City Planning, with the assistance of various other departments, to identify "options for amending, supplementing, overlaying by neighborhood or revising the Ventura-Cahuenga Boulevard Corridor Specific Plan." As noted in the motion, the Specific Plan was intended to "specifically address the concerns of the residents most impacted by development along Ventura Boulevard." At a regular meeting held on November 7, 2017, the PLUM Committee considered the Motion relative to the feasibility of revising the Ventura - Cahuenga Boulevard Corridor Specific Plan. After providing an opportunity for public comment, the Committee recommended that Council approve the Motion. On November 21, 2017, the Council adopted the Committee's report forthwith. Policy staff is currently working on the feasibility of amending the Specific Plan.

Tarzana Streetscape Plan

Approved on May 25, 2000 by the City Planning Commission, as required by the Ventura-Cahuenga Corridor Specific Plan to replace interim streetscape guidelines. The Streetscape Plan established guidelines for streetscape design and improvements within the Tarzana community, including the creation of an aesthetic, scenic and functional sector along Ventura Boulevard. The Streetscape Plan identifies three primary districts as well as an opportunity area. The Streetscape Plan identifies the area bound by Ventura Boulevard to the south, and north of the US 101 Freeway between Reseda Boulevard to Etiwanda Avenue as an "Opportunity Area" identifying Tipuana Tipu trees for this area. Jacarandas should be used to accent entrances to parking lots and buildings and Tipus used away from access points.

Freeway Advisory Notice

The Project Site is also subject to "ZI-2427 Freeway Adjacent Advisory Notice for Sensitive Uses." This notice sets a City Planning Commission (CPC) policy, effective November 8, 2012, for the review of all new projects and expansions of existing development within 1,000 feet of a freeway involving sensitive uses, including hospitals. It further identifies potential mitigations to help reduce or address impacts and public health risks. Suggested mitigations listed in the ZI-2427 document include: conducting a site-specific health risk assessment during an EIR review, improving indoor air quality with MERV-Rated (MERV 11 or higher) or HEPA air filtration equipment, or reducing exposure through project design. As part of the environmental analysis, the Project performed a Health Risk Assessment which found carcinogenic risk estimates to be within acceptable levels and impacts less than significant. Nevertheless, the Project would comply with 2016 California Mechanical Code which requires a MERV 8 pre-filter and a MERV

14 secondary filter for areas considered “Patient Care.” As such, the Project would further comply with Ordinance No. 184,245, which requires the provision of air filtration media that achieve a MERV of 13 for regularly occupied areas of buildings located within 1,000 feet of a freeway.

Above-Grade Parking Structure Policy Notice

On October 27, 2016, the City Planning Commission issued an Advisory Notice Relative to Above-Grade Parking in order to address potential impacts from above-grade parking on the quality of the public realm and pedestrian environment. Projects are encouraged to provide parking below grade; line above-grade parking with habitable uses; integrate parking levels into the building design; avoid blank walls; screen parking structures with architectural features; design parking levels to complement the rest of the building, with flat levels and standard ceiling heights providing flexibility of use over time; and on larger sites with multiple buildings, provide parking in a shared stand-along parking structure rather than embedded within multiple buildings.

On-Site Related Cases

VTT-74314: On November 14, 2017, the Advisory Agency approved the merger and re-subdivision of seven lots into three legal lots for the 13-acre site, including the elimination of a private street easement and approval of a Haul Route for the export of 44,000 cubic yards of material for the construction and improvements to the existing hospital including the replacement of the Main Building Replacement and addition of a new canopy, the New Patient Wing including improvements to the Emergency Department Canopy, construction of a new central utility plant in the basement of the New Patient Wing, expansion of the diagnostic and treatment area, and New Parking Structure. The approval became final on December 15, 2017 as no appeals were filed.

Case No. ENV-2016-1662-EIR: Environmental Impact Report for the Providence Tarzana Medical Center Project. The Notice of Availability of the Final Environmental Impact Report was issued on October 27, 2017. On November 14, 2017, the Deputy Advisory Agency and Hearing Officer, on behalf of the City Planning Commission, held a concurrent public hearing. On December 5, 2017, the Advisory Agency, pursuant to Section 21082.1(c) of the California Public Resources Code, certified ENV-2016-1662-EIR (State Clearinghouse House No. 2016071041) and adopted findings, Statement of Overriding Considerations, accompanying mitigation measures, and Mitigation Monitoring Program as the environmental clearance for the project. No appeal was filed.

Ordinance No. 174052: Effective August 18, 2001, an ordinance amending the Ventura/Cahuenga Boulevard Corridor Specific Plan, for portions of the Sherman Oaks-Studio City-Cahuenga Pass-Toluca Lake Community Plan, the Encino-Tarzana Community Plan, and the Canoga Park-Winnetka-Woodland Hills-West Hills Community Plan.

ZI No. 1877: Effective August 25, 1993, pursuant to AF-92-1884056, the site consisting of 18410 Burbank Boulevard, 18420 Burbank Boulevard, 18360-70 Burbank Boulevard, 18365 Clark Street, and 18321 Clark Street, shall be considered as one parcel for parking purposes only. No permits were to be issued that would increase the square footage until the applicant demonstrates that all required parking is provided.

Ordinance No. 166560: Effective February 16, 1991, an ordinance establishing a specific plan, known as the Ventura/ Cahuenga Boulevard Corridor Specific Plan, for portions of the Sherman Oaks-Studio City-Toluca Lake District Plan, the Encino-Tarzana District Plan, Encino-Ventura Boulevard Specific Plan and the Canoga Park-Winnetka-Woodland Hills District Plan.

Case No. 89-0387-ZC/GPA: Approved April 30, 1990, the City Council adopted the [Q]C2-1L Zone subject to Ordinance No. 165846, published on May 9, 1990, in conjunction with a zone change and general plan amendment to allow the construction and maintenance of a medical facility and related parking structures on-site. The established "Q" conditions provided the following restrictions: 1) subject property limited to medical and parking uses; 2) total non-residential floor area restricted to no greater than 286,000 square feet; 3) structures limited to 45 feet in height; 4) a minimum of 1,140 parking spaces required; 5) landscaping requirements of open areas, parking areas and a 10-foot landscaped buffer between a parking lot or structure, except for the westerly property line, to include walkways, stepping stones and pedestrian access and linkage items, within the [Q]C2-1L Zone.

Case No ZA-88-1190-ZV: Approved January 10, 1989, A Zone Variance for the construction of a 1,400 square-foot addition to the Tarzana Hospital which exceeds the floor area ratio permitted at the time as a result of Proposition U which reduced the FAR in the C2-1 zone from 3:1 to 1.5:1 thereby, resulting in permitted development of 122,300 square feet vs. the previously permitted 155,000 square feet.

Case No. ZA-21780: Approved September 8, 1975, a Conditional Use for the development, use and maintenance of the site for not more than 130 off-site parking spaces to serve as additional parking for the adjoining Tarzana Medical complex. Subsequent Clarification issued May 12, 1976 by the Zoning Administrator regarding dedications and improvements associated with the extension of an alley parallel to Clark Avenue on the subject property, whereby dedications modified to widen only portions of the adjacent alley contingent on property held under one ownership.

Off-Site Related Cases

DIR-2011-1603-SPP-SPPA-1A: Approved on February 22, 2013, the South Valley Area Planning Commission granted an appeal to an adjustment in order to correct the location of a landscape setback of at least (8) feet from the eastern property line of the project site located at 5411 Etiwanda Avenue. The adjustment also permitted a height of 49 feet, six inches, in lieu of the maximum 45 feet allowed by the Specific Plan, and a reduction from 10 feet to 8 feet for the landscape buffer adjacent to the parking structure.

Case No. ZA-2010-2313-ZA-ZAD-SPR-1A: On January 24, 2013, the South Valley Area Planning Commission approved, on appeal, a Zone Variance, Zoning Administrator's Determination, and Site Plan Review for the construction, use and maintenance of a three-story, 93,376 square-foot medical office building and parking structure located at 5411 N. Etiwanda Avenue, with a height of 49 feet, 6 inches, in lieu of the Transitional Height Limit of 33 feet within 50 to 99 feet of an OS Zone Classification and reduction in parking.

DIR-2011-1603-SPP-SPPA: The Director of Planning issued a determination on October 3, 2012, for located at 5411 Etiwanda Avenue for a project permit compliance with the Ventura-Cahuenga Boulevard Corridor Specific Plan conditionally approving a four-story, 93,376 gross square-foot medical office building and the establishment of a comprehensive sign program and an adjustment to permit two new buildings with a maximum height of 49 feet, six inches in lieu of

PROJECT ANALYSIS

Entitlement Analysis:

General Plan Amendment

The Project is located within the Encino-Tarzana Community Plan, most recently updated and adopted by the City Council on December 16, 1998. The existing Plan designates the subject site for Community Commercial land uses with a corresponding zone of CR, C2, C4, and RAS3. The Applicant is seeking a General Plan Amendment to add a site-specific footnote (19) to the Encino-Tarzana Community Plan in order to implement the Project. The requested General Plan Amendment would allow Height District 1 over the entire Project Site, which does not restrict height, except as conditioned herein, in lieu of Footnote No.12 (Height District IVL) restricting heights to 45 feet and three stories and Footnote 13 (Height District 1L) which restricts the site to a maximum height of six stories or 75 feet. The Project is also seeking an amendment to the Ventura-Cahuenga Boulevard Specific Plan which restricts the height to 45 feet. The existing land use designation per the Specific Plan is Community Commercial, therefore, no change is requested to the land use designation.

The site-specific footnote would allow the Project to achieve a height of 120 feet (with an additional 5 feet for the cooling towers), facilitating the existing hospital to expand the size of its rooms while maintaining the current six stories. The existing patient building, with a height of 82 feet, three inches (95 feet including the mechanical penthouse), was constructed in the 1970s when floor-to-floor heights were approximately 13 feet. The extended floor-to-floor height of approximately 16 feet, would allow for advances in technology and clearance for additional ducts and vents required for delivery of services to the patient rooms. Further, the Project's FAR of 1.03:1 would be consistent with the Height District 1 FAR of 1.5:1. The Plan amendment would permit the renovation and improvement of the existing Providence Tarzana Medical Center and will result in a net floor increase of 256,802 square feet, consisting of the replacement of the Hospital's main building and addition of a new canopy, a New Patient Wing including improvement of the Emergency Department and Walk-in Canopy, expansion of the Diagnostic and Treatment area with new canopy, and a New Parking Structure, resulting in a total of 579,744 square feet of development on-site.

The Hospital, and accessory uses, would be consistent with the surrounding medical, office, retail and multifamily uses adjacent to the Project Site. The Project's proximity to transit would also provide opportunities for various modes of travel to and from the Project Site. The Project further incorporates design elements such as construction materials, color schemes, screening, and landscaping that provide compatibility with on-site buildings and adjacent development. The Project's function as a non-profit hospital furthers the City's objectives and policies of providing accessible health care to the local and regional community.

Therefore, the requested Plan amendment is consistent with the applicable zoning regulations and land use policies of the Encino-Tarzana Community Plan and General Plan.

Zone Change and Height District Change

The Project Site is requesting a Zone and Height District Change necessary to remove the existing "Q" Conditions established by Ordinance 165,846 to allow a height of 120 feet (excluding cooling tower and rooftop mechanical equipment), in lieu of the "Q" Condition

restricting the height to 45 feet. The Hospital also proposes a maximum 579,744 square feet on-site in lieu of the 286,000 imposed by the "Q" Condition. The Project Site is currently zoned [Q]C2-1L, C2-1, P-1. The C2 Zone currently allows the existing hospital, medical offices, and accessory uses. Portions of the site on which the hospital and existing parking structure are located are designated Height District 1L, generally permitting building heights to 75 feet, with a further limitation on commercial building heights to a maximum of six stories. However, a portion of the site is zoned P-1 permitting only the existing surface parking. Consequently, no structures are permitted above-grade thereby precluding the development of the proposed New Parking Structure. The requested zone and height district change would provide relief for the Project restrictions imposed by existing "Q" conditions.

Specific Plan Amendment

The Applicant is requesting an amendment to the Ventura-Cahuenga Boulevard Specific Plan to exclude the Project Site from the Plan boundaries. As indicated previously, the Hospital predates the Specific Plan. The request would allow the implementation of the Project without requesting multiple specific plan exceptions and would minimize layers of approvals, as required by OSHPD.

The Project is located "off-boulevard" and as such does not front on Ventura or Cahuenga Boulevard. It is also not identified on the Tarzana – Exhibit B Map as located within a pedestrian oriented area. Unlike other commercial uses that directly abut residential uses along Ventura and Cahuenga Boulevard, the Project Site is an existing use that is situated at least 200 feet from residential uses. The site also is flanked on its easterly and westerly boundaries by intervening buildings, streets, and structures, which help buffer and diffuse the sound and activities of the Hospital. It should be noted there is no specific reference to the Providence Tarzana Medical Center in the Specific Plan regulations, other than in Map 5 and Exhibit B.

Notwithstanding the requested Specific Plan Amendment, the Project would still comply with several requirements of the Plan. It would provide for pedestrian walkways throughout the Project Site, landscaped buffers, open space and address traffic impacts through Project Design Features J-1, and J-2 and Mitigation Measures J-1 and J-2, resulting in no operational traffic impacts.

In terms of transportation improvements, a key purpose of the Specific Plan is to provide community development limitations based on the community's transportation infrastructure capacity. The Project's implementation will result in no project impacts to transportation. In addition, the Project provides Project Design Feature J-1 identified in the Mitigation Monitoring Program, which provides a new midblock traffic signal on Burbank Boulevard for a signalized crosswalk across Burbank Boulevard. Thus, with the new traffic signal, left turns would be allowed from the Project Site onto westbound Burbank Boulevard (a movement which is currently restricted) and, to facilitate this movement, an exclusive, (protective) left turn outbound lane would be installed within the Project Site for the left-turning vehicles. An eastbound through lane would be installed along the Project's Site frontage, providing right-turn access into the project site and leading to the US 101 Southbound on-ramp to the east. DOT's Design and Operations Units would ensure that these improvements would not interfere with pedestrian crossings and safety. If the Specific Plan Amendment is approved, the Project would not be subject to project impact fees required by the Plan. Nevertheless, based on preliminary calculations by the Los Angeles Department of Transportation (DOT), DOT indicates that the proposed signalized improvement on Burbank Boulevard would be commensurate to fees that would have been required under the Specific Plan.

The Project will also promote other purposes of the Specific Plan including preserving and enhancing the community by establishing aesthetic standards for signs, buffering, setbacks, and landscaping. As provided in the Conceptual Sign Program, the Project will provide colors and size of signs that are compatible with the existing site and surrounding community. Landscaped buffers would be provided around the New Parking Structure as indicated in the Plan. Setbacks would be landscaped with a variety of tree species, while pedestrian landscaped paseos and walkways would provide linkages to various buildings on-site. These elements would enhance the Project's aesthetics as well as that of the surrounding community.

A copy of the application request was transmitted, as required by the Specific Plan, to the Specific Plan Review Board (PRB). On July 13, 2017 the PRB, by majority vote, voted to recommend amending the Specific Plan to exclude the Project Site from the Specific Plan boundaries stating, "The Board supports an amendment to the Ventura-Cahuenga Boulevard Corridor Specific Plan to remove the Providence Tarzana Medical Center site from the Plan in order to permit replacing the Main Building within the hospital, expanding the diagnostic and treatment areas and construction a new patient wing and parking structure." The PRB found it more efficient to approve an amendment than to process multiple exceptions required for the implementation of the Proposed Project insomuch as the Project is essential to meet the future health needs of the West Valley Community.

Based on the facts, the Project Site is located "off-boulevard" and not in an area designated as a pedestrian oriented area, its location in the northernmost boundary of the Specific Plan and its function of providing public convenience and welfare by facilitating access to health care, sets aside this property from other properties with similar uses within the Tarzana Community Section of Specific Plan. Therefore, no detrimental effects are anticipated by the removal of the Project Site from the Specific Plan boundary, and the Specific Plan Amendment would be appropriate.

Major Development Project

The Project is subject to "Major" Development Project (Sec. 12.24.U.14) approval for projects constructing 100,000 square feet of non-residential floor area in the C2 Zone. Although, the City Planning Commission has not approved Design Guidelines for Major Development Projects, the Project meets the findings incorporated herein for approval of the entitlement.

As a non-profit entity, the Project provides a service that is essential and beneficial to the community, city and region. The Proposed Project would enhance its facilities by providing private rooms for its patients ensuring convenience, safety and privacy. As part of the improved facilities, although the New Patient Wing would reach 120 feet (with an additional 5 feet for the cooling tower) in height, the number of stories would remain at six stories, consistent with the existing six-story patient building. However, floor-to-floor heights would increase from approximately 13 feet to approximately 16, accommodating the upgrading of utilities and implementation of advanced technologies in patient care.

The Project has been designed to be compatible with adjacent properties and the surrounding neighborhood. Adjacent uses consist of medical uses, shopping centers and pharmacy, as well as multi-family residential. The proposed maximum height of the New Patient Wing of 125 feet (including cooling tower) is consistent with other surrounding buildings, such as the Cube MOB building with a height of approximately 100 feet and the existing Patient Building of 95 feet on-site. Building heights in proximity to the Project range from approximately 65 feet to 150 feet for

a building at the corner of Ventura Boulevard and Etiwanda Avenue. The existing hospital use and accessory uses would be compatible with the surrounding uses.

The Project incorporates design and landscaping elements to enhance the built environment. The New Patient Wing and enhancements to the existing Hospital would be constructed in a contemporary architectural style, to include new windows, a variety of surface materials and colors, and to provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital and other existing buildings on-site. The design approach is intended to be complementary and appropriate to the scale of the existing Hospital and surrounding community. Materials include concrete, stucco, aluminum, glass, concrete block, terracotta (copper), and various types of cladding. The New Parking Structure will be screened with architectural elements and landscaping to provide aesthetic appeal.

Based on the essential services provided by the Project and its compatibility with the surrounding neighborhood, the Project meets the findings required for approval of a Major Development Project.

Sign Variance

Based on the Conceptual Sign Program, Exhibit E, the Project requires a zone variance to allow a monument sign with a vertical dimension greater than its horizontal dimension and a height of more than eight feet above grade, and for a wall sign which exceeds its permitted sign area. The Department of Building and Safety[1] was consulted on the proposed signage whereas it was confirmed that frontage on three streets, Burbank Boulevard, Clark Street and Etiwanda Avenue, would determine the allowable signage on-site.

The variance for the monument sign is requested for an existing sign currently 78 square feet (per side) with a dimension of 12 feet by 6 feet, 6 inches, resulting in a vertical dimension greater than its horizontal dimension. The Project proposes a replacement monument sign with a smaller dimension of 12 feet by 6 feet, 3 inches, approximately 75 square feet (per side) at approximately the same location at the main entry from Burbank Boulevard. This variance is necessary to ensure signage that is unobstructed, visible and would not interfere with traffic or endanger public safety. The location and size of the proposed monument sign is an important element considering the curvature of Burbank Boulevard travelling eastbound to the Hospital. Although speed limits are posted at 35 miles per hour, many drivers exceed the speed limits in anticipation of the US-101 southbound lane located just east of the Hospital. A larger sign, as opposed to a sign with a reduced height, would more readily alert visitors to the entry on Burbank Boulevard. Further, the US-101 overpass is located approximately 400 feet travelling westbound on Burbank Boulevard, coupled with the curvature of the street, appropriately-sized signs are important to expeditiously direct patients to the Medical Center.

Three wall signs, 800 square feet each, are proposed fronting on Burbank Boulevard, Clark Street and Etiwanda Avenue. However, given the Project Site frontage on Etiwanda Avenue is only 25.74 linear feet, this yields a maximum permitted sign area of approximately 64 square feet. Due to the unique irregular configuration of the parcel and limited frontage on Etiwanda Avenue resulting from an intervening medical office building, this significantly limits the wall signage on the easterly side of the building. An 800 square-foot sign would be appropriate along

[1] Consultation with Tammy Svetich, Supervisor, Van Nuys Counter- Plan Check, October 11, 2017

this frontage as it would serve the public convenience and the welfare by enhancing the visibility of the hospital at an optimal location.

Signage proposed for Etiwanda Avenue and Burbank Boulevard would be visible along portions of the Ventura Freeway (US 101). Pursuant to LAMC Section 14.4.6.A., these identification signs are exempt from the freeway exposure limitations if the signs are not larger than five percent of the area of the side of the building, which faces primarily to the freeway. As noted in the Conceptual Sign Program, Exhibit E, the 800 square-foot signs proposed for both of these frontages would meet this criterion and therefore, would be consistent with LAMC requirements.

All other signage on-site would be in compliance with LAMC requirements. Therefore, in consideration of the Project's unique parcel configuration, existing physical layout and the Project's use as a hospital, signage is an important component to expedite patient access to vital services; especially in emergency situations. Appropriate location and size of signage not only enhances patient access to hospital services but that of first responders as well. As such, the variance requested for the monument and wall signs are appropriate in this unique situation and would not be materially detrimental to the public welfare.

Waiver of Dedications and Improvements

During the processing of the application, and in an abundance of caution, the Applicant filed a request for a Waiver of Dedications and Improvements. At the joint November 14, 2017 public hearing, the Bureau of Engineering modified their requirements for related Case No. VTT-74314 eliminating an additional 4-foot wide public sidewalk easement on Burbank Boulevard, adding a variable width of less than 3-foot strip of land dedication along Clark Street, and eliminating dedications along Etiwanda, thereby rendering this entitlement request null and void. As such, staff recommends the Waiver of Dedications and Improvements be dismissed as no longer necessary.

Professional Volunteer Program:

The Project was presented to the Department of City Planning's Urban Design Studio and Professional Volunteer Program (PVP) on October 10, 2017. The main focus of the PVP centered on the design of the New Parking Structure. Their comments and responses by the Applicant are summarized below:

- *Height of New Patient Wing will assist in buffering freeway noise from multi-family residences south of the Project Site*.

  The location and height of the New Patient Wing, which would extend northwesterly from the rear of the Hospital, will assist in buffering noise form the 101 Freeway to Medical Center uses and the multifamily residential and commercial uses to the south of the Project Site.

- *Complimented well-designed New Patient Wing and hospital*.

  The design approach is intended to be complementary and appropriate to the scale and character of the existing Medical Center and surrounding community by providing visual interest through horizontal and vertical articulation.

- *Would prefer landscaping at the perimeter of parking structure, as proposed, rather than on the rooftop where no one will see it*.

  The Project design proposes new landscaping along the four elevations of the New Parking Structure, as well as the north, east and south elevations of the Existing Parking Structure. New landscaping, including trees, shrubs and flowers, will provide visual interest and additional screening of both Parking Structures.

- *Natural ventilation proposed by the Project is preferable to mechanical ventilation*.

  The New Parking Structure is designed to be naturally ventilated.

- *Vertical gardens would green the environment and reduce the specs of the type of block used for the wall, as it would be covered*.

  A vertical garden is not recommended for the walls of the New Parking Structure. As detailed above, new landscaping, including trees, shrubs, and flowers, will be provided around the perimeter of the Parking Structure and throughout the Medical Center. In addition, the project would enhance the landscape buffers along Burbank Boulevard and Clark Street. This landscaping would enhance the green environmental and provide visual interest and multiple layers of screening of the Parking Structure.

- *Do not show horizontal ramps on parking structure - they can easily be screened with architectural features*.

  The New Parking Structure has been redesigned to reduce the view of the horizontal ramps. The New Parking Structure has been redesigned along the western elevation to utilize the adjacent grade and slope. The ground floor has been modified to mimic the adjacent grade and one percent slope. Drivers and pedestrians within the surface parking to the west of the New Parking Structure would perceive the ground floor level as flat. Ramps along the western elevation for the elevated levels would slope about 1.5 percent more and would be parallel with each other, and the steeper ramps have been relocated to the east elevation adjacent to the Existing Parking Structure. The design utilizes the adjacent grade and slope to create a natural, “flat” feel to the look of the floors from the perspective of the drivers and pedestrians within the surface parking lot to the west of the New Parking Structure and drivers who may glimpse the New Parking Structure from Burbank Boulevard.

- *Design should show connections to other buildings*.

  The New Parking Structure was designed to complement the Hospital and create a cohesive Medical Center. The Project strengthens and reinforces an architectural hierarchy at the Medical Center. The primary buildings include the New Patient Wing, the existing Hospital, and the Main Building Replacement. The New Patient Wing extends northwesterly from the rear of the Hospital with softened and curved forms. The New Patient Wing is unique and distinct and is intended to be the primary visual focus of the Medical Center for patient wayfinding. Secondary buildings within the Medical Center include the Cube MOB and the

Tarzana Garden Plaza, which reflect the character of the original Hospital and the adjacent community. Tertiary elements within the Medical Center are the New and Existing Parking Structures. These structures are neither designed nor intended to draw attention, but rather to recede behind landscaping and architectural screens and into the background. The New Parking Structure design intentionally follows the rectilinear forms of the Existing Parking Structure.

- *EV chargers should be accessible*.

  Within the New Parking Structure, 20 percent of parking spaces would be EV-ready for future charging stations and five percent of parking spaces would be equipped with EV charging stations. The New Parking Structure is accessible from both Burbank Boulevard and Clark Street.

- *The two ends of the parking structure are too solid; break up design with metal mesh; wire fabric; non-combustible materials*.

  To the extent this comment refers to the western edge of the New Parking Structure, the Project proposes to screen both the north and south portions of the New Parking Structure's west elevation that is visible (at an oblique angle) from Burbank Boulevard and Clark Street. Options are currently being considered for the New Parking Structure as discussed in greater detail below. The remainder of the west elevation is only visible from a service alley and back of house (e.g. loading areas) of the commercial uses (supermarket, retail, and storage) between the Medical Center and Reseda Boulevard. The New Parking Structure is not visible from Reseda Boulevard. The portion of the western elevation that is not screened will be painted to add visual interest. In addition, landscaping will be provided along the western elevation of the New Parking Structure.

- *CAD manufacturing can produce images such as trees on a metal mesh; it could be a combination of public art as well*.

  Two options are currently being considered for the New Parking Structure's architectural screens: digitally printed image on a composite perforated fabric or varying openness of wire fabric adding visual texture. Both options provide visual interest and offer an architectural approach to concealing the New Parking Structure. Imagery being considered for the digitally printed image include landscape from the surrounding Tarzana community or images of Providence caregivers and families.

- *Break up horizontal line of roofline so it can be staggered and not one straight line; color matching on metal structure*.

  The New Parking Structure design intentionally follows the rectilinear forms of the Existing Parking Structure. Due to the structure design of the New Parking Structures, the top level is naturally staggered from the north to the south.

- *Angle profile of parking façade so it matches Patient Wing and creates a cohesive unit; line of work façade parking structure (especially in the middle between two panels) use of glass*

or copper planes of the colors of the Patient Wing. Could have a mesh that curves up such undulating waves from edge.

As described above, the Parking Structures are tertiary elements within the Medical Center. These structures are intentionally designed to recede into the background and remain rectilinear in plan and elevation. New Parking Structure is designed to complement, but not compete in form and aesthetic with, the New Patient Wing.

Regarding the use of copper color for the New Parking Structure, the color chosen for the screen would be complementary to and further integrate the New Parking Structure within the Project Site and the surrounding area while providing visual interest.

The use of glass on the New Parking Structure is not recommended because it would solidify the elevations and require the need to mechanically ventilate the garage. As commented by the PVP above, natural ventilation is preferable to mechanical ventilation. In addition, the cost for installation and maintenance of glass on the New Parking Structure would be prohibitive.

Parking Structure Design Options

As noted above, staff has been working with the Applicant and their team on improving the design of the New Parking Structure in order to address concerns and suggestions proffered by the PVP. The Applicant submitted several options for the New Parking Structure. The following three options were selected in consultation with the Urban Design Studio:

Option 1: Multi-Colored Composite Fabric. The fabric would be produced with complimentary colors of the New Patient Wing, i.e., with copper highlights. This option includes a wrapping element to soften the large volumes presented at the corners of the structure. This type of feature would provide natural ventilation. Concerns with this type of material are its exposure to the elements which would make it susceptible to fading. The Architect has indicated this type of composite fabric comes with a 10-year warranty. The Applicant would repair and replace accordingly to maintain the fabric in good condition.

Option 2: Digital Imagery on Composite Fabric. Similar to Option 1, this feature also involves fabric with the same maintenance characteristics, including providing light and natural ventilation of the parking structure. However, this option proposes a landscape image of Tarzana. Although the proposed image would provide visual interest during the interim period while the newly planted trees reach maturity, the fabric would still be subject to environmental elements requiring a high maintenance schedule.

Option 3: Wire Mesh over Painted Parking Structure. Metal fabric panels would allow varying degrees of transparency allowing complimentary colors to gradually emerge from underneath the fabric gradually adding dimension and texture to the façade. Building corners would also be wrapped to minimize the large volumes. This is notably the low maintenance option presented as the wire mesh panels, according to the Project architect, would be constructed with stainless steel, a material known for its durable constitution. Natural lighting and ventilation would also be provided by this option.

Upon review of the three options, and in consultation with the Urban Design Studio, Option 3 is recommended as the best option due to its aesthetic appeal and low maintenance schedule.

Commercial Citywide Design Guidelines

Although the Project Site is a redevelopment of existing hospital proposing to renovate and improve its facilities, the Project is in substantial conformance with The Citywide Design Guidelines as applicable to the Project. The Citywide Design Guidelines encourage high-quality designs in Projects through several objectives: neighborhood context and linkages in building design and site design; employment of distinguishable and attractive building design; provide pedestrian connections within and around the Project; minimize the appearance of driveways

and parking areas; utilize open space areas and landscaping to their full potential; and improve the streetscape experience by reducing visual clutter.

The Project generally meets the objectives set forth above. The design provides for direct paths of pedestrian travel within the property, linking building entrances with parking. Buildings are centrally located on the site, facilitating access to various services. Reconstructed surface parking areas would include additional tree plantings to minimize the appearance of parking areas while providing respite from the sun. Additional shading for pedestrians would be provided by replacement and installation of new canopies, offering visitors shaded areas while awaiting transportation. Low level lighting would provide for safe passages along pathways, surface parking and parking structures.

As proposed, the Project maximizes the use of landscaping and open space by providing a tree-lined boulevard to delineate the primary internal campus driveway. Multiple layers of trees would be planted to screen the parking structures. A landscaped paseo would run along the southern elevation of new and existing parking structures, connecting this shaded walkway to the hospital entrance. An outdoor garden is proposed to provide respite for patients, employees and visitors.

Proposed building materials would include concrete, stucco, aluminum, glass, concrete block, terracotta (copper), cladding, pre-finished wall panel, and prefinished metal. Color bands in the New Patient Wing would tie into the color scheme of existing buildings on-site and in the surrounding neighborhood. The New Parking Structure would include the same color bands incorporated into a screening element as an architectural feature on the façade, effectively framing the Project Site with these two buildings. The new buildings will be compatible in scale, massing, style and architectural materials with existing structures on the Property and in the surrounding areas. The Project provides sufficient space between buildings, articulation along the street frontage, and visual breaks to diminish and scale and massing. Further, the New Patient Wing has been designed to emulate the curvature of the site, thus minimizing sharp angles and creating visual interest.

The incorporation of landscaped paseos, new tree plantings, open space, screening architectural elements, and design elements would promote a site that is cohesive in design and promotes compatibility with the surrounding community.

Sustainability Features: Where applicable, the Project would provide for the following sustainable features:

- Energy Reduction Demand: Chiller plant with rooftop heat rejection, non-reflective glass; high efficiency HVAC systems and boilers; LED lighting systems; enhanced insultation to minimize solar and thermal gain; and cool roofing;
- Where Leadership in Energy and Efficient Design (LEED®) standards for healthcare are applicable, design of new buildings would achieve LEED® Silver certification equivalency;
- Renewable Energy Sources: Roof of the New Parking Structure would provide conduits for potential future electrical solar systems.

Environmental Analysis

The City of Los Angeles published a Notice of Preparation (NOP) on July 15, 2016 identifying the scope of the environmental issues, which was distributed to State, regional and local agencies, and members of the public, initiating a 30-day period to August 15, 2016. The

purpose of the NOP was to formally notify the public that the City was preparing a Draft EIR for the Project, and to solicit input regarding the scope and content of the environmental information to be included in the Draft EIR. A public scoping meeting was held on July 27, 2016, from 5:00 P.M. to 7:00 P.M. at the Providence Tarzana Medical Center Auditorium located at 18321 Clark Street, Los Angeles, CA 91356. A Notice of Completion and Availability of the Draft EIR was published in the Los Angeles Times on June 15, 2017 initiating the 46-day public comment period ending on July 31, 2017. A notification of the release of the Draft EIR was published by the City in the Los Angeles Times newspaper notifying interested parties of the availability of the Draft EIR for the Project. A total of 13 comment letters were received at the close of the circulation period. The City released the Final EIR for the Project on October 27, 2017.

On November 14, 2017, a joint hearing was held by the Hearing Officer and the Deputy Advisory Agency. The Deputy Advisory Agency certified the EIR on December 5, 2017 in connection with its approval of Case No. VTT-74314, which included adoption of a Statement of Overriding Considerations for the following impacts identified as significant and unavoidable:

Project Impacts
- Noise (On-Site Construction);
- Traffic, Access, and Parking (Construction)

Cumulative Impacts
- Noise (On-Site Construction, Cumulative)
- Noise (Off-Site Construction, Cumulative); and
- Traffic, Access, and Parking (Construction, Cumulative)

Agency Reports Received:

Letters were received from the Department of Public Works (Bureau of Engineering, Bureau of Street Lighting, and Bureau of Sanitation), Department of Transportation, Fire Department, Department of Building and Safety-Zoning, Building and Safety-Grading, Department of Water and Power. These recommendations were included in the conditions for the Vesting Tentative Tract Map VTT-74314. Conditions applicable to the zone change have been incorporated as [Q] or [T] conditions of approval.

Public Hearing and Testimony:

Attendance:

A joint public hearing was held for the Proposed Project and subdivision on November 14, 2017, and was attended by approximately 60 individuals. (See Public Hearing and Communications, Page P-1). At the public hearing, testimony was provided by the Project Applicant, Project Representatives, and approximately 21 speakers who spoke in support of the Project, including community members and individuals representing the Ventura-Cahuenga Boulevard Corridor Plan Review Board, Tarzana Neighborhood Council, Our Lady of Grace, Chabad of the Valley, VICA, Encino Chamber of Commerce, LA/Orange County Building and Construction Trades, The Child Development Institute, Providence Tarzana Hospital Foundation Board, Providence Tarzana Medical Center staff, National Union of Healthcare Workers (NUHW), and United Chambers.

Communications Received:

At the time of the preparation of this report, twenty letters of support were received from Chabad of the Valley; Tarzana Neighborhood Council; Los Angeles Police Protective League; Our Lady of Grace Parish; Temple Judea; Valley Industry & Commerce Association; St. Mel Parish; St. James Presbyterian Church; St. Paul's United Methodist Church; Los Angeles / Orange Counties Building and Construction Trades Council; Boys & Girls Club of the West Valley; Valley Village; ONE Generation; Los Angeles Area Chamber of Commerce; Biz Fed – Los Angeles County Business Federation; Matthew Dababneh, Assemblymember, California Legislature, Forty-Fifth District; Encino Chamber of Commerce; Child Development Institute; The Valley Economic Alliance; and United Chamber of Commerce San Fernando Valley & Region.

The Ventura-Cahuenga Boulevard Corridor Specific Plan Review Board submitted their recommendation dated July 13, 2017 stating that the PRB, by majority vote, voted to recommend amending the Specific Plan to exclude the Project Site from the Specific Plan boundaries as more efficient that processing specific plan exceptions for the entitlement requests.

Tarzana Neighborhood Council provided the Department of City Planning a copy of their recommendation letter dated April 18, 2017, indicating the Council voted unanimously to approve the related Case. No. VTT-74314; an amendment to the Ventura-Cahuenga Boulevard Corridor Specific Plan to move the boundary of the Plan area to exclude the project; allow the zone change and height district change with use restrictions to medical uses; and any future structures greater than 45 feet would require a conditional use permit.

It should be noted that the joint hearing notice included a typographical error for one of the Project Site's addresses (18370 Clark Street should have read 18370 Burbank Boulevard). The Hearing Officer clarified the error and noted that although the address incorrectly indicated "Clark Street," the correct assessor number identifying the parcel was included in the notice. Further, as no such address exists on Clark Street, no other real property was implicated by the notice.

Issues:

Construction Traffic

One community member, employed at an office building on the south side of Clark Street, inquired as to construction truck routes traveling along Clark Street and any programs in place to address traffic and parking along the construction site. Although the speaker was in favor of the Project, concerns were expressed with congestion and accidents on an already congested street. The speaker was informed that Mitigation Measure J-1 of the Mitigation Monitoring Program requires the Project Applicant to prepare a Construction Management Plan, approved by the Department of Transportation, to address the following: Prohibition of construction worker parking on nearby streets; Temporary traffic control during all construction activities adjacent to the public right-of-way to improve traffic flow on public roadways (e.g. flagmen); Scheduling of construction activities to reduce the effect on the traffic flow on surrounding arterial streets; and Safety precautions for pedestrian and bicyclists through such measures as alternate routing and protection barriers as appropriate.

Development Agreement

A representative of the NUHW, proposed "the City put together a development agreement to include 15 million dollars to contribute to workforce housing in the area and the creation of a psychiatric emergency room on-site" in accordance with such priorities identified in *Providence's San Fernando Valley community - Joint Community Health Needs Assessment, 2016*. The concern was expressed that such services are located closer to downtown and other parts of LA County, whereas the Valley is in need of such services, including a psychiatric emergency room.

According to information provided by the Applicant, and incorporated into the case file, the Hospital is a part of the Providence Health and Services, a not-for-profit system. Providence Tarzana provides community benefits in the form of access to health care and grants to non-profit organizations in the San Fernando Valley. It partners with local treatment centers to address behavioral and mental health care needs. A component of the Proposed Project and its expanded Emergency Department is to include two emergency exam/treatment rooms for patients with behavioral issues located near the nurses' stations.

Therefore, based on the role of the Providence Tarzana Medical Center as an organization that provides a public benefit to the community, a development agreement was not requested by the Applicant.

On December 22, 2017, a courtesy notice for the City Planning Commission meeting was mailed to all owners, occupants and interested parties, with email preferences transmitted on December 27, 2017. The Project Site was posted on January 9, 2018.

Conclusion

The Project is an existing hospital facility that seeks to renovate its campus in order to modernize its delivery of services and provide a higher quality of care. It provides a significant public benefit by making health care accessible to its community members on a local and regional level.

The Proposed Project would be consistent with policies of the General Plan promoting uses consistent with the requested C2 Zone and Height District 1 over the entire Hospital Campus. The additional height would allow the delivery of more efficient and technologically advanced services while promoting the privacy of the Hospital's patients. Staff recommends approval of the [T][Q]C2-1 Zone with the attached [Q] Qualified and [T] Tentative conditions.

The project's location, uses, height, and other features would be compatible with the surrounding neighborhood, and would not adversely affect public health, welfare, and safety. Therefore, Department of City Planning staff recommends that the City Planning Commission approve the Proposed Project and entitlement requests.

CONDITIONS FOR EFFECTUATING [T] TENTATIVE CLASSIFICATION REMOVAL

Pursuant to Section 12.32-G of the Municipal Code, the [T] Tentative Classification shall be removed by the recordation of a final parcel or tract map or by posting of guarantees through the B-permit process of the City Engineer to secure the following without expense to the City of Los Angeles, with copies of any approval or guarantees provided to the Department of City Planning for attachment to the subject planning case file.

Dedications and Improvements. Prior to the issuance of any building permit, public improvements and dedications for streets and other rights of way adjoining the subject property shall be guaranteed to the satisfaction of the Bureau of Engineering, Department of Transportation, Fire Department (and other responsible City, regional and federal government agencies, as may be necessary), including the following:

Responsibilities/Guarantees.

1. Bureau of Engineering. Prior to the issuance of sign-offs for final site plan approval and/or project permits by the Department of City Planning, the applicant/developer shall provide written verification to the Department of City Planning from the responsible agency acknowledging the agency's consultation with the applicant/developer. The required dedications and improvements may necessitate redesign of the Project. Any changes to the project design required by a public agency shall be documented in writing and submitted for review by the Department of City Planning.

2. Dedication Required:

    a. **Burbank Boulevard** (Avenue II) - A 4-foot variable width of land be dedicated along Burbank Boulevard to complete a 49-foot wide and variable width half public right-of-way adjoining the tract in accordance with LA Mobility Plan Avenue street standards.

    b. **Clark Street** (Collector) - A 3-foot and variable width (less than 3-foot) strip of land be dedicated along Clark Street adjoining the tract to complete a 33-foot wide half right-of-way in accordance with Collector Street Standards of LA Mobility Plan.

3. Improvements Required:

    a. Improve Burbank Boulevard being dedicated and adjoining the subdivision by the construction of the following:

        (i) A concrete curb, a concrete gutter, and a 10-11-foot variable width concrete sidewalk with tree wells.
        (ii) Suitable surfacing to join the existing pavement and to complete a minimum 38-foot and variable width half roadway.
        (iii) Any necessary removal and reconstruction of existing improvements.
        (iv) The necessary transitions to join the existing improvement.

    b. Improve Clark Street being dedicated and adjoining the tract by construction and reconstruction of the existing sidewalk to complete a new 13-foot wide full-width

concrete sidewalk with tree wells including any necessary removal and reconstruction of the exiting improvements satisfactory to the City Engineer.

c. Install a traffic signal on Burbank Boulevard to allow left turns from the Project Site onto westbound Burbank Boulevard facilitated by an exclusive, protected, left turn outbound lane installed within the Project Site for left turning vehicles. Additionally, install an eastbound through lane along the Project's Burbank Boulevard frontage providing right-turn access into the Project Site and leading to the US 101 Southbound on-ramp to the east. A pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway.

d. Install a traffic monitoring camera at the intersection of White Oak Avenue and Burbank Boulevard.

e. Install a traffic monitoring camera at the intersection of Reseda Boulevard and Burbank Boulevard.

4. Department of Transportation.

a. Construction Impacts. A construction work site traffic control plan shall be submitted to DOT for review and approval prior to the start of any construction work. The plan should show the location of any roadway or sidewalk closures, traffic detours, haul routes, hours of operation, protective devices, warning signs and access to abutting properties. Constriction related traffic shall be restricted to off-peak hours to the extent possible.

b. A detailed parking and driveway plan shall be submitted to DOT's Valley Development Review Section at 6262 Van Nuys Boulevard, Suite 320, Van Nuys, CA 91401.

5. Bureau of Street Lights. Install street lighting facilities to serve the tract as required by the Bureau of Street Lighting.

a. Improvement Condition. No Street Lighting improvement if no street widening per BOE improvement conditions. Otherwise, relocate and upgrade street lights; four (4) on Clark St. and three (3) on Burbank Boulevard. That consents to the drainage easement being merged and waivers of any damages that may accrue as a result of such mergers be obtained from all property owners who might have certain rights in the area being merged.

NOTES: The quantity of street lights identified may be modified slightly during the plan check process based on illumination calculations and equipment selection. Conditions set: 1) in compliance with a Specific Plan, 2) by LADOT, or 3) by other legal instrument excluding the Bureau of Engineering conditions above, requiring an improvement that will change the geometrics of the public roadway may require additional or the reconstruction of street lighting improvements as part of that condition.

6. Fire Department.

a. That consents to the drainage easement being merged and waivers of any damages that may accrue as a result of such mergers be obtained from all property owners who might have certain rights in the area being merged.

b. That satisfactory arrangements be made with all public utility agencies maintaining

existing facilities within the area being merged.

c. Fire lane width shall not be less than 20 feet. When a fire lane must accommodate the operation of Fire Department aerial ladder apparatus or where fire hydrants are installed, those portions shall not be less than 28 feet.

d. Fire lane, where required and dead ending streets shall terminate in cul-de-sac or other approved turning area. No dead ending street or fire lane shall be greater than 700 feet in length.

e. Submit plot plans indicating access road and turning area for Fire Department approval.

f. Adequate off-site public and on-site private fire hydrants may be required. Their number and location to be determined after the Fire Department's review of the plot plan.

g. All parking restrictions for fire lanes shall be posted and/or painted prior to any Temporary Certificate of Occupancy being issued.

h. Plans showing areas to be posted and/or painted, "FIRE LANE NO PARKING" shall be submitted and approved by the Fire Department prior to building permit application sign-off.

i. Electric Gates approved by the Fire Department shall be tested by the Fire Department prior to Building and Safety granting a Certificate of Occupancy.

j. Standard cut -corners will be used on all turns.

k. Where access for a given development requires accommodation of Fire Department apparatus, overhead clearance shall not be less than 14 feet.

l. The Fire Department may require additional vehicular access where buildings exceed 28 feet in height.

m. The Fire Department may require additional roof access via parapet access roof ladders where buildings exceed 28 feet in height, and when overhead wires or other obstructions block aerial ladder access.

n. Entrance to the main lobby shall be located off the address side of the building.

o. Any required Fire Annunciator panel or Fire Control Room shall be located within 50-feet visual line of site of the main entrance stairwell or to the satisfaction of the Fire Department.

p. Site Plans shall include all overhead utility lines adjacent to the site.

q. Any roof elevation changes in excess of 3 feet may require the installation of ship ladders.

Note: The applicant is further advised that all subsequent contact regarding these conditions must be with the Hydrant and Access Unit. This would include clarification, verification, of condition compliance and plans or building permit applications, etc., and shall be accomplished BY APPOINTMENT ONLY. In order to assure that you receive service with a minimum amount of waiting, please call (818) 374-4351. You should advise any consultant representing you of this requirement as well.

7. Bureau of Sanitation. Satisfactory arrangements shall be made with the Bureau of Sanitation, Wastewater Collection Systems Division for compliance with its conditions and requirements. Upon compliance with its conditions and requirements, the Bureau of Sanitation, Wastewater Collection Systems Division will forward the necessary clearances to the Bureau of Engineering.

8. Information Technology Agency. To assure that cable television facilities will be installed in the same manner as other required improvements, please email cabletv.ita@lacity.org that provides an automated response with instructions on how to obtain Cable TV clearance. The automated response also provides the email address of three people in case the applicant/ owner has any additional questions.

9. Bureau of Street Services, Urban Forestry Division. Prior to the issuance of a grading permit, a plot plan prepared by a reputable tree expert, indicating the location, size, type and condition of all existing trees on the site shall be submitted for approval by the Department of City Planning. All trees in the public right-of-way shall be provided per the current Urban Forestry Division standards.

   Replacement by a minimum 24-inch box trees in the parkway and on the site of the 115 trees to be removed, shall be required for the unavoidable loss of desirable trees on the site. NOTE: Removal of all trees in the public right-of-way shall require approval of the Board of Public Works. Contact Urban Forestry Division at (213) 485-5675.

10. Submit a parking area and driveway plan to the Valley District Office of the Bureau of Engineering and the Department of Transportation for review and approval.

11. Covenant. Prior to the issuance of any permits relative to this matter, an agreement concerning all the information contained in these conditions shall be recorded by the property owner in the County Recorder's Office. The agreement shall run with the land and shall be binding on any subsequent owners, heirs or assigns. Further, the agreement must be submitted to the Planning Department for approval before being recorded. After recordation, a copy bearing the Recorder's number and date must be given to the City Planning Department for attachment to the subject file.

Notice: Prior to issuance of a clearance letter by the Bureau of Engineering, all engineering fees pertaining to Ordinance No. 176,077 adopted by the City Council, must be paid in full at the Development Services Division office.

Notice: Certificates of Occupancy for the subject property will not be issued by the City until the construction of all the public improvements (streets, sewers, storm drains, etc.), as required herein, are completed to the satisfaction of the City Engineer.

[Q] QUALIFIED CONDITIONS OF APPROVAL

Pursuant to Section 12.32-G of the Municipal Code, the following limitations are hereby imposed upon the use of the subject property, subject to the [Q] Qualified classification.

A. Development Conditions:

1. **Project Description (Use).** Development resulting in the renovation and improvement of a Hospital with accessory uses and free-standing buildings totaling 579,744 square feet with 37,198 square feet of portions of the hospital, existing modular buildings and an MRI center to be demolished. The Project will result in a total floor area as follows:

a.	Hospital	474,847 square feet
b.	Tarzana Garden Plaza	39,019 square feet
c.	Cube Medical Office Building	65,878 square feet

2. **Site Development.** Except as modified herein, the Project shall be in substantial conformance with the plans and materials stamped "Exhibit A" and dated January 5, 2018, and attached to the subject case file. No change to the plans will be made without prior review by the Department of City Planning, and written approval by the Director of Planning, with each change being identified and justified in writing. Minor deviations may be allowed in order to comply with provisions of the Municipal Code, the subject conditions, and the intent of the subject permit authorization.

3. **Floor Area.** The total floor area shall not exceed 579,744 square feet (approximately 1.03 to 1 Floor Area Ratio) of development as shown in Exhibit A, dated January 5, 2018.

4. **Height.** The New Patient Wing shall not exceed a height of 120 feet, with an additional height of 5 feet for the Cooling Tower.

5. **Development Services Center.** Prior to sign-off on building permits by the Department of City Planning's Development Services Center for the project, the Department of City Planning's Major Projects Section shall confirm, via signature, that the project's building plans substantially conform to the conceptual plans stamped as Exhibit "A", as approved by the City Planning Commission.

   Note to Development Services Center: The plans presented to, and approved by, the City Planning Commission (CPC) included specific architectural details that were significant to the approval of the project. Plans submitted at plan check for condition clearance shall include a signature and date from Major Projects Section planning staff to ensure plans are consistent with those presented at CPC.

6. **Automobile Parking**. Parking shall be in compliance with LAMC, except as otherwise authorized herein.

7. **Bicycle Parking**. On-site bicycle parking shall be provided in compliance with LAMC Section 12.21-A.16.

CONDITIONS OF APPROVAL

A. Entitlement Conditions

2. **Project Description.** Development resulting in the renovation and improvement of a Hospital with accessory uses and free-standing buildings totaling 579,744 square feet with 37,198 square feet of portions of the hospital, existing modular buildings and an MRI center to be demolished. The Project will result in a total floor area of s follows:

a.	Hospital	474,847 square-feet
b.	Tarzana Garden Plaza	39,019 square-feet
c.	Cube Medical Office Building	65,878 square-feet

3. **Site Development.** Except as modified herein, the Project shall be in substantial conformance with the plans and materials stamped "Exhibit A" and dated January 5, 2018, and attached to the subject case file. No change to the plans will be made without prior review by the Department of City Planning, and written approval by the Director of Planning, with each change being identified and justified in writing. Minor deviations may be allowed in order to comply with provisions of the Municipal Code, the subject conditions, and the intent of the subject permit authorization.

4. **Height.** The proposed and existing buildings to remain shall be subject to the following heights as shown in "Exhibit A.":

a.	Hospital building	120 feet plus 5 feet for the Cooling Tower
b.	New Parking Structure (6 levels)	60 feet
c.	Existing Parking Structure (4 levels)	37 feet
d.	Tarzana Garden Plaza	45 feet 5 inches
e.	Cube Medical Office Building	100 feet 8 inches

Notwithstanding the above, each building shall be permitted an additional height as necessary to account for elevator shafts, solar panels, and equipment, in substantial conformance with Exhibit A.

5. **Above-Grade Parking Structure**. The New Parking Structure shall have an external screen integrated into the architecture in accordance with Exhibit A, and shall be designed to improve the building's appearance and minimize light pollution while meeting code requirements for ventilation.

6. **Electric Vehicle Parking.** The project shall include at least 20 percent (20%) of the total automobile parking spaces developed on the project site capable of supporting future electric vehicle supply equipment (EVSE). Plans shall indicate the proposed type and location(s) of EVSE and also include raceway method(s), wiring schematics and electrical calculations to verify that the electrical system has sufficient capacity to simultaneously charge all electric vehicles at all designated EV charging locations at their full rated amperage. Plan design shall be based upon Level 2 or greater EVSE at its maximum operating ampacity. In addition, five percent (5%) of the total automobile parking spaces developed within the New Parking Structure (28 parking spaces), and five percent (5%) of all parking spaces in excess of LAMC-required spaces for the use (12 parking spaces), shall be further provided with EV chargers to immediately accommodate electric vehicles within the parking areas. The 40 EV-ready spaces shall

be installed in various locations throughout the Project Site. When the application of either the required 20 percent or five percent results in a fractional space, round up to the next whole number. A label stating “EV CAPABLE” shall be posted in a conspicuous place at the service panel or subpanel and next to the raceway termination point.

7. **Lighting.** All outdoor lighting shall be shielded and down-casted within the site in a manner that prevents the illumination of adjacent public rights-of-way, adjacent properties, and the night sky (unless otherwise required by the Federal Aviation Administration (FAA) or for other public safety purposes). Walkways and parking areas shall be maintained to provide sufficient illumination of the immediate environment so as to render objects or persons clearly visible for the safety of the public, employees, and emergency response personnel.

8. **Landscaping.** All open areas not used for buildings, driveways, parking areas, or walkways shall be attractively landscaped and maintained in accordance with a landscape plan and an automatic irrigation plan, prepared by a licensed Landscape Architect and to the satisfaction of the decision-maker.

9. Prior to the issuance of the building permit, a copy of Case No. VTT-74314 shall be submitted to the satisfaction of the Development Services Center.

10. **Temporary Trailers.** During pre-construction and construction, temporary trailers shall be permitted in substantial conformance with Exhibit A.

11. **Trash Enclosure.** The new trash facility will be enclosed on three sides by a block wall, with a height at 14 feet. The enclosure will include a canopy that would primarily cover the area where trash is deposited with the opening internal to the site (westerly direction) and locked with not in use. In no instance shall more than on trash compactor be operated at any given time.

12. **Mitigation Monitoring Program**. The Project shall be in substantial conformance with the mitigation measures in the attached MMP and stamped, “Exhibit B” and attached to the subject case file. The implementing and enforcing agencies may determine substantial conformance with mitigation measures in the MMP. If substantial conformance results in effectively deleting or modifying the mitigation measure, the Director of Planning shall provide written justification supported by substantial evidence as to why the mitigation measures, in whole or in part, is no longer needed, and its effective deletion or modification will not result in a new significant impact or a more severe impact to a previously identified significant impact.

    If the Project is not in substantial conformance to the adopted mitigation measures or MMP, a modification or deletion shall be treated as a new discretionary action under CEQA Guidelines, Section 15162(c) and will require preparation of an addendum or subsequent CEQA Clearance. Under this process, the modification or deletion of a mitigation measure shall not require a Zone Change unless the Director of Planning also finds that the change to the mitigation measure results in a substantial change to the Project or the non-environmental conditions of approval.

13. **Mitigation Monitor.** During the construction phase and prior to the issuance of building permits, the applicant shall retain an independent Construction Monitor (either via the City or through a third-party consultant), approved by the Department of City Planning, who shall be responsible for monitoring implementation of project design features and

mitigation measures during construction activities consistent with the monitoring phase and frequency set forth in the MMP.

The Construction Monitor shall also prepare documentation of the applicant's compliance with the project design features and mitigation measures during construction every 90 days in a form satisfactory to the Department of City Planning. The documentation must be signed by the applicant and Construction Monitor and included as part of the applicant's Compliance Report. The Construction Monitor shall be obligated to immediately report to the Enforcement Agency any non-compliance with the mitigation measures and project design features within two business days if the applicant does not correct the non-compliance within a reasonable time of notification to the applicant by the monitor or if the non-compliance is repeated. Such non-compliance shall be appropriately addressed by the Enforcement Agency.

B. Entitlement Conditions – Zone Variance (Signs).

1. **Monument Sign.** Approve herein a variance for monument sign in substantial conformance with Exhibit E (Conceptual Sign Program) located at the main public entry driveway on Burbank Boulevard and with dimensions not to exceed 12 feet in height by 6 feet, 3 inches in width, with a total square footage of 75 square feet.

2. **Wall Sign.** Approve herein a variance for an 800 square-foot wall sign fronting Etiwanda Avenue and in substantial conformance with Exhibit E (Conceptual Sign Program).

   Notwithstanding the Conditions B.1 and B.2 above, additional monument, wall and identification signs, in addition to those identified in the Conceptual Sign Program, may be permitted provided they are within the allowable sign area and consistent with the LAMC sign regulations.

C. Administrative Conditions.

1. **Approval, Verification, and Submittals.** Copies of any approvals, guarantees or verification of consultations, reviews or approvals, plans, etc. as may be required by the subject conditions, shall be provided by the Planning Department for placement in the subject file.

2. **Code Compliance.** Area, height and use regulations of the zone classification of the subject property shall be complied with, except wherein these conditions explicitly allow otherwise.

3. **Covenant.** Prior to the issuance of any permits relative to this matter, an agreement concerning all the information contained in these conditions shall be recorded in the County Recorder's Office. The agreement shall run with the land and shall be binding on any subsequent property owners, heirs or assign. The agreement must be submitted to the Planning Department for approval before being recorded. After recordation, a copy bearing the Recorder's number and date shall be provided to the Planning Department for attachment to the file.

4. **Definition.** Any agencies, public officials or legislation referenced in these conditions shall mean those agencies, public offices, legislation or their successors, designees or amendment to any legislation.

5. **Enforcement.** Compliance with these conditions and the intent of these conditions shall be to the satisfaction of the Planning Department and any designated agency, or the agency's successor and in accordance with any stated laws or regulations, or any amendments thereto.

6. **Building Plans.** Page 1 of the grant and all conditions of approval shall be printed on the building plans submitted to the City Planning Department and the Department of Building and Safety.

7. **Project Plan Modifications.** Any corrections and/or modifications to the Project plans made subsequent to this grant that are deemed necessary by the Department of Building and Safety, Housing Department, or other Agency for Code compliance, and which involve a change in site plan, floor area, parking, building height, yards or setbacks, building separations, or lot coverage, shall require a referral of the revised plans back to the Department of City Planning for additional review and final sign-off prior to the issuance of any building permit in connection with said plans. This process may require additional review and/or action by the appropriate decision-making authority including the Director of Planning, City Planning Commission, Area Planning Commission, or Board.

8. **Indemnification and Reimbursement of Litigation Costs.** The Applicant shall do all of the following:

   (i) Defend, indemnify and hold harmless the City from any and all actions against the City relating to or arising out of, in whole or in part, the City's processing and approval of this entitlement, including but not limited to, an action to attack, challenge, set aside, void, or otherwise modify or annul the approval of the entitlement, the environmental review of the entitlement, or the approval of subsequent permit decisions, or to claim personal property damage, including from inverse condemnation or any other constitutional claim.

   (ii) Reimburse the City for any and all costs incurred in defense of an action related to or arising out of, in whole or in part, the City's processing and approval of the entitlement, including but not limited to payment of all court costs and attorney's fees, costs of any judgments or awards against the City (including an award of attorney's fees), damages, and/or settlement costs.

   (iii) Submit an initial deposit for the City's litigation costs to the City within 10 days' notice of the City tendering defense to the Applicant and requesting a deposit. The initial deposit shall be in an amount set by the City Attorney's Office, in its sole discretion, based on the nature and scope of action, but in no event, shall the initial deposit be less than $50,000. The City's failure to notice or collect the deposit does not relieve the Applicant from responsibility to reimburse the City pursuant to the requirement in paragraph (ii).

   (iv) Submit supplemental deposits upon notice by the City. Supplemental deposits may be required in an increased amount from the initial deposit if found necessary by the City to protect the City's interests. The City's failure to notice or collect the deposit does not relieve the Applicant from responsibility to reimburse the City pursuant to the requirement in paragraph (ii).

   (v) If the City determines it necessary to protect the City's interest, execute an indemnity and reimbursement agreement with the City under terms consistent with the requirements of this condition.

The City shall notify the applicant within a reasonable period of time of its receipt of any action and the City shall cooperate in the defense. If the City fails to notify the applicant of any claim, action, or proceeding in a reasonable time, or if the City fails to reasonably cooperate in the defense, the applicant shall not thereafter be responsible to defend, indemnify or hold harmless the City.

The City shall have the sole right to choose its counsel, including the City Attorney's office or outside counsel. At its sole discretion, the City may participate at its own expense in the defense of any action, but such participation shall not relieve the applicant of any obligation imposed by this condition. In the event the Applicant fails to comply with this condition, in whole or in part, the City may withdraw its defense of the action, void its approval of the entitlement, or take any other action. The City retains the right to make all decisions with respect to its representations in any legal proceeding, including its inherent right to abandon or settle litigation.

For purposes of this condition, the following definitions apply:

> "City" shall be defined to include the City, its agents, officers, boards, commissions, committees, employees, and volunteers.
>
> "Action" shall be defined to include suits, proceedings (including those held under alternative dispute resolution procedures), claims, or lawsuits. Actions includes actions, as defined herein, alleging failure to comply with any federal, state or local law.

Nothing in the definitions included in this paragraph are intended to limit the rights of the City or the obligations of the Applicant otherwise created by this condition

FINDINGS

A. GENERAL PLAN / CHARTER FINDINGS (Charter Sec. 555, 556, 558).

The proposed general plan amendment (initiated by the Director of Planning on June 13, 2016), zone change, and height district change are in substantial conformance with the purposes, intent, and provisions of the General Plan and is in conformity with public necessity, convenience, general welfare and good zoning practice. In addition, the proposed land use ordinances are consistent with, and implement policies, in the Encino-Tarzana Community Plan, a component of the Land Use Element of the General Plan:

1. **Charter Findings.**
   a. **Amendment in Whole or in Part**. The General Plan Amendment before the City Planning Commission represents an Amendment in Part of the Encino-Tarzana Community Plan signifying a change to the physical identify of the Project Site, which is currently designated as Community Commercial and zoned [Q]C2-1L, C2-1, and P-1. A portion of the eastern portion of the property is zoned P-1 which would preclude the physical development of an above-grade parking structure as proposed by the Project. The height district of the existing zoning and Footnotes 12 (Height District 1VL) and Footnote 13 (Height District 1L) restricts the current height to 45 and 75 feet, respectively. Current "Q" conditions on the site further restrict the height to 45 feet. The Plan Amendment for a site-specific footnote on the Project Site to Height District 1 would allow the height of the Proposed Project of 120 feet. Height District 1 would reflect the existing physical development of the Site, with existing buildings currently at approximately 110 and 95 feet in height, and would be consistent with the Community Commercial designation. The amendment to Height District 1 would also be consistent with surrounding building heights ranging from 65 feet to approximately 150 feet in height within areas currently designated as Community Commercial.

      In adopting the Plan Amendment to permit Height District 1 on the Project Site, the City finds the subject property has a significant economic and physical identity when viewed from development in the surrounding area. The Providence Tarzana Medical Center has been in operation since 1973 providing access to health care for over 40 years. The Site is currently developed with four buildings, eight modular buildings and a parking structure on-site. The Amendment would permit the Medical Center to introduce advanced technologies in their patient rooms, which would now be all private. The improvement of the existing facility would maximize the delivery of health care services to its community. Further, the 13-acre Hospital site is a renowned resource in the community on a local and regional level, and as a non-profit, has been providing medical services to a wide range of socioeconomic levels. The Project's location adjacent to transit makes the site accessible by a range of transit options.

      Therefore, the City concludes that the approval of the Plan Amendment to assign a site-specific footnote to the Project Site to allow Height District 1 will be consistent with the land use designation of Community Commercial, and with the existing physical development of the site and the surrounding community.

   b. **Initiation of Amendments**. In compliance with this sub-section, the amendment to the Encino-Tarzana Community Plan (General Plan Land Use Element) was initiated by the Department of City Planning, via a signature by the Director of Planning's designee, on June 13, 2016.

c. **Commission and Mayoral Recommendations**. The noticing and hearing requirements of the General Plan were satisfied, pursuant to Section 12.32-C.3. The hearing was scheduled, duly noticed, and held at the San Fernando Marvin Braude Constituent Center in Van Nuys on November 14, 2017.

This action is further subject to the following sections of Charter Section 555:

d. **Council Action**. The Council shall conduct a public hearing before taking action on a proposed amendment to the General Plan. If the Council proposes any modification to the amendment approved by the City Planning Commission, that proposed modification shall be referred to the City Planning Commission and the Mayor for their recommendations. The City Planning Commission and the Mayor shall review any modification made by the Council and shall make their recommendation on the modification to the Council in accordance with subsection (c) above. If no modifications are proposed by the Council, or after receipt of the Mayor's and City Planning Commission's recommendations on any proposed modification, or the expiration of their time to act, the Council shall adopt or reject the proposed amendment by resolution within the time specified by ordinance.

e. **Votes Necessary for Adoption**. If both the City Planning Commission and the Mayor recommend approval of a proposed amendment, the Council may adopt the amendment by majority vote. If either the City Planning Commission or the Mayor recommend the disapproval of a proposed amendment, the Council may adopt the amendment only by a three-fourths vote. If the Council proposes a modification of an amendment, the recommendations of the Commission and the Mayor on the modification shall affect only that modification."

The proposed General Plan Amendment complies with Section 556 and 558 in that the amendment promotes an intensity and pattern of development that is consistent with the General Plan Framework designation that encourages uses that serve the needs of adjacent residents, are compatible with adjacent neighborhoods and are developed to live, work and visit, both daytime and nighttime in an area adjacent to transit.

2. **General Plan Land Use Designation.** The subject property is located within the Encino-Tarzana Community Plan, last updated and adopted by the City Council on December 16, 1998. The existing Plan designates the subject site for Community Commercial land uses, with a corresponding zone of CR, C2, C4, and RAS3. The requested General Plan Amendment, Zone Change and Height District Change are necessary to remove the existing "Q" Conditions established by Ordinance 165,846 to allow a height of 120 feet (excluding cooling tower and rooftop mechanical equipment), in lieu of the "Q" Condition restricting the height to 45 feet, and a maximum 579,744 square feet on-site in lieu of the 286,000 imposed by the "Q" Condition. The requested General Plan Amendment would include a site-specific footnote to allow the Project's height in lieu of Footnote No.12 (Height District IVL) and Footnote 13 (Height District 1L), restricting the site to a maximum height of three stores and 45 feet, and six stories and 75 feet, respectively.

The Project involves the renovation and improvement of the existing Providence Tarzana Medical Center and will result in net floor increase of 256,802 square feet, consisting of the replacement of the Hospital's main building and addition of a new canopy, a New Patient Wing including improvement of the Emergency Department and Walk-in Canopy, expansion of the Diagnostic and Treatment area with new canopy, and a New Parking Structure, resulting in a total of 579,744 square feet.

The development is consistent with the applicable zoning regulations and land use policies of the Encino-Tarzana Community Plan, which promotes commercial development that is in harmony and compatible with adjacent development, improve safety and aesthetics of parking areas in commercial areas, increase trips made on public transit, implements transportation management strategies, and development of parking garages in accordance with design standards.

3. **General Plan Text.**

a. The Encino-Tarzana Community Plan. The proposed renovation and improvement Project is consistent with several objectives and policies of the Encino-Tarzana Community Plan. The plan text includes the following relevant commercial land use goals, objectives and policies:

Aesthetics

Policy 2-1.3	Require that projects be designed and developed to achieve a high level of quality, distinctive character, and compatibility with existing uses and development.
Policy 2-3.3	Ensure that commercial infill projects achieve harmony with the best of existing development.
Policy 2-4.1	Require that any proposed project development be designed to enhance and be compatible with adjacent development.
Policy 2-4.2	Preserve community character, scale and architectural diversity.
Policy 2-4.3	Improve safety and aesthetics of parking areas in commercial areas.
Goal 5	A community with sufficient open space in balance with development to serve the recreational, environmental, health needs of the community and to protect environmental and aesthetic resources.

The Project will enhance the building environment in the surrounding neighborhood. The Project will be constructed in a contemporary architectural style that provide for materials and colors compatible with the existing buildings on-site to remain as well the surrounding area. Proposed materials include concrete, stucco, aluminum, glass, pre-finished wall panels and prefinished metal. Architectural screening elements will be provided on the New Parking Structure which would tie it to the New Patient Wing and existing buildings on-site.

The existing utility plant currently located outside of the east of the Hospital will be removed and replaced within the basement of the New Patient Wing. Existing utilities will be consolidated in one area in the east area of the Project Site and screened for limited visibility. The trash enclosure will be enclosed on three sides by a block wall with heights of 14 feet, with the opening facing westerly and internal to the site. The LADWP substation will be relocated and enclosed on four sides by 14-foot walls and open to the sky.

The Project would provide new landscaping and 115 replacement trees planted throughout the Project Site to buffer uses and enhance green space. Project landscaping will include an outdoor garden, landscaped walkways and hardscaped courtyards to entryways. Landscaped paseos will link parking structures to the Hospital entrance and other buildings and services on-site. The additional landscaping will add a third tier of trees along Burbank Boulevard providing screening of the New Parking Structure.

The Project proposes low-level lighting adjacent to buildings, parking structures, surface parking areas, and along pedestrian walkways and pathways for security and wayfinding purposes.

Transportation

Objective 11-1	To pursue transportation management strategies that can maximize vehicle occupancy, minimize average trip length, and reduce the number of vehicle trips.
Policy 11-1.1	Encourage non-residential development to provide employee incentives for utilizing alternatives to the automobile (i.e. carpools, vanpools, buses, flex time, bicycles, telecommuting, and walking, etc.)

The Property is in close proximity to transit stops and bike lanes easily accessible to employees, visitors and patients of the Hospital. A local bus route travels along Burbank Boulevard adjacent to the Property with stops at Etiwanda Avenue and Reseda Boulevard. Two additional bus routes travel along Reseda Boulevard east of the Project Site, one of which is a rapid bus with stops on Ventura Boulevard and Oxnard Street. A Metro Orange Busway station is located on Reseda Boulevard just north of Oxnard Street. The Orange Busway provides east-west access throughout the San Fernando Valley and connects to multiple destinations, including the Red Line to North Hollywood and Downtown Los Angeles. The Project includes Project Design Feature J-2, which requires the preparation of a Transportation Demand Management Program requiring the Hospital to identify a transportation coordinator who will be responsible for provided all employees with rideshare/carshare programs and transit services, including bicycle routes, encouraging the use of bicycles by providing short and long term spaces, showers and lockers, as well as incentives for employees who ride bicycles to work, preferential parking for carpoolers, and incentives for public transit.

Parking

Policy 13-1.4-1	New development projects should be designed to minimize disturbance to existing traffic flow with proper ingress and egress to parking.
Policy 11-1.1	New parking lots and new parking garages shall be developed in accordance with design standards.

The Project's currently provides for 1,259 parking spaces on the site. Parking is provided in an existing parking structure which includes 596 spaces and 663 surface parking spaces. Access is provided along Burbank Boulevard and Clark Street.

Vehicle access would be maintained along Burbank and Clark Street. Access from Burbank Boulevard be provided to the New Parking Structure. In addition, in order to improve ingress and egress from Burbank Boulevard, a new midblock traffic signal is proposed at the driveway on Burbank Boulevard, which would provide for protected left turns from the Property onto westbound Burbank Boulevard. An eastbound through lane would be provided for right turn access into the Property and leading to the U.S. 101 southbound onramp to the east. A pedestrian crosswalk would further be installed across Burbank Boulevard on the west side of the driveway. As such, the Project would minimize and improve traffic flow by providing proper ingress and egress.

The Project includes the construction of a new, six-level, above-grade parking structure which would provide 565 parking spaces. The New Parking Structure would consist of 230,000 square feet with a height of 60 feet (excluding mechanical equipment and elevator shafts). Upon completion of the Project, 1,500 parking spaces would be provided on-site, meeting LAMC code requirements. Although the site would be over-parked, the use of the Project as a hospital justifies the additional parking such as in emergency situations whereby specialty staff maybe called in for emergency services, or instances of major catastrophic events when staff levels increase and additional space is required for first responders.

The Project proposes to screen the New Parking Structures along the southern and northern, and partial western and eastern elevations. Screening options, such as composite perforated fabric or wire fabric with complimentary paint colors would add visual interest. Corners would be wrapped to soften large volumes of space. New landscaping would include additional rows of trees to screen the parking facades from the public right-of-way.

b. Framework Land Use Chapter:

The Land Use Chapter of the Framework Element provides primary objectives to support the viability of the City's residential neighborhoods, commercial and industrial districts, and encourage sustainable growth in appropriate locations. The Land Use Chapter establishes land use categories which are broadly described by ranges of intensity/density, heights, and lists of typical uses. The designated land use categories are Neighborhood Districts, Community Centers, Regional Centers, Downtown Center, Mixed-Use Boulevards, and Industrial Districts. The Project is consistent with the following objectives and policies:

Land Use

Objective 3.1:	Accommodate a diversity of uses that support the needs of the City's existing and future residents, businesses, and visitors.
Policy 3.1.1:	Identify areas on the Long-Range Land Use Diagram and in the community plans sufficient for the development of a diversity of uses that serve the needs of existing and future residents (housing, employment, retail, entertainment, cultural/institutional, educational, health, services, recreation, and similar uses) provide job opportunities, and support visitors and tourism.

Policy 3.8.2 Encourage the retention of existing development of new commercial uses that primarily are oriented to the residents of adjacent neighborhoods and promote the inclusion of community services (e.g. childcare and community meeting rooms).

The Providence Tarzana Medical Center currently provides 1,480 jobs in the San Fernando Valley in a variety of employment positions. The Project is expected to provided approximately 1,000 construction jobs through completion of build-out.

The Project will renovate and improve an existing hospital facility. Upon completion of the New Patient Wing and relocation of patients from the Existing Patient Building, the Existing Patient Building would be converted to Ancillary & Support Space. The Ancillary & Support Space would consist of other medical center uses, but not used to house acute care inpatient beds. The uses and functions of the proposed modular buildings to be demolished would be relocated into the Ancillary & Support Space. The Medical Center currently allows community and group meetings to take place at their facility at no cost to the community, which will continue with the implementation of the Project.

Urban Form and Neighborhood Design

Objective 5.5: Enhance the liveability of all neighborhoods by upgrading the quality of development and improving the quality of the public realm.

Policy 5.5.7: Promote the undergrounding of utilities throughout the City's neighborhoods, districts, and centers.

Policy 5.8.4: Encourage that signage be designed to be integrated with the architectural character of the buildings and convey a visually attractive character.

Objective 5.9: Encourage proper design and effective use of the built environment to help increase personal safety at all times of the day.

Policy 5.9.1: Facilitate observation and natural surveillance through improved development standards which provide for common areas, adequate lighting, clear definition of outdoor spaces, attractive fencing, use of landscaping as a natural barrier, secure storage areas, good visual connections between residential, commercial, or public environments and grouping activity functions such as child care or recreation areas.

The Property is currently developed with four buildings, eight modular buildings, a parking structure, and various surface parking area, totaling approximately 322,942 square feet of floor area for medical facilities. The heights of the existing buildings on-site range from approximately 15 feet, six inches to approximately 100 feet, eight inches. The existing buildings incorporate the use of terracotta (copper), brick, masonry, concrete and glass.

The Project proposes upgrades and enhancements to the Hospital totaling approximately 294,000 square feet, including enhancing the Main Hospital’s lobby, expanding the diagnostic and treatment areas with a new diagnostic and treatment building, and

constructing a New Patient Wing. The Project would also include the construction of a new six-level, above-grade parking structure that would be approximately 60 feet in height and provide approximately 565 parking spaces.

In addition, the Project will enhance the built environment in the surrounding neighborhood. The New Patient Wing and enhancements would be constructed in a contemporary architectural style, to include new windows, a variety of surface materials and colors, and to provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital in its exterior building skin. Additionally, the New Parking Structure would be designed to substantially screen automobiles in the garage. The design approach is intended to be complementary and appropriate to the scale of the existing Medical Center and surrounding community.

Landscaping on the Property will include new courtyards in order to provide additional gathering areas for employees and patients and their visitors. An outdoor garden, the Healing Garden, is planned adjacent to the Walk-In Canopy of the New Patient Wing for use by patients, visitors, and staff.

The Project would include a new central utility plant in the basement of the New Patient Wing, which would replace the outdated central utility plant that is currently located inside and outside of the Hospital, and will place most major utilities underground, including electrical, HVAC, and plumbing utilities, among others.

Signs are currently located along the Burbank Boulevard and Clark Street frontages and consist of monument signs, pole signs, building signs, wayfinding signs, and wall signs. Project signage would include both new and replacement signs. New signage is proposed along the Burbank Boulevard, Clark Street, 101 Freeway on-ramp, and east facing frontages and would include replacing the existing monument and pole signs with new monument signs. In addition, the Project would also replace existing signage at the vehicle and pedestrian entrances to direct guests to the new entrances and buildings on the Project Site. Project signage would include new building signs, wayfinding signs, and wall signs. A zone variance is sought for a monument sign at the Project Site's driveway at Burbank Boulevard with a vertical dimension greater than its horizontal dimension and with a height of more than eight feet above grade. Three wall signs of approximately 800 square feet each will be added near the top of the New Patient Wing as identification signage for the Hospital. A zone variance is sought for one of these wall signs, which exceeds its permitted sign area. Total signage is consistent with the allowable sign area set forth by the LAMC. Project signage will be designed to be aesthetically compatible with the existing and proposed architecture of the Property. New signage will be architecturally integrated into the design of the buildings and establish appropriate identification for the medical uses. Project signage will be illuminated by means of low-level external lighting, internal halo lighting, or ambient light. Exterior lights would be directed onto signs to minimize offsite glare. The Project would not include electronic signage or signs with flashing, mechanical, or strobe lights. Illumination used for project signage would be limited in light intensity to avoid negative lighting impacts to the nearest residentially zoned property. New signage will comply with LAMC lighting requirements.

The Project maintains 24-hour security operations and patrol using contract and in-house staff, provides an excess of 60 security cameras monitoring grounds and interior hospital space, and implements disaster drills and hospital lock downs at least once a year for staff training. The Security Plan also includes written plans for hazardous materials and waste management, fire safety, medical equipment, and utility systems. The Security Plan would

continue to be implemented during construction and upon completion of the Project, continuing to enhance the welfare and safety of the surrounding community.

The Project would incorporate elements that would promote individual and community safety. Specifically, the Project would include adequate lighting within and surrounding the proposed structures to reduce areas of concealment as well as adequate lighting of building entries and pedestrian walkways to provide for pedestrian orientation and to clearly identify a secure route between the New Parking Structure and points of entry into buildings. The New Parking Structure and surface parking areas on the Property will include safety measures to ensure the safety of pedestrians and bicyclists traveling across the Property. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Lighting on the Property would include low-level lighting adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes. In addition, the Project includes sidewalks and clear paths of travel from both Burbank Boulevard and Clark Street. Wayfinding signage will direct pedestrians through the Property.

c. Health and Wellness Element:

Policy 1.5: Improve Angelenos' health and well-being by incorporating a health perspective into land use, design, policy and zoning decisions through existing tools, practices and programs.

Policy 2.2: Promote a healthy built environment by encouraging the design and rehabilitation of buildings and sites for healthy living and working conditions, including promoting enhanced pedestrian-oriented circulation, lighting, attractive and open stairs, healthy building materials and universal accessibility using existing tools, practices and programs.

Policy 2.3: Strive to eliminate barriers for individuals with permanent and temporary disabilities to access health care and health care resources.

Policy 2.7: Encourage the equitable distribution of health care service providers: including federally qualified health centers, hospitals, pharmacies, urgent care, and mental health services, to ensure that every Angeleno has access to preventive care and medical treatment.

The proposed facilities would update the existing Hospital to meet modern standard of care and current code requirements for hospitals, including increased space and additional functions in diagnostic and treatment areas, emergency room, and support services.

The Project is an existing Hospital, bounded by Burbank Boulevard and the eastbound on-ramp to the Ventura Freeway (US 101) on the north, the Tarzana Medical Plaza on the east, Clark Street on the south, and commercial uses on the west. The location is easily accessible to patients, visitors, and employees, thus enhancing Angelenos' health and well-being by enhancing their access to care. Primary regional access is provided by the Ventura Freeway, which runs east-west adjacent to the Property. The major arterials that

provide regional and sub-regional access to the Property vicinity include Ventura Boulevard, Reseda Boulevard, and Lindley Avenue, which is east of the Property. The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property.

Further, the Project is located in close proximately to local and regional transit options, including Metro Orange Line Station at Reseda Boulevard and Oxnard Street just north of the Project Site. A dedicated bicycle pathway is located along the Orange Line's route. Dedicated bicycle lanes are also located along Reseda Boulevard traveling in both directions. The Project will include 78 bicycle parking spaces. The New Parking Structure will include 52 long-term bicycle parking spaces, and 26 short-term bicycle parking spaces will be located near the Main Building Replacement's pedestrian entrance and the Emergency Department Walk-In entrance on the northwest side of the New Patient Wing. Given the Property's close proximity to Ventura Boulevard and the US 101, it is centrally located for drivers, pedestrians, and bicyclists to easily access the premises. Because of health and safety needs for patients to receive medical services, including emergency medical services, Providence allows for ease of access by whatever means of transportation is most convenient for patients. The Hospital's redevelopment, achieved through the Project, will improve Angelenos' health and well-being by enhancing access to care in an already accessible location.

The Project upgrades to the existing Hospital promote a healthy built environment. The Project enhancements include the Main Building Replacement, D&T Expansion, and construction of the New Patient Wing and New Parking Structure to continue performing a function and providing a service that is essential or beneficial to the community, city, and region. The New Patient Wing would provide new, improved amenities for both patients and their visitors. It would also provide all private patient rooms. The New Patient Wing will be built to current seismic standards and include leading-edge technology and the latest in efficiency for delivering care.

The New Patient Wing, which will extend northwesterly from the rear of the Hospital, will replace the Existing Patient Building as the location for the acute care inpatient beds. The Hospital currently has 249 acute care inpatient beds: 195 in the Existing Patient Building, 21 in the NICU located in the Main Building, and 33 in the Women's Pavilion. The proposed New Patient Wing rooms that will provide for private rooms with advanced technology for the delivery of services. The New Patient Wing will have a total of 190 acute care inpatient beds. Together with the 33 beds in the Women's Pavilion and 21 beds in the NICU located in the Main Building, the Project will result in a slight decrease in the number of acute care inpatient beds from 249 to 244 at the Hospital. The New Patient Wing will also contain a new, expanded Emergency Department, imaging and pediatrics facilities, and the inpatient pharmacy. The increase in square footage for the new buildings on the Hospital is due to modern standard of care and current code requirements for hospitals, including increased space and additional functions in nursing units, diagnostic and treatment areas, emergency room, and support services. The New Patient Wing will total approximately 230,000 square feet of floor area plus two canopy areas associated with the relocated and improved Emergency Department referred to herein as the Walk-In Canopy and the ED Canopy. The Walk-In Canopy comprises approximately 3,000 square feet, and the ED Canopy comprises approximately 6,000 square feet. The New Patient Wing is proposed to be six stories and approximately 120 feet in height.

The Project would provide an attractive environment that will allow for safe pedestrian circulation via landscaped walkways and paseos accented with low-level lighting to adequately secure access to the main hospital and parking areas The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees. An outdoor garden, the Healing Garden, is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital for use by patients, visitors, and employees. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. Further, African Sumac trees will be located throughout the Project's surface parking lots to provide shade and visual interest.

The Project would not create any barriers for individuals with disabilities to access health care and health resources. As a non-profit organization, Providence supports the accessibility of health care services by providing free and reduced-cost medical care including access to preventive care, educational classes and medical treatment. Furthermore, low-cost prenatal classes are offered to any family in the community.

The Project is an existing hospital that provides health care services to the surrounding neighborhood and community. The Project provides a variety of services including specialties in cardiovascular care, orthopedics, women's services, pediatrics, NICU, and emergency. The Medical Center is designated as a Pediatric Medical Center, certified to treat critically ill children transported by the 911 emergency services system. The Medical Center also offers a pharmacy residency program. The Project enhances access to care by upgrading existing Hospital facilities to meet the modern standard of care and current code requirements for hospitals, including technically advanced private patient rooms and increased space and additional functions in nursing units, diagnostic and treatment areas, emergency room and support services.

d. Mobility Plan 2035:

Policy 2.3:	Recognize walking as a component of every trip, and ensure high-quality pedestrian access in all site planning and public right-of-way modifications to provide a safe and comfortable walking environment.
Policy 2.6:	Provide safe, convenient, and comfortable local and regional bicycling facilities for people of all types and abilities.
Policy 3.1:	Recognize all modes of travel, including pedestrian, bicycle, transit, and vehicular modes-including goods movement-as integral components of the City's transportation system.
Policy 3.8:	Provide bicycles with convenient, secure and well-maintained bicycle parking facilities.

The Property is located in close proximity to transit stops and bicycle routes, providing access for pedestrians and bicyclists. A local bus route traverses Burbank Boulevard adjacent to the Property with stops at Etiwanda Avenue and Reseda Boulevard. This route then continues on to Reseda Boulevard. Two additional bus routes traverse Reseda Boulevard near the Property; one is a rapid bus with stops at Ventura Boulevard and Oxnard Street, and the other is a local route with more frequent stops. Additional bus routes traverse Ventura Boulevard. A Metro Orange Line Busway station is located

on Reseda Boulevard just north of Oxnard Street. The Orange Line provides east-west access to locations throughout the San Fernando Valley and connects to downtown Los Angeles via the Red Line Subway connection in North Hollywood. A dedicated bicycle pathway is located along the Orange Line's route. Dedicated bicycle lanes are also located along Reseda Boulevard traveling in both directions. The Project will include 78 bicycle parking spaces. The New Parking Structure will include 52 long-term bicycle parking spaces, and 26 short-term bicycle parking spaces will be located near the Main Building Replacement's pedestrian entrance and the Emergency Department Walk-In entrance on the northwest side of the New Patient Wing. Well lit, landscaped, paved and defined pathways will make it easy and safe for bicyclists to find their way to the various buildings on the Property. Because of health and safety needs for patients to receive medical services, including emergency medical services, Providence encourages ease of access by whatever means of transportation is most convenient for patients. Pedestrian access would be provided throughout the Property from Burbank Boulevard and Clark Street. Existing pedestrian access would also be enhanced along Burbank Boulevard with the installation of a new traffic signal providing a pedestrian crosswalk. The Project will also improve internal circulation on the Property. The Project will provide well-lit and paved pathways from the Existing Parking Structure and New Parking Structure to the Hospital, New Patient Wing and other Hospital facilities. In addition, new pathways and internal roads will allow for pedestrian and vehicular access through the Property from Clark Street and Burbank Boulevard.

The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property. This convenient location reduces trips by San Fernando Valley residents to medical facilities located farther away.

The Project substantially conforms with the purpose, intent and provisions of the General Plan's Mobility Plan 2035.

B. ENTITLEMENT FINDINGS (Sec. A Findings are referenced as if fully incorporated herein)

1. VESTING ZONE CHANGE AND HEIGHT DISTRICT CHANGE:

a) The recommended zone change and height district change is in conformance with the public necessity, convenience, general welfare.

The Project is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (101) Freeway and Clark Street on the south and is currently developed as a Medical Center consisting of a 249-bed Hospital and medical office buildings. The site is currently improved with four buildings, eight modular buildings, a parking structure, and various surface parking lots. In total, the Property includes approximately 322,942 square feet of floor area of medical facilities. The heights of the existing buildings on-site range from approximately 15 feet-six inches to approximately 100 feet, eight inches. The Hospital is the largest building on the Property and consists of several connected areas that are referred to as the Main Building, the Ancillary Wing, the Existing Patient Building, and the Women's Pavilion. The Magnetic Resonance Imaging ("MRI") Center is a freestanding building located north of the parking structure, along the northern portion of the Property. The Tarzana Garden Plaza, which is located at the southwestern corner of the Property, contains medical and dental offices and a pharmacy. The Cube Medical Office Building

("MOB") is located south of the Existing Parking Structure in the southern portion of the Property. The Cube MOB, which is not operated by Providence, contains medical offices and a pharmacy.

The Property is located within the Encino-Tarzana Community Plan (Community Plan), a component of the Land Use Element of the City of Los Angeles' General Plan. The Community Plan Map designates the Property for Community Commercial use, with corresponding zones of CR, C2, C4, and RAS3. The Property is also currently located within the Ventura/Cahuenga Boulevard Specific Plan (Specific Plan). The Specific Plan designates the Property as Community Commercial. As part of the Project, Providence seeks to amend the Specific Plan boundaries to exclude the Property.

The Property is primarily zoned [Q]C2-1L, with portions of the property zoned C2-1 and P-1. To permit the Project as proposed, The Project is seeking a Vesting Zone and Height District Change of the P-1 zoned portion of the Property to C2-1 to permit the proposed above grade parking structure; and of the [Q]C2-IL zoned portion of the Property to C2-1 to permit the New Patient Wing height of six stories and approximately 120 feet and to remove the existing [Q] conditions to permit the Project as proposed, including the New Patient Wing and other structures, the Project's FAR, and other Project components that may be inconsistent with the [Q] conditions.

The Medical Center's services include cancer, diabetes, emergency care, heart and vascular, home care, hospice, imaging, NICU, obstetrics, orthopedics, pediatrics, surgery, women's health, and wound care. The Medical Center houses the San Fernando Valley Heart Institute, the Women's Pavilion, the Diabetes Care Center, and NICU unit. The Medical Center offers a pharmacy residency program. 195 of the Hospital's 249 acute care impatient beds are located in the Existing Patient Building, 21 are located in the NICU located in the Main Building of the Hospital, and 33 are located in the Women's Pavilion. The Existing Patient Building rooms are outdated in terms of size and technology, and privacy.

The Project is a redevelopment of existing Hospital facilities. The Project will enhance the public health benefits the Hospital currently provided upon the completion of the Project, expanding access to care for residents of the San Fernando Valley. Upon Project completion, the Medical Center will meet patients and families' health care needs. The Project will include the latest technology and safety features and providing private patient rooms which will contain modern technology and the Property's infrastructure and support space will be updated. As part of the Project, the New Patient Wing will also include a new, expanded Emergency Department. Upon completion, the Project's improved facilities will expand PTMC's benefit to the community's public health, welfare, and safety.

The Project will be compatible with the uses on adjacent properties. Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family residences. Uses south of the Property, across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket, retail, and a storage company. The Project will not change the basic use of the Property, which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. The Project's operations will therefore be compatible with and positively affect the surrounding neighborhood.

The Project is conveniently located for residents in the San Fernando Valley because of its close proximity to the Ventura Freeway and major surface streets. The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property.

The Project would provide new landscaping and trees throughout the Property to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees. An outdoor garden, the Healing Garden, is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital. The proposed Healing Garden would offer patients, visitors, and staff a landscaped area available for respite and meditation. In addition, the Project would include gardens and pathways to encourage healing that would feature colorful foliage and flowers and shade trees. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. African Sumac trees will be located throughout the Project's surface parking lots to provide shade and visual interest.

The Medical Center maintains 24-hour security operations and patrol using contract and in-house staff, provides an excess of 60 security cameras monitoring grounds and interior hospital space, and implements disaster drills and hospital lock downs at least once a year for staff training. A Security Plan also includes written plans for hazardous materials and waste management, fire safety, medical equipment, and utility systems. The Security Plan would continue to be implemented during construction and upon completion of the Project, continuing to enhance the welfare and safety of the surrounding community.

The Project's parking would include the construction of a new, six-level above grade parking structure that would provide approximately 565 parking spaces. The New Parking Structure will be approximately 60 feet in height and approximately 230,000 square feet. With the 365 on-site surface parking stalls upon Project completion and the 596 spaces in the Existing Parking Structure, the total number of parking spaces on the Property will total 1,500 stalls upon Project completion. The 1,500 parking spaces will meet City parking requirements and also meet the Project's parking demand to support and encourage patients, visitors, and employees to park with the Medical Center rather than on the streets or in other nearby lots. Further, as conditioned, the Project will provide five percent (5%) of the total automobile parking spaces provided in the New Parking Structure (28 parking spaces) and five percent (5%) all parking spaces in excess of the code requirement (12 parking spaces), with immediate installation of electric vehicle (EV) charging stations. The condition requiring EV ready parking spaces (installed with chargers) will support the adoption of low and zero emission transportation fuel sources by the Project's visitors, patients, and employees. This condition provides for the public welfare and public necessity by reducing the level of pollution of greenhouse gas emissions to the benefit of the neighborhood, and City in response to General Plan Health and Wellness Element Policies 5.1 (reduce air pollution), 5.7 (reduce greenhouse gas emissions); Air Quality Element policy 4.2.3 (ensuring new development is compatible with alternative fuel vehicles), 5.1.2 (shift to non-polluting sources of energy in buildings and operations); and Mobility Element Policy 4.1 (expand access to transportation choices). The EV condition is also good zoning practice because it provides a convenient service amenity to the occupants or visitors who use electric vehicles and utilize

electricity on site for other functions. This condition allows the Project to improve the health, wellness, air and mobility of the patients, visitors, employees and neighborhood, but within the context of the Project's proposed density, uses, and features.

The New Parking Structure and surface parking areas on the Property will include safety measures to ensure the safety of pedestrians and bicyclists traveling across the Property. Lighting on the Property would include low-level lighting adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. In addition, the Project includes sidewalks and clear paths of travel from both Burbank Boulevard and Clark Street. Wayfinding signage will direct pedestrians through the Property.

The Project is in conformity with public necessity, convenience, and general welfare. The Project's location, size, height, operations, and other significant features will be compatible with and will not adversely affect or further degrade adjacent properties, the surrounding neighborhood, or the public health, welfare, and safety. While operations are currently Hospital operations—and will continue to be Hospital operations after the Project—the Project will enhance health care and improve access to care, and thus create a healthy community.

b) The project would conform to good zoning practice.

The Project is seeking a General Plan Amendment, Specific Plan Amendment, and Vesting Zone and Height District Change to permit the Project. The Specific Plan Amendment would amend the Specific Plan's boundaries to exclude the Property; therefore, the Project would not be inconsistent with height limitations in the Specific Plan. The Vesting Zone and Height District Change would amend the current zoning on the Property of P-1, [Q]C2-1L, and C2-1, which limits structures on portions of the Property to 45 feet in height, to apply C2-1 zoning to the entire Property to allow for the New Patient Wing, which is proposed to be six stories and approximately 120 feet in height. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. Upon approval of these requests, the Project would comply with the height and area regulations of the zone in which it is located. Other components of the Project are consistent with all other height and area regulations of the existing zones.

The Project will be compatible with the uses on adjacent properties. Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family residences. Uses south of the Property, across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket, retail, and a storage company. The Project will not change the basic use of the Property, which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. The Project's operations will therefore be compatible with and positively affect the surrounding neighborhood.

The Project proposes a New Patient Wing and other enhancements to the existing Hospital, including the D&T Expansion, Main Building Replacement, and New Parking Structure to

continue performing a function and providing a service that is essential or beneficial to the community, city, and region: providing access to care. The New Patient Wing would provide new, improved amenities for both patients and their visitors. It would also provide all private patient rooms. The New Patient Wing will be built to current seismic standards and include advance technologies.

The existing buildings on the Property range from approximately 15 feet, six inches to approximately 100 feet, eight inches. The Existing Patient Building is 82 feet, three inches in height. The Cube MOB is 100 feet, eight inches in height. The Project includes the Main Building Replacement, which will be approximately 45 feet in height. The proposed D&T Expansion will be approximately 45 feet in height. Both the Main Building Replacement and D&T Expansion are consistent with the existing Hospital. The Project will also include a New Patient Wing, located in the northeast corner of the Property adjacent to an on-ramp to the US-101 freeway. The New Patient Wing will be six stories and approximately 120 feet in height, resulting in increased floor-to-floor height for the Hospital to accommodate medical advances. This height includes a screened rooftop area housing mechanical equipment. The height of the existing Cube MOB with the inclusion of its mechanical penthouse is approximately 110 feet. The Existing Patient Building with the inclusion of its mechanical penthouse is approximately 95 feet. Therefore, the New Patient Wing is consistent with existing heights on the Property. In the 1970s, when the Hospital was originally constructed, hospital floor-to-floor heights were approximately 13 feet. The design of modern healthcare facilities includes floor-to-floor heights in excess of 16 feet. This floor-to-floor height increase is also required to accommodate advances in medical technology and HVAC systems.

The Project will also include the New Parking Structure, which will include approximately 565 spaces and be six levels and approximately 60 feet in height. The New Parking Structure will allow the Property to accommodate patient, visitor, and staff parking and avoid bottlenecks and prolonged searches for parking spaces.

The heights of the buildings in the surrounding area range from approximately 65 feet to approximately 150 feet in height. Specifically, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet, six inches in height. The New Patient Wing will be approximately 120 feet in height and will be similar to the heights of buildings in the surrounding area. The heights of the other proposed buildings and structures range from approximately 45 feet to approximately 60 feet in height. The Project's building heights will be consistent with the scale of the properties in the surrounding area.

The Property is located in a highly urbanized area characterized primarily by low- to mid-rise buildings that are occupied by commercial, residential, and medical uses. The upgrades and enhancements to the existing Medical Center include the New Patient Wing of the Hospital. Approving the approximately 120-foot New Patient Wing (not including rooftop mechanical equipment and elevator shafts) is not spot zoning as the building is consistent with existing buildings on the 13-acre Property, including the 82 feet, three-inch Existing Patient Building and the 100 foot, eight-inch Cube MOB. Moreover, the New Patient Wing is located in the northeast corner of the Property adjacent to the Ventura Freeway. The additional height allowed for the New Patient Wing will not impact residential properties: the closest residential properties are over 200 feet and separated from the New Patient Wing by a medical office building (not affiliated with the Project), Etiwanda Avenue, and a flood

control channel; other nearby residential properties are south of Clark Street and separated from the New Patient Wing by the existing Hospital.

The General Plan allows a FAR of 2:1, and the LAMC allows a FAR of 1.5:1 per LAMC Section 12.21.1 A. The Project's FAR will be 1.03:1 upon completion, which complies with applicable requirements. Therefore, the Project is consistent with the FAR requirements. The Project will construct approximately 294,000 square feet of new floor area, resulting in a net increase of approximately 256,802 square feet of new floor area within the Property. At completion, the entire Project will total approximately 579,744 square feet.

The Project would provide new landscaping and trees throughout the Property to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees. An outdoor garden, the Healing Garden, is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital. The proposed Healing Garden would offer patients, visitors, and staff a dedicated outdoor landscaped area. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. African Sumac trees will be located throughout the Project's surface parking lots to provide shade and visual interest.

The Vesting Zone Change and Height District Change will allow for consistency in the zoning of the local commercial uses by continuing the Property's current use as a full service medical center, while remaining consistent with the height and square footage of the existing Property and surrounding community.

ADDITIONAL FINDINGS FOR A "T" AND "Q" QUALIFIED CLASSIFICATIONS (LAMC 12.32.G AND Q:

The current action, as recommended has been made contingent upon compliance with new "T" and "Q" conditions of approval imposed herein for the Proposed Project. Such limitations are necessary to ensure the identified dedications, improvements, and actions are undertaken to meet the public's needs, convenience, and general welfare served by the required actions. The conditions that limit the scale and scope of future development on the site are also necessary to protect the best interests of and to assure a development more compatible with surrounding properties and the overall pattern of development in the community, to secure an appropriate development in harmony with the General Plan, and to prevent or mitigate potential adverse environmental effects of the subject recommended action.

The discussion at Findings A.2 and A.3, is referenced as if fully incorporated herein and detail how the recommended "T" and "Q' conditions support these findings in addition to the following discussion.

c) The Project will protect the best interests of and assure a development more compatible with the surrounding community or neighborhood.

The Project represents a scale and intensity of development consistent community commercial areas and zoning consistent with the Encino-Tarzana Community Plan.

The Project will renovate and improve the existing Providence Tarzana Medical Center, resulting in a replacement of the Hospital's Main Building, expansion of diagnostic and treatment areas, construction of a new patient wing, and construction of a new parking structure. The improved facilities, will allow the Project to expand its access to health care without extending beyond its existing property site. The improved facilities will further allow the Medical Center to incorporate advances in medical technology by increasing floor-to-floor heights while providing private rooms for the visitors and patients. The Project will promote the Encino-Community Plan's goals and policies to improve community aesthetics by providing landscape features and open space, offer transportation alternatives to vehicles by being located near transit and providing bicycle amenities on-site, and improving the design of parking structures by utilizing architectural elements for screening of the proposed parking structure. The Project will, therefore, promote a development that is compatible with the surrounding property and neighborhood.

As conditioned, the "Q" Conditions will ensure that the Project is constructed as approved herein and subject to the mitigation measures and project design features identified in the EIR.

d) The Project will secure an appropriate development in harmony with the objectives of the General Plan.

The Project promotes and is consistent with the intensity and pattern of development of the Community Commercial land use areas. The General Plan Framework identifies community commercial areas as focal points that serve the needs of the adjacent residents, promote neighborhood and community activity, are compatible with adjacent neighborhoods, and are developed as desired places to live, work, and visit both daytime and nighttime.

The Project will renovate and improve the existing Providence Tarzana Medical Center, a focal point of the Tarzana Community, resulting in a replacement of the Hospital's Main Building, expansion of diagnostic and treatment areas, construction of a new patient wing, and construction of a new parking structure. The improved facilities will allow the Project to expand its access to health care without extending beyond its existing property site. The New Patient Wing, the highest building on-site, will be developed at the Project's northerly boundary, adjacent to the US-101 freeway and away from multi-family and single-family residents. Parking structures will be screened and additional landscaping will be provided on the site, increasing the green space in the surrounding neighborhood. Therefore, the development is appropriate and will be in harmony with the objectives of the General Plan.

e) The Project will prevent or mitigate potential adviser environmental effects of the zone change.

The EIR identified the following areas where impacts would result in significant and unavoidable impacts: Noise (On and Off-site Construction); Traffic, Access, and Parking (Construction); Noise (On and Off-site Construction, Cumulative) and Traffic, Access and Parking (Construction, Cumulative). Although there are significant and unavoidable impacts from the implementation of the Project, Statement of Overriding Considerations have been adopted. Please refer to pages F-157-159.

The Project has been conditioned herein to comply with all project design features, and mitigation measures, and the Mitigation Monitoring Program (Exhibit B) of the environmental impact report, Case No. ENV-2016-1662-EIR (Sch. No. 2016071041).

2. SPECIFIC PLAN AMENDMENT (Sec. A Findings are incorporated herein by reference):

a) The Project is consistent with the General Plan and Community Plan.

The Property is located within the Ventura/Cahuenga Boulevard Specific Plan ("Specific Plan"). The Specific Plan designates the Property as Community Commercial. As part of the Project, Providence seeks to amend the Specific Plan boundaries to exclude the Property. The Providence Tarzana Medical Center originally opened in 1973 and has been in operation for approximately 43 years. The Specific Plan was initially adopted in 1991, subsequent to the construction of many buildings in the area which are inconsistent with the Specific Plan's height, FAR and other limitations. Nevertheless, the Project will continue to conform with the Specific Plan's purpose and intent and to several of the Specific Plan's provisions, including community development limitations based on the community's transportation infrastructure capacity, aesthetics, buffers, landscaping and open space. In addition, the Project Site, even after removal from Specific Plan boundaries, will continue to be consistent with the General Plan and Community Plan policies as discussed in detail at Sections A.2 and A.3 above. The discussion in those sections is referenced as if fully incorporated herein.

As to the Specific Plan's building limitations, no project may exceed a maximum FAR of 1.25:1 within areas designated as Community Commercial. Upon buildout, the Project's FAR would be 1.03:1. As a result, the Project would be consistent with the allowable FAR. Furthermore, the Project would be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community and would not be out of character with the existing setting.

Regarding driveways, the Project would not include multiple driveways where the linear frontage of the lot is less than 250 feet.

The Project would also be consistent with the Specific Plan's landscaping requirements. The Project proposes to screen the New Parking Structure along its northern, southern, partial western (those portions visible from Burbank Boulevard and Clark Street), and eastern elevations. The portion of the western elevation that is not screened will be painted to complement the screening material and add visual interest. Options currently being considered for the New Parking Structure's architectural screen are wire fabric or a composite perforated fabric. The Project design proposes new landscaping along the four elevations of the New Parking Structure, as well as the north, east and south elevations of the Existing Parking Structure. New landscaping, including trees, shrubs, and flowers, will provide visual interest and additional screening of both Parking Structures. These screening and landscaping measures would reduce glare as well as lighting levels from vehicle headlights during the night.

The Project would increase the total parking supply on the Project Site to approximately 1,500 parking spaces, which exceeds parking requirements under the Specific Plan for the Medical Center. The Specific Plan does not cap the amount of parking provided.

The Specific Plan requires a project applicant to make street and highway dedications and improvements to the satisfaction of the Department of Transportation (LADOT) and the Bureau of Engineering (BOE). The Project provides dedications and improvements along Burbank Boulevard and Clark Street consistent with recommendations of LADOT and BOE.

The Specific Plan also requires a project applicant to mitigate traffic impacts and implement a transportation demand management ("TDM") program. The Project will coordinate with LADOT to fund and implement the installation of closed circuit television traffic monitoring cameras and necessary fiber optic cables at the intersection of Reseda Boulevard and Burbank Boulevard and at the intersection White Oak Avenue and Burbank Boulevard. Additionally, the Project proposes a traffic signal at the driveway on Burbank Boulevard to allow for left turns from the Property onto westbound Burbank Boulevard. To facilitate this movement, an exclusive outbound lane would be installed within the Property for the left-turning vehicles onto Burbank Boulevard. Additionally, an eastbound through lane would be installed along the Property's Burbank frontage providing right-turn access into the Property and leading to the US-101 Southbound onramp to the east. Furthermore, a pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway. The Project will also include implementation of a TDM program via Project Design Feature identified as J-2 in the Mitigation Monitoring Program (Exhibit B). The Project will comply with the Specific Plan's provisions regarding traffic mitigation.

b) The Project is in conformity with public necessity, convenience, and general welfare.

The Property is currently located within the Ventura/Cahuenga Boulevard Specific Plan. The Specific Plan designates the Property as Community Commercial. As part of the Project, Providence seeks to amend the Specific Plan boundaries to exclude the Property. Nonetheless, the Project is consistent with several applicable provisions of the Specific Plan and would serve the public necessity, convenience, and general welfare through its continued operation as a hospital. A detailed discussion of how the Project satisfies this finding is located in Section B.1.a. above, and is referenced as if fully incorporated herein. A summary of that discussion follows:

The Project is a redevelopment of existing Hospital facilities. Upon Project completion, the Medical Center will meet patients and families' health care needs. The Project will include the latest technology and safety features and providing private patient rooms with advanced technologies. The Property's infrastructure and support space will be updated. As part of the Project, the New Patient Wing will also include a new, expanded Emergency Department. Upon completion, the Project's improved facilities will further support benefits to the community's public health and welfare.

The Project proposes a New Patient Wing and other enhancements to the existing Hospital including the D&T Expansion, Main Building Replacement, and New Parking Structure, to continue performing a function and providing a service that is essential or beneficial to the community, city, and region. The New Patient Wing would provide new, improved amenities for both patients and their visitors. It would also provide all private state-of-the-art patient rooms. The New Patient Wing will be built to current seismic standards and include leading-edge technology. The Project enhances access to care by upgrading existing Hospital facilities to meet the modern standard of care and current code requirements for hospitals, including state-of-the-art patient rooms, increased space and additional functions in nursing units, diagnostic and treatment areas, emergency room, and support services.

The Property is located in close proximity to transit stops and bicycle routes, providing access for pedestrians and bicyclists. A local bus route traverses Burbank Boulevard adjacent to the Property with stops at Etiwanda Avenue and Reseda Boulevard. This route then continues on to Reseda Boulevard. Two additional bus routes traverse Reseda Boulevard near the Property; one is a rapid bus with stops at Ventura Boulevard and Oxnard Street, and the other is a local route with more frequent stops. Additional bus routes traverse

Ventura Boulevard. A Metro Orange Line Busway station is located on Reseda Boulevard just north of Oxnard Street. The Orange Line provides east-west access to locations throughout the San Fernando Valley and connects to downtown Los Angeles via the Red Line Subway connection in North Hollywood. A dedicated bicycle pathway is located along the Orange Line's route. Dedicated bicycle lanes are also located along Reseda Boulevard traveling in both directions. The Project will include 78 bicycle parking spaces. The New Parking Structure will include 52 long-term bicycle parking spaces, and 26 short-term bicycle parking spaces will be located near the Main Building Replacement's pedestrian entrance and the Emergency Department Walk-In entrance on the northwest side of the New Patient Wing. Well lit, landscaped, paved and defined pathways will make it easy and safe for bicyclists to find their way to the various buildings on the Property. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Existing pedestrian access would also be enhanced along Burbank Boulevard with the installation of a new traffic signal providing a pedestrian crosswalk.

The Specific Plan would provide for new landscaping and enhanced pedestrian walkways. The Project would provide new landscaping and trees throughout the Property to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood.

The Hospital is also conveniently located to allow San Fernando Valley residents to receive health care without having to travel to other facilities farther away. The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property. This convenient location reduces trips by San Fernando Valley residents to medical facilities located farther away. In addition, the Project's enhancements to the Hospital will ensure that Medical Center can provide medical care to residents, further reducing trips to other medical facilities.

c) The Project would conform to good zoning practice.

The Project is a redevelopment of existing Hospital facilities. A detailed discussion on how the Project satisfies this finding is located in Section B.1.b. above, and is referenced as if fully incorporated herein. A summary of that discussion follows:

The Project will enhance the public health benefits the Hospital already provides upon the completion of the Project, expanding access to care for residents of the San Fernando Valley. The Project will be consistent with the uses on adjacent properties. Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family dwellings. Uses south of the Property, across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket and a storage company. The Project will not change the basic use of the Property, which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. Therefore, the Project conforms to good zoning practice, because it continues the existing use of the Property, which is consistent with other uses in the area.

The Property consists of seven contiguous parcels comprising approximately 13 acres. The existing buildings on the Property range from 15 feet-six inches to 100 feet, eight inches. The Existing Patient Building is 82 feet, three inches in height. The Cube MOB is 100 feet, eight inches in height. The Project includes the Main Building Replacement, which will be approximately 45 feet in height. The proposed D&T Expansion will also be approximately 45 feet in height. Both the Main Building Replacement and D&T Expansion are consistent with the existing Hospital. The Project will also include a New Patient Wing, located in the northeast corner of the Property adjacent to an on-ramp to the US-101 freeway. The New Patient Wing is proposed to be six stories and approximately 120 feet in height, resulting in increased floor-to-floor height for the Hospital to accommodate medical advances. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. In the 1970s, when the Hospital was originally constructed, hospital floor-to-floor heights were approximately 13 feet. The design of modern healthcare facilities includes floor-to-floor heights in excess of 16 feet. This floor-to-floor height increase is also required to accommodate advances in medical technology and HVAC systems. The Project will also include the New Parking Structure, which will include approximately 565 spaces and be six levels and approximately 60 feet in height. The New Parking Structure will allow the Property to accommodate patient, visitor, and staff parking and avoid bottlenecks and prolonged searches for parking spaces.

The height of the proposed buildings will be consistent with the surrounding area. The Property is located in a highly urbanized area characterized primarily by low- to mid-rise buildings that are occupied by commercial, residential, and medical uses. The New Patient Wing is located in the northeast corner of the Property adjacent to the Ventura Freeway. The additional height allowed for the New Patient Wing will not impact residential properties: the closest residential properties are over 200 feet and separated from the New Patient Wing by a medical office building (not affiliated with the Project), Etiwanda Avenue, and a flood control channel; other nearby residential properties are south of Clark Street and separated from the New Patient Wing by the existing Hospital. The New Parking Structure will be located in the northwestern portion of the Property. It will be separated from Burbank Boulevard by a private drive and landscaped buffer. The New Parking Structure will be separate from adjacent uses to the west by landscaping and surface parking areas.[2] Other buildings in the Medical Center vicinity range in height from approximately 65 feet to approximately 150 feet in height. Specifically, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet-six inches in height.

The General Plan allows a FAR of 2:1, and the LAMC allows a FAR of 1.5:1 per LAMC Section 12.21.1 A. The Project's FAR will be 1.03:1 upon completion, which complies with applicable requirements. The Project will construct approximately 294,000 square feet of new floor area, resulting in a net increase of approximately 256,802 square feet of new floor area within the Property. At completion, the entire Project will total approximately 579,744 square feet.

The Project's location, size, height, operations, and other significant features will be compatible with and will not adversely affect or further degrade adjacent properties, the surrounding neighborhood, or the public health, welfare, and safety.

---

[2] Only the rear portion of commercial adjacent uses to the west abut the Property, including loading areas.

The Project will comply with the height and area regulations of the Encino-Tarzana Land Use Map's Community Commercial Zone and C2-1 zoning, and thus will conform to good zoning practice.

3. MAJOR DEVELOPMENT CONDITIONAL USE (Sec. A Findings are incorporated herein by reference):

a) The project will enhance the built environment in the surrounding neighborhood or will perform a function or provide a service that is essential or beneficial to the community, city or region.

The Property is improved with four buildings, eight modular buildings, a parking structure, and various surface parking lots. In total, the Property includes approximately 322,942 square feet of floor area of medical facilities. The heights of the existing buildings on-site range from approximately 15 feet, six inches to 100 feet, eight inches. The Hospital is the largest building on the Property and consists of several connected areas that are referred to as the Main Building, the Ancillary Wing, the Existing Patient Building, and the Women's Pavilion. The Magnetic Resonance Imaging (MRI) Center is a freestanding building located north of the parking structure, along the northern portion of the Property. The Tarzana Garden Plaza, which is located at the southwestern corner of the Property, contains medical and dental offices and a pharmacy. The Cube Medical Office Building (MOB) is located south of the Existing Parking Structure in the southern portion of the Property. The Cube MOB, which is not operated by Providence, contains medical offices and a pharmacy.

Eight modular buildings are located along the northeastern part of the Property, fronting Burbank Boulevard and the US 101 freeway entrance. The modular buildings are occupied by uses that would generally be housed in the Hospital, but due to space constraints, are in the modular buildings. Building A houses the Case Management Department. Building B consists of meetings rooms and restrooms. Building C houses the Performance Improvement and Quality Departments. Building D consists of office space for medical staff. Building E houses volunteers and the Compliance and Service Excellence Departments. Building F houses the Medical Records and Pathology Departments. Building G houses the Spiritual Care Department. The final modular building, the Foundation Building, houses the Providence Tarzana Foundation offices. There are also several service buildings located on the Property that contain general storage, emergency supply storage, electrical switch gear, mechanical equipment, oxygen tank storage, trash enclosures, and emergency generators.

The Existing Patient Building was opened in 1973. The patient rooms are outdated and not appropriately sized. In addition, many are double and triple occupancy rooms. The Hospital's support space is antiquated, and the Property's infrastructure and central utility plant are aging.

In order for the Medical Center facilities to accommodate the health care services provided, the Project proposes upgrades and enhancements to the Hospital, including to replace the Hospital's Main Building (Main Building Replacement), expand the diagnostic and treatment areas, (D&T Expansion), and construct a new patient wing (New Patient Wing) and an additional parking structure (New Parking Structure), in order to continue providing a service that is essential or beneficial to the community, city, and region: providing access to care. The New Patient Wing would provide new, improved amenities for both patients and their visitors. It would also provide all private patient rooms. The New Patient Wing will be built to current seismic standards and include advanced technologies and the latest in efficiency for delivering care. An outdoor garden, the Healing Garden, is planned between

the Walk-In Canopy of the New Patient Wing and the existing Hospital, which would offer patients, visitors, and staff an outdoor landscaped area. The Main Building Replacement will be constructed along the central portion of the Hospital to replace the Main Building and enhance the Lobby. The Main Building Replacement, a modernized and redesigned lobby and visitor's center, would improve access to the Hospital by creating a central entrance and a meeting and gathering space for patients, visitors, and other guests. The first floor of the Main Building Replacement will include an entrance and lobby area for patients and visitors. The second floor will accommodate clinical services for Hospital programs and operations. The D&T Expansion will expand the diagnostic and treatment areas located in the Hospital's Ancillary Wing. New landscaping and trees throughout the Property, including gardens and pathways featuring shade trees, will buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. To meet the parking needs for the entire property, the Project will also include a New Parking Structure. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance.

In addition, the Medical Center offers the use of its facilities for community and group meetings in the Medical Center's auditorium and in its conference rooms and proposes to do so as part of the Project.

The Project will enhance the built environment in the surrounding neighborhood. The New Patient Wing and enhancements to the existing Hospital would be constructed in a contemporary architectural style, to include new windows, a variety of surface materials and colors, and to provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital in its exterior building skin. The design approach is intended to be complementary and appropriate to the scale of the existing Medical Center and surrounding community.

Proposed building materials would include concrete, stucco, aluminum, glass, concrete block, terracotta, cladding, pre-finished wall panel, and prefinished metal. The Project would also replace the outdated central utility plant that is currently located inside and outside of the Hospital in a currently-visible location, in the new central plant to be located in the basement of the New Patient Wing. Certain service buildings and facilities on the Property would also be removed. In addition, the existing above-grade emergency generators would be consolidated in one area east of the proposed D&T Expansion. This area would be fully screened around the perimeter. Furthermore, the existing trash enclosure and LADWP substation would be relocated to an area east of the proposed D&T Expansion, along the eastern property line. The trash enclosure would be enclosed on three sides by a block wall, with wall heights reaching approximately 14 feet. The opening of the trash enclosure would face the D&T Expansion, west of the trash enclosure. The LADWP substation would be located directly north of the trash enclosure and would be enclosed on four sides by a 14-foot high block wall open to the sky. The height of the proposed block wall to screen the trash enclosure and the location of the LADWP substation would limit visibility of the trash enclosure and LADWP substation from off-site areas.

The Project's landscaping would also enhance the built environment. The Project includes approximately 69,629 square feet of landscaping. The Project would provide new landscaping and trees throughout the Property to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees. New landscaping, including rows of African Sumac

trees will be located throughout the Project's surface parking lots to provide shade and visual interest. Project landscaping would include courtyards, gardens, and walkways that would be located throughout the Property to provide additional gathering areas for patients, visitors, and employees. An outdoor garden, the Healing Garden, is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital. The proposed Healing Garden would offer patients, visitors, and staff an outdoor landscaped area. In addition, the Project would include gardens and pathways that would feature a variety of shade trees. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. In total, 115 new trees would be planted as part of the Project. Therefore, the continued use and proposed expansion of the existing Medical Center will provide a service that is both essential and beneficial to the community.

The Project will enhance the built environment in the surrounding neighborhood or will perform a function or provide a service that is essential or beneficial to the community, city, or region.

b) *The project's location, size, height, operations and other significant features will be compatible with and will not adversely affect or further degrade adjacent properties, the surrounding neighborhood, or the public health, welfare, and safety.*

The Project is a redevelopment of existing Hospital facilities. The Project will enhance the public health benefits the Hospital currently provides upon the completion of the Project, expanding access to care for residents of the San Fernando Valley. The Project will include the latest technology and safety features by providing private patient rooms that will contain state-of-the-art technology and the Property's infrastructure and support space will be updated. As part of the Project, the New Patient Wing will also include a new, expanded Emergency Department. Upon completion, the Project's improved facilities will expand the Project's benefit to the community's public health, welfare, and safety.

The Project will be compatible with the uses on adjacent properties. Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family residences. Uses south of the Property, across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket, retail, and a storage company. The Project will not change the basic use of the Property, which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. The Project's operations will therefore be compatible with and positively affect the surrounding neighborhood.

The Project is conveniently located for residents in the San Fernando Valley because of its close proximity to the Ventura Freeway and major surface streets. The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property.

The existing buildings on the Property range from 15 feet, six inches to 100 feet, eight inches. The Existing Patient Building is 82 feet, three inches in height. The Cube MOB is 100 feet, eight inches in height. The Project includes the Main Building Replacement, which will be approximately 45 feet in height. The proposed D&T Expansion will be approximately 45 feet in height. Both the Main Building Replacement and D&T Expansion are consistent with the existing Hospital. The Project will also include a New Patient Wing, located in the northeast corner of the Property adjacent to an on-ramp to the US-101 freeway. The New Patient Wing is proposed to be six stories and approximately 120 feet in height, resulting in increased floor-to-floor height for the Hospital to accommodate medical advances. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. The height of the existing Cube MOB with the inclusion of its mechanical penthouse is approximately 110 feet. The Existing Patient Building with the inclusion of its mechanical penthouse is approximately 95 feet. Therefore, the New Patient Wing is consistent with existing heights on the Property. In the 1970s, when the Hospital was originally constructed, hospital floor-to-floor heights were approximately 13 feet. The design of modern healthcare facilities includes floor-to-floor heights in excess of 16 feet. This floor-to-floor height increase is also required to accommodate advances in medical technology and HVAC systems. The Project will also include the New Parking Structure, which will include approximately 565 spaces and be six levels and approximately 60 feet in height. The New Parking Structure will allow the Property to accommodate patient, visitor, and staff parking and avoid bottlenecks and prolonged searches for parking spaces.

The height of the proposed buildings will be consistent with the surrounding area. The Property is located in a highly urbanized area characterized primarily by low- to mid-rise buildings that are occupied by commercial, residential, and medical uses. The New Patient Wing is located in the northeast corner of the Property adjacent to the Ventura Freeway. The additional height allowed for the New Patient Wing will not impact residential properties: the closest residential properties are over 200 feet and separated from the New Patient Wing by a medical office building (not affiliated with PTMC), Etiwanda Avenue, and a flood control channel; other nearby residential properties are south of Clark Street and separated from the New Patient Wing by the existing Hospital. The New Parking Structure will be located in the northwestern portion of the Property. It will be separated from Burbank Boulevard by a private drive and landscaped buffer. The New Parking Structure will be separated from adjacent uses to the west by landscaping and surface parking areas.[3] Other buildings in the Medical Center vicinity range in height from approximately 65 feet to approximately 150 feet in height. Specifically, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet, six inches in height.

The Project would provide new landscaping and trees throughout the Property to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees, providing additional screening of proposed buildings. Project landscaping would include courtyards, gardens, and walkways that would be located throughout the Property to provide additional gathering areas for patients, visitors, and employees. A 5,600 square-foot outdoor garden, referred to as the Healing Garden, is planned between the Walk-In Canopy

[3] Only the rear portion of commercial adjacent uses to the west abut the Property, including loading areas.

of the New Patient Wing and the existing Hospital. The proposed Healing Garden would offer patients, visitors, and staff an outdoor landscaped area. In addition, the Project would include gardens and pathways that would feature a variety of shade trees. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. New landscaping, including rows of African Sumac trees, will be located throughout the existing surface parking areas to provide shade and visual interest. In total, 115 replacement trees would be planted as part of the Project.

The Project proposes to screen the New Parking Structure along its northern, southern, partial western (those portions visible from Burbank Boulevard and Clark Street), and eastern elevations. The portion of the western elevation that is not screened will be painted to complement the screening material and add visual interest. Options currently being considered for the New Parking Structure's architectural screen are wire fabric or a composite perforated fabric. The Project design proposes new landscaping along the four elevations of the New Parking Structure, as well as the north, east and south elevations of the Existing Parking Structure. New landscaping, including trees, shrubs, and flowers, will provide visual interest and additional screening of both Parking Structures. These screening and landscaping measures would reduce glare as well as lighting levels from vehicle headlights during the night.

Providence currently implements its own security plan. The Security Plan includes a variety of programs for the safety of those who enter the Property, including quarterly inspections of all areas, ongoing staff training, and monthly employee Safety and Disaster Newsletters. Providence also maintains 24-hour security operations and patrol using contract and in-house staff, provides an excess of 60 security cameras monitoring grounds and interior hospital space, and implements disaster drills and hospital lock downs at least once a year for staff training. The Security Plan also includes written plans for hazardous materials and waste management, fire safety, medical equipment, and utility systems. The Security Plan would continue to be implemented during construction and upon completion of the Project, continuing to enhance the welfare and safety of the surrounding community.

The Project's location, size, height, operations, and other significant features will be compatible with and will not adversely affect or further degrade adjacent properties, the surrounding neighborhood, or the public health, welfare, and safety. The current and proposed continued operations of the Hospital will enhance health care and improve access to care, and thus create a healthy community.

c) The project substantially conforms with the purpose, intent and provisions of the General Plan, the applicable community plan, and any applicable specific plan.

The Property is located within the Encino-Tarzana Community Plan (Community Plan), a component of the Land Use Element of the City of Los Angeles' General Plan. The Community Plan Map designates the Property for Community Commercial use, with corresponding zones of CR, C2, C4, and RAS3. Upon approval of the Project's requested entitlements, the Project would substantially conform with the purpose, intent and provisions of the General Plan and Community Plan.

The Property is also located within the Ventura/Cahuenga Boulevard Specific Plan (Specific Plan). The Specific Plan designates the Property as Community Commercial. As part of the Project, Providence Tarzana Medical Center seeks to amend the Specific Plan boundaries

to exclude the Property.[4] Nonetheless, the Project will continue to conform with the Specific Plan's purpose and intent and with many of the Specific Plan's provisions as delineated in Sec. 2 of the Findings incorporated herein by reference.

d) The Project provides for an arrangement of uses, buildings, structures, open spaces, and other improvements that are compatible with the scale and character of the adjacent properties and surrounding neighborhood.

The Property is developed with a 249-bed Hospital and medical office buildings serving the needs of the San Fernando Valley. The Medical Center's services include cancer, diabetes, emergency care, heart and vascular, home care, hospice, imaging, NICU, obstetrics, orthopedics, pediatrics, surgery, women's health, and wound care. The Medical Center houses the San Fernando Valley Heart Institute, the Women's Pavilion, the Diabetes Care Center, and one of the largest NICU units in the San Fernando Valley. It also offers a pharmacy residency program. 195 of the Hospital's 249 acute care impatient beds are located in the Existing Patient Building, 21 are located in the NICU located in the Main Building of the Hospital, and 33 are located in the Women's Pavilion. The Existing Patient Building rooms are small and contain both double and triple occupancy rooms.

The Hospital's current operations will continue with the development of the Project. Upon Project completion, the Medical Center will meet patients and families' health care needs. The Project will include the latest technology and safety features and will provide private patient rooms with advanced technology and the Property's infrastructure and support space will be updated. As part of the Project, the New Patient Wing will also include a new, expanded Emergency Department. The Project will also include the New Parking Structure, which will include approximately 565 spaces and be six levels and approximately 60 feet in height. The New Parking Structure will allow the Property to accommodate patient, visitor, and staff parking and avoid bottlenecks and prolonged searches for parking spaces. The Property consists of seven contiguous parcels comprising an approximately 13-acre site. The Property is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (101) Freeway and Clark Street on the south.

The Project will be compatible with the character of the adjacent properties and surrounding neighborhood. Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family dwellings. Uses south of the Property, across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket, retail, and a storage company. The Project will not change the basic use of the Property which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. The Project's operations will therefore be compatible with the character of the surrounding neighborhood.

The existing buildings on the Property range from 15 feet-six inches to 100 feet, eight inches. The Existing Patient Building is 82 feet, three inches in height. The Cube MOB is 100 feet, eight inches in height. The Project includes the Main Building Replacement, which

[4] The Specific Plan was initially adopted in 1991, subsequent to construction of many buildings in the area which are inconsistent with the Specific Plan's height, FAR, and other limitations.

will be approximately 45 feet in height. The proposed D&T Expansion will be approximately 45 feet in height. Both the Main Building Replacement and D&T Expansion are consistent with the existing Hospital. The Project will also include a New Patient Wing, located in the northeast corner of the Property adjacent to an on-ramp to the US-101 freeway. The New Patient Wing is proposed to be six stories and approximately 120 feet in height, resulting in increased floor-to-floor height for the Hospital to accommodate medical advances. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. The height of the existing Cube MOB with the inclusion of its mechanical penthouse is 110 feet. The Existing Patient Building with the inclusion of its mechanical penthouse is 95 feet. Therefore, the New Patient Wing is consistent with existing heights on the Property. In the 1970s, when the Hospital was originally constructed, hospital floor-to-floor heights were approximately 13 feet. The design of modern healthcare facilities includes floor-to-floor heights in excess of 16 feet. This floor-to-floor height increase is also required to accommodate advances in medical technology and HVAC systems.

The height of the proposed buildings will be consistent with the surrounding area. The Property is located in a highly urbanized area characterized primarily by low- to mid-rise buildings that are occupied by commercial, residential, and medical uses. The New Patient Wing is located in the northeast corner of the Property adjacent to the Ventura Freeway. The additional height allowed for the New Patient Wing will not impact residential properties: the closest residential properties are over 200 feet and separated from the New Patient Wing by a medical office building (not affiliated with PTMC), Etiwanda Avenue, and a flood control channel; other nearby residential properties are south of Clark Street and separated from the New Patient Wing by the existing Hospital. The New Parking Structure will be located in the northwestern portion of the Property. It will be separated from Burbank Boulevard by a private drive and landscaped buffer. The New Parking Structure will be separate from adjacent uses to the west by landscaping and surface parking areas.[5] Other buildings in the Medical Center vicinity range in height from approximately 65 feet to approximately 150 feet in height. Specifically, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet, six inches in height.

The Project will also include new landscaping and trees throughout the Property to buffer hospital uses and enhance green space in the neighborhood. The Project would enhance the existing landscaped buffer along Clark Street consisting of Crape Myrtle trees. In addition, the Project would enhance the landscaped buffer along Burbank Boulevard that would include Canary Island Pine trees. An outdoor garden, the Healing Garden, is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital. The proposed Healing Garden would offer patients, visitors, and staff an outdoor landscaped area. In addition, the Project would include gardens and pathways that would feature a variety of shade trees. A new landscaped Paseo will provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance. Courtyards would also provide additional gathering areas for patients and their families, as well as staff. African Sumac trees will be located throughout the Project's surface parking lots to provide shade and visual interest. In total, 115 replacement trees would be planted as part of the Project.

[5] Only the rear portion of commercial adjacent uses to the west abut the Property, including loading areas.

Lighting on the Property would include low-level lighting adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes. In addition, low-level lighting to accent signage, architectural features, and landscaping elements would be installed throughout the Property. The proposed lighting sources would be similar to other lighting sources in the vicinity of the Property. The proposed lighting would not generate artificial light levels that are out of character with the surrounding area, which is densely developed and characterized by a high degree of human activity during the day and night. The exterior lighting will consist of low-level lights adjacent to buildings and surface parking lots, as well as along pathways. It is anticipated the exterior lighting will be shielded or directed toward the areas to be lit to limit light spillover onto off-site uses and would meet all applicable LAMC lighting standards.

The Project provides for an arrangement of uses, buildings, structures, open spaces and other improvements that are compatible with the scale and character of the adjacent properties and surrounding neighborhood

e) The Project complies with the height and area regulations of the zone in which it is located.

The Property is currently developed as a Hospital and medical office buildings. The Project will expand and enhance existing uses on the Property. Currently, the Existing Patient Building on the property is 82 feet, three inches in height, with the rest of the buildings on the property ranging from 15 feet, six inches in height to 100 feet, eight inches in height. The proposed New Patient Wing will be approximately 120 feet in height. The heights of the other proposed buildings and structures range from approximately 45 feet in height to approximately 60 feet in height.

In order for the Medical Center facilities to accommodate the care provided by Providence Hospital, the Project proposes upgrades and enhancements to the Hospital, including the Main Building Replacement, D&T Expansion, and construction of the New Patient Wing and New Parking Structure, to continue performing a function and providing a service that is essential or beneficial to the community, city, and region: providing access to care. The New Patient Wing would provide new, improved amenities for both patients and visitors. It would also provide all private patient rooms. The New Patient Wing will be built to current seismic standards and include leading-edge technology and the latest in efficiency for delivering care.

The New Patient Wing, which will extend northwesterly from the rear of the Hospital, will replace the Existing Patient Building as the location for the acute care inpatient beds. The Hospital currently has 249 acute care inpatient beds: 195 in the Existing Patient Building, 21 in the NICU located in the Main Building, and 33 in the Women's Pavilion. The Existing Patient Building rooms are small and contain both double and triple occupancy rooms, in contrast to the proposed New Patient Wing rooms that will be state-of-the art and have all single occupancy rooms, which provides for privacy for patients and their families and visitors. The New Patient Wing will have a total of 190 acute care inpatient beds. Together with the 33 beds in the Women's Pavilion and 21 beds in the NICU located in the Main Building, the Project will result in a slight decrease in the number of acute care inpatient beds from 249 to 244 at the Hospital. The New Patient Wing will also contain a new, expanded Emergency Department, imaging and pediatrics facilities, and the inpatient pharmacy. The increase in square footage for the new buildings on the campus is due to modern standard of care and current code requirements for hospitals, including increased space and additional functions in nursing units, diagnostic and treatment areas, emergency room, and support services. The New Patient Wing will total approximately 230,000 square

feet of floor area plus two canopy areas associated with the relocated and improved Emergency Department, i.e., the Walk-In Canopy and the ED Canopy. The Walk-In Canopy comprises approximately 3,000 square feet, and the ED Canopy comprises approximately 6,000 square feet. The New Patient Wing is proposed to be six stories and approximately 120 feet in height.

Providence is seeking a General Plan Amendment, Specific Plan Amendment, and Vesting Zone and Height District Change to permit the New Patient Wing height of six stories and approximately 120 feet. The Specific Plan Amendment would amend the Specific Plan's boundaries to exclude the Property; therefore, the Project would not be inconsistent with height limitations in the Specific Plan. The Vesting Zone and Height District Change would amend the current zoning on the Property of [Q]C2-1L, C2-1 and P-1, which limits structures on portions of the Property to 45 feet in height, to apply C2-1 zoning to the entire property to allow for the New Patient Wing, which is proposed to be six stories and approximately 120 feet in height. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. Upon approval of these requests, the Project would comply with the height and area regulations of the zone in which it is located. Other components of the Project are consistent with all other height and area regulations of the existing zones.

The General Plan allows a FAR of 2:1, and the LAMC allows a FAR of 1.5:1 per LAMC Section 12.21.1 A. The Project's FAR will be 1.03:1 upon completion, which complies with applicable requirements. Therefore, the Project is consistent with the FAR requirements. The Project will construct approximately 294,000 square feet of new floor area, resulting in a net increase of 256,802 square feet of new floor area within the Property. At completion, the entire Project will total approximately 579,744 square feet.

Upon approval of the zone and height district change, the Project would comply with the height and area regulations of the Encino-Tarzana Land Use Map's Community Commercial land use designation and C2-1 Zone.

f) That the Project is consistent with the City Planning Commission's design guidelines for Major Development Projects, if any.

The City Planning Commission has not yet approved Design Guidelines for Major Development Projects.

4. ZONE VARIANCE (SIGNS)

a) The strict application of the zone code would result in practical difficulties or unnecessary hardships inconsistent with the general purposes and intent of the zoning regulations.

The Property is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (US-101) Freeway and Clark Street on the south and is currently developed as a Medical Center consisting of a 249-bed Hospital and medical office buildings.

Signs are located along the Burbank Boulevard and Clark Street frontages under existing conditions and consist of monument signs, pole signs, building signs, wayfinding signs, and wall signs. Project signage would include both new and replacement signs. New signage for the Project would include replacing the existing monument and pole signs with new monument signs. In addition, the Project would also replace existing signage at the vehicle and pedestrian entrances to direct guests to the new entrances and buildings on the Project

Site. Project signage would include new building signs, wayfinding signs, and wall signs along the Burbank Boulevard, Clark Street, adjacent to the 101 Freeway on-ramp, and east facing frontages. A zone variance is sought for a monument sign at the Project Site's driveway at Burbank Boulevard with a vertical dimension greater than its horizontal dimension and with a height of more than eight feet above grade. Three wall signs of approximately 800 square feet each will be added near the top of the New Patient Wing as identification signage for the Hospital. A zone variance is sought for one of these wall signs, which exceeds its permitted sign area. Total signage is consistent with the allowable sign area set forth by the LAMC. Project signage will be designed to be aesthetically compatible with the existing and proposed architecture of the Property. New signage will be architecturally integrated into the design of the buildings and establish appropriate identification for the medical uses. Project signage will be illuminated by means of low-level external lighting, internal halo lighting, or ambient light. Exterior lights would be directed onto signs to minimize off-site glare. The Project would not include electronic signage or signs with flashing, mechanical, or strobe lights. Illumination used for project signage would be limited in light intensity to avoid negative lighting impacts to the nearest residentially zoned property. New signage will comply with LAMC lighting requirements.

Monument Sign

The Project requires a zone variance for height and shape of a monument sign at the Medical Center's Burbank driveway and for the area of an east-facing wall sign on the mechanical parapet on top of the New Patient Wing. Other signs will comply with LAMC requirements.

The existing monument sign at the Medical Center's Burbank driveway is 12 feet in height and six feet, six inches in width. It would be replaced with a new monument sign that is 12 feet in height and six feet, three inches in width, requiring a zone variance for exceeding LAMC's limitation of 8 feet in height and for a monument sign with a vertical dimension greater than its horizontal dimension.[6] The replacement monument sign at the Burbank driveway would comply with other LAMC requirements.

The Burbank driveway is used for access to all Hospital facilities. Similar to the existing monument sign, the proposed monument sign will include directions to various Hospital facilities. Visitors to the Hospital, including to the Emergency Department and Women's Pavilion, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The proposed monument sign's height of 12 feet above grade allows unobstructed and effective signage for visitors entering the Hospital at the Burbank driveway.

A zone variance is necessary to maintain a monument sign height equivalent to the existing monument sign height at the Burbank driveway. Burbank Boulevard is designated as Avenue II in Mobility Plan 2035 and has a posted speed limit of 35 miles per hour in front of the Hospital. Vehicles traveling west on Burbank Boulevard toward the Hospital pass through an underpass beneath the US-101 freeway approximately 400 feet east of the Medical Center's Burbank driveway. Westbound drivers are not able to view the Burbank driveway's monument sign until emerging from the underpass. Vehicles traveling east on Burbank Boulevard toward the Hospital travel around a curve approximately 400 feet west of the Medical Center's Burbank driveway, and the driveway is screened by trees along the

[6] In 1985, PTMC obtained approval for a sign at the Medical Center's Burbank driveway with a size of 16 feet by 8 feet with 96 square feet of copy area and an overall height of 11 feet above grade.

south side of Burbank Boulevard. The structures on the Property are separated from Burbank Boulevard by a landscaped buffer and an internal road, which limit visibility of the Hospital from Burbank Boulevard. A variance to allow a sign height of 12 feet will maintain visibility at the Burbank driveway to identify the Hospital's entrance and directions to various Hospital facilities despite visual impediments for drivers approaching from either side of the driveway.

The monument sign at the Project's Burbank driveway must have a greater vertical dimension than horizontal dimension in order to maintain its height of 12 feet and comply with LAMC's 75 square foot maximum allowable square footage for monument signs. The monument sign at the Project's Burbank driveway would comply with LAMC's height, shape, and area requirements for a pole sign, but is inconsistent with the definition of a pole sign because it is not affixed to a pole or post.

Application of LAMC's 8-foot height limit and shape requirements to the monument sign at the Project's Burbank driveway would result in practical difficulties or unnecessary hardships inconsistent with the general purposes and intent of the zoning regulations because strict application of the code would undermine the site's ability to provide unobstructed and effective visual access to signage for members of the public attempting to enter the medical facility from its main access point on Burbank Boulevard. Lower, obstructed signage potentially prompts last minute vehicle movements that may trigger a traffic accident. Strict application of the code would conflict with two purposes of the City's sign regulations at LAMC 14.4.1 et. seq., in particular the goal of ensuring that the design, construction, installation, repair and maintenance of signs will not interfere with traffic safety or otherwise endanger public safety; and that both the public and sign users will benefit from signs having improved legibility, readability and visibility.

Wall Signs

Three wall signs of approximately 800 square feet each will be added near the top of the New Patient Wing as identification signage for the Hospital. These wall signs face east, north, and west, respectively. A variance is sought for the area of the east-facing wall sign of the New Patient Wing.

The Project Site is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (US-101) Freeway and Clark Street on the south. The Project Site has approximately 25 feet of street frontage on Etiwanda Avenue to the east; however, there is otherwise an intervening medical office building separating the Project Site from Etiwanda Avenue. Based on the unique configuration of the Project's parcels, only 25 feet of street frontage is available on Etiwanda Avenue. A strict application of the LAMC would permit approximately 64 square feet of allowable wall sign area along the Project Site's eastern elevation. If the Project Site was bounded by Etiwanda Avenue, the LAMC would permit approximately 1,400 square feet of allowable wall sign area. Accordingly, but for the special circumstances of the Project Site and the intervening medical office building between much of the eastern elevation of the Project Site and Etiwanda Avenue, this sign would comply with LAMC wall sign provisions. In addition, to the extent in the final design this sign is located over 100 feet above grade, it would be considered a high-rise sign under the LAMC. The area of high rise signs may constitute up to five percent of the area where the sign is attached. Under the LAMC, a high-rise sign along the eastern wall of the New Patient Wing would be permitted up to 1,406 square feet. Moreover, the Project Site's cumulative allowable wall sign area from Burbank Boulevard, Clark Street, and Etiwanda Avenue is

4,187.35 square feet; the Project proposes 3,728 square feet of wall signs, including this sign.

Visitors to the Hospital, including to the Emergency Department, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The 800-square foot area of the east-facing wall sign near the top of the New Patient Wing would enable drivers of westbound vehicles on the 101 Freeway to identify the Hospital from a distance and assist them in timely merging lanes and exiting the freeway to arrive at the Hospital.

Application of LAMC's wall sign area requirements to the Project's east-facing wall sign near the top of the New Patient Wing would result in practical difficulties or unnecessary hardships inconsistent with the general purposes and intent of the zoning regulations by undermining the site's ability to unobstructed and effective visual access to signage for Hospital visitors and patients traveling to the Property from the east on the 101 Freeway. Smaller signage potentially prompts last minute vehicle movements that may trigger a traffic accident. Strict application of the code would conflict with two purposes of the City's sign regulations at LAMC 14.4.1 et. Seq., in particular the goal of ensuring that the design, construction, installation, repair and maintenance of signs will not interfere with traffic safety or otherwise endanger public safety; and that both the public and sign users will benefit from signs having improved legibility, readability and visibility.

b) *Special circumstances apply to the subject property such as size, shape topography, location or surroundings that do not apply generally to other property in the same zone and vicinity.*

The Project requires a zone variance for height and shape of a monument sign at the Medical Center's Burbank driveway and for the area of an east-facing wall sign on the mechanical parapet on top of the New Patient Wing. Other signs will comply with LAMC requirements.

<u>Monument Sign</u>

The existing monument sign at the Medical Center's Burbank driveway is 12 feet in height and six feet, six inches in width. It would be replaced with a new monument sign that is 12 feet in height and six feet, three inches in width, requiring a zone variance for exceeding LAMC's limitation of 8 feet in height and for a monument sign with a vertical dimension greater than its horizontal dimension. The replacement monument sign at the Burbank driveway would comply with other LAMC requirements.

The Burbank driveway is used for access to all Hospital facilities. Similar to the existing monument sign, the proposed monument sign will include directions to various Hospital facilities. Visitors to the Hospital, including to the Emergency Department and Women's Pavilion, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The proposed monument sign's height of 12 feet above grade allows it to present clear visual directions to visitors entering the Hospital at the Burbank driveway.

A zone variance is necessary to maintain a monument sign height equivalent to the existing monument sign height at the Burbank driveway. Burbank Boulevard is designated as Avenue II in Mobility Plan 2035 and has a posted speed limit of 35 miles per hour in front of the Hospital. Vehicles traveling west on Burbank Boulevard toward the Hospital pass through an underpass beneath the US-101 freeway approximately 400 feet east of the

Medical Center's Burbank driveway. Westbound drivers are not able to view the Burbank driveway's monument sign until emerging from the underpass. Vehicles traveling east on Burbank Boulevard toward the Hospital travel around a curve approximately 400 feet west of the Medical Center's Burbank driveway, and the driveway is screened by trees along the south side of Burbank Boulevard. The structures on the Property are separated from Burbank Boulevard by a landscaped buffer and an internal road, which limit visibility of the Hospital from Burbank Boulevard. A variance to allow a sign height of 12 feet will maintain visibility at the Burbank driveway to identify the Hospital's entrance and directions to various Hospital facilities despite visual impediments for drivers approaching from either side of the driveway.

The monument sign at the Project's Burbank driveway must have a greater vertical dimension than horizontal dimension in order to maintain its height of 12 feet and comply with LAMC's 75 square foot maximum allowable square footage for monument signs. The monument sign at the Project's Burbank driveway would comply with LAMC's height, shape, and area requirements for a pole sign, but is inconsistent with the definition of a pole sign because it is not affixed to a pole or post.

Other properties with entrances on Burbank Boulevard in the vicinity of the Project Site are not similarly situated. Abutting the Property to the west is a strip center with a supermarket, retail, and storage company. The strip center is readily visible from the intersection of Reseda Boulevard and Burbank Boulevard, and drivers on Burbank Boulevard do not have the same visual impediments to the property's entrance. Office uses are located to the north of the Property across Burbank Boulevard. The structures on these properties are more readily visible from the street due to minimal setbacks, the location of Burbank Boulevard curve, location of existing trees, and the location of items like the underpass, landscaped buffer and internal road. Visitors to the strip center abutting the Property on the west and to the office uses north of the Property are unlikely to encounter the same potential distractions or urgency as visitors to the Medical Center seeking medical care, including emergency or labor and delivery services.

Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza. The Tarzana Medical Plaza does not have an entrance on Burbank Boulevard. Its entrance on Clark Street is more readily visible for approaching drivers, because Clark Street is straight in front of and approaching the property. Similarly, signage at Providence's entrance on Clark Street does not require a zone variance.

The location of the Project's Burbank driveway on Burbank Boulevard between a tree-lined curve and an underpass and the Property's use as a regional hospital with emergency and labor and delivery services result in special circumstances that do not apply generally to other property in the same zone and vicinity.

Wall Sign

Three wall signs of approximately 800 square feet each will be added near the top of the New Patient Wing as identification signage for the Hospital. These wall signs face east, north, and west, respectively. A variance is sought for the area of the east-facing wall sign of the New Patient Wing.

The Project Site is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (US-101) Freeway and Clark Street on the south. The Project Site has

approximately 25 feet of street frontage on Etiwanda Avenue to the east; however, there is otherwise an intervening medical office building separating the Project Site from Etiwanda Avenue. Based on the 25 feet of street frontage on Etiwanda Avenue, a strict application of the LAMC (based on two square feet for each foot of street frontage) would permit approximately 64 square feet of allowable wall sign area along the Project Site's eastern elevation. If the Project Site was bounded by Etiwanda Avenue, the LAMC would permit approximately 1,400 square feet of allowable wall sign area. Accordingly, but for the special circumstances of the Project Site and the intervening medical office building between much of the eastern elevation of the Project Site and Etiwanda Avenue, this sign would comply with LAMC wall sign provisions. In addition, to the extent in the final design this sign is located over 100 feet above grade, it would be considered a high-rise sign under the LAMC. The area of high rise signs may constitute up to five percent of the area where the sign is attached. Under the LAMC, a high-rise sign along the eastern wall of the New Patient Wing would be permitted up to 1,406 square feet. Moreover, the Project Site's cumulative allowable wall sign area from Burbank Boulevard, Clark Street, and Etiwanda Avenue is 4,187.35 square feet; the Project proposes 3,728 square feet of wall signs, including this sign.

Visitors to the Hospital, including to the Emergency Department, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The 800-square foot area of the east-facing wall sign near the top of the New Patient Wing would enable drivers of westbound vehicles on the 101 Freeway to see the signage and identify the Hospital from a distance and assist them in timely merging lanes and exiting the freeway to arrive at the Hospital. Other properties in the same zone and vicinity do not face the special circumstances as the Medical Center's need for visibility of identification signage from the surrounding area and freeway and the constraint of limited street frontage due to an intervening medical office building separating the Project Site from Etiwanda Avenue.

c) *The variance is necessary for the preservation and enjoyment of a substantial property right or use generally possessed by other property in the same zone and vicinity but which, because of the special circumstances and practical difficulties or unnecessary hardships is denied to the property in question.*

Providence is seeking a General Plan Amendment, Specific Plan Amendment, and Vesting Zone and Height District Change to permit the New Patient Wing height of six stories and approximately 120 feet. The Specific Plan Amendment would amend the Specific Plan's boundaries to exclude the Property; therefore, the Project would not be inconsistent with height limitations in the Specific Plan. The Vesting Zone and Height District Change would amend the current zoning on the Property of P-1, [Q]C2-1L, and C2-1, which limits structures on portions of the Property to 45 feet in height, to apply C2-1 zoning to the entire property to allow for the New Patient Wing, which is proposed to be six stories and approximately 120 feet in height. This height includes a screened rooftop area housing mechanical equipment with the elevator extending six inches above the mechanical screen and the cooling tower extending to 125 feet in height. Upon approval of these requests, the Project would comply with the height and area regulations of the zone in which it is located. Other components of the Project are consistent with all other height and area regulations of the existing zones.

Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza, a medical office building owned by a third party. Properties east of Etiwanda Avenue and an intervening flood control channel are developed with multi-family and single-family residences. Uses south of the Property,

across Clark Street from east to west, consist of surface parking, multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. Abutting uses to the west of the Property (on the east side of Reseda Boulevard) include a supermarket, retail, and a storage company. The Project will not change the basic use of the Property, which is a regional hospital, and is consistent with other medical uses in the Project's immediate vicinity. The Project's operations will therefore be compatible with and positively affect the surrounding neighborhood.

The Project is conveniently located for residents in the San Fernando Valley because of its close proximity to the Ventura Freeway and major surface streets. The westbound off-ramp from the Ventura Freeway connects at Reseda Boulevard which intersects Clark Street. Ventura Boulevard, which is designated a Boulevard II, is located one block south of Clark Street. Entrances along Burbank Boulevard and Clark Street provide direct access to the Property.

The Project requires a zone variance for height and shape of a monument sign at the Medical Center's Burbank driveway and for the area of an east-facing wall sign on the mechanical parapet on top of the New Patient Wing. Other signs will comply with LAMC requirements.

Monument Sign

The existing monument sign at the Medical Center's Burbank driveway is 12 feet in height and six feet-six inches in width. It would be replaced with a new monument sign that is 12 feet in height and six feet-three inches in width, requiring a zone variance for exceeding LAMC's limitation of 8 feet in height and for a monument sign with a vertical dimension greater than its horizontal dimension. The replacement monument sign at the Burbank driveway would comply with other LAMC requirements.

The Burbank driveway is used for access to all Hospital facilities. Similar to the existing monument sign, the proposed monument sign will include directions to various Hospital facilities. Visitors to the Hospital, including to the Emergency Department and Women's Pavilion, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The proposed monument sign's height of 12 feet above grade allows it to present clear visual directions to visitors entering the Hospital at the Burbank driveway.

A zone variance is necessary to maintain a monument sign height equivalent to the existing monument sign height at the Burbank driveway. Burbank Boulevard is designated as Avenue II in Mobility Plan 2035 and has a posted speed limit of 35 miles per hour in front of the Hospital. Vehicles traveling west on Burbank Boulevard toward the Hospital pass through an underpass beneath the US-101 freeway approximately 400 feet east of the Medical Center's Burbank driveway. Westbound drivers are not able to view the Burbank driveway's monument sign until emerging from the underpass. Vehicles traveling east on Burbank Boulevard toward the Hospital travel around a curve approximately 400 feet west of the Medical Center's Burbank driveway, and the driveway is screened by trees along the south side of Burbank Boulevard. The structures on the Property are separated from Burbank Boulevard by a landscaped buffer and an internal road, which limit visibility of the Hospital from Burbank Boulevard. A variance to allow a sign height of 12 feet will maintain visibility at the Burbank driveway to identify the Hospital's entrance and directions to various Hospital facilities despite visual impediments for drivers approaching from either side of the driveway.

The monument sign at the Project's Burbank driveway must have a greater vertical dimension than horizontal dimension in order to maintain its height of 12 feet and comply with LAMC's 75 square foot maximum allowable square footage for monument signs. The monument sign at the Project's Burbank driveway would comply with LAMC's height, shape, and area requirements for a pole sign, but is inconsistent with the definition of a pole sign because it is not affixed to a pole or post.

Other properties with entrances on Burbank Boulevard in the vicinity of the Project Site are not similarly situated. Abutting the Property to the west is a strip center with a supermarket, retail, and storage company. The strip center is readily visible from the intersection of Reseda Boulevard and Burbank Boulevard, and drivers on Burbank Boulevard do not have the same visual impediments to the property's entrance. Office uses are located to the north of the Property across Burbank Boulevard. The structures on these properties are more readily visible from the street due to minimal setbacks. Visitors to the strip center abutting the Property on the west and to the office uses north of the Property are unlikely to encounter the same potential distractions or urgency as visitors to the Medical Center seeking medical care, including emergency or labor and delivery services.

Uses abutting the Property to the east (west of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza. The Tarzana Medical Plaza does not have an entrance on Burbank Boulevard. Its entrance on Clark Street is more readily visible for approaching drivers, because Clark Street is straight in front of and approaching the property. Similarly, signage Providence's entrance on Clark Street does not require a zone variance.

A variance to permit monument sign 12 feet in height at the Project's Burbank driveway is necessary for the preservation of the signage visibility generally possessed by other commercially zoned property in the vicinity. Because of the hospital use and location of the Burbank driveway between a tree-lined curve and a freeway underpass, a monument sign complying with LAMC's 8-foot height limit would result in practical difficulties or unnecessary hardships by limiting visibility for drivers approach the Hospital from Burbank Boulevard. Limiting the height of the sign identifying the Hospital entrance for drivers on Burbank Boulevard would inhibit the Medical Center's ability to fulfill its purpose as a regional hospital providing quality care, including emergency and labor and delivery services, to the San Fernando Valley community.

Wall Sign

Three wall signs of approximately 800 square feet each will be added near the top of the New Patient Wing as identification signage for the Hospital. These wall signs face east, north, and west, respectively. A variance is sought for the area of the east-facing wall sign of the New Patient Wing.

The Project Site is bounded on the north by Burbank Boulevard and the eastbound on-ramp to the Ventura (US-101) Freeway and Clark Street on the south. The Project Site has approximately 25 feet of street frontage on Etiwanda Avenue to the east; however, there is otherwise an intervening medical office building separating the Project Site from Etiwanda Avenue. Based on the 25 feet of street frontage on Etiwanda Avenue, a strict application of the LAMC would permit approximately 64 square feet of allowable wall sign area along the Project Site's eastern elevation. If the Project Site was bounded by Etiwanda Avenue, the LAMC would permit approximately 1,400 square feet of allowable wall sign area. Accordingly, but for the special circumstances of the Project Site and the intervening

medical office building between much of the eastern elevation of the Project Site and Etiwanda Avenue, this sign would comply with LAMC wall sign provisions. In addition, to the extent in the final design this sign is located over 100 feet above grade, it would be considered a high-rise sign under the LAMC. The area of high rise signs may constitute up to five percent of the area where the sign is attached. Under the LAMC, a high-rise sign along the eastern wall of the New Patient Wing would be permitted up to 1,406 square feet. Moreover, the Project Site's cumulative allowable wall sign area from Burbank Boulevard, Clark Street, and Etiwanda Avenue is 4,187.35 square feet; the Project proposes 3,728 square feet of wall signs, including this sign.

Visitors to the Hospital, including to the Emergency Department, may be rushed or distracted due to the need for the driver or a passenger to receive medical care. The 800-square foot area of the east-facing wall sign near the top of the New Patient Wing would enable drivers of westbound vehicles on the 101 Freeway to identify the Hospital from a distance and assist them in timely merging lanes and exiting the freeway to arrive at the Hospital.

A variance to permit an area of approximately 800 square feet for the east-facing wall sign near the top of the New Patient Wing is necessary for the preservation of east facing signage area and visibility generally possessed by other commercially zoned property in the vicinity. Because of the hospital use and constraint of limited street frontage due to an intervening medical office building separating the Project Site from Etiwanda Avenue, a wall sign complying with the LAMC's limitation of approximately 64 square feet of wall sign area would inhibit the Medical Center's ability to provide the same visual wayfinding and sight access allowed other similarly zoned properties in the same vicinity so that the site can fulfill its purpose as a regional hospital providing quality care, including emergency and labor and delivery services, to the San Fernando Valley community.

5. WAIVER OF DEDICATIONS AND IMPROVEMENTS

On December 5, 2017, the Advisory Agency issued its Letter of Determination approving related Case No. VTT-74314. At the November 14, 2017 concurrent public hearing, the Bureau of Engineering modified conditions to improvements and dedications eliminating an additional 4-foot wide public sidewalk easement on Burbank Boulevard, adding a variable width of less than 3-foot strip of land dedication along Clark Street, and eliminating dedications along Etiwanda Avenue, thus rendering the requested entitlement as unnecessary. Therefore, staff has recommended dismissal of the entitlement.

C. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) FINDINGS

FINDINGS OF FACT (CEQA)

A. INTRODUCTION

The Environmental Impact Report (EIR) consisting of the Draft EIR and Final EIR, is intended to serve as an informational document for public agency decision-makers and the general public regarding the objectives and components of the project. Providence Health System–Southern California, the "Applicant," or its successor, proposes new and improved facilities and improved access to care at the Providence Tarzana Medical Center as part of the Providence Tarzana Medical Center Project ("Project"). The Project would be implemented on the existing Providence Tarzana Medical Center ("Project Site") located in the Encino–Tarzana community

of the City of Los Angeles. The Project Site comprises approximately 13 acres and is currently improved with four permanent buildings, eight modular buildings, a parking structure, and surface parking areas. The Project proposes upgrades and enhancements to the Hospital on the Project Site, including replacing the Main Building within the Hospital and enhancing the existing Hospital Lobby (Main Building Replacement), expanding the diagnostic and treatment areas (D&T Expansion), and constructing a New Patient Wing. The Project would also include the construction of a new above-grade six-level parking structure that would provide approximately 565 parking spaces (New Parking Structure). To provide for the proposed improvements, the Project would include removal of the existing eight modular buildings and the magnetic resonance imaging (MRI) Center. The uses in these existing buildings to be removed would be relocated within the Hospital. While not part of the Project, required seismic upgrades would necessitate the removal of other existing structures within the Hospital. Overall, approximately 37,198 square feet of existing floor area would be removed within the Project Site. The Project would construct approximately 294,000 square feet of new floor area. Therefore, with implementation of the Project, approximately 256,802 square feet of net new floor area would be provided within the Project Site. At buildout, the Project Site would include a total of approximately 579,744 square feet of floor area.

B. ENVIRONMENTAL DOCUMENTATION BACKGROUND

The Project was reviewed by the Los Angeles Department of City Planning (serving as Lead Agency) in accordance with the requirements of the CEQA. The City prepared an Initial Study in accordance with Section 15063(a) of the State CEQA Guidelines. Pursuant to the provisions of Section 15082 of the State CEQA Guidelines, the City then circulated a Notice of Preparation (NOP) to State, regional and local agencies, and members of the public for a 30-day period commencing on July 15, 2016. The purpose of the NOP was to formally inform the public that the City was preparing a Draft EIR for the Project, and to solicit input regarding the scope and content of the environmental information to be included in the Draft EIR.

The NOP included notification that a public scoping meeting would be held to further inform public agencies and other interested parties of the Project and to solicit input regarding the Draft EIR. The public scoping meeting was held on July 27, 2016, from 5:00 P.M. to 7:00 P.M. at the Providence Tarzana Medical Center Auditorium within the Project Site, located at 18321 Clark Street, Los Angeles, CA 91356.

Written comment letters responding to the NOP were submitted to the City by public agencies and interested organizations. Comment letters were received from various public agencies. The NOP and NOP comment letters are included in Appendix A of the Draft EIR.

The Draft EIR evaluated in detail the potential effects of the Project. It also analyzed the effects of a reasonable range of five alternatives to the Project, including a “No Project” alternative. The Draft EIR for the Project (State Clearinghouse No. 2016071041), incorporated herein by reference in full, was prepared pursuant to CEQA and State, Agency, and City CEQA Guidelines (Pub. Resources Code Sec. 21000, et seq.; 14 Cal. Code Regs. Sec.15000, et seq.; City of Los Angeles California Environmental Quality Act Guidelines). The Draft EIR was circulated for a 46-day public comment period beginning on June 15, 2017, and ending on October 25, 2017. A notification of the release of the Draft EIR was published by the City in the Los Angeles Times newspaper notifying interested parties of the availability of the Draft EIR for the Project. This notice was also mailed to government agencies, interested parties, entities that commented on the Draft EIR, and owners and occupants residing within 500 feet of the Project Site, as well as any individual or organization requesting notification. The notice included information on how to access the Draft EIR, which also included access on the City’s website.

A Notice of Completion (NOC) was also submitted to the State Clearinghouse. Copies of the written comments received are provided in the Final EIR. Pursuant to Section 15088 of the CEQA Guidelines, the City, as Lead Agency, reviewed all comments received during the review period for the Draft and responded to each comment in Section III of the Final EIR.

The City released a Final EIR for the Project on October 27, 2017, which is hereby incorporated by reference in full. The Final EIR is intended to serve as an informational document for public agency decision-makers and the general public regarding objectives and components of the Project. The Final EIR addresses the environmental effects associated with implementation of the Project, identifies feasible mitigation measures and alternatives that may be adopted to reduce or eliminate these impacts, and includes written responses to all comments received on the Draft EIR during the public review period. Responses were sent to all public agencies that made comments on the Draft EIR at least 10 days prior to certification of the Final EIR pursuant to CEQA Guidelines Section 15088(b). The Final EIR was also made available for review on the City's Department of City Planning website. Digital versions of the Final EIR were also made available at three libraries and the Department of Planning. Notices regarding availability of the Final EIR and the Notice of Public Hearing were sent to those within a 500-foot radius of the Project Site, as well as individuals who commented on the Draft EIR, attended the NOP scoping meeting, or provided comments during the NOP comment period.

A duly noticed public hearing for the Project was sent out for the Deputy Advisory Agency and Hearing Officer hearing, on behalf of the City Planning Commission, and held on November 14, 2017.

The documents and other materials that constitute the record of proceedings on which the City's CEQA findings are based are located at the Department of City Planning, Marvin Braude San Fernando Valley Constituent Service Center, 6262 Van Nuys Boulevard, Room 351, Los Angeles, California 91401. This information is provided in compliance with CEQA Section 21081.6(a)(2).

C. FINDINGS REQUIRED TO BE MADE BY A LEAD AGENCY UNDER CEQA

Section 21081 of the California Public Resources Code and Section 15091 of the CEQA Guidelines require a public agency, prior to approving a project, to identify significant impacts of the project and make one or more of three possible findings for each of the significant impacts:

- "Changes or alterations have been required in, or incorporated into, the project which avoid or substantially lessen the significant environmental effect as identified in the final EIR. (State CEQA Guidelines Section 15091, subd. (a)(1))."

- "Such changes or alterations are within the responsibility and jurisdiction of another public agency and not the agency making the finding. Such changes have been adopted by such other agency or can and should be adopted by such other agency. (State CEQA Guidelines Section 15091, subd. (a)(2))."

- "Specific economic, legal, social, technological, or other considerations, including provision of employment opportunities for highly trained workers, make infeasible the mitigation measures or project alternatives identified in the final EIR. (State CEQA Guidelines Section 15091, subd. (a)(3))."

The findings reported in the following pages incorporate the facts and discussions of the environmental impacts that are found to be significant in the Final Environmental Impact Report (EIR) for the Project as fully set forth therein. Although Section 15091 of the CEQA Guidelines does not require findings to address environmental impacts that an EIR identifies as merely "potentially significant," these findings nevertheless fully account for all such effects identified in the Final EIR for the purpose of better understanding the full environmental scope of the Proposed Project. For each environmental issue analyzed in the Draft EIR and Revised Draft EIR, the following information is provided:

- Description of Effects - A specific description of the environmental effects identified in the EIR.

- Project Design Features - Identified project design features or actions that are included as part of the Proposed Project (numbering of the Project Design Features corresponds to the Mitigation Monitoring Program, which is included as Section IV of the Final EIR).

- Mitigation Measures - Identified mitigation measures or actions that are required as part of the Proposed Project (numbering of the Mitigation Measures corresponds to the Mitigation Monitoring Program, which is included as Section IV of the Final EIR).

- Finding - One or more of three specific findings in direct response to CEQA Section 21081 and CEQA Guidelines Section 15091 as discussed in the previous paragraph.

- Rationale for Finding - A summary of the reasons for the finding(s).

- Reference - A notation on the specific section of the Draft EIR and Revised Draft EIR, which includes the evidence and discussion of the identified impact.

D. DESCRIPTION OF THE PROJECT

1. Project Location and Surrounding Uses

The Project proposes upgrades and enhancements to the Hospital totaling approximately 294,000 square feet, including the Main Building Replacement and the addition of a new canopy (referred to herein as the Lobby Canopy), the D&T Expansion, which would include a canopy (referred to herein as the D&T Canopy), and constructing the New Patient Wing, which would include two canopy areas associated with the relocated and improved Emergency Department (referred to herein as the Walk-In Canopy and the ED Canopy). The Project would also include the construction of a new approximately six-level above-grade parking structure that would provide approximately 565 parking spaces (referred to herein as the as the New Parking Structure). To provide for the proposed improvements, the Project would include removal of the existing eight modular buildings and the MRI Center. The uses in these existing buildings to be removed would be relocated within the Hospital.

The proposed Main Building Replacement would be constructed along the central portion of the Hospital to replace the Main Building and enhance the Lobby. The Main Building Replacement would include the addition of approximately 25,000 square feet to replace the demolished floor area.

A new covered entry canopy and drop-off (Lobby Canopy) comprising approximately 5,000 square feet of floor area would also be added to the west side of the Main Hospital entrance.

The first floor of the Main Building Replacement would include an entrance and lobby area for patients and visitors. The second floor would accommodate clinical services for the Hospital. The Main Building Replacement and the Lobby Canopy would create a central entrance for the Hospital and a meeting and gathering space for patients, visitors, and other guests. The Main Building Replacement would be approximately 45 feet in height. A new landscaped paseo would provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Hospital.

The proposed D&T Expansion would be constructed to the rear of the Hospital. The D&T Expansion would expand the existing diagnostic and treatment areas currently located in the Hospital's Ancillary Wing and would include a canopy area. The D&T Expansion would comprise approximately 25,000 square feet plus an approximately 3,000-square-foot D&T Canopy. The D&T Expansion would reach approximately 45 feet in height.

The New Patient Wing, which would extend northwesterly from the rear of the Hospital would replace the Existing Patient Building of the Hospital as the new location for the acute care inpatient beds. The Hospital currently has 249 acute care inpatient beds: 195 beds in the Existing Patient Building, 21 beds in the NICU located in the Main Building of the Hospital, and 33 beds in the Women's Pavilion. The Existing Patient Building rooms are small and contain both double and triple occupancy rooms. In contrast, the New Patient Wing would provide all single-occupancy rooms. The New Patient Wing would have a total of 190 acute care inpatient beds. Together with the 33 beds in the Women's Pavilion and 21 beds in the NICU located in the Main Building of the Hospital, the Project would result in a slight decrease in the number of acute care inpatient beds from 249 beds to 244 beds at the Hospital. As part of the Project, the New Patient Wing would also include a new, expanded Emergency Department, imaging and pediatrics facilities, and the inpatient pharmacy. The increase in square footage for the new buildings within the Medical Center is due to technological advances and current code requirements for hospitals, including increased space and additional functions in nursing units, diagnostic and treatment areas, emergency room, and support services.

The New Patient Wing would comprise approximately 230,000 square feet plus the Emergency Department Walk-In Canopy comprising approximately 3,000 square feet and the ED Canopy comprising approximately 6,000 square feet. The New Patient Wing would be six stories with an approximate height of 120 feet. The proposed cooling towers on the New Patient Wing would extend approximately five feet above the mechanical equipment on the New Patient Wing and would reach a height of approximately 125 feet. During construction of the New Patient Wing, it is anticipated that certain uses and functions in the modular buildings and the MRI Center would be temporarily relocated to temporary on-site locations, such as temporary trailers, and/or off-site locations as the buildings would need to be removed to accommodate construction of the New Patient Wing.

Upon completion of the New Patient Wing and relocation of the patients from the Existing Patient Building to the New Patient Wing, the Existing Patient Building would be converted to Ancillary & Support Space for the Hospital. The Ancillary & Support Space would consist of other medical center uses, but would not be used to house acute care inpatient beds. The uses and functions in Modular Buildings A–G and the Foundation Building are anticipated to be relocated into the Ancillary & Support Space or elsewhere in the Hospital.

The new central utility plant would be constructed in the basement of the New Patient Wing and would total approximately 18,000 square feet. The remainder of the New Patient Wing basement is allocated for the inpatient pharmacy, pharmacy storage, and janitorial supply storage.

The Project also includes the construction of a new six-level above-grade parking structure that would provide approximately 565 parking spaces. The New Parking Structure would comprise approximately 230,000 square feet and would be 60 feet high.

As part of the Project, the Project Applicant would subdivide the Project Site into three legal lots. A Vesting Tentative Tract Map includes the merger and resubdivision of the Project Site from seven legal lots into three legal lots. Proposed Lot 1 would contain the Hospital, the Existing Parking Structure, the New Parking Structure, and various surface parking spaces. Proposed Lot 2 would contain the Tarzana Garden Plaza and surrounding surface parking spaces. Proposed Lot 3 would contain the Cube Medical Office Building and surrounding surface parking spaces. The existing internal lot lines for seven lots on the Project Site are outdated, reflecting various subdivisions processed decades ago, but bearing no relation to the current and future use of the Project Site.

Overall, approximately 37,198 square feet of existing floor area would be removed within the Project Site. The Project would construct approximately 294,000 square feet of new floor area. Therefore, with implementation of the Project, approximately 256,802 square feet of net new floor area would be provided within the Project Site. At buildout, the Project Site would include approximately 579,744 square feet of floor area.

With the addition of new components to the existing Medical Center, the design approach is intended to be complementary and appropriate to the scale and character of the existing Medical Center and surrounding community.

The additions to the Hospital, including the New Patient Wing, D&T Expansion, and Main Building Replacement would provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital. An outdoor garden is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital. The proposed approximately 5,700- square-foot outdoor garden (referred to as the Healing Garden) would also offer patients, visitors, and staff an additional landscaped area within the Project Site.

The maximum building height would be approximately 120 feet above-grade level, with cooling towers on the New Patient Wing that would reach 125 feet in height, including rooftop penthouses and mechanical equipment and screens. As a note, the top of the mechanical equipment (including the elevators) would be approximately six inches above the mechanical screen on the New Patient Wing. Building materials could include concrete, stucco, aluminum, glass, concrete block, pre-finished wall panel, and prefinished metal. Building façades would include transparent glass and sunshades on the interior of the building. Additionally, most major utilities would be placed underground.

The New Parking Structure would be designed to substantially screen automobiles in the garage. The façade design would be complementary with the aesthetics of the existing and proposed buildings within the Project Site. The New Parking Structure would include landscaping around the perimeter to include trees, shrubs, and flowers.

Existing vehicular access to the Project Site is provided along Burbank Boulevard, Clark Street, and the western edge of the Project Site. Specifically, along Burbank Boulevard, the primary public (non-emergency) and public (emergency) access would continue to be provided from the western driveway. As part of the Project, this driveway would be modified to include a traffic signal control, which would allow for left turns from the Project Site onto westbound Burbank Boulevard. To facilitate this movement, an exclusive left-turn outbound lane would be installed within the Project Site for the left-turning vehicles onto Burbank Boulevard. Additionally, an

eastbound through lane would be installed along the Project Site's Burbank frontage providing right- turn access into the Project Site and leading to the US-101 Southbound on-ramp to the east. Furthermore, a pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway. The eastern driveway along Burbank Boulevard, which would continue to provide emergency access, would be modified to lead directly to the new Emergency Department on the northeastern edge of the Project Site. The central driveway along Clark Street, adjacent to the Existing Patient Building, would continue to provide primary public (non-emergency) and service access and would also provide public (emergency) access. The two western driveways located along Clark Street would continue to provide secondary public (non-emergency) and service access to the Tarzana Garden Plaza surface parking area and the Cube Medical Office Building surface parking area. In addition, the eastern driveway located along Clark Street, adjacent to the eastern portion of the Hospital, would continue to provide service access. The easternmost driveway located along Clark Street would no longer provide public (non-emergency and emergency) access, but would be modified to serve emergency vehicles only. Lastly, the driveway located on the western edge of the Project Site, which currently provides employee access, would be removed.

As previously described, the Project Site currently provides 1,259 parking spaces, including 596 parking spaces within the Existing Parking Structure and 663 parking spaces provided in various surface parking areas throughout the Project Site. Some existing surface parking spaces would be removed to accommodate the new Project buildings. As part of the Project, additional parking would be provided in the New Parking Structure, which would be an above-grade parking structure within the western portion of the Project Site. The six-level New Parking Structure would provide 565 parking spaces. The Project would comply with City requirements for providing electric vehicle charging capabilities and electric vehicle charging stations within the New Parking Structure. Specifically, within the New Parking Structure, 20 percent of parking spaces would be EV-ready charging stations and five percent of parking spaces would be equipped with EV charging stations. Once the Project is completed, 1,500 parking spaces would be provided on-site. Overall, the Project would result in the net removal of approximately 324 surface parking spaces and an overall increase of approximately 241 parking spaces within the Project Site.

The Project would also provide bicycle parking spaces, which would include both covered and non-covered bicycle parking, in compliance with the LAMC. Short-term bicycle parking spaces would be located near the pedestrian entrances to the Main Building Replacement and the Emergency Department Walk-In Canopy entrance of the New Patient Wing. Long term bicycle parking spaces would be located on the ground level of the New Parking Structure. A new landscaped paseo would provide a walkway to connect the New Parking Structure and Existing Parking Structure and Main Building Replacement and Hospital.

The Project would provide new landscaping and trees throughout the Project Site to buffer hospital uses. The Project would retain the existing landscaped buffer along Clark Street. In addition, the Project would add a landscaped buffer along Burbank Boulevard that would include Canary Pine trees. Landscaping and open space areas would be sustainable and water-efficient containing a mixture of California native and Mediterranean low water use plants. In addition, the Project Applicant would plant 115 new trees on the Project Site.

Landscaping on the Project Site would include new courtyards in order to provide additional gathering areas for employees and patients and their visitors. The Healing Garden, which is planned between the Walk-In Canopy of the New Patient Wing and the existing Hospital, would also offer patients, visitors, and staff an additional landscaped area. The New Parking Structure would be designed to substantially screen automobiles in the garage from view by pedestrians

and adjacent buildings. A new landscaped paseo would provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital entrance.

Lighting on the Project Site would include low-level interior lighting adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes. In addition, low-level lighting to accent signage, architectural features, and landscaping elements would be installed throughout the Project Site. The proposed lighting sources would be similar to other lighting sources in the vicinity of the Project Site and would not generate artificial light levels that are out of character with the surrounding area. On-site exterior lighting would be shielded or directed toward the areas to be lit to limit light spillover onto off-site uses and would meet all applicable LAMC lighting standards.

Signs are located adjacent to the Burbank Boulevard and Clark Street frontages under existing conditions and consist of monument signs, pole signs, building signs, wayfinding signs, and wall signs. Project signage would include both new and replacement signs of existing monument and pole signs with new monument signs. Project signage would also include new building signs, wayfinding signs, and wall signs adjacent to Burbank Boulevard, Clark Street, US-101, and east facing frontages. Total signage is consistent with the allowable sign area set forth by the LAMC. Signage would be designed to be aesthetically compatible with the existing and proposed architecture of the Project Site. New signage would be architecturally integrated into the design of the buildings and would establish appropriate identification for the medical uses. Project signage would include monument signage, building, and general ground level and wayfinding pedestrian signage. Project signage would be illuminated by means of low-level external lighting, internal halo lighting, or ambient light. Exterior lights would be directed onto signs to minimize off-site glare. In accordance with the LAMC, illumination used for Project signage would be limited in light intensity to avoid negative lighting impacts to the nearest residentially zoned property.

As part of the operation of the Providence Tarzana Medical Center, currently implements safety standards and procedures for patients, visitors, employees, volunteers, and medical staff. These standards include quarterly inspections of all areas, ongoing staff training, and monthly employee Safety and Disaster Newsletters. The Hospital also maintains 24-hour security operations and patrol using contract and in-house staff, provides an excess of 60 security cameras monitoring grounds and interior hospital space, and implements disaster drills and hospital lock downs at least once a year for staff training. The Project Applicant has also developed written plans for hazardous materials and waste management, fire safety, medical equipment, and utility systems. The Project Applicant's existing safety standards and procedures would continue to be implemented with construction of the Project and updated as needed.

As described above, as part of the Project, the existing central utility plant, located east of the Hospital, would be removed and replaced with a new central plant that would be located in the basement of the New Patient Wing. Certain service buildings and facilities on the Project Site would also be removed. In addition, the existing above-grade emergency generators would be consolidated in one area east of the proposed D&T Expansion. This area would be fully screened around the perimeter. Furthermore, aboveground oxygen tanks would be located in a fenced area directly north of the emergency generator enclosure and east of the New Patient Wing, and would not be visible from the public right-of-way. Additionally, the existing trash enclosure and LADWP substation would be relocated to an area east of the proposed D&T Expansion, along the eastern property line. As the trash enclosure would directly abut the adjacent medical building east of the Project Site, it would be enclosed on three sides by a block

wall, with wall heights reaching approximately 14 feet. The enclosure would include a canopy that would primarily cover the area where trash is deposited into one of two compactors which would not operate simultaneously. The opening of the trash enclosure would face the D&T Expansion, on the western portion of the trash enclosure. The LADWP substation would be located directly north of the trash enclosure and would be enclosed on four sides by a 14-foot-high block wall open to the sky.

Project construction is anticipated to be completed as early as 2022 to 2025. Construction of the Project would commence with removal of the existing buildings (i.e., eight modular buildings and MRI Center), followed by grading and excavations. The Project would require excavations up to 23 feet below ground surface. It is estimated that approximately 44,000 cubic yards of soil would be exported from the Project Site by way of an approved haul route. Construction hours would occur Monday through Saturday in accordance with the LAMC, with extended hours if specifically permitted by the City. There is the potential for some construction activities, such as concrete pours, to occur at night, including during the building construction stage for the New Parking Structure and during the foundation to street level stage for the New Patient Wing. Nighttime construction activities may also occur during seismic upgrades. The haul route to and from the Project Site is anticipated to be from the US-101 via Reseda Boulevard, Burbank Boulevard, and Clark Street. Inbound haul trucks would exit the US-101, head south on Reseda Boulevard, turn east on Burbank Boulevard, and enter the Project Site from the north. Outbound haul trucks would exit the Project Site to the south by turning west on Clark Street, then turn north on Reseda Boulevard, and either continue on Reseda Boulevard to enter the US-101 heading west or turn east on Burbank Boulevard to enter US-101 heading east.

During construction of the Project, certain portions of the Medical Center's operations may be temporarily moved to a nearby off-site location to be identified by the Project Applicant. The majority of the Medical Center's operations would be within a 0.5-mile radius of the Project Site in existing buildings that currently allow leasing. In addition, on-site temporary trailers may be used during construction. The Project Site Improvements would necessitate the use of these temporary trailers in order for the hospital to remain functional during the seismic upgrades and improvements and renovations. These trailers would provide for construction, MRI, CT, nuclear medicine, staff, and dietary functions.

Uses abutting the property to the east (West of Etiwanda Avenue) consist of medical and dental offices known as the Tarzana Medical Plaza. On the east of Etiwanda Avenue, east of an intervening flood control channel, are multi-family and single-family residential properties. Uses south of the property, across Clark Street from east to west, consist of surface parking (approved for the development of a new four-story 93,376 square foot medical office building and parking structured with a maximum height of 49 feet-six inches), multi-family residential, a medical and dental office building known as Tarzana Medical Square, a neighborhood shopping center, and a pharmacy. The abutting uses to the west of the property (on the east side of Reseda Boulevard) include a supermarket, retail and a storage company.

2. Existing Conditions

a. Site Conditions

The 13-acre Project Site consists of seven contiguous parcels currently comprised of several facilities consisting of approximately 322,942 square feet of floor area of medical facilities. The Hospital building originally opened in 1973 and was expanded in 1975, 1981, 1989, and 1992. The Hospital contains approximately 204,097 square feet of floor area is approximately 82 feet three inches in height. The Hospital consists of several connected areas referred to as the Main

Building, the Ancillary Wing, the Existing Patient Building and the Women's Pavilion. The Hospital further includes the Emergency Department. The main Building contains 21 acute care beds in the NICU, as well as operating rooms, the Imaging Department and Laboratory. The Existing Patient Building contains 195 acute care beds. The Ancillary Wing contains diagnostics and treatment areas, the Pediatric Intense Care Unit and the Hospital's pharmacy. The Hospital's Women's Pavilion has 33 acute beds and contains Women's Perinatal Services. A Magnetic Resonance Imaging (MRI) Center is a free-standing building located in the northern area of the Project Site along with eight modular buildings occupied with additional hospital administrative uses. The Hospital provides for a total of 249 beds consisting of a total of 171 single-occupancy rooms, 36 double-occupancy rooms, and two triple-occupancy rooms. The Hospital can typically only put one patient in a room due to age differences, patient sex and disease process. As a result, the Hospital often operates the double and triple occupancy rooms as single-occupancy rooms. Thus, the Hospital provides for 209 "effective beds" in regular use.

The Property also includes the Tarzana Garden Plaza (Plaza), a medical office building containing medical and dental office and a pharmacy, operated by Providence Tarzana Medical Center (PTMC). The Plaza contains 39,019 square feet of floor area is 44-feet five inches in height. A second medical office building, referred to as the Cube Medical Office Building (Cube MOB), not operated by the Hospital is subject to a ground lease to a third party to the year 2050. The Cube MOB contains 65,878 square feet of floor area and 100 feet eight inches in height.

There are currently 1,259 parking spaces on the property located within a 4-level parking structure, 37 feet in height, as well as surface parking located throughout the subject property.

No protected trees, as defined by the City of Los Angeles Municipal Code (LAMC), are present on-site.

b. Existing Planning and Zoning

The Project Site is located within the Encino-Tarzana Community Plan Area and the Ventura-Cahuenga Boulevard Corridor Specific Plan (Specific Plan). The Project Site is bounded by Burbank Boulevard and the eastbound on-ramp to the Ventura Freeway (US-101) on the north, a medical plaza on the east, Clark Street on the south, and commercial uses on the west. Beyond the intervening medical plaza is Etiwanda Avenue to the east. Beyond the intervening commercial uses is Reseda Boulevard to the west. Primary regional access is provided by the Ventura Freeway, which runs northeasterly of the Project Site. The Encino-Tarzana Community Plan designates the property as Community Commercial land uses with the corresponding zones of CR, C2, C4, and RAS-3. The Project Site is currently zoned [Q]C2-1L, C2, and P1, subject to existing "Q" conditions restricting the square footage and height as well as limiting the Project Site to medical uses. The Specific Plan also designates the Project Site as Community Commercial, and establishes a maximum Floor Area Ratio, for projects within the Community Commercial designation, of 1.5:1, and a maximum height of 45 feet. The Project is further located within the Tarzana District Streetscape Plan area.

E. IMPACTS DETERMINED IN THE INITIAL STUDY TO HAVE NO IMPACTS, TO BE LESS THAN SIGNIFICANT, OR LESS THAN SIGNIFICANT WITH MITIGATION.

1. Environmental Categories the Initial Study Determined Had No Impacts

Section 15128 of the CEQA Guidelines states that an EIR shall contain a brief statement indicating reasons that various possible significant effects of a project were determined not to be significant and not discussed in detail in the EIR. The City of Los Angeles Department of City Planning prepared an Initial Study dated July 15, 2016 that evaluated the Project Applicant's development program for the Project Site at that time. This Initial Study determined that an Environmental Impact Report (EIR) was required and the City issued a Notice of Preparation (NOP) of an EIR in July 15, 2016. The Initial Study provides a discussion of the potential environmental impacts by topic and the reasons that each topical area is or is not analyzed further in the Draft EIR. As further described in the Initial Study, the City determined that the Project would not result in significant impacts related to (i) Agriculture, (ii) Biological Resources, (iii) Mineral Resources, (iv) Population/Housing and (v) Recreation.

The rationale for the conclusion that no significant impact will occur in each of these issue areas is summarized below (and set forth in Appendix A of the Draft EIR). Based on that rationale and other evidence in the administrative record, the City finds and determines that the Proposed Project will not result in any significant impacts in the following environmental impact categories and that no mitigation measures are needed.

2. Environmental Categories the Initial Study Determined May Have Significant Impacts

The Initial Study determined that the Project may have significant impacts in the following environmental categories: (i) Aesthetics, (ii) Air Quality, (iii) Cultural Resources, (iv) Geology/Soils, (v) Greenhouse Gases, (vi) Hazards and Hazardous Materials, (vii) Hydrology/Water Quality, (viii) Land Use, (ix) Noise, (x) Public Services, (xi) Transportation and Traffic, and (xii) Utilities/Service Systems.

F. IMPACTS THE EIR FOUND TO BE LESS THAN SIGNIFICANT

Based on the analysis in the Draft EIR and other evidence in the administrative record relating to the Project, the City finds and determines that the following environmental impact categories will not result in any significant impacts and that no mitigation measures are needed.

Aesthetics, Views, Light/Glare, and Shading

1. Aesthetics

a) Construction

Construction activities could be visible from adjacent land uses, surrounding roadways, and the US-101. However, due to the location of the proposed improvements toward the north central, northeast, and eastern portions of the Project Site, much of the construction would not be visible from vantage points to the south, along Clark Street. Similarly, as the Project Site does not front a public street on the east and west, constructions activities would be further shielded by adjacent development. Construction activities would be most visible from areas north of the Project Site, along Burbank Boulevard and the US-101. Some construction could be visible from portions of Clark Street as well as from the upper levels of the existing buildings surrounding the Project Site. Views of the construction site would be limited by Project Design Feature A-1, which would require the installation of temporary construction fencing around the perimeter of construction areas, where appropriate, thereby screening much of the construction activity from view at street level. In addition, Project Design Feature A-2 would ensure that any temporary pedestrian walkways and construction barriers accessible to the public would be monitored for graffiti removal and unauthorized postings. Overall, while affecting the visual

character of the Project area on a temporary, short-term basis, Project construction would not substantially degrade or alter the long- term visual character or quality of the Project Site or its surroundings. The removal of on-site structures, surface parking areas, and landscaping would not cause the loss of unique visual resources or prominent existing features and would not substantially alter, degrade, or eliminate the visual quality of the Project Site or the surrounding area. Implementation of project design features would further ensure that the overall aesthetic character of the area would not be substantively degraded during construction. Therefore, aesthetic impacts during construction of the Project would be less than significant.

b) Operation

Implementation of the Project would result in the removal of eight modular buildings and the MRI Building, as well as some of the existing service buildings and facilities and some of the existing paved areas and landscaping. The Project would create a visually unified site with new buildings designed to be compatible with the general scale and character of the existing Project Site and surrounding area. Landscaping and lighting elements would further create a visually cohesive site. Furthermore, the Project would not remove existing valued features or elements that contribute positively to the visual character of the surrounding area. As such, the Project would not cause any of the following: substantial degradation of the existing visual character or quality of the Project Site or the surrounding vicinity; removal or development of a substantial amount of existing open space; a substantial degree of contrast between proposed features and existing features that represent the Project Site's aesthetic image; or the development of buildings that detract from the existing style or image of the Project Site or surrounding area due to density, height, bulk, setbacks, signage, or other physical elements. Therefore, the Project would not substantially alter, degrade, or eliminate the existing visual character of the Project Site or surrounding area, including valued existing features or resources, or introduce elements that substantially detract from the visual character. Impacts related to aesthetics would be less than significant.

2. Views

a) Construction

Construction activities on the Project Site would cause a disruption in the general aesthetic character of the area due to demolition activities, site preparation and grading, the staging of construction and equipment, building construction, and landscape/hardscape installation. The presence of construction equipment and materials associated with these activities could alter the existing views of and across the Project Site. However, construction activities would maintain a relatively low height profile, which includes the use of a tower crane for the duration of construction for the New Patient Wing, which would extend 45 feet above the highest point of the New Patient Wing. Therefore, construction activities would not impede or block any existing views of and across the Project Site. Furthermore, construction activities would be temporary, and any potential alterations to viewshed in the area would also be temporary. Thus, construction of the Project would not affect views or have a substantial adverse effect on a scenic vista and construction-related impacts to views would be less than significant.

b) Operation

Visual resources in the greater Project vicinity include the Santa Monica Mountains to the south of the Project Site and the Santa Susana Mountains to the distant north of the Project Site.

There are no visual resources on the Project Site or in the immediate Project vicinity. The Project Site is located within an urban area that is developed with office, commercial, residential and freeway uses with no prominent open or green space. As such, the Project vicinity does not have a natural scenic quality. In addition, the surrounding uses are of a more contemporary design and do not exhibit features of cultural, historical, or aesthetic value.

Based on the view simulations provided in Section IV.A of the Draft EIR, Aesthetics, Views, Light and Glare, and Shading, while the new buildings and landscaping proposed by the Project would be visible from off-site locations, due to the relatively flat topography and intervening development and landscaping, view changes would typically occur at limited vantage points, as opposed to along extensive roadway segments or from entire large geographic areas. Furthermore, the new buildings would feature architectural treatments to effectively integrate all of the structures on the Project Site. Additionally, although views of valued visual resources (e.g., the Santa Monica Mountains and Santa Susana Mountains) are not generally available under existing conditions, the views of the Santa Monica Mountains that do exist are limited due to existing structures. While proposed structures could block some of these views, such a blockage would be minimal and transitory in nature. Similarly, the Project would not result in the removal or alteration of existing features that contribute to the valued visual character or image of the Project Site or the larger Project area. In addition, the Project would not affect views from a designated scenic highway, corridor, or parkway. As such, the Project would not obstruct an existing valued view, and view impacts would be less than significant.

3. Light and Glare

a) Construction

Construction activities would occur in accordance with the provisions of LAMC Section 41.40, which limits the hours of construction to between 7:00 A.M. and 9:00 P.M. on weekdays and between 8:00 A.M. and 6:00 P.M. on Saturdays and national holidays, with no construction permitted on Sundays. While construction of the Project would occur primarily during daylight hours, there is a potential that construction could occur during evening hours, particularly during the winter months when the duration of daylight may not be sufficient. In addition, if approved by the Board of Police Commissioners, there is a potential for some construction activities to occur at night between the hours of 9:00 P.M. and 7:00 A.M. during the building construction stage for the New Parking Structure component and during the foundation-to-street level stage for the New Patient Wing component. Artificial lighting sources during evening and night hours could include floodlights, spot lights, and/or headlights associated with construction equipment and trucks. To the extent evening construction includes artificial light sources, such use would be temporary and would cease upon completion of proposed Project construction. Further, construction-related illumination would be used for safety and security purposes only. Additionally, most of the construction areas would be separated from off-site residential uses by intervening buildings. Construction lighting would also be directed toward the particular area undergoing work, as set forth in Project Design Feature A-3, which requires that construction lighting be shielded and/or aimed so that no direct beam illumination would fall outside of the Project Site boundary. Therefore, off-site uses would not be anticipated to be substantially affected by construction light or glare. Thus, with adherence to existing LAMC regulations and Project Design Feature A-3, light resulting from construction activities would not significantly impact light-sensitive uses, substantially alter the character of off-site areas surrounding the Project Site, or interfere with the performance of an off-site activity. Therefore, light impacts associated with proposed construction would be less than significant.

Daytime glare could potentially occur during construction activities if reflective construction materials were positioned in highly visible locations where the reflection of sunlight could occur. However, any glare would be transitory and short-term, given the movement of construction equipment and materials within the construction area and the temporary nature of construction activities. In addition, large, flat surfaces that are generally required to generate substantial glare are typically not an element of construction activities. Furthermore, construction would occur in accordance with the LAMC and would primarily occur during daytime hours. Temporary construction glare would be no more impactful than the potential glare currently generated by existing on-site structures and vehicles that currently park on the Project Site. Therefore, there would be a limited potential for construction activities on the Project Site to adversely affect daytime or nighttime views in the area.

In conclusion, light and glare associated with construction of the Project would not substantially alter the character of off-site areas surrounding the Project Site or result in a substantial adverse change in ambient day or nighttime levels in close proximity to light-sensitive uses in the Project area. Thus, impacts from Project-related sources of artificial light and glare during construction would be less than significant.

b) Operation

New sources of artificial lighting that would be introduced by the Project would be similar to what currently exists on the Project Site and in the surrounding area. Lighting sources would include: low-level exterior lights adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes; low-level accent lighting to highlight architectural features, landscape elements, and Project signage; and automobile headlights. The Project would not generate artificial light levels that are out of character with the surrounding area, which is located in an urban built environment and characterized by a high degree of human activity and ambient light. Project lighting would also meet applicable LAMC lighting standards.

Signs are located adjacent to the Burbank Boulevard and Clark Street frontages under existing conditions and consist of monument signs, pole signs, building signs, wayfinding signs, and wall signs. Project signage would include both new and replacement signs. New signage for the Project would include replacing the existing monument and pole signs with new monument signs. Project signage would also include new building signs, wayfinding signs, and wall signs adjacent to the Burbank Boulevard, Clark Street, US-101, and east facing frontages. A zone variance is sought for a monument sign with a vertical dimension greater than its horizontal dimension and with a height of more than eight feet above grade and for a wall sign which exceeds its permitted sign area. Total signage is consistent with the allowable sign area set forth by the LAMC. Further detail on the sign program is provided in Appendix N. Project signage would be designed to be aesthetically compatible with the existing and proposed architecture of the Project Site and in the surrounding area and would include monument signage, building signage, and general ground level and wayfinding pedestrian signage. New signage would be illuminated by means of low-level accent lighting, internal halo lighting, or ambient light that would be shielded or directed toward the areas to be lit. In addition, in accordance with the LAMC, illumination used for Project signage would be limited to a light intensity of 3 foot-candles above ambient lighting, as measured at the property line of the nearest residentially zoned property.

With regard to glare, a variety of building materials could be used in the design of the Project, including concrete, stucco, aluminum, glass, concrete block, prefinished wall panel, and prefinished metal. Due to its height and location, the New Patient Wing would have the greatest

potential to generate glare that could impact motorist traveling on the US-101, which is considered a sensitive receptor. This structure would be constructed largely of non-reflective materials such as prefinished metal composite panels. Approximately 40 percent of the exterior envelope of the New Patient Wing would be glazed. In accordance with Project Design Feature A-4, glass facing the US- 101 would be non-reflective, treated with a non-reflective coating or applied film, or consist of back- painted, spandrel glass to minimize glare. The various canopies proposed including the ED Canopy and Walk-In Canopy, would also reduce the glare potential from the New Patient Wing, particularly when the sun is low on the horizon and can reflect off the lower stories of buildings. In addition, existing trees in the US-101 right-of-way and along the north side of the Project Site would provide some screening of the New Patient Wing as viewed from motorists traveling on the freeway, thereby limiting glare potential. The Project would include a landscaping buffer along Burbank Boulevard that would include Canary Pine trees, as well as new landscaping throughout the Project Site, that would further reduce potential glare impacts associated with the New Patient Wing and other structures throughout the Project Site. The Main Building Replacement would be centrally located within the Project Site and would be fronted by a Lobby Canopy. Thus, this building would have limited potential to result in glare impact to off-site uses. The D&T Expansion would be a maximum of 45 feet in height with a canopy along the south of the D&T Expansion. This D&T Canopy would serve to reduce glare for off-site glare sensitive uses to the south of the Project Site, across Clark Street. In addition, the Tarzana Medical Plaza building, located east of the Project Site, would serve as a buffer between the D&T Building and off-site glare-sensitive residential uses across Etiwanda Avenue, east of Cabrillo Creek. Glare could also be generated from light reflecting off cars parked on the Project Site as well as from vehicle headlights and lighted signage. The Project would include the removal of some of the existing surface parking areas, with replacement parking provided in the New Parking Structure, which would include concrete barrier walls that would substantially screen automobiles in the garage. Various architectural screening options could include an architectural screen, painted perforated metal panels, wire fabric or a composite perforated fabric. In addition, landscaping, including trees, shrubs, and flowers would be provided around the northern perimeter of the New Parking Structure. Enhanced landscaping within the Project Site also would provide screening of the Existing Parking Structure. These screening and landscaping measures would reduce glare as well as lighting levels from vehicle headlights during the night. While headlights from vehicles entering and exiting the Project Site via Clark Street and Burbank Boulevard would be visible during the evening hours, such lighting sources would be similar to the existing conditions and typical for the area and, thus, would not be anticipated to result in a substantial adverse impact.

In conclusion, lighting associated with operation of the Project would not substantially alter the character of off-site areas surrounding the Project Site or result in a substantial adverse change in ambient day or nighttime levels at light-sensitive uses in the Project area. Furthermore, the Project would not incorporate substantial amounts of highly reflective building materials in areas that are highly visible to glare-sensitive uses. Therefore, impacts from Project-related sources of artificial light and glare during operation would be less than significant.

4. Shading

As shown in the shadow diagrams provided in Section IV.A, Aesthetics, Views, Light and Glare, and Shading, of the Draft EIR, shadow-sensitive uses would not be shaded by proposed Project-related development for more than three hours between the hours of 9:00 A.M. and 3:00 P.M. Pacific Standard Time (between early November and early March), or more than four hours between the hours of 9:00 A.M. and 5:00 P.M. Pacific Daylight Time (between early March and early November). Therefore, Project shading impacts would be less than significant.

5. Consistency with Regulatory Framework

As detailed in Section IV.A, Aesthetics, Views, Light and Glare, and Shading, of the Draft EIR, the Project would be consistent with applicable policies from the Framework Element, Encino-Tarzana Community Plan, and Ventura–Cahuenga Boulevard Corridor Specific Plan, and Tarzana Streetscape Plan that relate to aesthetics. The Project also would be consistent with the objectives of the Citywide Design Guidelines for commercial and mixed-use projects. In addition, the Project would generally support the applicable Walkability Checklist objectives and implement relevant strategies. Overall, the Project would be consistent with applicable regulatory standards and policies that relate to aesthetics.

6. Cumulative Impacts

a) Aesthetics

Two related projects, Related Project No. 3 and Related Project No. 7, are located sufficiently close to the Project Site to enter the same field of view as the Project, as shown in Figure III-1 in Section III, Environmental Setting, of the Draft EIR. These projects consist of a medical office building located on the corner of Etiwanda Avenue and Clark Street and a mixed-use residential and retail/restaurant development located along Reseda Boulevard, respectively. Similar to the Project, future developments, including Related Project No. 3 and Related Project No. 7, would be subject to the City's design review processes and discretionary review and approval to ensure consistency with adopted guidelines and standards that address aesthetics (e.g., LAMC height limits, density, setback requirements, etc). Thus, Related Project No. 3 and Related Project No. 7 would represent infill developments that are not expected to be out of scale or character with the existing visual environment. Therefore, it is not anticipated that future development would substantially alter, degrade, or eliminate the existing visual character of the Project area, including valued existing features or resources, or introduce elements that substantially detract from the visual character of the area. Thus, cumulative impacts associated with aesthetics would be less than significant.

b) Views

Public vantage points available in the vicinity of the Project Site are largely limited due to the relatively flat topography and developed nature of the Project area. As such, public views from street level locations in the area are largely limited to short-range views of the immediately surrounding urban landscape. The Project area is urban in nature and does not have a natural scenic quality. In addition, the uses in the area are of a more contemporary design and do not exhibit features of cultural, historical, or aesthetic value. Given the view limitations under existing conditions, increased building heights and density associated with future developments in the area would affect views only from adjacent vantages and would have a negligible effect on longer-range views. As with the Project, any view obstruction of the Santa Monica Mountains or the Santa Susana Mountains resulting from the related projects would be limited and transitory in nature. As such, future development in the Project area would not be expected to cumulatively obstruct public views of valued visual resources within and in the immediate vicinity of the Project Site.

c) Light and Glare

Development of the Project, as well as the other related projects in the area, would introduce new or expanded sources of artificial light. Consequently, ambient light levels in the area may increase overall. Of the related projects, none are located immediately adjacent to the Project Site. The closest related projects are Related Project Nos. 3 and 7.

With regard to light, the Project Site is located within an urbanized area characterized by moderate to high ambient nighttime artificial light levels. As such, the Project and Related Project Nos. 3 and 7, which would include typical land uses for the Project area, would not significantly alter the existing lighting environment currently experienced in the area. In addition, cumulative lighting would not be expected to interfere with the performance of off-site activities given the moderate ambient nighttime artificial light levels already present. Furthermore, the Project and all related projects would adhere to applicable City requirements regarding lighting, which would control potential artificial light sources. As a result, cumulative artificial light impacts would be less than significant.

Similarly, with regard to glare, the proposed uses for the Project and Related Project Nos. 3 and 7 are consistent and compatible with existing development in the area and common for a dense urban environment. In addition, it is anticipated that all related projects would be subject to discretionary review and applicable LAMC requirements to ensure that significant sources of glare are not introduced. Furthermore, it is anticipated that all projects would include standard design features related to use of low-level lighting and shielding as well as use of non-reflective surfaces to minimize the potential for glare. As such, cumulative daytime glare impacts would be less than significant.

d) Shading

Cumulative shading impacts can occur when related projects are located sufficiently close to the Project Site so as to create shadows that overlap with those of the Project and affect the same shade-sensitive uses. Based on the location of the related projects identified in the area, as shown in Figure III-1 in Section III, Environmental Setting, of the Draft EIR, none of the related projects are located sufficiently near the Project Site to have the potential to cast shadows that may affect some of the same shade-sensitive uses as the Project. The nearest related project (Related Project No. 3), in terms of shading, is located south of the Project Site. Building shadows generally move in a northwesterly to northeasterly direction, so shadows from the proposed Project and Related Project No. 3 would not overlap. Therefore, cumulative shading impacts would be less than significant.

7. Project Design Features

The Project would implement the following specific project design features with regards to aesthetics, views, light/glare, and shading.

Project Design Feature A-1: The Project Applicant shall place temporary construction fencing along the periphery of construction areas on the Project Site, as necessary, to screen construction activity from view at the street level from off-site.

Project Design Feature A-2: The Project Applicant shall ensure, through appropriate postings and daily visual inspections, that no unauthorized materials are posted on any temporary construction barriers or temporary pedestrian walkways that are accessible/visible to the public, and that such temporary barriers and walkways are maintained in a visually attractive manner (i.e., free of trash, graffiti, peeling postings and of uniform paint color or graphic treatment) throughout the construction period.

Project Design Feature A-3: During construction and operation of the Project, on-site lighting shall be shielded or directed toward the areas to be lit so that no direct beam illumination would fall outside of the Project Site boundary.

Project Design Feature A-4: In order to minimize glare from reflected sunlight, the exterior windows and glass used on the exterior of the New Patient Wing facing the US-101 shall: (1) be non-reflective; (2) be treated with a non-reflective coating or applied film; or (3) consist of back-painted, spandrel glass.

Air Quality

1. Construction

a) Localized Impacts from On-Site Construction Activities

Maximum localized construction emissions for off-site sensitive receptors would not exceed any of the SCAQMD-recommended localized screening thresholds. Therefore, localized construction emissions resulting from the Project would result in a less-than-significant air quality impact.

b) Toxic Air Contaminants (TAC)

The greatest potential for TAC emissions during construction would be from diesel particulate emissions associated with heavy equipment operations during grading and excavation activities. Because the construction schedule estimates that the phases which require the most heavy-duty diesel vehicle usage, such as site grading/excavation, would last for a much shorter duration (e.g., approximately five months), construction of the Project would not result in a substantial, long-term (i.e., 70-year) source of TAC emissions. Additionally, the SCAQMD CEQA guidance does not require a health risk assessment for short-term construction emissions. It is, therefore, not necessary or meaningful to evaluate long-term cancer impacts from construction activities which occur over a relatively short duration. In addition, there would be no residual emissions or corresponding individual cancer risk after construction. As such, Project-related TAC impacts during construction would be less than significant.

2. Operation

a) Regional Operational Impacts

SCAQMD's CalEEMod was used to calculate regional mobile source emissions, on-road fugitive dust, and emissions from architectural coatings, landscape equipment, energy use, and stationary sources (i.e. emergency generators). Operation was assumed to begin in 2022, which is the earliest possible year for operation of the Project. Although operation may begin in 2025, emissions for subsequent years of operation would improve as technology improves and it is therefore assumed that an operation date of 2025 would produce lower emissions than an operation of 2022. Regional emissions resulting from operation of the Project would not exceed any of the SCAQMD's daily regional operational thresholds. Therefore, air quality impacts from Project operational emissions would be less than significant.

b) Localized Impacts

(1) On-Site Sources

Operation of the Project would not introduce any major new sources of air pollution within the Project Site. On-site operational emissions would not exceed any of the LSTs.

(2) Off-Site Sources

The City Planning Commission advises that applicants of projects requiring discretionary approval, located in proximity of a freeway, and contemplating hospitals and other sensitive uses, perform a HRA. As the Project would introduce hospital patients within 1,000 feet of a freeway, a HRA related to criteria pollutants was performed for the Project. The assessment revealed that exposures to maximum predicted NO2, CO, PM10, PM2.5, and concentrations were found to be within acceptable limits.

c) CO "Hot Spots" Analysis

Consistent with the CO methodology discussed in Section IV.B, Air Quality, of the Draft EIR, if a project intersection does not exceed 400,000 vehicles per day, then the project does not need to prepare a detailed CO hot spot analysis.

At buildout of the Project, the highest average daily trips at an intersection would be approximately 16,240 at the White Oak Avenue and Burbank Boulevard intersection,6 which is significantly below the daily traffic volumes that would be expected to generate CO exceedances as evaluated in the 2003 AQMP. This daily trip estimate is based on the peak hour conditions of the intersection. There is no reason unique to SCAB meteorology to conclude that the CO concentrations at the White Oak Avenue and Burbank Boulevard intersection would exceed the 1- hour CO standard if modeled in detail, based on the studies undertaken for the 2003 AQMP. Therefore, the Project does not trigger the need for a detailed CO hotspots model and would not cause any new or exacerbate any existing CO hotspots. As a result, impacts related to localized mobile-source CO emissions are considered less than significant.

d) Toxic Air Contaminants

(1) On-Site Sources

The primary sources of potential air toxics associated with Project operations include diesel particulate matter from delivery trucks (e.g., truck traffic on local streets and idling on adjacent streets). However, these activities, and the land uses associated with the Project, are not considered land uses that generate substantial TAC emissions. It should be noted that the SCAQMD recommends that health risk assessments be conducted for substantial sources of diesel particulate matter (e.g., truck stops and warehouse distribution facilities that generate more than 100 trucks per day or more than 40 trucks with operating transport refrigeration units) and has provided guidance for analyzing mobile source diesel emissions. Based on this guidance, the Project is not considered to be a substantial source of diesel particulate matter warranting a refined HRA since daily truck trips to the Project Site would not exceed 100 trucks per day or more than 40 trucks with operating transport refrigeration units. In addition, the CARB-mandated ATCM limits diesel-fueled commercial vehicles (delivery trucks) to idle for no more than 5 minutes at any given time which would further limit diesel particulate emissions.

As the Project would not contain substantial TAC sources and is consistent with CARB and SCAQMD guidelines regarding TAC sources in proximity to existing sensitive land uses, potential TAC impacts would be less than significant.

Typical sources of acutely and chronically hazardous TACs include industrial manufacturing processes (e.g., chrome plating, electrical manufacturing, petroleum refinery). The Project

would not include these types of potential industrial manufacturing process sources. It is expected that quantities of hazardous TACs located on-site for the types of proposed land uses would be below thresholds warranting further study under California Accidental Release Program (CalARP). As such, the Project would not release substantial amounts of TACs, and impacts on human health would be less than significant.

(2) Off-Site Sources

The City Planning Commission advises that applicants of projects requiring discretionary approval, located in proximity of a freeway, and contemplating hospitals and other sensitive uses, perform a HRA. As the Project would introduce hospital patients within 1,000 feet of a freeway, a HRA was performed for the Project. The maximum predicted carcinogenic risk estimate under a six-month exposure scenario was 0.045 in one million (4.5 x 10-8), which is well below the threshold limit of ten in one million (1.0 x 10-5). Therefore, risks were predicted to be within acceptable limits. For acute noncarcinogenic effects, the hazard index identified for each toxicological endpoint resulted in a maximum hazard index of 0.05 and totaled less than one for all identified exposure scenarios. Therefore, noncarcinogenic hazards were predicted to be within acceptable limits. Thus, implementation of mitigation measures such as enhanced high efficiency particulate air (HEPA) filtration, revised building orientation/massing and vegetation screening is not warranted. Although impacts would be considered less than significant, the Project would further reduce air quality impacts as the Project would comply with the 2016 California Mechanical Code which requires a MERV 8 pre-filter and a MERV 14 secondary filter for areas considered “Patient Care.” Further discussion with regard to Zoning Information No. 2427 is included in Section IV.G, Land Use, of the Draft EIR.

3. SCAQMD CEQA Air Quality Handbook Policy Analysis

While development of the Project would result in short-term regional impacts, Project development would not have a significant long-term impact on the region’s ability to meet state and federal air quality standards. The Project would comply with SCAQMD Rule 403 related to fugitive dust control and would implement all feasible mitigation measures for control of NOX. The Project’s long-term influence would also be consistent with the goals and policies of the AQMP and is, therefore, considered consistent with the SCAQMD’s AQMP.

4. City of Los Angeles Policies

The Project is consistent with applicable policies of the City of Los Angeles General Plan Air Quality Element. Specifically, the Project includes 52 long-term bicycle parking spaces and 26 short-term bicycle spaces for a total of 78 bicycle parking spaces. The Project would be located in an area well-served by public transit provided by Metro, including bus stops along Reseda Boulevard, Burbank Boulevard, and Ventura Boulevard in close proximity to the Project Site. The Project Site is also located approximately 0.6 mile from the Metro Orange Line (Reseda Station). In addition, within the Project Site, a new landscaped paseo would provide a walkway to connect the New Parking Structure and Existing Parking Structure to the Main Building Replacement and Hospital. Existing pedestrian access would also be enhanced along Burbank Boulevard with the installation of a new traffic signal providing a pedestrian crosswalk. As such, the Project would provide opportunities for the use of alternative modes of transportation, including access to public transit and opportunities for walking and biking, thereby facilitating a reduction in vehicle miles traveled. The Project also includes primary entrances for pedestrians and bicyclists that would be safe and easily accessible. Furthermore, the Project is a hospital

that primarily caters to patients who live in the San Fernando Valley, thereby reducing vehicle miles traveled that would otherwise be required for patients to travel to similar hospital uses elsewhere in the City of Los Angeles.

5. Cumulative Impacts

a) Operation

According to the SCAQMD, if an individual project results in air emissions of criteria pollutants that exceed the SCAQMD's recommended daily thresholds for project-specific impacts, then the project would also result in a cumulatively considerable net increase of these criteria pollutants. Operational emissions from the Project would not exceed any of the SCAQMD's regional or localized significance thresholds at Project buildout or under the existing conditions analysis. Therefore, the emissions of non-attainment pollutants and precursors generated by project operation would not be cumulatively considerable.

As indicated in Section III, Environmental Setting, of the Draft EIR, there are nine related projects in the vicinity of the Project Site. The related projects generally consist of infill development and redevelopment of existing uses, including residential, commercial, office, and medical uses. The Project and related projects would be consistent with the recommended screening level siting distances for TAC sources, as established in CARB's Land Use Guidelines, and the Project and related projects would not result in a cumulative impact requiring further evaluation. However, the Project and each of the related projects would likely generate minimal TAC emissions related to the use of consumer products and landscape maintenance activities, among other things. Pursuant to California Assembly Bill 1807, which directs the CARB to identify substances as TACs and adopt ATCMs to control such substances, the SCAQMD has adopted numerous rules (primarily in Regulation XIV) that specifically address TAC emissions. These SCAQMD rules have resulted in and will continue to result in substantial Air Basin-wide TAC emissions reductions. As such, cumulative TAC emissions during long-term operations would be less than significant. In addition, the Project would not result in any substantial sources of TACs that have been identified by the California Air Resources Board's Land Use Guidelines, and thus, would not result in a cumulatively considerable impact or a cumulatively significant impact.

6. Project Design Features

No specific project design features are proposed with regard to air quality. The Project would incorporate project design features to support and promote environmental sustainability as discussed under Section IV.D, Greenhouse Gas Emissions, of the Draft EIR. While these features are designed primarily to reduce greenhouse gas emissions, they would also serve to reduce criteria air pollutants discussed herein.

Geology and Soils

1. Seismic Hazards

a) Fault Rupture

Ground rupture is the visible breaking and displacement of the earth's surface along the trace of a fault during an earthquake. Based on research of available literature and the findings of the Geotechnical Report, no known active or potentially active faults underlie the Project Site. In addition, the Project Site is not located within an Alquist-Priolo Earthquake Fault Zone, as mapped by the CGS. The closest major active (and zoned) fault near the Project Site is the

Santa Susana Fault located approximately nine miles to the north of the Project Site. Therefore, no active faults with the potential for surface fault rupture are known to pass directly beneath the Project Site, and as such, the potential for surface rupture due to faulting occurring beneath the Project Site is considered low. Thus, the Project would not exacerbate existing conditions by bringing people or structures into areas potentially susceptible to substantial adverse effects, including fault rupture that could result in substantial damage to proposed structures or infrastructure, or expose people to substantial risk of injury. Impacts associated with surface rupture from a known earthquake fault would be less than significant, and no mitigation measures are required.

b) Soil Erosion

Development of the Project would require grading, excavation, and other construction activities that have the potential to disturb existing soils and expose soils to rainfall and wind, thereby potentially resulting in soil erosion. However, construction activities would occur in accordance with erosion control requirements, including grading and dust control measures, imposed by the City pursuant to grading permit regulations. Specifically, Project construction would comply with the Los Angeles Building Code, which requires permits, plans, plan checks, and inspections to ensure that the Project would reduce the sedimentation and erosion effects. In addition, as discussed in Section IV.F, Hydrology, Surface Water Quality, and Groundwater, of the Draft EIR, the Project would implement a Storm Water Pollution Prevention Plan during construction pursuant to National Pollutant Discharge Elimination System permit requirements. As part of the Storm Water Pollution Prevention Plan, Best Management Practices would be implemented during construction to reduce sedimentation and erosion levels to the maximum extent possible. In addition, Project construction contractors would be required to comply with City grading permit regulations, which require necessary measures, plans, and inspections to reduce sedimentation and erosion. With compliance with regulatory requirements that include the implementation of Best Management Practices, the Project's impact with respect to soil erosion or the loss of topsoil would be less than significant, and no mitigation measures are required.

c) Lateral Spreading

Liquefaction may also cause lateral spreading. For lateral spreading to occur, the liquefiable zone must be continuous, unconstrained laterally, and free to move along gently sloping ground toward an unconfined area such as an unlined river channel. As described in Section II, Project Description, of the Draft EIR, the Project Site is located in an urbanized area and is primarily surrounded by commercial, residential, and medical uses. In addition, the Project Site is relatively flat and is not surrounded by an unlined river channel or similar feature. Furthermore, the potential for liquefaction at the Project Site is considered low as the groundwater level within the Project Site is not anticipated to rise above 50 feet below ground surface during the design life of the existing and proposed buildings on the Project Site. Therefore, the potential for lateral spreading to occur at the Project Site is also considered low. Thus, potential impacts related to lateral spreading would be less than significant, and no mitigation measures are required.

d) Subsidence

The Project Site is not located within an area of known ground subsidence. In addition, no large-scale extraction of groundwater, gas, oil, or geothermal energy is occurring or is planned at the Project Site. Specifically, as discussed in Section IV.F, Hydrology, Surface Water Quality, and Groundwater, of the Draft EIR, while development of the Project would include excavations to a depth of approximately 23 feet below ground surface and the historic high groundwater level in the vicinity of the Project Site was approximately 20 feet below grade. However, due to the

urban nature of the Project's vicinity, it is extremely unlikely that groundwater levels would approach the historic high levels. In addition, based on boring explorations conducted at the Project Site as part of the Geotechnical Report, groundwater was not encountered in any of the borings drilled to a maximum depth of 75 feet at the Project Site. Therefore, it is not anticipated that groundwater would be encountered during construction that would require temporary or permanent dewatering operations. Thus, the Project would not exacerbate existing environmental conditions related to subsidence. Therefore, impacts related to subsidence would be less than significant, and no mitigation measures are required.

e) Landform Alteration

There are no distinct and prominent geologic or topographic features (i.e., hilltops, ridges, hillslopes, canyons, ravines, rock outcrops, water bodies, streambeds, or wetlands) on the Project Site or in the vicinity of the Project Site. Therefore, the Project would not destroy, permanently cover, or materially and adversely modify any distinct and prominent geologic or topographic features. Impacts associated with landform alteration would not occur, and no mitigation measures are required.

2. Cumulative Impacts

Due to the site-specific nature of geological conditions (i.e., soils, geological features, subsurface features, seismic features, etc.), geology impacts are typically assessed on a project-by- project basis, rather than on a cumulative basis. Nonetheless, cumulative growth through 2022, the Project's earliest build out year, (inclusive of the nine related projects identified in Section III, Environmental Setting, of the Draft EIR) would expose a greater number of people to seismic hazards. However, as with the Project, related projects and other future development projects would be subject to established guidelines and regulations pertaining to building design and seismic safety, including those set forth in the Los Angeles Building Code. With adherence to applicable regulations, the Project's impacts with regard to the exacerbation of geological and soils conditions would not be cumulatively considerable and cumulative impacts with regard to geology and soils would be less than significant.

3. Project Design Features

No specific project design features are proposed with regard to geology and soils.

Greenhouse Gas Emissions

1. Analysis of Project Impacts

The Project would generate an incremental contribution to and cumulative increase in sources of GHGs. However, even a very large individual project would not generate enough GHG emissions on its own to significantly influence global climate change. Thus, potential GHG impacts are addressed generally as a cumulative impact for environmental review purposes.

Considering implementation of applicable project design features identified throughout the Draft EIR, including the requirements set forth in the City of Los Angeles Green Building Code and the full implementation of current state mandates, the GHG emissions for the Project would be approximately 144 metric tons of equivalent mass of CO2 (MTCO2e) per year during construction and 2,106 MTCO2e per year during operation of the Project for a combined total of 2,250 MTCO2e per year. As a result, the net Project GHG emissions of 2,250 MTCO2e/yr would be less than the 2008 SCAQMD draft 3,000 MTCO2e/yr screening level. Under the draft

screening criteria framework, this supports a conclusion that the Project's GHG emissions are less than significant.

Moreover, the Project would be consistent with the regulations outlined in the AB 32 Climate Change Scoping Plan, particularly its emphasis on the identification of emission reduction opportunities that promote economic growth while achieving greater energy efficiency and accelerating the transition to a low-carbon economy. Similarly, the Project would be consistent with the regulations and reduction actions/strategies outlined in SCAG's Regional Transportation Plan/ Sustainable Communities Strategy and the City of Los Angeles' LA Green Plan. More specifically, as part of SCAG's 2016–2040 RTP/SCS, a reduction in VMT within the region is a key component to achieving the 2020 and 2035 GHG emission reduction targets established by CARB. The Project would result in a VMT reduction of approximately 36 percent in comparison to a standard project with similar land uses within the air basin, as estimated by CalEEMod, and would be consistent with SCAG's 2016–2040 RTP/SCS. The Project also would comply with the LA Green Plan, which emphasizes improving energy conservation and energy efficiency, increasing renewable energy generation, and changing transportation and land use patterns to reduce auto dependence with the Project's compliance with regulatory measures and implementation of project design features identified in the Draft EIR.

Therefore, the Project would not conflict with any applicable plan, policy, or regulation of an agency adopted for the purpose of reducing the emissions of GHGs, and Project-specific impacts with regard to climate change would be less than significant.

2. Cumulative Impacts

The analysis of a project's GHG emissions is inherently a cumulative impacts analysis because climate change is a global problem and the emissions from any single project alone would be negligible. Accordingly, the analysis took into account the potential for the Project to contribute to the cumulative impact of global climate change. The emissions presented in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, illustrate that implementation of the Project's regulatory requirements and project design features, including state mandates, would contribute to GHG reductions.

Project would also include various sustainability features that would serve to reduce energy demand including design methods and technologies which may include a centralized chiller plant with rooftop heat rejection; insulating glass that is non-reflective, treated with a non-reflective coating or applied film, or consist of back- painted, spandrel glass; appropriately oriented shading devices; high-efficiency HVAC systems and boilers; LED lighting systems; enhanced insulation to minimize solar and thermal gain; and cool roofing. In addition, the design of new buildings shall include features so as to be capable of achieving LEED Silver certification equivalency. Project energy savings would be 15 percent over Title 24 baseline model for hospitals and would further reduce energy demand. Furthermore, the roof area of the New Parking Structure would install wiring conduits for potential future electrical solar systems. A reduction in energy usage would further reduce the Project's greenhouse gas emissions.

The analysis shows that the Project is consistent with the RTP/SCS' regulatory requirements to reduce regional GHG emissions from the land use and transportation sectors by 2020 and 2035. The Project is also consistent with CARB's Climate Change Scoping Plan, by pursuing emission reduction opportunities that achieve greater energy efficiency and accelerate the transition to a low-carbon economy. In addition, the Project would comply with the LA Green Plan, which emphasizes improving energy conservation and energy efficiency, increasing renewable energy generation, and changing transportation and land use patterns to reduce auto

dependence. Furthermore, the Project's net GHG emissions are below the 2008 draft screening level from the SCAQMD. For these reasons, the Project's cumulative contribution to global climate change is less than significant.

3. Project Design Features

The following project design features are proposed with regard to GHG emissions:

Project Design Feature D-1: Where Leadership in Energy and Efficiency and Design (LEED®) standards for Healthcare are applicable, the design of new buildings shall include features so as to be capable of achieving LEED Silver certification equivalency. Project energy savings would be 15 percent over Title 24 baseline model for hospitals.

Project Design Feature D-2: The Project Applicant shall provide at least20 percent of the total parking spaces provided in the New Parking Structure, capable of supporting future electric vehicle supply equipment (EVSE). Plans shall indicate the proposed type and location(s) of EVSE and also include raceway method(s), wiring schematics and electrical calculations to verify that the electrical system has sufficient capacity to simultaneously charge all electric vehicles at all designated EV charging locations at their full rated amperage. Plan design shall be based upon Level 2 or greater EVSE at its maximum operating capacity. Only raceways and related components are required to be installed at the time of construction. When the application of the 20 percent results in a fractional space, round up to the next whole number. A label stating "EV CAPABLE" shall be posted in a conspicuous place at the service panel or subpanel and next to the raceway termination point.

Project Design Feature D-3: At least 5 percent of the total parking spaces provided in the New Parking Structure shall be equipped with EV charging stations. Plans shall indicate the proposed type and location(s) of charging stations. Plan design shall be based on Level 2 or greater EVSE at its maximum operating capacity. When the application of the 5 percent requirement results in a fractional space, round up to the next whole number.

Project Design Feature D-4: In non-clinical areas, the Project Applicant shall install low flow bathroom faucets, kitchen faucets, toilets, and showers.

Project Design Feature D-5: The Project Applicant shall install a water efficient irrigation system.

As discussed in Section II, Project Description, of the Draft EIR, the Project would also include various sustainability features that would serve to reduce energy demand may include a centralized chiller plant with rooftop heat rejection; insulating glass that is non-reflective, treated with a non-reflective coating or applied film, or consist of back-painted, spandrel glass; appropriately oriented shading devices; high-efficiency HVAC systems and boilers; LED lighting systems; enhanced insulation to minimize solar and thermal gain; and cool roofing. In addition, the roof area of the New Parking Structure would install wiring conduits for potential future electrical solar systems. While the above sustainability features would serve to reduce GHG emissions, this analysis conservatively only quantified the reduction in GHG emissions from Project Design Features D-4 and D-5 and did not quantify reductions in GHG emissions from Project Design Features D-1 through D-3.

Hazards and Hazardous Materials

1. Construction Impacts

a) Hazardous Materials Use and Storage

During on-site grading and building construction, fuel and oils associated with construction equipment, as well as coatings, paints, adhesives, and caustic or acidic cleaners could be used, handled, and stored on the Project Site. The use, handling, and storage of these materials could increase the opportunity for hazardous materials releases and, subsequently, the exposure of people and the environment to hazardous materials. However, the Project Site is not located on a site which is included on a list of hazardous materials sites compiled pursuant to Government Code Section 65962.5 and, as a result, would not exacerbate the current environmental conditions so as to create a significant hazard to the public or the environment. Additionally, all potentially hazardous materials would be used and stored in accordance with manufacturers' instructions. In addition, applicable laws and regulations are aimed at establishing specific guidelines regarding risk planning and accident prevention, protection from exposure to specific chemicals, and the proper storage of hazardous materials, including during construction activities. Therefore, compliance with all applicable federal, state, and local requirements concerning the use, storage, and management of hazardous materials would effectively reduce the potential for Project construction activities to expose people to a substantial risk resulting from the release or explosion of a hazardous material, or from exposure to a health hazard, in excess of regulatory standards. Thus, impacts related to the use and storage of hazardous materials during construction would be less than significant, and no mitigation measures are required.

b) Hazardous Waste Generation, Handling, and Disposal

During on-site grading and building construction, hazardous materials, such as fuels, paints, solvents, and concrete additives could be used and therefore would require proper management and, in some cases, disposal. The management of any resultant hazardous wastes could increase the opportunity for hazardous materials releases and, subsequently, the exposure of people and the environment to hazardous materials. Project construction would occur in compliance with all applicable federal, state, and local requirements concerning the handling, storage, and disposal of hazardous waste. With compliance with relevant regulations and requirements, Project construction activities would not expose people to a substantial risk resulting from the release or explosion of a hazardous material, or from exposure to a health hazard, in excess of regulatory standards. Therefore, impacts associated with hazardous waste management during construction would be less than significant, and no mitigation measures are required.

c) Aboveground and Underground Storage Tanks

Five ASTs for the storage of diesel fuel were observed on the eastern portion of the Project Site. In addition, one UST is located on the northeastern portion of the Project Site and provides diesel fuel for an emergency generator. No staining, leaks, or spills were observed in the vicinity of the ASTs, and no releases have been reported to the local regulatory agencies. Furthermore, according to the most recent tank integrity tests (i.e., the Secondary Containment Test and Monitoring System Certification and Spill Bucket Testing), the UST is reported to be tight. Project construction would require the removal and relocation of the existing ASTs and the UST. As part of the Project, the existing above-grade emergency generators and associated diesel ASTs would be consolidated within an enclosed area east of the proposed D&T Expansion. In addition, the existing underground diesel storage tank would be removed as part of the Project. Furthermore, multiple diesel fuel tanks, with a total storage capacity of 34,000-gallons to provide for 96-hours of backup power, would be located underground within the service area east of the D&T Expansion. This would result in an increase in on-site diesel to serve the existing and proposed buildings. Removal of the ASTs would comply with all state and local regulatory requirements governing the removal of ASTs. Similarly, removal of the existing UST would

comply with applicable requirements, including obtaining applicable permits from the LAFD prior to removal. During tank removal, excavations would be monitored for the potential for impacted soils. Soils that exhibit odors or visual evidence of contamination would be managed as required by the appropriate regulatory agencies. Depending on the extent of contamination, these agencies could require that the soils be sampled for laboratory analysis, segregated, stored, and disposed of in accordance with applicable regulations. Therefore, in the event that contaminated soils are unexpectedly encountered during construction, the nature and extent of the contamination would be determined and appropriate handling, disposal, and/or treatment would be implemented in accordance with applicable regulatory requirements. Compliance with applicable permitting, notification, and worker safety regulations and programs would also ensure construction worker safety at and near sites with potential contamination. Adherence to these guidelines would serve to effectively avoid worker exposure to hazardous materials that may be encountered on-site during construction activities. Therefore, with compliance with applicable regulations, impacts related to the potential disturbance of the on-site ASTs and UST during construction would be less than significant, and no mitigation measures are required.

d) Asbestos-Containing Materials

Any building, structure, surface asphalt driveway, or parking lot constructed prior to 1979 could contain asbestos or ACMs. The Project would involve limited construction in some areas of the Hospital in order to accommodate the relocation of certain uses to/from/within the Hospital. The Main Building, Existing Patient Building, and the Ancillary Wing were constructed prior to 1975. Based on the age of these portions of the Hospital, there is a potential for demolition debris to potentially contain ACMs. Thus, in accordance with SCAQMD Rule 1403, the Project Applicant would be required to conduct a comprehensive asbestos survey prior to demolition. In the event that ACMs are found within areas proposed for demolition, abatement of ACMs would need to be performed. Abatement, air monitoring and final certification for abatement of ACMs would comply with all Federal, State and Local regulations, including National Emission Standards for Hazardous Air Pollutants (NESHAPS, per Section 112 of the CAA), Cal/OSHA and South Coast Air Quality District (SCAQMD). With compliance with relevant regulations and requirements, Project construction activities would not expose people to a substantial risk resulting from the release of asbestos fibers in the environment. Therefore, impacts related to asbestos and ACMs would be less than significant, and no mitigation measures are required.

e) Lead-Based Paint

The Main Building and Existing Patient Building of the Hospital opened in 1973, while the Ancillary Wing opened in 1975. Based on the age of the older portions of the Hospital, it is possible that LBP was used on-site and could be present. In the event that LBP is found within areas proposed for demolition, abatement of LBP would need to be performed. Abatement, air monitoring and final certification for abatement of LBP would comply with all Federal, State and Local regulations, including National Emission Standards for Hazardous Air Pollutants (NESHAPS, per Section 112 of the CAA), Cal/OSHA and SCAQMD, including any procedural requirements such as use of respiratory protection devices while handling lead-containing materials, containment of lead or materials containing lead on the site or location at which construction activities are performed, and certification of all consultants and contractors conducting activities involving LBP or lead hazards. With compliance with relevant regulations and requirements, Project construction activities would not expose people to a substantial risk resulting from the release of LBP into the environment. Therefore, impacts related to LBP would be less than significant, and no mitigation measures are required.

f) Polychlorinated Biphenyls

Several potential PCB-containing equipment were observed on-site, including two pad- mounted transformers, a transformer substation, and nine hydraulic passenger elevators. However, the two pad mounted transformers and transformer substation observed on-site are not labeled indicating PCB content. In addition, no staining or leakage was observed in the vicinity of the transformers. Furthermore, no significant surface staining associated with the elevators was observed and a review of service records did not reveal any major incidents with the elevator equipment. No other potential PCB-containing equipment was observed on the Project Site. Therefore, the transformers and elevators are not expected to represent a significant environmental concern. Thus, impacts related to PCBs would be less than significant, and no mitigation measures are required.

2. Operational Impacts

a) Hazardous Materials Use and Storage

Project operations would involve the use of potentially hazardous materials typical of those used in hospital uses, including biohazards and radioactive waste, cleaning agents, paints, and lab chemicals. As with Project construction, all hazardous materials on the Project Site would continue to be acquired, handled, used, stored, and disposed of in accordance with all applicable federal, state and local requirements. Furthermore, the Project would continue to implement a Hazardous Materials and Waste Management Plan as part of the Project. Therefore, with compliance with all applicable local, state, and federal laws and regulations relating to environmental protection and the management of hazardous materials as well as continued implementation of a Hazardous Materials and Waste Management Plan at the Project Site, impacts associated with the use, storage, and management of hazardous materials during operation of the Project would be less than significant.

b) Hazardous Waste Generation, Handling, and Disposal

Project operations would involve the use of potentially hazardous materials typical of those used in hospital uses. As proposed operations would be similar to those operations occurring presently on-site, no substantial increases in the amount or type of operational hazardous wastes would be expected to occur. As stated previously, activities involving the handling and disposal of hazardous wastes would occur in compliance with all applicable federal, state, and local requirements concerning the handling and disposal of hazardous waste. Therefore, with compliance with relevant regulations and requirements, operational activities would not expose people to a substantial risk resulting from the release or explosion of a hazardous material, or from exposure to a health hazard, in excess of regulatory standards. Thus, impacts associated with hazardous waste generation, handling, and disposal during operation of the Project would be less than significant, and no mitigation measures are required.

c) Aboveground and Underground Storage Tanks

As part of the Project, the existing above-grade emergency generators and associated diesel ASTs would be consolidated within one area east of the proposed D&T Expansion. In addition, multiple diesel fuel tanks, with a total storage capacity of 34,000-gallons to provide for 96-hours of backup power, would be located underground within the service area east of the D&T Expansion. This would result in an increase in on-site diesel to serve the existing and proposed buildings. As with existing operations, the use of the proposed USTs would be subject to the applicable requirements of the California Code of Regulations, Code of Federal Regulations, and Health & Safety Code for regulating the storage of hazardous substances in USTs. With compliance with relevant regulations and requirements, Project use of storage tanks would not

expose people to a substantial risk resulting from the release of VOCs, including benzene, toluene, and PCE, and other chemicals associated with the use of fuel storage tanks. Thus, impacts associated with ASTs and USTs would be less than significant, and no mitigation measures are required.

d) Asbestos-Containing Materials

Development of the Project would include the use of commercially-sold construction materials that would not include asbestos or ACMs. As such, Project development is not anticipated to increase the occurrence of friable asbestos or ACMs at the Project Site. Therefore, operation of the Project would not expose persons in the immediate vicinity to any risk resulting from the release of friable asbestos in the environment. Thus, no impacts associated with ACMs during operation of the Project would occur, and no mitigation measures are required.

e) Lead-Based Paint

Development of the Project would include the use of commercially-sold construction materials that would not include LBP. As such, Project development is not anticipated to increase the occurrence of LBP at the Project Site. Operation of the Project would not expose persons in the immediate vicinity to any risk resulting from the release of lead in the environment. Thus, no impacts associated with LBP during operation of the Project would occur, and no mitigation measures are required.

f) Polychlorinated Biphenyls

In accordance with existing regulations, the new electrical systems to be installed as part of the Project would not contain PCBs. Therefore, during operation of the Project, maintenance of such electrical systems would not expose people in the immediate vicinity to PCBs. In addition, the Project Applicant would comply with applicable laws regulating PCBs. As such, operation of the Project would not expose people to any risk resulting from the release of PCBs in the environment. Therefore, no impacts related to PCBs during Project operation would occur, and no mitigation measures are required.

3. Cumulative Impacts

Development of the Project in combination with the related projects has the potential to increase the risk for an accidental release of hazardous materials. Each of the related projects would require evaluation for potential threats to public safety, including those associated with the use, storage, and/or disposal of hazardous materials, asbestos-containing materials, lead-based paint, polychlorinated biphenyls, and oil and gas and would be required to comply with all applicable local, state, and federal laws, rules and regulations. This evaluation would occur on a case-by-case basis for each individual project affected, in conjunction with development proposals on these properties. Therefore, with full compliance with all applicable local, state, and federal laws, rules and regulations as well as implementation of site specific recommendations for the related projects, cumulative impacts related to hazards and hazardous materials would be less than significant.

4. Project Design Features

No specific project design features are proposed with regard to hazards and hazardous materials.

Hydrology and Water Quality

1. Construction

a) Surface Water Hydrology

Construction activities for the Project would include excavating to a maximum depth of 23 feet for the basement levels, building the structures, and installing hardscape and landscape features around the structures. As the Project Site is greater than one acre, the Project would be required to obtain coverage under the NPDES Construction General Permit. In accordance with the requirements of this permit, the Project would implement a SWPPP that specifies BMPs and erosion control measures to be used during construction to manage runoff flows and prevent pollution. BMPs would be designed to reduce runoff and pollutant levels in runoff during construction. The NPDES and SWPPP measures are designed to contain and treat, as necessary, stormwater or construction watering on the Project Site to avoid runoff from impacting off-site drainage facilities or receiving waters. Construction activities are temporary, and flow directions and runoff volumes during construction would be controlled.

In addition, the Project would be required to comply with all applicable City grading permit regulations that require necessary measures, plans, and inspections to reduce sedimentation and erosion. Thus, through compliance with all NPDES General Construction Permit requirements, including preparation of a SWPPP, implementation of BMPs, and compliance with applicable City grading regulations, the Project would not substantially alter the Project Site drainage patterns in a manner that would result in substantial erosion, siltation, flooding on- or off-site. Similarly, with adherence to standard compliance measures, construction activities would not cause flooding, substantially increase or decrease the amount of surface water flow from the Project Site into a water body, or result in a permanent, adverse change to the movement of surface water. As such, construction-related impacts to surface water hydrology would be less than significant.

b) Surface Water Quality

Construction activities, such as earth moving, maintenance/operation of construction equipment, potential dewatering, and handling/storage/disposal of materials could contribute to pollutant loading in stormwater runoff. However, as previously discussed, projects disturbing greater than one acre of soil are required to obtain coverage under the NPDES Construction General Permit. In accordance with the requirements of the permit, the Project would prepare and implement a site-specific SWPPP adhering to the California Stormwater Quality Association BMP Handbook. The SWPPP would specify BMPs to be used during construction. BMPs would include, but not be limited to, erosion control, sediment control, non-stormwater management, and materials management. Because of the depth to groundwater on the Project Site, the Project is not expected to require dewatering during construction.

With the implementation of site-specific BMPs included as part of the SWPPP, the Project would reduce or eliminate the discharge of potential pollutants from the stormwater runoff. In addition, the Project would be required to comply with City grading permit regulations, which require necessary measures, plans (including a wet weather erosion control plan if construction occurs during the rainy season), and inspection to reduce sedimentation and erosion. Therefore, with compliance with NPDES requirements and City grading regulations, construction of the Project would not result in discharge that would violate any water quality standard or waste discharge requirements, or otherwise substantially degrade water quality. Furthermore, construction of the Project would not result in discharges into the LA River that would cause regulatory standards to be violated. Therefore, temporary construction-related impacts on surface water quality would be less than significant.

c) Groundwater Hydrology

No water supply wells are located at the Project Site or within 1 mile of the Project Site that could be impacted by construction. In addition, the Project would not include the construction of water supply wells. Development of the Project would include excavations to a depth of approximately 23 feet below ground surface. The historic high groundwater level at the Project Site is approximately 20 feet bgs. However, due to a permanent change in the hydrology of the region through urbanization and the lining of rivers and flood channels, including the Los Angeles River, it is unlikely that groundwater levels would approach the historic high levels measured prior to the lining of the rivers and creeks. According to data provided therein, groundwater was not encountered in any of the four borings drilled to a maximum depth of 75 feet at the Project Site in 2008. Accordingly, it is not expected that groundwater would be encountered during construction that would require temporary or permanent dewatering operations. Therefore, as the Project development would not adversely impact the rate or direction of flow of groundwater and no water supply wells would be affected, the Project would not result in a significant impact on groundwater hydrology during construction.

d) Groundwater Quality

During on-site grading and building construction, hazardous materials, such as fuels, paints, solvents, and concrete additives, could be used and would, therefore, require proper management and, in some cases, disposal. The management of any resultant hazardous wastes could increase the potential for hazardous materials releases into groundwater. Compliance with all applicable federal, state, and local requirements, concerning the handling, storage and disposal of hazardous waste, would reduce the potential for the construction of the Project to release contaminants into groundwater that could affect the rate or change direction of movement of existing contaminants, expand the area or increase the level of groundwater contamination, or cause a violation of regulatory water quality standards. In addition, as there are no groundwater production wells or public water supply wells on-site or within 1 mile of the Project Site, construction activities would not be anticipated to affect existing wells. Therefore, the Project would not result in any substantial increase in groundwater contamination through hazardous materials releases that could affect the rate or direction of movement of existing contaminants, expand the area or increase the level of groundwater contamination, or cause a violation of regulatory water quality standards. In addition, as there are no groundwater production wells or public water supply wells within 1 mile of the Project Site, construction activities would not be anticipated to affect existing wells. Accordingly, Project impacts on groundwater quality would be less than significant, and no mitigation measures are required.

2. Operation

a) Surface Water Hydrology

The Project Site is approximately 88 percent impervious, including buildings and pavements for pedestrian and vehicular circulation. The remaining 12 percent of the Project Site is pervious, consisting of landscaped areas and lawns. The Project would include development of new buildings, paved areas, and landscaped areas. With implementation of the Project, the amount of impervious area would decrease from approximately 88 percent to 87 percent. The boundaries of the drainage areas would remain the same as under existing conditions. The Project would not impact existing storm drain infrastructure serving the Project Site, and runoff would continue to follow the same discharge paths and flow to the same storm drain systems. In addition, the future peak runoff flows resulting from the Project would not increase stormwater runoff at the discharge points from the Project Site to the public right-of-way. Furthermore, as

part of the SUSMP for the Project to manage post-construction stormwater runoff, the Project would include the installation of catch basins, planter drains, and building roof drain downspouts throughout the Project Site to collect roof and site runoff and direct stormwater away from structures through a series of underground storm drain pipes. Additionally, the Project Site is not located within a FEMA designated 100-year flood plain.

Earthquake-induced flooding can result from the failure of dams or other water-retaining structures resulting from earthquakes. Although the Project Site is mapped within the inundation zone for Encino Reservoir, catastrophic failure of this dam is expected to be a very unlikely event in that stringent dam safety regulations exist and are enforced by the Division of Safety of Dams, Army Corp of Engineers, and Department of Water Resources. Inspectors may require dam owners to perform work, maintenance or implement controls if issues related to the safety of the dam are found. These dams are under continuous monitoring for safety against failure. Therefore, the risk of flooding from inundation by dam failure is considered low, and impacts would be less than significant.

In conclusion, the Project would not substantially alter the existing drainage pattern of the Project Site in a manner that would cause substantial erosion or siltation on- or off-site, result in an incremental impact on either on-site or off-site flooding during a 50-year storm event, would not substantially reduce or increase the amount of surface water in a water body, or result in a permanent adverse change to the movement of surface water that would result in an incremental effect on the capacity of the existing storm drain system. Additionally, impacts associated with dam failure would be less than significant. As such, operation of the Project would result in a less-than- significant impact on surface water hydrology.

b) Surface Water Quality

The Project would be required to implement SUSMP and LID requirements throughout the operational life of the Project. As part of these requirements, the Project would prepare a SUSMP, which would outline the stormwater treatment measures or post-construction BMPs required to control pollutants of concern. In addition, consistent with LID requirements to reduce the quantity and improve the quality of rainfall runoff that leaves the Project Site, the Project would include the installation of an infiltration system as established by the LID Manual.

The Project Site currently does not have structural BMPs for the treatment of stormwater runoff from the existing impervious surfaces. Therefore, implementation of BMP systems proposed as part of the Project would result in a substantial improvement in surface water quality runoff from the Project Site. In addition, the implementation of BMPs, which would utilize the natural adsorption and filtration characteristics of vegetated swales and pervious surfaces, would allow for more opportunities to direct stormwater to flow through the planting media, where pollutants are filtered, absorbed, and biodegraded by the soil and plants, prior to infiltrating the ground below.

In conclusion, with implementation of BMPs, operation of the Project would not result in discharges that would cause: (1) an incremental increase in pollution, which would alter the quality of the waters of the State (i.e., Los Angeles River) to a degree which unreasonably affects beneficial uses of the waters; (2) an incremental increase of contamination of the quality of the waters of the State by waste to a degree which creates a hazard to the public health through poisoning or through the spread of diseases; or (3) an incremental increase in the nuisance that would be injurious to health, affect an entire community or neighborhood or any considerable number of persons; and occurs during or as a result of the treatment or disposal of wastes. Furthermore, operation of the Project would not result in discharges that would cause

regulatory standards to be violated in Long Beach Harbor. Therefore, operational impacts on surface water quality would be less than significant.

c) Groundwater Hydrology

The percolation of precipitation that falls on pervious surfaces is variable, dependent upon the soil type, condition of the soil, vegetative cover, and other factors. Implementation of the Project would include both the addition and removal of impervious surfaces throughout the Project Site. Currently, the Project Site is approximately 88 percent impervious and 12 percent pervious. Implementation of the Project would decrease impervious surfaces to approximately 87 percent. Additionally, the Project would include the installation of structural BMPs, which would infiltrate the first flush or the equivalent of the greater between the 85th percentile storm and first 0.75 inch of rainfall for any storm event and offset the potential reduction in percolation resulting from Project development. The proposed BMP systems would be designed with an internal bypass or overflow system to prevent upstream flooding due to large storm events. The stormwater, which bypasses the BMP systems, would discharge to an approved discharge point in the public right-of-way and not result in infiltration of a large amount of rainfall, which would affect groundwater hydrology, including the direction of groundwater flow.

Project development would require excavations with a depth ranging from 4 feet to approximately 23 feet bgs. As previously described, the historic high groundwater level in the vicinity of the Project site is approximately 20 feet bgs. However, based on the absence of groundwater identified as part of the on-site borings drilled to depths of 75 feet below grade surface throughout the Project Site as well as historical data from the last several decades, it is not expected that groundwater would be encountered during construction that would require either temporary or permanent dewatering operations.

Furthermore, the Project would not affect production levels of groundwater supply wells given that there are no existing wells or spreading grounds within 1 mile of the Project Site, and the Project would not include new injection or supply wells.

In conclusion, operation of the Project would result in a less than significant impact on groundwater hydrology, including groundwater levels.

d) Groundwater Quality

Operational activities, which could affect groundwater quality, include spills of hazardous materials and leaking aboveground and underground storage tanks. Surface spills from the handling of hazardous materials most often involve small quantities and are cleaned up in a timely manner, thereby resulting in little threat to groundwater. Other types of risk sources, such as leaking aboveground and underground storage tanks and sewage storage tanks, have a greater potential to affect groundwater. As discussed in Section IV.E, Hazards and Hazardous Materials, of the Draft EIR, no staining, leaks, or spills associated with these tanks were identified in the Phase I Environmental Site Assessment prepared for the Project. The existing above-grade emergency generators and associated aboveground diesel storage tanks would be consolidated in one area east of the proposed D&T Expansion as part of the Project. In addition, the existing underground diesel storage tank would be removed as part of the Project. Furthermore, multiple diesel fuel tanks, with a total storage capacity of 34,000-gallons to provide for 96-hours of backup power, would be located underground within the service area east of the D&T Expansion. This would result in an increase in on-site diesel to serve the existing and proposed buildings. Furthermore, the Project would include a new underground sewage storage

tank with a total storage capacity of 37,500 gallons, minimum, to provide for 72 hours of sewage storage for the Hospital.

All fuel storage and sewage storage tanks associated with the Project would be installed and maintained in compliance of all existing regulations. In addition, while the development of expanded facilities would increase the use of existing on-site hazardous materials, compliance with all applicable existing regulations at the Project Site would prevent the Project from affecting or expanding any potential areas of contamination, increasing the level of contamination, or causing regulatory water quality standards at an existing production well to be violated, as defined in California Code of Regulations, Title 22, Division 4, Chapter 15 and the Safe Drinking Water Act. Furthermore, operation of the Project would not require extraction from the groundwater supply based on the depth of excavation for the proposed uses and the depth of groundwater below the Project Site. The Project does not include the installation or operation of water wells, or any extraction or recharge system that is in the vicinity of the coast, an area of known groundwater contamination or seawater intrusion, a municipal supply well, or spreading ground facility. The Project does not include surface or subsurface application or introduction of potential contaminants or waste materials during operation. The Project is not anticipated to result in releases or spills of contaminants that could reach a groundwater recharge area or spreading ground or otherwise reach groundwater through percolation. Additionally, the Project would include the installation of structural BMPs as a means of pretreatment prior to infiltration of the first flush or equivalent of the greater between the 85th percentile storm event and the first 0.75-inch of rainfall for any storm event, which would allow for treatment of the on-site stormwater prior to potential contact with the groundwater below.

In conclusion, operation of the Project would result in a less than significant impact on groundwater quality.

3. Cumulative Impacts

a) Surface Water Hydrology

The geographic context for the cumulative impact analysis on surface water hydrology is the Los Angeles River Watershed. The Project, in conjunction with the cumulative growth in the Los Angeles River Watershed (inclusive of the related projects), would cumulatively increase stormwater runoff flows potentially resulting in cumulative impacts to surface water hydrology. However, in accordance with City requirements, related projects and other future development projects would be required to implement BMPs, such that post-development peak stormwater runoff discharge rates would not exceed the estimated pre-development rates. Furthermore, the City of Los Angeles Department of Public Works would review each future development project on a case-by-case basis to ensure sufficient local and regional drainage capacity is available to accommodate stormwater runoff. Therefore, cumulative impacts on surface water hydrology would be less than significant.

b) Surface Water Quality

The geographic context for the cumulative impact analysis on surface water quality is the Los Angeles River Watershed. As with the Project, cumulative growth in the Los Angeles River Watershed (including related projects) through 2025 would be subject to NPDES requirements regarding water quality for both construction and operation. In addition, it is anticipated that the related projects and other future development projects would also be subject to SWPPP, SUSMP, and LID requirements and implementation of measures to comply with total maximum daily loads. Furthermore, increases in regional controls associated with other elements of the

municipal separate storm sewer system permit would improve regional water quality over time. Additionally, with implementation of the Project, new BMPs for the treatment of stormwater runoff would be installed, thus improving the surface water quality runoff from the campus compared to existing conditions. Therefore, with compliance with all applicable laws, rules and regulations, cumulative impacts to surface water quality would be less than significant.

c) Groundwater Hydrology

Cumulative groundwater hydrology impacts could result from the overall utilization of groundwater basins located in proximity to the Project Site and the related projects. In addition, interruptions to existing injection or supply wells or designated spreading grounds would have the potential to affect groundwater levels. Any calculation of the extent to which the related projects would extract or otherwise directly utilize groundwater would be speculative. Nevertheless, the cumulative utilization of groundwater in the region, either as a result of water extraction under the related project sites or extraction from local basins by the local water supply agency, to accommodate the related projects could also adversely affect local and regional groundwater hydrology, including groundwater levels. However, no water supply wells, spreading grounds, or injection wells are located within a 1-mile radius of the Project Site. In addition, Project development would not involve the temporary or permanent extraction of groundwater from the Project Site or otherwise utilize the groundwater.

Furthermore, as previously discussed, implementation of the Project would result in negligible change in impervious surface area. Development of the related projects could result in changes in impervious surface area within their respective project sites. Any calculation of the extent to which the related projects would increase or decrease impervious or pervious surfaces that might affect groundwater hydrology would be speculative. In addition, as the related projects are located in an urbanized area, any reduction in groundwater recharge due to the overall net change in impervious area within the related project sites would be minimal in the context of the regional groundwater basin. Additionally, as infiltration systems are designed to infiltrate only the greater of the 85th percentile storm and or the first 0.75-inch of rainfall for any storm event, the infiltration of stormwater as a means of stormwater treatment and management within the Project Site and related project sites would not result in a cumulative effect to groundwater hydrology.

In conclusion, cumulative impacts to groundwater hydrology would be less than significant.

d) Groundwater Quality

Compliance with all applicable existing regulations at the Project Site would prevent the Project from affecting or expanding any potential areas affected by contamination, increasing the level of contamination, or causing regulatory water quality standards at an existing production well to be violated, as defined in the California Code of Regulations, Title 22, Division 4, Chapter 15 and the Safe Drinking Water Act. As with the Project, the related projects would be unlikely to cause or increase groundwater contamination because compliance with existing statutes and regulations would prevent the related projects from affecting or expanding any potential areas affected by contamination, or increasing the level of contamination, or causing regulatory water quality standards at an existing production well to be violated. Therefore, cumulative impacts to groundwater quality would be less than significant.

4. Project Design Features

No specific project design features beyond those set forth in Section II, Project Description, of the Draft EIR are proposed with regard to hydrology, surface water quality, and groundwater.

Land Use

1. Consistency with Local Plans and Applicable Policies

a) Los Angeles General Plan

(1) Los Angeles General Plan Framework Element

The Project would support and would be generally consistent with the Framework Element Land Use Chapter. Specifically, the Project would contribute to the City's objective and policy to accommodate a diversity of uses that support the needs of the City's existing and future residents, businesses, and visitors by providing upgrades and enhancements to the existing Hospital on the Project Site, which would result in improved facilities and improved access to care within the City. The Project would also create construction jobs and employment opportunities during the operational life of the Project, in accordance with policy 3.1.1 of the Land Use Element Chapter. In addition, development of the Project in an area with convenient access to public transit, bicycle facilities, and opportunities for walking would promote an improved quality of life by facilitating a reduction of vehicle trips and emphasizing pedestrian/bicycle access.

The Project would also support the City's policy to provide for the siting and design of new development that maintains the prevailing scale and character of the City's stable residential neighborhoods and enhances the character of commercial and industrial districts by providing complementary and appropriate uses within the existing Medical Center that would be consistent with the scale and character of the existing Medical Center and the surrounding medical office and commercial uses. Further, the Project would support Objective 3.3 by developing the Project within an existing urban area and within an existing site with adequate supporting transportation, infrastructure, and public services. Therefore, the Project would be generally consistent with the applicable objectives and policies that support the goals set forth in the Framework Element's Land Use Chapter.

The Project would be generally consistent with the relevant objectives and policies that support the goals of the Framework Element's Urban Form and Neighborhood Design Chapter. The Project would include upgrades and enhancements to the existing Hospital within the Project Site, which is located adjacent to and along corridors that are served by public transit and are already functioning as a center for the community. In addition, the Project would upgrade the quality of development and improve the quality of the public realm by designing a Project that would be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community and providing new landscaping and trees throughout the Project Site and along the Burbank Boulevard frontage to buffer hospital uses and enhance green space in the neighborhood. Additionally, the Project would promote the underground of utilities throughout the City by proposing to underground most major utilities, including electrical, HVAC, and plumbing utilities, among others. Further, the Project would support the City's policy to encourage that signage be designed to be integrated with the architectural character of the buildings. Specifically, proposed signage would be architecturally integrated into the design of the buildings and would establish appropriate identification for the medical uses. The Project would also promote individual and community safety and would support the City's objective to encourage proper design and effective use of the built environment to help increase personal safety at all times of the day. Therefore, the Project would be generally consistent with the

applicable objectives and policies that support the goals set forth in the Framework Element's Urban Form and Neighborhood Design Chapter.

The Project would also be generally consistent with the relevant policies that support the objectives and goals of the Framework Element's Open Space and Conservation Chapter. In particular, the Project would support the City's policy to seek new opportunities for private development to enhance the open space resources of the neighborhoods by providing new landscaping and trees throughout the Project Site and along Burbank Boulevard that would serve to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. In addition, the Project would include new landscaped courtyards and a garden where employees, patients, and visitors can gather. Therefore, the Project would be generally consistent with the applicable policies that support the objectives and goals set forth in the General Plan Framework's Open Space and Conservation Chapter.

The Project would be consistent with the relevant objectives and policies that support the goals of the Framework Element's Economic Development Chapter. Specifically, the Project would support the City's objective to establish a balance of land uses that provides for commercial and industrial development which meets the needs of local residents, sustains economic growth, and assures maximum feasible environmental quality by providing upgrades and enhancements to the existing Hospital on the Project, which would provide improved facilities and improved access to care that would in turn support the health care needs of the City's residents, businesses, and visitors. The Project would further support this objective by assuring maximum feasible environmental quality through the incorporation of sustainability features, including the reduction in energy demand and water consumption through implementation of efficient equipment and infrastructure. Similarly, by enhancing the existing Hospital, the Project would promote the City's policy to encourage the inclusion of community-serving uses within community and regional centers, in transit stations, and along mixed-use corridors. Thus, the Project would be generally consistent with the applicable objectives and policies that support the goals set forth in the Framework Element's Economic Development Chapter.

The Project would also be consistent with the relevant objectives and policies that support the goals of the Framework Element's Transportation Chapter. Specifically, the Project would support the City's objective in the Transportation Chapter to reduce congestion and improve air quality through the implementation of Project Design Feature J-1 regarding installing a traffic signal on Burbank Boulevard and Mitigation Measure J-2 regarding implementing the installation of a closed-circuit television monitoring camera. With these improvements, impacts at Intersections 5 and 14 would be reduced to a less than significant level under both access patterns. The Project also promotes the City's policy in the Transportation Chapter by providing 52 long term bicycle parking spaces and 26 short-term spaces for a total of 78 spaces, in compliance with LAMC Section 12.21.A.16. In addition, given the location of the Project Site in proximity to major thoroughfares, the intrusion of project traffic into residential neighborhoods would be minimized.

The Project would be consistent with the relevant objectives and policies of the Framework Element's Infrastructure and Public Services Chapter. Specifically, with implementation of the Project, the future peak runoff flows resulting from the Project would not increase stormwater runoff at the discharge points from the Project Site to the public right-of-way. In addition, the Project would prepare a Standard Urban Stormwater Management Plan, which would outline the stormwater treatment measures or post-construction Best Management Practices required to control pollutants of concern. As the Project Site currently does not have Best Management Practices for the treatment of stormwater runoff from the existing impervious surfaces, the implementation of the Project's Best Management Practices would result in an improvement in

surface water quality runoff from the Project Site. Further, as discussed in Section IV.L, Utilities and Service Systems—Water Supply and Infrastructure, of the Draft EIR, LADWP would be able to meet the water demand of the Project, as well as the existing and planned future water demands of its service area. Further, the Project would not exceed the available capacity within the distribution infrastructure that would serve the Project Site and the Project would not require or result in the construction of new water facilities or expansion of existing facilities.

In summary, the Project would be generally consistent with the relevant goals, objectives, and policies of the Framework Element.

(2) Mobility Plan 2035

The Project would be consistent with the relevant policies that support the goals and objectives of Mobility Plan 2035. Specifically, the Project would support the City's policy to provide for safe passage of all modes of travel during construction by preparing and implementing a construction management plan that would identify the location of any temporary lane and sidewalk closures and provide for measures to maintain both directions of travel or alternative routes. The Project would also promote the City's policy to design, plan, and operate streets to serve multiple purposes by providing upgrades and enhancements to the existing Hospital, which is located within an urban area with a mature street network serving vehicles, public transit, bicycles, and pedestrians. Further, the Project would provide enhancements to ensure a quality pedestrian environment by retaining the existing landscaped buffer along Clark Street and adding a landscaped buffer along Burbank Boulevard with Canary Pine trees. The Canary Pine trees would provide shading for pedestrians, which would enhance the pedestrian environment. In addition, the Project would contribute to the City's policy to provide safe, convenient, and comfortable bicycle facilities by enhancing on-site bicycle amenities. The Hospital currently offers locker and shower facilities for employees that bike to the Project Site. Moreover, the Project is designed to provide accessibility and accommodate the needs of people with disabilities as required by the American with Disabilities Act (ADA) and the City. The Project would also promote equitable land use decisions that result in fewer vehicle trips by providing upgrades and enhancements to an existing hospital located within an established medical center and within an urbanized area surrounded by a mix of neighborhood- serving commercial uses, residential uses, and other similar medical uses. Additionally, given the location of the Project Site along and in close proximity to major transit corridors, the Project would provide all employees, patients, and visitors' convenient access to transit services. Therefore, the Project would be generally consistent with the applicable policies that support the goals and objectives set forth in the Mobility Plan 2035.

(3) City of Los Angeles General Plan Health and Wellness Element—Plan for a Healthy Los Angeles

The Plan for a Healthy Los Angeles is the new Health and Wellness Element of the General Plan. The Plan for a Healthy Los Angeles identifies seven primary goals and associated objectives and policies and possible programs that serve as the implementation blueprint for creating healthier, vibrant communities. The goals of the Plan for a Healthy Los Angeles include: (1) Los Angeles, a Leader in Health and Equity; (2) A City Built for Health; (3) Bountiful Parks and Open Spaces; (4) Food that Nourishes the Body, Soul, and Environment; (5) An Environment Where Life Thrives; (6) Lifelong Opportunities for Learning and Prosperity; and (7) Safe and Just Neighborhoods. Supporting policies which are applicable to the Project include:

- Policy 1.5—Improve Angelenos' health and well-being by incorporating a health perspective into land use, design, policy, and zoning decisions through existing tools, practices, and programs.

- Policy 2.2—Promote a healthy built environment by encouraging the design and rehabilitation of buildings and sites for healthy living and working conditions, including promoting enhanced pedestrian-oriented circulation, lighting, attractive and open stairs, healthy building materials and universal accessibility using existing tools, practices and programs.

- Policy 2.3—Strive to eliminate barriers for individuals with permanent and temporary disabilities to access health care and health resources.

- Policy 2.7—Encourage the equitable distribution of health service providers: including federally qualified health centers, hospitals, pharmacies, urgent care, and mental health services, to ensure that every Angeleno has access to preventive care and medical treatment.

With regard to Policy 1.5, development of the Project itself would serve to improve Angelenos' health and well-being by providing upgrades and enhancements to an existing Hospital, which is outdated. The proposed facilities would update the existing Hospital to meet modern standard of care and current code requirements for hospitals, including increased space and additional functions in diagnostic and treatment areas, emergency room, and support services. The Project would also feature design elements that would promote the improved health of the City's residents such as enhancing the streetscape along Burbank Boulevard, providing on-site bicycle amenities, and providing a garden area where employees, patients, and visitors can gather. Further, the Hospital's website currently provides free information regarding healthy eating by providing healthy recipes by dietary consideration or by food category on the Hospital website. Advancements in technology allow the Project to reach more members of the community and would serve to improve Angelenos' health and well-being.

The Project would also support Policy 2.2 by rehabilitating the Existing Patient Building as Ancillary and Support Space for the Hospital and constructing a New Patient Wing. As previously discussed, the Project would promote enhanced pedestrian circulation by enhancing the streetscape along Burbank Boulevard and providing a landscaped paseo with a walkway from the New Parking Structure and Existing Parking Structure to the Hospital. In addition, lighting on the Project Site would include low-level interior lighting adjacent to buildings, parking structures, surface parking areas, and along pathways for security and wayfinding purposes. The proposed lighting sources would be similar to other lighting sources in the vicinity of the Project Site and would not generate artificial light levels that are out of character with the surrounding urban area, characterized by a human activity during the day and night. On-site exterior lighting would be shielded or directed toward the areas to be lit to limit light spillover onto off-site uses and would meet all applicable LAMC lighting standards.

The Project would also support Policies 2.3 and 2.7 of the Plan for a Healthy Los Angeles. Specifically, with regard to Policy 2.3, the Project would not create any barriers for individuals with disabilities to access health care and health resources. As a non-profit organization, the Project supports the accessibility of health care services to all by providing free and reduced-cost medical care. In addition, also supports Policy 2.7, which encourages the equitable distribution of health service providers to ensure that every Angeleno has access to preventive care and medical treatment. Furthermore, low-cost prenatal classes are offered to any family in the community. Additionally, classes are offered on Medicare, diabetes education, and joint replacement to the community for free that are available through the Health Resource Center.

(4) Encino-Tarzana Community Plan

The Project is generally consistent with the objectives and policies set forth in the Encino–Tarzana Community Plan and the Project would support the City's objective to conserve and strengthen viable commercial development and the City's policy to locate new commercial uses in existing established commercial areas. Specifically, the Project would provide upgrades and enhancements to the existing Hospital within the Project Site, which is located within an existing established commercial area. In addition, as previously described, the Project would be designed and developed to achieve a distinctive character and compatibility with existing uses. In particular, the design approach is intended to be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community. Further, the Project would add to and enhance the existing pedestrian street activity by enhancing the streetscape along Burbank Boulevard. The New Parking Structure would be designed such that automobiles are substantially screened. In addition, while it was determined in the Initial Study, provided in Appendix A, of the Draft EIR, that the Project would not generate a demand for additional police protection services that would substantially exceed the capability of the West Valley Community Police Station to serve the Project Site, the Project Applicant would coordinate with the Los Angeles Police Department regarding the development of the Project, in accordance with Project Design Feature G-1.

The Project would also promote the City's objectives to increase the work trips and non-work trips made on public transit, pursue transportation management strategies that can maximize vehicle occupancy, and to encourage non-residential development to provide employee incentives for utilizing alternatives to the automobile. Specifically, the Project Site's location in close proximity to several transit options would provide employees, patients, and visitors of the Project a variety of existing transit services. In addition, the Project includes staggered work hours for employees and the provision of 52 long-term and 26 short-term bicycle parking spaces. The Project would also support the City's policy to design new development projects to minimize disturbance to existing traffic flow by maintaining existing vehicular access points to the Project Site. Additionally, the New Parking Structure would be designed in accordance with all applicable design standards.

As previously discussed, the Project Site is currently designated as Community Commercial in the Encino–Tarzana Community Plan. The Community Plan Map assigns height and floor area ratio limits by attaching footnotes to land use designations. Three footnotes are attached to the Community Commercial land use designation: Footnote 12 (Height District No. 1VL) and Footnote 13 (Height District No. 1L) allow a maximum height of six stories and 75 feet, and Footnote 17 allows FAR of 2:1. In order to accommodate new technologies, state-of-the-art patient rooms and medical equipment and facilities, including a new and expanded Emergency Department, the New Patient Wing would feature increased floor-to-floor heights in excess of 16 feet compared to the Existing Patient room heights of 13 feet, to accommodate medical advances. The height of the New Patient Wing would be approximately 120 feet, and approximately 125 feet with the cooling towers. As a note, the top of the mechanical equipment (including the elevators) would be approximately six inches above the mechanical screen on the New Patient Wing. The height of the existing Cube Medical Office Building, with the inclusion of its mechanical penthouse, is approximately 110 feet. The Existing Patient Building, with the inclusion of its mechanical penthouse, is approximately 95 feet. Therefore, although the New Patient Wing would be inconsistent with the existing footnotes, the New Patient Wing would be consistent with existing heights on the Project Site. Other buildings in the vicinity of the Project Site range in height from approximately 65 feet to approximately 150 feet in height. Specifically, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank

Boulevard and Clark Street) is approximately 80 feet 6 inches in height. As part of the Project, the Project Applicant is requesting a General Plan Amendment to add new Footnote 19 to the Community Commercial land use designation to permit Height District No. 1 at the Providence Tarzana Medical Center property subject to the conditions established in the ordinance implementing the Project approvals, CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI to permit the New Patient Wing height of six stories and 120 feet in lieu of the current maximum height of 45 feet. The Project's FAR would be 1.03:1 upon completion. Therefore, the Project would comply with the Community Plan's 2:1 FAR requirement.

Thus, as set forth above and with the adoption of the requested General Plan amendment, the Project would be generally consistent with the applicable objectives and policies set forth in the Encino–Tarzana Community Plan.

b) Ventura-Cahuenga Boulevard Corridor Specific Plan

The Project Site is located in the Tarzana Community area of the Specific Plan and is currently designated as Community Commercial. The Specific Plan includes design regulations that address building limitations, land use regulations, and sign regulations. While the Project includes a Specific Plan Amendment to exclude the Medical Center from the Specific Plan, the applicable design regulations set forth in the Specific Plan are discussed below.

(1) Building Limitations

As provided in Section 6, Building Limitations, of the Specific Plan, each lot shall have development rights of at least a 0.5:1 FAR in the Specific Plan areas designated as Regional Commercial and Community Commercial. Further, no project may exceed a maximum FAR of 1.25:1 within areas designated as Community Commercial. Overall, the Project would remove approximately 37,198 square feet of existing floor area and construct approximately 294,000 square feet of new floor area, resulting in a net increase of 256,802 square feet of net new floor area within the Project Site. Upon buildout, the Project's FAR would be 1.03:1. As a result, the Project would be consistent with the allowable FAR. Furthermore, the Project would be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community and would not be out of character with the existing setting. Therefore, the Project would be consistent with Section 6, Building Limitations, of the Specific Plan, and would also be consistent with the existing buildings within the Medical Center and the other medical uses surrounding the Project Site.

(2) Land Use Regulations

a. Yards and Setbacks

The following yard and setback regulations are provided in Section 7, Land Use Regulations, of the Specific Plan: an entrance to a business shall provide direct access from the sidewalk without crossing a parking lot or driveway; a maximum 10 foot front yard shall be permitted for lots in areas designated as Regional Commercial and Community Commercial with no parking area or driveway placed directly in front of the building except where a driveway is located to provide direct access through the building to a parking area located in the building or to the rear of the building; no project shall be built within 18 inches of the front lot line and the 18 inch setback shall be landscaped to the satisfaction of the Director of Planning; no side yard shall be permitted at the ground floor, except that an access way, which may include a maximum 20-foot-wide driveway, a maximum 4-foot-wide walkway and landscape buffers of 18 inches to five feet on either side of the access way may be provided for vehicular access to parking and

pedestrian access to the building; and, if the rear lot line of a lot is adjacent to a street, then there shall be a minimum 15-foot rear yard. The Project would be consistent with Section 7, Land Use Regulations, of the Specific Plan as the Project would not build any buildings within 18 inches of the front lot line. In addition, the Project would not build any structures in the 15-foot rear yard set-back along Burbank Boulevard. Furthermore, with regard to the maximum 10-foot front yard, the existing buildings on the Project Site do not comply with the requirement as the construction of the buildings predate the Specific Plan. However, the proposed New Patient Wing would be within 10 feet of the property line.

b. Lot Coverage and Driveways

Per Section 7.B, Lot Coverage, and Section 7.C, Driveways, of the Specific Plan, buildings and structures shall cover no more than 75 percent of the lot area, and a project review shall be required on any site with multiple driveways where the linear frontage of the lot is less than 250 feet. The buildings and structures on the Project Site cover approximately 38 percent of the lot area, which is less than the maximum of 75 percent specified in the Specific Plan and would leave area for new landscaping and enhanced pedestrian walkways. In addition, the Project would not include multiple driveways where the linear frontage of the lot is less than 250 feet. Therefore, the Project would be consistent with Section 7.B, Lot Coverage, and Section 7.C, Driveways, of the Specific Plan.

c. Landscaping

The following landscaping requirements are provided in Section 7.D, Landscaping Requirements, of the Specific Plan: parking structures or that portion of a building which is used for parking shall be designed to substantially screen automobiles contained in the garage from view by pedestrians and from adjacent buildings, except as may be recommended by the Los Angeles Police Department for purposes of safety, with the façade of any parking building designed so that it is similar in color, material, and architectural detail with the building(s) for which it serves for parking; parking structures shall have a landscaped buffer of ten feet around the surface perimeter, except where immediately adjacent to another structure; parking structures shall be designed to include planting of trees, shrubs, and flowers for a minimum total of four percent of the roof area, located principally around the perimeter of the roof level parking, in order to provide additional screening and exterior landscaping; and parking structures installed with air circulation vents and/or fans shall not have the vents and fans adjacent to or facing a residential area in order to avoid any adverse noise impact. In addition, at least 60 percent of all front yards or front setbacks in excess of 18 inches shall be landscaped and the remainder shall be finished to City standards for sidewalks, or finished with other paving materials, including concrete pavers, and brick masonry pavers. The landscaping requirements set forth in the Specific Plan also require project applicants to install an automatic irrigation system to maintain all required landscaping.

As described in Section II, Project Description, of the Draft EIR, the New Parking Structure would be designed to substantially screen automobiles in the garage from view by pedestrians and adjacent buildings. Screening options may include painted perforated metal panels, wire fabric or a composite perforated fabric. The design of the New Parking Structure would be complementary with the aesthetics of the existing and proposed buildings within the Project Site. The New Parking Structure would include landscaping around the perimeter and would be designed to include trees, shrubs, and flowers, which would provide additional screening. Enhanced landscaping within the Project Site also would provide screening of the Existing Parking Structure. The landscaping provided by the Project, including planter beds, would meet the minimum total of four percent of the roof area as required under Section 7.D, Landscaping

Requirements, of the Specific Plan. Furthermore, an automatic irrigation system to maintain landscaping would be installed as part of the Project.

d. Height Limit

Within the Tarzana Section of the Specific Plan area, the Specific Plan sets forth the following height limitation for the Project Site: a height of 45 feet on the north side of Ventura Boulevard from the intersection of Etiwanda Avenue and Ventura Boulevard to the intersection of Wilbur Avenue and Ventura Boulevard.

As previously described, the maximum building height of the Project would be approximately 120 feet above grade level, and approximately 125 feet with the cooling towers, and would exceed the height limitations provided in the Specific Plan. However, with approval of the requested Specific Plan amendment to exclude the Project from the Specific Plan, the Project would no longer be part of the Specific Plan and would not be subject to the height limitations set forth in the Specific Plan. As previously noted, 120-foot height for the New Patient Wing includes increased floor-to-floor heights compared to the Existing Patient Building in order to accommodate new technologies, state-of-the-art patient rooms and medical equipment and facilities, including a new and expanded Emergency Department. The design of modern healthcare facilities includes floor-to-floor heights in excess of 16 feet. While the height of the Project would be above the height limitations set forth in the Specific Plan, the Project would be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community. Specifically, the height of the existing Cube Medical Office Building, with the inclusion of its mechanical penthouse, is approximately 110 feet. The Existing Patient Building, with the inclusion of its mechanical penthouse, is approximately 95 feet. Other buildings in the vicinity of the Project Site range in height from approximately 65 feet to approximately 150 feet in height. In particular, a building at the corner of Ventura Boulevard and Etiwanda Avenue (known as the Tarzana Tower) is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet 6 inches in height. Therefore, while the Project would exceed the height limitations set forth by the Specific Plan, the Project would be consistent with the existing buildings within the Medical Center and the other buildings surrounding the Project Site.

e. Parking

As provided in Section 7.F, Parking, of the Specific Plan, hospitals shall provide at least 2.5 parking spaces for each bed, 1 space per 250 square feet of medical office building, and 1 space per 300 square feet of general office building. Therefore, the Project would be required to provide 1,355 parking spaces under the Specific Plan. However, as part of the Project, the Project Applicant is requesting an amendment to the Specific Plan to exclude the Project Site from its boundaries, in which case the Project would be subject to the parking requirements of the LAMC. The LAMC requires 2.0 spaces per licensed hospital bed, 1.0 space per 500 square feet of general office building, and 1.0 space per 200 square feet of medical office building. Thus, the Project would be required to provide 1,266 parking spaces under the LAMC. As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, the project would increase the total parking supply on the Project Site to approximately 1,500 parking spaces, which exceeds parking requirements under both the Specific Plan and the LAMC.

(3) Sign Regulations

As provided in Section 8, Sign Regulations, of the Specific Plan, in addition to the signs otherwise prohibited in the LAMC, the following signs are also prohibited: portable signs, signs on free-standing walls, off-site commercial signs, window signs, pole signs, windblown devices, signs in the public-right-of-way, stretchers, flashing signs, or supergraphic displays. Additional sign regulations for areas designated as Regional Commercial or Community Commercial include the following: a maximum of one wall sign per tenant on a building's street frontage; a wall sign area not exceeding two square feet for each one foot of lot frontage; no wall sign projecting greater than 12 inches from a building face or above the lowest elevation of the roof eave visible from the street; no more than one monument sign per 200 feet of lot frontage; locate monument signs in maintained landscaped areas which are equal to or greater in area than the dimensions of the face of the sign; no monument sign may exceed six feet in height measured from grade; the total area of each side of the monument structure shall not exceed 60 square feet; no more than one non-illuminated construction sign shall be permitted for each lot frontage; and construction signs shall not exceed 25 square feet in sign area and 15 feet in height.

As described in Section II, Project Description, of the Draft EIR, Project signage would include monument signage, wall signs, and general ground level and wayfinding pedestrian signage. In addition, the Project would also replace existing signage at the vehicle and pedestrian entrances to direct guests to the new entrances and buildings on the Project Site. As a note, the signage installation would be phased per building occupancy and temporary signage would be installed during construction of the various Project components. Proposed signage would be designed to be aesthetically compatible with the existing and proposed architecture of the Medical Center, would be architecturally integrated into the design of the buildings, and would establish appropriate identification for the medical uses. Therefore, the Project would be consistent with the Specific Plan signage requirements.

c) Los Angeles Municipal Code

As previously discussed, the Project Site is primarily zoned [Q]C2-1L (Qualified Commercial, Height District 1L), with portions of the Project Site zoned C2-1 (Commercial, Height District 1) and P-1 (Automobile Parking, Height District 1). In addition, the permanent [Q] Qualified classification found in the Project Site's zoning also sets forth limitations regarding development of the Project Site, including a height limitation of 45 feet. The Commercial zone permits a wide array of land uses including hospitals and medical clinics, as well as uses customarily incident to any of these uses, and accessory buildings. The Parking zone allows public or private parking areas and parking buildings which are located entirely below the natural or finished grade. The Height District 1L designation within the C2 zone imposes a height limitation of six stories or 75 feet and a maximum FAR of 1.5:1. No above grade buildings are permitted in the P Zone.

With regard to the permitted uses within the Project Site, the Project proposes upgrades and enhancements to the existing Medical Center on the Project Site, including enhancing the existing Hospital Lobby, expanding the diagnostic and treatment areas, and constructing a New Patient Wing. The Project would also include the construction of a new above-grade six-level parking structure that would provide approximately 565 parking spaces. The proposed hospital and medical uses would be consistent with the existing Commercial zone. While a portion of the Project Site is zoned for Parking, only public or private parking areas and parking buildings which are located entirely below grade are permitted. Therefore, the proposed above-grade parking structure would not be permitted. Accordingly, the Project includes a Vesting Zone and Height District Change of the portion of the Project Site zoned P-1 to C2-1 to permit the New Parking Structure above-grade and at a height of 50 to 60 feet. Approval of the requested

Vesting Zone and Height District Change would be consistent with the Existing Parking Structure located within the Project Site and within other adjacent medical uses.

With regard to height, Height District 1L within the C2 zone imposes a height limitation of six stories or 75 feet. No above-grade buildings are permitted in the P Zone. As previously discussed, the maximum height of the Project would be approximately 120 feet, with cooling towers on the New Patient Wing that would reach 125 feet in height. Therefore, the Project would exceed the height permitted within the Project Site. Accordingly, the Project includes a Vesting Zone and Height District Change from [Q]C2-1L and P-1 to C2-1 to permit the New Parking Structure above-grade and at a height of 60 feet, to permit the New Patient Wing height of six stories and 120 feet, with cooling towers on the New Patient Wing that would reach 125 feet in height, and to permit the Project as proposed, including the New Patient Wing and other structures, the Project's floor area, and other Project components such as the landscaping requirements, that may be inconsistent with the [Q] conditions. Approval of the requested Vesting Zone and Height District Changes would be consistent with other uses located within the Project Site and in the vicinity of the Project Site. Specifically, the height of the existing Cube Medical Office Building, with the inclusion of its mechanical penthouse, is approximately 110 feet. The Existing Patient Building, with the inclusion of its mechanical penthouse, is approximately 95 feet. Other buildings in the vicinity of the Project Site range in height from approximately 65 feet to approximately 150 feet in height. In particular, a building at the corner of Ventura Boulevard and Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet 6 inches in height. Therefore, while the Project would exceed the permitted heights, the Project would be consistent with the existing buildings within the Medical Center and other medical uses surrounding the Project Site.

With regard to the FAR, upon buildout, the Project FAR would be 1.03:1. Thus, the Project would be consistent with the permitted FAR of 1.5:1.

As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, the Project Applicant is requesting an amendment to the Specific Plan to exclude the Project Site from its boundaries, in which case the Project would be subject to the parking requirements of the LAMC. The LAMC requires 2.0 spaces per licensed hospital bed, 1.0 space per 500 square feet of general office building, and 1.0 space per 200 square feet of medical office building. Thus, the Project would be required to provide 1,266 parking spaces under the LAMC. As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, the project would increase the total parking supply on the Project Site to approximately 1,500 parking spaces, which exceeds parking requirements under the LAMC. Therefore, the Project would be consistent with the requirements of the LAMC.

In summary, with approval of the requested discretionary actions, the Project would be consistent with all applicable provisions of the LAMC.

d) Tarzana Streetscape Plan

The Project includes a Specific Plan Amendment to the Ventura/Cahuenga Boulevard Corridor Specific Plan to amend the Specific Plan boundary in the Specific Plan at Plan Designations, Map 5—Tarzana Section and Pedestrian Oriented Areas, Exhibit B—Tarzana Section to exclude the Project Site. As the Tarzana Streetscape Plan boundaries are based off the Ventura/Cahuenga Boulevard Corridor Specific Plan boundaries, the Project would be excluded from the Tarzana Streetscape Plan. Nevertheless, the Project's consistency with the applicable goals of the Tarzana Streetscape Plan is provided below.

The Project's proposed signage, landscaping, and overall architectural design are currently being considered during the conceptual state of the Project. As such, the Project would meet the goal to promote the integration of signage, landscaping, and architectural design at the concept stage of all new projects. The Project would also support the goals to promote attractive and harmonious commercial development, preserve and enhance community aesthetics, and enhance corridor landscaping. Specifically, the design approach for the Project is intended to be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community. The Project would provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital. The canopies that would be developed at the entrance to the Hospital and the New Patient Wing would add a pedestrian scale, as well as visual interest to the Project Site. In addition, the Project would provide new landscaping and trees throughout the Project Site to buffer hospital uses, enhance the overall patient experience, and enhance green space in the neighborhood. The Project would also retain the existing landscaped buffer along Clark Street and would add a landscaped buffer along Burbank Boulevard with Canary Pine trees. Similarly, with the proposed landscaping improvements along Burbank Boulevard and throughout the Project Site, the Project would promote an attractive pedestrian environment which will encourage pedestrian activity. Therefore, the Project would be generally consistent with the goals of the Streetscape Plan.

e) City of Los Angeles Freeway Adjacent Advisory Notice for Sensitive Uses

The Project would introduce hospital uses within 500 feet of the US-101. Thus, in compliance with the recommendations of Zoning Information No. 2427, a health risk assessment was conducted to assess the potential health risks from both criteria pollutants and toxic air contaminants (TACs) that patients may experience due to the Project Site's proximity to the freeway. The complete HRA, prepared by Air Quality Dynamics, is provided in Appendix C of the Draft EIR.

While the hospital is designed to accommodate acute and emergency care to in-house and ambulatory patients whereby long-term care (i.e., more than six months) does not occur, the assessment did consider a limited exposure duration of six months to assess the impact of carcinogenic exposures. The State of California has established a threshold of ten in one million (1.0 x 10-5) as a level posing no significant risk for exposures to carcinogens regulated under the Safe Drinking Water and Toxic Enforcement Act (Proposition 65). The maximum predicted carcinogenic risk estimate under a six-month exposure scenario was 0.045 in one million (4.5 x 10- 8), which is well below the threshold limit of ten in one million (1.0 x 10-5). Therefore, risks were predicted to be within acceptable limits.

To assess acute and short duration noncancer impacts, pollutant concentrations were divided by their respective Reference Exposure Level (REL) for identified averaging times of 1-hour and 8-hours. No frequency or duration adjustments are considered for these limited exposure scenarios. Available RELs presented in the Consolidated Table of OEHHA/ARB Approved Risk Assessment Health Values were considered in the assessment. For acute noncarcinogenic effects, the hazard index identified for each toxicological endpoint resulted in a maximum hazard index of 0.05 and totaled less than one for all identified exposure scenarios. Therefore, noncarcinogenic hazards were predicted to be within acceptable limits.

Based on these findings, implementation of mitigation measures such as enhanced high efficiency particulate air (HEPA) filtration, revised building orientation/massing and vegetation screening is not warranted. Although impacts would be considered less than significant, the Project would further reduce air quality impacts as the Project would comply with the 2016

California Mechanical Code which requires a MERV 8 pre-filter and a MERV 14 secondary filter for areas considered "Patient Care." This is consistent with City of Los Angeles recommendations and with Ordinance No. 184,245, which requires the provision of air filtration media that achieve a MERV of 13 for regularly occupied areas of buildings located within 1,000 feet of a freeway. Therefore, the Project would be consistent with Zoning Information No. 2427.

2. Consistency with Regional Plans

a) Regional Transportation Plan/Sustainable Communities Strategy and Compass Growth Vision

The Project's general consistency with the applicable goals and principles set forth in the 2016–2040 RTP/SCS and the Compass Growth Vision Report, respectively, is analyzed in the Section IV.G, Land Use, of the Draft EIR. As described therein, the Project would be generally consistent with the applicable goals and principles set forth in the 2016–2040 RTP/SCS and the Compass Growth Vision Report.

b) Regional Comprehensive Plan

The Project's general consistency with the applicable goals and policies set forth in the Regional Comprehensive Plan is analyzed in Section IV.G, Land Use, of the Draft EIR. As described therein, the Project would be generally consistent with the applicable goals and policies set forth in the Regional Comprehensive Plan.

3. Conclusion Regarding Impacts Relative to Land Use Consistency

Overall, the Project would be generally consistent with applicable goals, policies, and objectives in local and regional plans that govern development on the Project Site. Therefore, with approval of the requested entitlements, the Project would not be in substantial conflict with the Community Plan. As such, impacts related to land use consistency would be less than significant.

4. Land Use Compatibility

The Project Site is located in an urbanized area characterized primarily by low- to mid-rise buildings that are occupied by commercial, residential, and medical uses. Specific land uses surrounding the Project Site include office uses to the north, across Burbank Boulevard; the Tarzana Medical Plaza and, across Etiwanda Avenue and an intervening flood control channel, single-family and multi-family residential uses to the east; multi-family residential uses and medical uses associated with a medical and dental office building known as Tarzana Medical Square to the south across Clark Street; and commercial uses, including a supermarket, retail, and a storage company, to the west. As described, the uses immediately adjacent to the Project Site primarily include medical office uses. Therefore, in terms of use, the Project's proposed upgrades and enhancements to the existing Medical Center would be an extension of the uses already present within and in the vicinity of the Project Site.

Further, while the Project's height would exceed the established height limitations, the Project's height and massing would be compatible with other buildings within and surrounding the Project Site. Specifically, the height of the existing Cube Medical Office Building within the Project Site, with the inclusion of its mechanical penthouse, is approximately 110 feet. The Existing Patient Building, with the inclusion of its mechanical penthouse, is approximately 95 feet. Other buildings in the vicinity of the Project Site range in height from approximately 65 feet to approximately 150 feet in height. In particular, a building at the corner of Ventura Boulevard and

Etiwanda Avenue is approximately 150 feet in height at its mechanical penthouse. A building on Reseda Boulevard (between Burbank Boulevard and Clark Street) is approximately 80 feet 6 inches in height. In addition, as described in Section II, Project Description, of the Draft EIR, with the addition of new components to the existing Medical Center, the design approach is intended to be complementary and appropriate to the scale and character of the existing Medical Center and the surrounding community. The additions to the Hospital, including the New Patient Wing, D&T Expansion, and Main Building Replacement would provide visual interest through horizontal and vertical articulation while maintaining consistency with the existing Hospital. The canopies that would be developed at the entrance to the Hospital and the New Patient Wing would add a pedestrian scale as well as visual interest to the Project Site. The New Parking Structure would also be designed to substantially screen automobiles in the garage and, while the façade design of the New Parking Structure would be complementary with the aesthetics of the existing and proposed buildings within the Project Site. As such, the Project represents an extension and reflection of the existing Medical Center and the surrounding urban environment.

Moreover, the discretionary actions required for the Project would not promote development that is incompatible with the surrounding community. Specifically, there are a variety of land use designations and zones in the vicinity of the Project Site, including Community Commercial, Automobile Parking, Medium Residential and Low II Residential, Open Space, and Public Facilities - Freeway and properties zoned C4-1L, P-1L, (Q)C2-1L, R1-1, 1XL, R3-1, R1-1, QR4-1LD, C2-1, C2- 1L, OS, and PF- IXL. The land use designations and zones reflect a variety of uses comprised of low- and mid-rise structures with commercial, medical, and residential uses. The Project would be compatible with the types of land uses and zones in the vicinity of the Project Site. Therefore, if approved, the requested General Plan Amendment and Vesting Zone and Height District Change to permit the Project as proposed would be consistent and compatible with the existing conditions on the Project Site, and other similarly designated development sites in the vicinity of the Project Site.

In conclusion, the Project would be compatible with surrounding land uses and zones and would not substantially or adversely change the existing land use relationships between the Project Site and existing and approved offsite uses. Therefore, impacts related to land use compatibility would be less than significant.

5. Cumulative Impacts

As indicated in Section III, Environmental Setting, of the Draft EIR, there are nine related projects in the vicinity of the Project Site. The related projects generally consist of infill development and redevelopment of existing uses, and the related project uses include residential, commercial, office, and medical uses. As with the Project, the related projects would be required to comply with relevant land use policies and regulations. In addition, as the Project would generally be consistent with applicable land use plans and zoning standards with approval of the requested entitlements, the Project would not incrementally contribute to cumulative inconsistencies with respect to land use plans and zoning standards. Therefore, cumulative impacts with regard to regulatory framework would not be cumulatively considerable and cumulative impacts would be less than significant.

With regard to land use compatibility, there are four related projects located in close proximity of the Project Site, as shown in Figure III-1 in Section III, Environmental Setting, of the Draft EIR. The related developments comprise a medical office building with ground floor retail (Related Project No. 1), a medical office building (Related Project No. 3), a mixed-use development with residential and retail/restaurant uses (Related Project No.7), and residential uses (Related

Project No. 9). Related Projects No. 2, 4, 5, and 8 are located over 0.7-mile north of the Project Site, beyond the US-101, and would not cause cumulative land use impacts related to land use compatibility due to distance and existing intervening development. Based on the mix of uses and buildings that currently comprise the Encino–Tarzana community and, specifically, the existing medical uses within the Project Site and the medical uses proposed by the Project and related projects, the Project and related projects would be compatible with the existing medical uses located in the immediate vicinity of the Project Site. In addition, while the Project in combination with the related projects represent a continuing trend of infill development at increased densities, future development, inclusive of the Project and related projects, would also serve to modernize the Project vicinity and provide sufficient infrastructure and amenities to serve the needs of a growing population. Given the locations of the Project and related projects, such developments are not expected to fundamentally alter the existing land use relationships in the community, but rather would concentrate development on particular sites.

In conclusion, the Project's incremental contribution with respect to land use compatibility would not be cumulatively considerable and the cumulative impact of the Project and the related projects on land use compatibility would be less than significant.

6. Project Design Features

In addition to the Project improvements discussed in Section II, Project Description, of the Draft EIR, the following project design feature is proposed with regard to land use:

Project Design Feature G-1: The Project Applicant shall coordinate with the Los Angeles Police Department regarding the design of the Project.

Noise

1. Construction Noise

a) Off-Site Construction Noise

In addition to on-site construction noise sources, other noise sources may include materials delivery, concrete mixing, and haul trucks (construction trucks), as well as construction worker vehicles accessing the Project Site during construction. Typically, construction trucks generate higher noise levels than construction worker vehicles. The major noise sources associated with off- site construction trucks would be associated with delivery/haul trucks. It is anticipated that the construction delivery/haul trucks would access the Project Site from the US-101 via Reseda Boulevard, Burbank Boulevard, and Clark Street. Trucks heading to the Project Site would use US- 101 and exit at Reseda Boulevard, travel south, turn east on Burbank Boulevard, and enter the Project Site via the existing driveway on Burbank Boulevard. Departing trucks would exit the site to Clark Street, travel west, turn north onto Reseda Boulevard, and either turn west onto US-101 north/west bound or turn east onto Burbank Boulevard to access US-101 south/eastbound on-ramp.

Project-related construction traffic is estimated to generate noise levels of up to 62.0 dBA (Leq) at receptor location R1 during the peak construction haul day of approximately 180 trips and up to 63.7 dBA (Leq) during the one day mat pour during the foundation to street level phase for the New Patient Wing. The estimated noise from the construction trucks would be similar to the existing daytime ambient noise level of 62.5 dBA (Leq) measured along Clark Street (measured at receptor location R1) and would be below the existing daytime ambient noise levels at other receptor locations. During other construction phases, the number of construction trucks would

be lower, which would result in lower noise levels. The estimated construction-related truck noise would be below the 5 dBA significance threshold. Therefore, temporary noise impacts from off-site construction traffic would be less than significant. Furthermore, the estimated noise levels from nighttime off-site construction traffic (i.e., concrete trucks) would be below the significance threshold (5 dBA above ambient) at all off-site receptor locations. Therefore, noise impacts associated with the off-site nighttime construction traffic would be less than significant.

2. Construction Vibration

a) Building Damage Impacts from On-Site Construction

With regard to potential building damage, the Project would generate ground-borne construction vibration during building demolition and site excavation/grading activities when heavy construction equipment, such as large bulldozers, drill rigs, and loaded trucks, would be used. It is noted that since impact pile driving methods would not be used during construction of the Project, in accordance with Project Design Feature H-2, impact pile driving vibration is not included in the on- site construction vibration analysis. Installation of piles for shoring and foundation would utilize a drilling method to minimize vibration generation. As shown in Section IV.H, Noise, of the Draft EIR, the estimated vibration velocity levels from all construction equipment would be below the building damage significance threshold of 0.2 PPV for the two-story commercial building structure to the north and 0.5 PPV for the multi-story residential and commercial building structures to the south, east and west. Therefore, vibration impacts associated with potential building damage would be less than significant.

b) Human Annoyance Impacts from On-Site Construction

Per FTA guidance, the threshold of significance for human annoyance is 72 VdB at residential uses, assuming there are a minimum of 70 vibration events occurring during a typical construction day. The estimated ground-borne vibration levels from construction equipment would be below the significance thresholds for human annoyance at all off-site residential receptor locations. Therefore, vibration impacts during construction of the Project would be less than significant pursuant to the threshold of significance for human annoyance.

In addition, the existing medical office building east of the Project Site would be exposed to ground-borne vibration levels up to 100 VdB due to heavy construction equipment (i.e., jackhammer and small bulldozer) operating directly adjacent to the building during the demolition and grading phase for the D&T Expansion. Generally, construction vibration levels could potentially impact the operation of vibration sensitive medical image equipment (i.e., magnetic resonance imaging equipment, MRI). As the existing medical office building east of the Project Site does not include MRI equipment, Project construction would not result in a vibration impact at the adjacent medical office building. In addition, Project Design Feature H-3 would be implemented to minimize ground- borne vibration generated by construction trucks at the medical office building.

c) Building Damage and Human Annoyance Impacts from Off-Site Construction

Construction delivery/haul trucks would travel between the Project Site and the US-101 via Clark Street, Reseda Boulevard and Burbank Boulevard. Heavy-duty construction trucks would generate ground-borne vibration as they travel along the Project's anticipated haul route. Thus, an analysis of potential vibration impacts using the building damage and human annoyance thresholds for ground-borne vibration along the anticipated local haul routes was conducted.

Regarding building damage, based on FTA data, the vibration generated by a typical heavy-duty truck would be approximately 63 VdB (0.006 PPV) at a distance of 50 feet from the truck. According to the FTA "[i]t is unusual for vibration from sources such as buses and trucks to be perceptible, even in locations close to major roads." Nonetheless, there are existing buildings along the Project's anticipated haul route(s) that are situated approximately 20 feet from the right-of-way and would be exposed to ground-borne vibration levels of approximately 0.022 PPV, as provided in the noise calculation worksheets included in Appendix G of the Draft EIR. This estimated vibration generated by construction trucks traveling along the anticipated haul route(s) would be below the most stringent building damage threshold of 0.12 PPV for buildings extremely susceptible to vibration. Therefore, vibration impacts (pursuant to the threshold of significance for building damage) from off-site construction activities (i.e., construction trucks traveling on public roadways) would be less than significant.

Per FTA guidance, the threshold of significance for human annoyance is 72 VdB for sensitive uses, including residential uses. It should be noted that buses and trucks rarely create vibration that exceeds 70 VdB at 50 feet from the receptor unless there are bumps in the road. The residential uses along Clark Street are approximately 30 feet from the truck travel path. As indicated in the noise calculation worksheets included in Appendix G of the Draft EIR, the temporary vibration levels could reach approximately 70 VdB periodically as trucks pass by the residence along Clark Street. Residential uses along Reseda Boulevard and Burbank Boulevard are located more than 30 feet from the truck paths, which would be exposed to lower vibration levels due to additional distance attenuation. The estimated ground-borne vibration from the construction trucks would be below the 72 VdB significance threshold at residential uses. Therefore, potential vibration impacts with respect to human annoyance that would result from temporary and intermittent vibration from construction trucks traveling along the anticipated haul route(s) would be less than significant.

3. Operational Noise

a) On-Site Stationary Noise Sources

(1) Mechanical Equipment

As part of the Project, the existing central utility plant, located east of the Hospital, would be removed and replaced with a new central plant that would be located in the basement of the New Patient Wing. In addition, the existing above-ground emergency generators would be consolidated in one area east of the proposed D&T Expansion. This area would be fully screened around the perimeter. Furthermore, the existing LADWP substation would be relocated to an area east of the proposed D&T Expansion, along the eastern property line. The LADWP substation would be enclosed on four sides by a 14-foot-high block wall open to the sky, with through doors provided on both the south and western portions of the enclosure. New mechanical equipment (e.g., air ventilation equipment) would also be located in various spaces within the new buildings and on the roof level of the Main Building, the New Patient Wing, and the D&T Expansion building.

Given its basement location, the central plant would not generate noise that would impact off-site sensitive receptors. In addition, the consolidated emergency generators would be fully screened around the perimeter and would only be used for emergency purposes with occasional testing. Thus, the consolidated emergency generators would not result in significant noise impacts. Although operation of the new rooftop and exterior mechanical equipment would generate noise, as provided below in Project Design Feature H-4, all outdoor mounted mechanical equipment would be enclosed or screened from off-site noise-sensitive receptors.

The estimated noise levels from the mechanical equipment would range from 31.1 dBA (Leq) at receptor location R4 to 48.0 dBA (Leq) at receptor location R1, which would result in a maximum increase of 0.6 dBA (Leq) at receptor location R2. Accordingly, the estimated noise levels at all off-site receptor locations would be below the significance threshold of 5 dBA (Leq) above ambient noise levels (based on the lowest measured ambient). Therefore, noise impacts from mechanical equipment would be less than significant.

With regard to the LADWP substation, the LADWP substation would be enclosed on four sides by a 14-foot-high block wall open to the sky. The LADWP substation would generate a noise level of approximately 75 dBA. The nearest noise sensitive receptors to the LADWP substation are R1 (residence south of Clark Street and south of the Project Site) and R2 (residence east of Etiwanda Avenue and east of the Project Site). The LADWP substation would be shielded to the off- site residence to the south (R1) by the Project provided 14 foot-high wall and to the residence to the east (R2) by the existing medical office building along the Project east property line. The estimated noise levels from the LADWP substation would be below the existing nighttime ambient noise levels at all off-site sensitive receptor locations. Therefore, noise impacts associated with the relocated LADWP substation would be less than significant.

(2) Outdoor Spaces

As discussed in Section II, Project Description, of the Draft EIR, the Project would include an outdoor Healing Garden located west of the New Patient Wing and east of the Main Hospital Building. In addition, a new landscaped Paseo would be included, which provides a walkway between the New Parking Structure and Existing Parking Structure to the Lobby Enhancement and Hospital. Noise sources associated with the Healing Garden and the Paseo would include noise from people gathering and conversing. It is assumed that up to 80 people could gather at the healing garden and up to 100 people along the Paseo at any given time. For this operational noise analysis, reference noise levels of 65 dBA for a male and 62 dBA for a female speaking in a raised voice were used for analyzing potential noise impacts from people gathering at the outdoor spaces. In order to analyze a typical noise scenario, it was assumed that up to 50 percent of the people (half of which would be male and the other half female) would be talking at the same time. In addition, the hours of operation for use of the healing garden were assumed to be during the daytime hours from 7:00 A.M. to 10:00 P.M.

The estimated noise levels from the outdoor areas range from 18.0 dBA (Leq) at receptor location R4 to 26.3 dBA (Leq) at receptor location R1. The estimated noise levels from the outdoor spaces would be below the existing ambient noise levels and the significance threshold of 5 dBA (Leq) above ambient noise levels at all off-site sensitive receptors. As such, noise impacts from the use of the outdoor uses would be less than significant.

(3) Parking Facilities

As part of the Project, additional parking would be provided in a new above-grade parking structure within the western portion of the Project Site. The six-level parking structure would provide 565 parking spaces. Sources of noise within parking structures primarily include vehicular movements and engine noise, doors opening and closing, people talking, and intermittent car alarms. Noise levels within the parking garages would fluctuate with the amount of automobile and human activity. The estimated noise from the Project parking structures is estimated to range from 43.6 dBA (Leq) at receptor location R2 to 48.4 dBA (Leq) at receptor location R1. The estimated noise levels at all off-site receptor locations would be below the existing ambient noise levels and the significance threshold of 5 dBA (Leq) above ambient noise levels. Therefore, noise impacts from parking operation would be less than significant.

(4) Truck Loading and Trash Collection Areas

As discussed in Section II, Project Description, of the Draft EIR, the existing trash enclosure would be relocated to an area east of the proposed D&T Expansion, along the eastern property line. The trash enclosure would be enclosed on three sides by a block wall, with wall heights reaching approximately 14 feet. The enclosure would include a canopy that would primarily cover the area where trash is deposited into the compactor. The opening of the trash enclosure would face the D&T Expansion, on the western portion of the trash enclosure. The nearest noise sensitive receptor to the trash enclosure is the existing residential use along the south side of Clark Street (represented by receptor R1). The trash enclosure would include two trash compactors as compared to the existing trash enclosure which includes one trash compactor. Trash compactor operation would generate a noise level of approximately 66 dBA at 50 feet distance, based on measured noise levels from a typical trash compactor. Although the Project would include two trash compactors, only one trash compactor would operate at a time. The estimated noise level from the trash compactor operation at the nearest sensitive receptor R1 would be 57.1 dBA, which would be below the existing daytime ambient noise level of 62.5 dBA. In addition, the noise from the future trash compactor at receptor R1 would be lower than the existing trash compactor, as the future trash compactor is located approximately 45 linear feet distance further than the existing location, which is 95 feet from receptor R1. The estimated noise levels at all other receptors would be well below the existing ambient noise levels. Therefore, noise impacts from loading and trash collection operations would be less than significant.

b) Off-Site Mobile Noise Sources

As such, Project-related traffic would increase the existing traffic volumes along the roadway segments in the study area when compared with Future without Project conditions and Existing Plus Project conditions. This increase in roadway traffic was analyzed to determine if any traffic-related noise impacts would result from operation of the Project. Under both conditions, the increase in traffic noise levels would be well below the relevant 3 dBA CNEL significance threshold. Therefore, traffic noise impacts would be less than significant.

c) Composite Noise Level Impacts from Project Operations

In addition to considering the potential noise impacts to neighboring noise-sensitive receptors from each specific on-site and off-site noise source (e.g., mechanical equipment, outdoor areas, parking facilities, LADWP substation, trash compactor, and off-site traffic), an evaluation of potential composite noise level increases (i.e., noise levels from all on-site noise sources combined) at the analyzed sensitive receptor locations was also performed. This evaluation of composite noise levels from all on-site project noise sources, evaluated using the CNEL noise metric, was conducted to determine the contributions at the noise-sensitive receptor locations in the vicinity of the Project Site.

The Project would result in an increase in composite noise levels ranging from 0.1 dBA at receptor location R3 to 1.5 dBA at receptor location R1. The composite noise levels from the Project operation at all off-site sensitive receptor locations would be below the 3-dBA significance threshold. Therefore, composite noise level impacts due to Project operations would be less than significant.

4. Land Use Compatibility

Based on the measured ambient noise levels, the exterior noise levels at the Project Site varied from 63.9 dBA CNEL at the southern boundary of the Project Site (measured at receptor location R1) to 67.7 dBA CNEL at the northern boundary of the Project Site (measured at receptor location R511). According to the City of Los Angeles Guidelines for Noise Compatible Land Use, the Project Site would be considered "conditionally acceptable" for hospital development (between 60 and 70 dBA CNEL). In addition, in accordance with regulatory requirements, the Project would include necessary noise insulation features, such as insulated glass windows and doors, to achieve an interior noise environment that does not exceed 45 dBA CNEL for hospital uses and 50 dBA Leq for non-residential uses. Therefore, noise impacts associated with land use compatibility would be less than significant.

5. Cumulative Impacts

a) Construction Vibration

(1) On-Site Construction Vibration

Ground-borne vibration decreases rapidly with distance. Potential vibration impacts due to construction activities are generally limited to buildings/structures that are located in proximity to the construction site (i.e., within 15 feet as related to building damage and 80 feet as related to human annoyance at residential uses). The nearest related project to the Project Site is Related Project No. 3. However, construction activities at the Related Project No. 3 would be approximately 150 feet south of the Project construction areas. Due to the rapid attenuation characteristics of ground-borne vibration and given the distance of the nearest related project to the Project Site, there is no potential for a cumulative construction vibration impact with respect to building damage associated with ground-borne vibration from on-site sources.

With regard to human annoyance, the nearest residential use to the Project (receptor R1) is approximately 165 from the Project construction area. The closest distance at which construction vibration could result in significant impact related to human annoyance is 80 feet. Therefore, cumulative construction vibration impacts pursuant to the threshold for human annoyance would be less than significant in the event concurrent construction of the Project and Related Project No. 3 were to occur.

(2) Off-Site Construction Vibration

Based on FTA data, the vibration generated by a typical heavy truck would be approximately 63 VdB (0.006 PPV) at a distance of 50 feet from the truck. In addition, according to the FTA "[i]t is unusual for vibration from sources such as buses and trucks to be perceptible, even in locations close to major roads." There are existing buildings that are approximately 20 feet from the right-of- way of the anticipated haul routes. These buildings are anticipated to be exposed to ground-borne vibration levels of approximately 0.022 PPV. Trucks from the related projects are expected to generate similar ground-borne vibration levels. Therefore, the vibration levels generated from off- site construction trucks associated with the Project and other related projects along the anticipated haul route(s) would be well below the most stringent building damage threshold of 0.12 PPV for buildings extremely susceptible to vibration. Therefore, potential cumulative vibration impacts with respect to building damage from off-site construction traffic would be less than significant.

Potential vibration impacts associated with temporary and intermittent vibration from project-related construction trucks traveling along the anticipated haul route would be less than significant with respect to human annoyance. Thus, should a related project use the same

construction route as the Project, such impacts would also be less than significant based on the distance to the closest sensitive receptor. Therefore, to the extent that other related projects use the same haul route as the Project, potential cumulative human annoyance impacts associated with temporary and intermittent vibration from haul trucks traveling along the designated haul routes would be less than significant.

b) Operational Noise

(1) On-Site Stationary Noise Sources

Due to provisions in the LAMC that limit stationary source noise from items, such as roof-top mechanical equipment, noise levels would be less than significant at the property line for each related project. Therefore, based on the distance of the related projects from the Project Site and the operational noise levels associated with the Project, cumulative stationary source noise impacts associated with operation of the Project and related projects would be less than significant.

(2) Off-Site Mobile Noise Sources

The Project and related projects in the area would produce traffic volumes (off-site mobile sources) that would generate roadway noise. Cumulative noise impacts due to off-site traffic were analyzed by comparing the projected increase in traffic noise levels from “Existing” conditions to “Future Plus Project” conditions to the applicable significance criteria. Future Plus Project conditions include traffic volumes from future ambient growth, related projects, and the Project. Cumulative traffic volumes would result in a maximum increase of 2.1 dBA (CNEL) along the roadway segments of Etiwanda Avenue between Clark Street and Ventura Boulevard, which would be below the relevant 5 dBA significance threshold (applicable when noise levels fall within the conditionally acceptable category). Therefore, cumulative noise impacts due to off-site mobile noise sources associated with the Project, future growth, and related projects would be less than significant.

6. Project Design Features

The following project design features are proposed with regard to noise and vibration:

Project Design Feature H-1: Power construction equipment (including combustion engines), fixed or mobile, would be equipped with state-of-the-art noise shielding and muffling devices (consistent with manufacturers’ standards). Should they be required, generators would be solar powered. All equipment would be properly maintained to assure that no additional noise, due to worn or improperly maintained parts, would be generated.

Project Design Feature H-2: Project construction would not include the use of driven (impact) pile systems.

Project Design Feature H-3: During construction, the surface of the eastern access driveway shall remain even and free of potholes in order to minimize haul/delivery trucks vibration at the adjacent medical office building.

Project Design Feature H-4: All outdoor mounted mechanical equipment would be enclosed or screened from off-site noise-sensitive receptors.

Public Services—Fire Protection

1. Construction

Construction activities have the potential to result in accidental on-site fires by exposing combustible materials (e.g., wood, plastics, sawdust, coverings and coatings) to fire risks from machinery and equipment sparks, and from exposed electrical lines, chemical reactions in combustible materials and coatings, and lighted cigarettes. Given the nature of construction activities and the work requirements of construction personnel, the Occupational Safety and Health Administration has developed safety and health provisions for implementation during construction, which are set forth in 29 Code of Federal Regulations, Part No. 1926. In accordance with these regulations, construction managers and personnel would be trained in emergency response and fire safety operations, which include the monitoring and management of life safety systems and facilities, such as those set forth in the Safety and Health Regulations for Construction established by the Occupational Safety and Health Administration. Additionally, in accordance with the provisions of the Occupational Safety and Health Administration, fire suppression equipment (e.g., fire extinguishers) specific to construction would be maintained on-site. Project construction would also occur in compliance with all applicable federal, state, and local requirements concerning the handling, disposal, use, storage, and management of hazardous materials. Thus, compliance with regulatory requirements would effectively reduce the potential for project construction activities to expose people to the risk of fire or explosion related to hazardous materials and non-hazardous combustible materials.

Construction of the Project could also potentially impact the provision of LAFD services in the vicinity of the Project Site as a result of construction impacts to the surrounding roadways. Specifically, access to the Project Site and the surrounding vicinity could be temporarily impeded by Project-related construction activities on portions of adjacent street rights-of-way, including proposed roadway/access improvements on Burbank Boulevard and the construction of utility line connections. Construction activities also would generate traffic associated with the movement of construction equipment, the hauling of soil and construction materials to and from the Project Site, and construction worker traffic. Thus, although construction activities would be short-term and temporary for the area, construction activities associated with the Project could temporarily increase response times for emergency vehicles along Burbank Boulevard and Clark Street, adjacent to the Project Site, and other main connectors surrounding the Project Site due to travel time delays caused by traffic during the Project's construction phase. However, construction-related traffic, including hauling activities and construction worker trips, would occur outside the typical weekday commuter morning and afternoon peak periods, thereby reducing the potential for traffic-related conflicts. In addition, as part of the Construction Management Plan, provisions for maintaining the flow of traffic during construction activities on portions of adjacent street rights-of-way would be provided. Also, the drivers of emergency vehicles normally have a variety of options for avoiding traffic, such as using sirens to clear a path of travel or driving in the lanes of opposing traffic. Therefore, construction of the Project would not cause substantial delays and disruption of existing traffic flow during construction.

With regard to access, as previously discussed, a Construction Management Plan would be prepared prior to the start of construction to ensure that adequate and safe access remains available within and near the Project Site during construction activities. Specifically, temporary traffic controls and/or flag men would be provided to direct traffic in the vicinity of the Project driveways that are used for construction access as required in the Construction Management Plan. Travel lanes would be maintained in each direction along Burbank Boulevard and Clark Street during the duration of construction and emergency access would not be impeded.

Based on the above, temporary construction activities associated with the Project would not require the addition of a new fire station or the expansion, consolidation, or relocation of an

existing facility in order to maintain service. Therefore, impacts to fire protection services during construction of the Project would be less than significant, and no mitigation measures are required.

2. Operation

a) Facilities and Equipment

The Project Site is currently and would continue to be served by Fire Station No. 93, which is the "first-in" station for the Project Site, and is located approximately 1.1 miles west of the Project Site at 19059 Ventura Boulevard. Fire Station No. 83, located approximately 2.6 miles southeast of the Project Site at 4960 Balboa Boulevard, could also be available to serve the Project Site in the event of an emergency.

The Project proposes upgrades and enhancement to the Hospital on the Project Site. The Project does not propose the development of residential uses, which would generate a new residential population in the service area of Fire Station No. 93 and which would typically generate a greater demand for public services compared to other non-residential uses. In addition, since the number of beds would be reduced with the Project and the existing uses to be removed would be relocated to other areas of the Hospital, the Project is not expected to generate a substantial increase in the number of employees. Further, it is anticipated that the Project could include a range of full-time and part-time positions that may be filled by persons already residing in the vicinity of the workplace. The Hospital currently provides approximately 1,480 jobs and it is expected that these and/or similar positions would be maintained with operation of the Project. Therefore, given that the Project would not directly contribute to population growth in the Project area and as some of the employment opportunities generated by the Project would be filled by people already residing in the vicinity of the Project Site, the Project would not generate a substantial new population in the service area of Fire Station No. 93.

The Project would implement all applicable OSHPD, City Building Code, and Fire Code requirements regarding structural design, building materials, site access, fire flow, storage and management of hazardous materials, alarm and communications systems, etc. Compliance with applicable OSHPD, City Building Code and Fire Code requirements would be demonstrated as part of OSHPD's and LAFD's fire/life safety plan review and fire/life safety inspection for new construction projects. In addition, as provided in Project Design Feature I-1, the Project Applicant would consult with the Los Angeles Fire Department regarding the design of the Project. Furthermore, pursuant to Section 57.507.3.3 of the LAMC, and provided in Project Design Feature I-2, the buildings proposed as part of the Project would be constructed with automatic fire sprinkler systems, which would reduce the demand placed on the LAFD.

Compliance with applicable regulatory requirements, including OSHPD's and LAFD's fire/life safety plan review and fire/life safety inspection for new construction projects, would ensure that adequate fire prevention features would be provided that would reduce the demand on LAFD facilities and equipment. In addition, in accordance with the fire protection-related goals, objectives, and polices set forth in the Framework Element, the Safety Element, and the Community Plan, the City along with LAFD would continue to monitor the demand for existing and projected fire facilities (Objective 9.16 of the Framework Element, Policy 2.1.6 of the Safety Element, and Fire Protection Policy 9-1.1 of the Community Plan) and coordinate the development of new fire facilities to be phased with growth (Objective 9.18 of the Framework Element). Therefore, given LAFD's fire/life safety plan review, LAFD's fire/life safety inspection,

and LAFD's continued evaluation of existing fire facilities, impacts with regard to LAFD facilities and equipment would be less than significant.

b) Response Distance and Emergency Access

The Project Site is located within the response distance from a fire station with a truck company. However, the Project Site is located outside of the required response distance of one mile from a fire station with an engine company. Therefore, pursuant to the requirements of Section 57.507.3.3 of the LAMC and various provision of the 2016 California Building Standards Code, the Project would install automatic fire sprinklers in all proposed new buildings of the Project.

As is the case under existing conditions, emergency vehicles would access the Project Site from Burbank Boulevard and Clark Street. The area surrounding the Project Site includes an established street system consisting of Freeways, Boulevards, Avenues, Collectors and Local Streets which provide regional, sub-regional, and local access and circulation within the Project's traffic study area.

Based on the Project Site's location within an urbanized area of the City, the streets surrounding the Project Site were designed as standard streets in terms of pavement width and thickness, curb and gutter, and horizontal and vertical curvature. Therefore, the street system surrounding the Project Site is not considered substandard. In addition, the Project's driveways and internal circulation would be designed to incorporate all applicable OSHPD, City Building Code and Fire Code requirements regarding site access, including providing adequate emergency vehicle access. Compliance with applicable OSHPD, City Building Code and Fire Code requirements, including emergency vehicle access, would be demonstrated as part of OSHPD's and LAFD's fire/life safety plan review and fire/life safety inspection for new construction projects, as set forth in Section 57.118 of the LAMC. Furthermore, the Project would not include the installation of barriers that could impede emergency vehicle access within or in the vicinity of the Project Site. As such, existing emergency access to the Project Site and surrounding uses would be maintained during operation of the Project. Therefore, the Project would not significantly impact emergency vehicle access to the Project Site and surrounding uses.

With regard to response times, the Project would generate additional traffic in the vicinity of the Project Site and Project-related traffic would have the potential to increase emergency vehicle response times to the Project Site and surrounding properties due to travel time delays caused by the additional traffic. However, with implementation of the proposed signalization improvements and mitigation measures, potentially significant impacts at the two study intersections would be reduced to a less-than-significant level. Accordingly, the Project is not anticipated to substantially affect existing response times in the service area of Fire Station No. 93. Furthermore, the drivers of emergency vehicles normally have a variety of options for avoiding traffic, such as using sirens to clear a path of travel or driving in the lanes of opposing traffic. Additionally, the LAFD initiated a major reorganization of the Department's Emergency Services Bureau, creating four distinct geographic bureaus, each with a Deputy Chief reporting directly to the LAFD Chief Deputy of Emergency Operations. The bureaus will operate during normal weekday business hours and bureau commanders and staff will be available 24/7 to respond to significant emergencies.

Overall, impacts with regard to response distance, emergency access, and response times would be less than significant.

c) Fire Flow

Domestic and fire water service to the Project Site would continue to be supplied by LADWP. Fire flow to the Project would be required to meet City fire flow requirements. The public fire hydrants adjacent to the Project Site have adequate fire flows to serve the Project Site. In addition, the estimated fire service flows for the Project would be in compliance with Section 94.2020.0 of the LAMC. Furthermore, based on the Service Advisory Report provided by LADWP, the existing water infrastructure can deliver flows of 1,400 gallons per minute with a residual pressure of up to 31 pounds per square inch, which would satisfy the private water system demands of the Project. Therefore, LADWP would be able to supply sufficient flow and pressure to satisfy the needs of the Project. Therefore, with construction of the proposed fire water system improvements (connections to the existing water mains) the Project would meet the fire flow requirements. As such, impacts with regard to fire flow would be less than significant.

3. Cumulative Impacts

With regard to facilities and equipment, similar to the Project, the related projects and other development in the City would be required to implement all applicable City Building Code and Fire Code requirements regarding structural design, building materials, site access, fire flow, storage and management of hazardous materials, alarm and communications systems, etc. Compliance with applicable regulatory requirements, including LAFD's fire/life safety plan review and LAFD's fire/life safety inspection for new construction projects, would ensure that adequate fire prevention features would be provided that would reduce the demand on LAFD facilities and equipment. As with the Project, other related projects may also include the installation of automatic fire sprinklers to enhance fire safety, which would further reduce the demand placed on the LAFD facilities and equipment. The Project as well as the related projects would also generate revenues to the City's Municipal Fund (in the form of property taxes, sales revenue, etc.) that could be applied toward the provision of new fire station facilities and related staffing, as deemed appropriate. In addition, in accordance with the fire protection-related goals, objectives, and polices set forth in the Framework Element, the Safety Element, and the Community Plan, as the City along with LAFD would also continue to monitor population growth and land development in the City and identify additional resource needs including staffing, equipment, trucks and engines, ambulances, other special apparatuses, and possibly station expansions or new station construction that may become necessary to achieve the required level of service. Therefore, given LAFD's fire/life safety plan review, LAFD's fire/life safety inspection, and LAFD's continued evaluation of existing fire facilities, cumulative impacts with regard to LAFD facilities and equipment would be less than significant.

With regard to response distance, given that the Project Site is located within an urban area, many of the related projects identified in the area would be developed within urbanized locations that fall within an acceptable distance from one or more existing fire stations. Additionally, in accordance with Fire Code requirements, if the related projects would not be within the acceptable distance from a fire station, that related project would be required to install an automatic fire sprinkler system to comply with response distance requirements. Similarly, as with the Project, related projects would be required to comply with all applicable City Building Code and Fire Code requirements regarding site access, including providing adequate emergency vehicle access. Compliance with applicable City Building Code and Fire Code requirements, including emergency vehicle access, would be demonstrated as part of LAFD's fire/life safety plan review and LAFD's fire/life safety inspection for new construction projects, as set forth in Section 57.118 of the LAMC, prior to the issuance of a building permit.

Furthermore, with regard to response times, the Project and related projects would introduce new uses to the Project area which would generate additional traffic in the vicinity of the Project

Site. Traffic from the Project and related projects would have the potential to increase emergency vehicle response times to the Project Site and surrounding properties due to travel time delays caused by the additional traffic. With the addition of Project traffic to the study intersections, two of the study intersections would experience a change to the volume-to-capacity ratio or delay that would exceed the significance thresholds. However, with implementation of the proposed signalization improvements and mitigation measures, potentially significant impacts at the two study intersections would be reduced to a less-than-significant level. Accordingly, the Project is not anticipated to substantially affect existing response times in the service area of Fire Station No. 93, and the Project would not contribute to a cumulative impact regarding response times.

Based on the above, the Project's contribution to cumulative impacts to fire protection would not be cumulatively considerable. The Project, when considered together with the related projects, would not result in substantial adverse physical impacts associated with the provision of new or physically altered governmental facilities, the construction of which would cause significant environmental impacts, in order to maintain acceptable fire protection emergency services. In any event, cumulative impacts on fire protection would be less than significant.

4. Project Design Features

The following project design feature is proposed with regard to fire protection:

Project Design Feature I-1: The Project Applicant shall consult with the Los Angeles Fire Department regarding the design of the Project.

Project Design Feature I-2: The Project shall include the installation of automatic fire sprinklers.

As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, pursuant to Mitigation Measure J-1, the Project Applicant would prepare and submit a Construction Management Plan to LADOT prior to the start of construction that would include provisions for maintaining emergency access to the Project Site during construction.

Traffic, Access, and Parking

1. Operational Impacts

a) Regional Transportation System

(1) Congestion Management Program Freeway Segment Analysis

The closest mainline freeway monitoring location to the Project Site is the US-101 monitoring location at Winnetka Avenue, approximately 2.0 miles west of the Project Site. Based on the Project trip generation and trip distribution pattern, the Project is projected to add a total of 48 trips combined in each direction to this freeway monitoring location under either access patterns. As such, the Project would not add 150 trips in either direction during either morning or afternoon peak hour. Therefore, Project impacts to a CMP mainline freeway monitoring location would be less than significant and no further analysis is required.

(2) Congestion Management Program Arterial Monitoring Station Analysis

The only arterial CMP monitoring station located within the Study Area is Intersection No. 7, Reseda Boulevard and Ventura Boulevard. The Project would add approximately 20 trips during

each peak hour, under both access patterns. Therefore, the Project would add fewer than 50 peak-hour trips at the arterial monitoring intersection closest to the Project Site. As such, Project impacts to a CMP arterial intersection would be less than significant, and no further analysis is required.

(3) Public Transit

As shown in Table 12 in the Traffic Study, in Appendix H, of the Draft EIR, the Project would generate approximately 13 net new transit trips during the A.M. and P.M. peak hour. The Study Area is served by numerous established transit routes. The peak capacity of the transit system serving the Project Site is approximately 1,800 persons during the morning peak hour and 2,060 persons during the afternoon peak hour. Even with potential growth in transit ridership by Year 2025, the Project's peak hour transit ridership of around 13 trips each hour can be easily accommodated within the available capacity of the system. Therefore, Project impacts to the existing transit system in the Study Area would be less than significant.

b) Residential Street Segments

The Project is a non-residential development. No local streets were identified in the vicinity of the Project Site that would provide a viable alternative to using arterial or collector streets. Therefore, no residential street segment analysis is required.

c) Access and Circulation

The vehicular circulation and access upon buildout of the Project is described below:

- Emergency vehicles would be provided an exclusive roadway between Driveway #3 on Burbank Boulevard and Driveway #6 on Clark Street. The emergency vehicle access roadway would travel along the north side of the New Patient Wing and the east side of the Hospital. As part of this change, emergency vehicles using Driveway #3 would not have to mix with public vehicles along the Central Driveway and Driveway #6 would only serve emergency vehicles. These changes would improve emergency vehicle access;

- Public access along the north and east sides of the Hospital (i.e., the secondary driveway) would be removed and there would no longer be public vehicular access along the north or east sides of the Hospital;

- A new public drop-off to the emergency department would be provided from the Central Driveway, which improves patient access in emergency situations;

- There would be access to the New Parking Structure near Driveway #1 on Burbank Boulevard, so drivers parking at that location would not have to travel through the Project Site on the Central Driveway to reach parking;

- The primary entrance on Burbank Boulevard (Driveway #1) would be signalized, and drivers exiting the Project Site would be allowed to turn left onto Burbank Boulevard;

- There would be a pedestrian sidewalk leading along the Central Driveway to Burbank Boulevard. With the installation of the proposed traffic signal at Driveway #1, there would also be pedestrian crosswalks across Burbank Boulevard;

- The fence along the northern edge of the Tarzana Garden Plaza parking lot would be removed, allowing vehicular access from Tarzana Garden Plaza to the New Parking Structure;

- The minor access to the adjacent retail center (Driveway #8) west of the Project Site would be closed;

- The valet pick-up and drop-off area would be slightly reconfigured as part of the Main Building Replacement; and

- New pedestrian walkways would be constructed between the New Parking Structure, along the north and south sides of the existing parking structure, and across the Central Driveway to the Hospital.

The new Project access would conform to City standards and would be designed to provide adequate sight distance, sidewalks, and/or pedestrian movement controls that would meet the City's requirements to protect pedestrian safety. In addition, the proposed driveway would be designed to limit potential impediments to visibility. The proposed implementation of the vehicular access and circulation features would improve traffic flow and pedestrian access.

The Project's two primary access points (Driveway #1 on Burbank Boulevard and Driveway #2 on Clark Street) were analyzed for potentially significant access impacts based on the L.A. CEQA Thresholds Guide. The nearest intersection to Driveway #1 is the driveway itself, which would be signalized as proposed under Project Design Feature J-1. It is analyzed as Intersection No. 20, and would operate at LOS A or B after signalization. The nearest intersection to Driveway #2 is Intersection No. 6, Reseda Boulevard & Clark Street, which would operate at C or better. Therefore, based on the L.A. CEQA Thresholds Guide, the Project would not have a significant impact on project access.

In addition, with regard to emergency vehicle access during operation, while traffic along the surrounding roadways would increase with implementation of the Project, the traffic generated by the Project would result in less than significant impacts on the study intersections analyzed in the Traffic Study with the implementation of Mitigation Measure J-2. Moreover, the Project would not include the installation of barriers that could impede emergency vehicle access within and in the vicinity of the Project Site. As such, existing emergency access to the Project Site and surrounding uses would be maintained during operation of the Project.

In summary, project impacts with regard to access and circulation would be less than significant.

d) Parking

The Project would increase total parking supply to approximately 1,500 parking spaces, which exceeds parking requirements per the LAMC and the Specific Plan. Therefore, the Project would meet its vehicular parking requirement.

The Specific Plan does not address bicycle-parking requirements. When a specific plan is silent on a particular regulation, those specific regulations set forth in the LAMC apply. The Project would develop 256,802 square feet of net new Hospital space. Based on LAMC Section 12.21.A.16, institutional uses, the Project must provide 52 long term bicycle parking spaces and 26 short-term spaces for a total of 78 spaces. The bicycle parking spaces are located in a strategic location to accommodate usage of the long and short-term bicycle spaces. Furthermore, the Project currently provides 10 showers and approximately 944 lockers and is in compliance with LAMC Section 12.21.A.16, which requires shower and personal lockers for long-term bicycle parking spaces. Therefore, impacts related to bicycle parking would be less than significant.

2. Caltrans Analysis

The Caltrans facilities analysis addresses the Project's potential impact on Caltrans facilities in accordance with the requirements of the Agreement Between City of Los Angeles and Caltrans District 7 on Freeway Impact Analysis Procedures (LADOT and Caltrans, December 2015). In accordance with Caltrans guidelines and a letter sent by Caltrans regarding the preparation of this analysis, Future Conditions (Year 2035) were analyzed in accordance with the analysis year of Mobility 2035 along with Existing Conditions (Year 2016).

a) Analyzed Facilities

Four types of analysis were conducted on Caltrans facilities. Three freeway mainline segments on US-101 were analyzed using HCM 2010 methodology to determine density, speed, and LOS, and using a V/C method to identify potential impacts. Five intersections were analyzed, including four signalized and one unsignalized. All of these intersections are freeway ramp locations, including two on Reseda Boulevard, one on Burbank Boulevard, and two on White Oak Avenue. These intersections were analyzed using HCM 2010 methodology to identify average vehicle delay and LOS. Four freeway off-ramps were analyzed for ramp queue lengths using PTV Vistro software to estimate queues. Four freeway on-ramps were reviewed to ensure that the ramp volumes do not exceed 900 vehicles per hour per lane (vphpl).

b) Evaluation Criteria

The Caltrans TIS Guide states that Caltrans' target LOS is "at the transition between LOS C and LOS D," which is generally interpreted to mean in the lower half of the range of LOS D (where the LOS is determined based on the freeway mainline density or the intersection delay). When that threshold has already been exceeded, the existing condition (or projected future condition) should be maintained with the addition of Project traffic.

However, Caltrans does not identify specific incremental criteria by which to measure the significance of impacts to freeway mainline segments or intersections and, therefore, it is not possible to identify whether a specific facility would be significantly impacted under Caltrans criteria. In the absence of specific Caltrans criteria for evaluating impacts, the analysis results are presented along with a summary of the Project's "proportionate share" of the incremental increase in traffic by year 2035. The proportionate share is calculated as the project's percentage of the total projected traffic growth on a freeway mainline segment up to year 2035.

c) Caltrans Facility Volumes

For Caltrans intersection and ramp analysis, the existing traffic volumes were used from the peak hour intersection turning movement counts from the Study Area. Existing freeway mainline segment volumes were collected from Caltrans' Performance Measurement System and year 2014 published traffic volumes and extrapolated across the three freeway mainline segments by using the peak hour traffic volumes collected at the on- and off-ramps between each segment.

In order to estimate year 2035 traffic volumes for Caltrans facilities, a process similar to that used in developing Year 2025 conditions for the intersection analysis was used. The Caltrans year 2035 analysis assumes 1 percent of growth per year for 19 years over existing conditions. When compounded annually, this results in 20.8 percent growth, which, along with the addition of Related Project traffic, forecasts the Future without Project Conditions for Year 2035. The subsequent addition of Project traffic volumes results in the Future with Project Year 2035 traffic conditions. The analysis of Caltrans facilities was based on the Shifted Access Pattern, which puts more of the Project traffic on Burbank Boulevard closer to freeway access. Overall, the differences in Project traffic on Caltrans facilities between the Existing Access Pattern and the

Shifted Access Pattern are very minor, but the Shifted Access Pattern results in a slightly more conservative analysis.

d) Freeway Mainline Segments

Three freeway mainline segments on US-101 were analyzed using the HCM 2010 methodology. As detailed in the Traffic Study, each segment operates at LOS D or E, depending on direction and peak hour, under both Existing and Existing with Project Conditions. The Project would not cause the LOS to worsen at any segment, and would only result in minor increases to traffic density at each segment.

In addition, each segment operates at LOS E or F, depending on direction and peak hour, under both Future without Project and Future with Project Conditions. Under these future conditions, the Project would not cause the LOS to worsen at any segment, and would only result in minor increases to traffic density at each segment.

Because the freeway mainline segments operate below Caltrans standards (between LOS C and D), the Project Applicant would contribute a proportionate share toward an improvement that Caltrans identifies for this section of US-101. Table 26 of the Traffic Study summarizes the calculation of the Project's proportionate share of projected future year 2035 traffic added to each of the three freeway mainline segments based on the peak hour volumes from Tables 24 and 25 of the Traffic Study. As demonstrated therein, the Project would contribute as much as 1.95 percent (and as little as 0.18 percent) of total projected growth on the mainline segments over the next 19 years until year 2035. Averaging both peak hours in both directions for the three segments, the Project's proportionate share is approximately 0.85 percent.

e) Intersections

Four signalized intersections and one unsignalized intersection under Caltrans' jurisdiction, all at US-101 on-ramps or off-ramps, were analyzed using the HCM 2010 methodology. Table 28 of the Traffic Study summarizes the results of the HCM 2010 analysis for Existing Conditions and Existing with Project Conditions for Year 2016. As shown, each of the four signalized intersections operate at LOS C or better during both peak hours, both under Existing and Existing with Project Conditions. Unsignalized Intersection No. 18, US-101 South/Eastbound On-ramp & Burbank Boulevard, has no conflicting turn movements and, therefore, no delay for vehicles passing through the intersection.

Table 29 of the Traffic Study summarizes the results of the HCM 2010 analysis for Future without Project Conditions and Future with Project Conditions for Year 2035. As shown, each of the four signalized intersections operate at LOS C or better during both peak hours, both under Future without Project and Future with Project Conditions. Unsignalized Intersection No. 18, US-101 South/Eastbound On-ramp & Burbank Boulevard, has no conflicting turn movements and, therefore, no delay for vehicles passing through the intersection.

f) Off-Ramp Queues

Four off-ramps from US-101 were analyzed to determine whether the length of the ramps were sufficient to accommodate vehicle queue lengths. PTV Vistro reports the 95th percentile queue length, in feet, for each approach lane on the off-ramp. Caltrans' primary concern at off-ramps is that queued vehicles may extend past the back of the ramp onto the mainline. To this end, the queuing analysis looks at two separate components of ramp capacity: the first is the length of each approach lane to the intersection; the second is the remaining length of the ramp to the

point where the ramp diverges from the freeway mainline. The queue may exceed the striped length of a given approach lane, but as long as there is sufficient additional queuing capacity on the ramp, it will not spill over onto the mainline.

Table 30 of the Traffic Study summarizes the results of the queuing analysis for Existing Conditions and Existing with Project Conditions for Year 2016. As shown, two off-ramps would have queues exceeding the capacity of the approach lanes during either the morning or afternoon peak hours, with and without Project traffic. However, these queues would not exceed the available storage on the ramps and, therefore, no improvements are necessary. The Project's effect on queue lengths at off-ramps under Existing with Project Conditions would be negligible and impacts would be less than significant.

As shown in the Traffic Study, all four off-ramps would have queues exceeding the capacity of the approach lanes during either the morning or afternoon peak hours, with and without Project traffic. However, these queues would not exceed the available storage on the ramps and, therefore, no improvements are necessary. The Project's effect on queue lengths at off-ramps under Future with Project Conditions would be negligible, with the exception of Off-ramp Q-3, US-101 North/Westbound Off-ramp to Reseda Boulevard, at which the queue length on the ramp could increase by approximately 88 feet during the afternoon peak hour. Even then, the ramp would still have approximately 570 feet of additional queuing space before any car would queue onto the freeway mainline.

g) On-Ramp Capacity

Four on-ramps were analyzed to determine whether the existing or projected volumes would exceed the maximum capacity of 900 vphpl established by Caltrans. Table 32 of the Traffic Study summarizes the results of the on-ramp analysis for Existing Conditions and Existing with Project Conditions for Year 2016. As shown, three of the four on-ramps operate under capacity during each peak hour, both without and with Project traffic. On-ramp No. R-3, US-101 North/Westbound On- ramp from Reseda Boulevard, currently has a morning peak hour volume of 986 vehicles (over the 900 vphpl threshold), and the Project would add three additional vehicles to that ramp during the morning peak hour.

Table 33 of the Traffic Study summarizes the results of the on-ramp analysis for Future without Project Conditions and Future with Project Conditions for Year 2035. As shown, each of the four on-ramps would operate above capacity during one or both peak hours, with and without Project traffic.

Because the on-ramps operate above capacity, the Project Applicant would contribute a proportionate share toward improvements that Caltrans identifies for these on-ramps. Table 34 of the Traffic study summarizes the calculation of the Project's proportionate share of projected future year 2035 traffic added to each of the four freeway on-ramps based on the peak hour volumes. As shown, the Project would contribute as much as 11.52 percent (and as little as 0 percent) of total projected peak hour growth on the freeway on-ramps over the next 19 years until year 2035 when averaging morning and afternoon peak hours together.

3. Cumulative Impacts

a) Operational Impacts

(1) Regional Transportation System

The Project would add less than 150 trips along the freeway monitoring station closest to the Project Site. In addition, the Project would not add more than 50 vehicle trips during the A.M. and P.M. peak hours at the CMP arterial monitoring stations nearest to the Project Site. Further, the Project would not result in significant transit impacts. Thus, no CMP or transit impacts would occur under the Project and, as a result, the Project's contribution to cumulative impacts would not be cumulatively considerable. Thus, the Project's cumulative impacts with regard to the CMP and transit would be less than significant.

(2) Access and Circulation

The Project would result in less than significant impacts related to access and circulation. Therefore, the Project's cumulative impacts would not be cumulatively considerable and impacts to access and circulation would be less than significant.

(3) Bicycle, Pedestrian, and Vehicular Safety

It is anticipated that future Related Projects would be subject to City review to ensure that they are designed with adequate access/circulation, including standards for sight distance, sidewalks, crosswalks, and pedestrian movement controls. Thus, Project impacts with regard to bicycle, pedestrian, and vehicular safety would not be cumulatively considerable, and cumulative impacts would be less than significant.

(4) Parking

With regard to parking, the parking demand associated with the Project would not contribute to the cumulative demand for parking in the vicinity of the Project Site as a result of development of the Project and Related Projects. In addition, the Project would comply with the parking requirements set forth in the LAMC and the Specific Plan for the proposed uses. Similarly, Related Projects would have been or would be subject to City review to ensure that adequate parking be provided for each of the Related Projects. Therefore, Project impacts with regard to parking would not be cumulatively considerable, and cumulative impacts would be less than significant.

4. Project Design Features

The following project design features are proposed with regard to traffic:

Project Design Feature J-1: Traffic Signal on Burbank Boulevard—The Project Applicant shall coordinate with LADOT to fund and implement the traffic signal on Burbank Boulevard at Driveway #1. With the traffic signal, left turns would be allowed from the Project Site onto westbound Burbank Boulevard (a movement which is currently restricted), and, to facilitate this movement, an exclusive left turn outbound lane would be installed within the Project Site for the left-turning vehicles. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US 101 Southbound on-ramp to the east. A pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway.

Project Design Feature J-2: Transportation Demand Management—The Project Applicant shall prepare and implement a Transportation Demand Management Plan that includes strategies to promote non-auto travel and reduce dependence on single-occupancy vehicles. The Transportation Demand Management Plan shall be subject to review and approval by the Department of City Planning and LADOT. The Transportation Demand Management Plan may include, but is not limited to, the following:

- Identify a Hospital Transportation Coordinator responsible for:

– Providing all employees with information regarding rideshare/carpool programs, transit service, and bicycle routes within the Project vicinity; and

– Posting promotional/informational materials regarding these services in a prominent location in the Hospital, such as the Hospital's Main Lobby;

- Encourage the use of bicycles, including provision of long-term and short-term bicycle spaces, showers and lockers, and provide incentives for employees who ride bicycles to the Project Site;

- Encourage the use of and provide incentives for rideshare/carpool, including designating preferential parking for registered carpools or vanpools;

- Encourage the use of and provide incentives for the use of public transportation; and

- Provide Guaranteed Ride Home service for carpool/vanpool/transit/bicycle users.

Utilities and Service Systems—Water Supply and Infrastructure

1. Water Supply

a) Construction

Construction activities for the Project would result in a temporary demand for water associated with soil compaction and earthwork, dust control, mixing and placement of concrete, equipment and site cleanup, irrigation for plant and landscaping establishment, testing of water connections and flushing, and other short-term related activities. These activities would occur incrementally throughout construction of the Project (from the start of construction to project buildout). The amount of water used during construction would vary depending on soil conditions, weather, and the specific activities being performed. However, given the temporary nature of construction activities, the short-term and intermittent water use during construction of the Project would be less than the net new water consumption of the Project at buildout. As described in the Utility Technical Report, based on a review of construction projects that are similar in size and duration to that of the Project, a conservative estimate of construction water use ranges from 1,000 to 2,000 gpd, which is less than the approximately 69,067 gpd of estimated proposed water consumption at the Project Site. Water for construction activities would be conveyed using the existing water infrastructure at the Project Site and no infrastructure improvements would be needed. Furthermore, as concluded in LADWP's 2015 UWMP, projected water demand for the City would be met by the available supplies during an average year, single-dry year, and multiple-dry year in each year from 2015 through 2040. If approved, Project construction would begin in the year 2018, and is anticipated to be completed by as early as 2022 or the latest by 2025. Therefore, the Project's temporary and intermittent demand for water during construction could be met by the City's available supplies during each year of Project construction. As such, construction-related impacts to water supply and infrastructure would be less than significant.

b) Operation

It is estimated that the Project would result in a net increase in the Project Site's average daily water demand of approximately 24,045 gpd, or approximately 27 AFY (assuming constant water

use throughout the year). It should be noted that City of Los Angeles Bureau of Sanitation wastewater generation rates do not account for water conservation features and therefore, the Project's estimated water demand is conservative. The 2015 UWMP utilized SCAG's RTP data that provide for more reliable water demand forecasts, taking into account changes in population, housing units and employment. The Project, anticipated to be complete by 2025, would be consistent with the 2016–2040 RTP/SCS growth projections anticipated for the SCAG Region and the City of Los Angeles. The Project is not expected to have an increase in the number of employees due to the decrease in number of hospital beds and relocation of existing uses to other buildings on the Project Site. Therefore, the Project's employees would be well within SCAG's employment projections for the City of Los Angeles and the SCAG Region. As such, the estimated water demand for the Project would not exceed the available supplies projected by LADWP. Thus, LADWP would be able to meet the water demand of the Project, as well as the existing and planned future water demands of its service area. Therefore, the Project's operation-related impacts on water supply would be less than significant.

2. Water Infrastructure

a) Construction

As discussed in the Utility Technical Report included as Appendix J to the Draft EIR and as summarized below, the existing off-site LADWP water infrastructure would be adequate to provide for the water flow necessary to serve the Project during operation. Thus, no upgrades to the mainlines that serve the Project Site would be required. However, the Project would require new service connections to connect to the existing water mainlines adjacent to the Project Site. The design and installation of new service connections would be required to meet applicable City standards. Installation of the new water distribution lines would primarily involve on-site trenching to place the lines below the surface, and minor off-site work to connect to the existing public water mains. Coordination with LADWP would be required prior to ground disturbance in order to identify the locations and depth of all lines. In addition, LADWP would be notified in advance of proposed ground disturbance activities in order to avoid water lines and disruption of water service.

The limited off-site connection activities could also temporarily affect access in adjacent right-of-ways. However, as discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, a Construction Management Plan would be implemented during project construction pursuant to Mitigation Measure J-1, to ensure that adequate and safe access remains available within and near the Project Site during construction activities. The Construction Management Plan would identify the location of any temporary street parking or sidewalk closures, warning signs, and access to abutting properties. Appropriate construction traffic control measures (e.g., detour signage, delineators, etc.) would also be implemented, as necessary, to ensure emergency access to the Project Site and traffic flow is maintained on adjacent right-of-ways.

Overall, construction activities associated with the Project would not require or result in the construction of new water facilities or expansion of existing facilities that could have a significant impact on the environment. In addition, the water distribution capacity would be adequate to serve the Project. Furthermore, minor off-site construction impacts associated with installation of the new service connections would be temporary in nature and would not result in a substantial interruption in water service or material inconvenience to motorists or pedestrians. As such, construction-related impacts to water infrastructure would be less than significant.

b) Operation

Water service to the Project Site would continue to be supplied by LADWP for domestic and fire protection uses. Fire flow to the proposed buildings of the Project would be required to meet City fire flow requirements. Specifically, the Project would comply with Section 57.507.3 of the LAMC, which establishes fire flow standards by development type. The Project falls within the Industrial and Commercial category, which has a required fire flow of 6,000 to 9,000 gpm from four to six fire hydrants flowing simultaneously with a residual pressure of 20 psi.

Based on the Fire Flow Availability Request results, six fire hydrants have the capacity to provide a minimum 1,500 gpm with residual pressure of 20 psi under the scenario in which all six hydrants are operating simultaneously. Therefore, LADWP would be able to supply sufficient flow and pressure to satisfy the needs of the fire suppression for the Project. Furthermore, as provided in Project Design Feature I-2, in Section IV.I, Public Services—Fire Protection, of the Draft EIR, the Project would include the installation of automatic fire sprinklers, which would reduce or eliminate the public hydrant demands.

In addition, a Service Advisory Request was submitted to LADWP in order to determine if the existing public infrastructure could meet the private water demands of the Project. Based on the SAR results summarized in the Utility Technical Report, the Project proposes to connect to the existing 8-inch main in Burbank Boulevard with a lateral that would be adequately sized to simultaneously accommodate fire demand and domestic demand. In addition, the Project would include backflow services that would be metered separately per City requirements.

In conclusion, the Project would not exceed the available capacity within the water distribution infrastructure that would serve the Project Site. Accordingly, the Project would not require or result in the construction of new off-site water facilities or expansion of existing facilities. Therefore, the Project's operational impacts on water infrastructure would be less than significant.

3. Cumulative Impacts

a) Water Supply

There are nine related projects located in the Project Site vicinity. As shown in Section IV.L, Utilities and Service Systems—Water Supply and Infrastructure, of the Draft EIR, related projects would generate a total average water demand of approximately 198,004 gpd. The estimate of the related projects' water demand is conservative as it does not account for water conservation measures that would be implemented beyond Code requirements. The net water demand of the Project would be 24,045 gpd. Accordingly, the Project in conjunction with the related projects would yield a cumulative average water demand of approximately 222,079 gpd.

As previously stated, based on water demand projections through 2040 in LADWP's 2015 UWMP, LADWP determined that it will be able to reliably provide water to its customers through the year 2040, as well as the intervening years (i.e., 2025) based on the growth projections in SCAG's RTP/SCS. With the available related projects information, the Draft EIR is able to estimate the total cumulative projects' water demand.

Compliance of the Project and other future development projects with the numerous regulatory requirements that promote water conservation would also reduce water demand on a cumulative basis. For example, certain related projects would be subject to the City's Green Building Code requirement to reduce indoor water use by at least 20 percent and all projects would be required to use fixtures that conserve water.

Overall, the LADWP's 2015 UWMP demonstrates that the City will meet all new water demands from projected population growth, through a combination of water conservation and water recycling. LADWP's 2015 UWMP specifically outlined the creation of sustainable sources of water for the City to reduce dependence on imported supplies. LADWP's 2015 UWMP also incorporates the goals of Executive Directive 5 and the City's Sustainability pLAn. LADWP is planning to achieve these goals by expanding its water conservation efforts through public education, installing high- efficiency water fixtures, providing incentives, and expanding the City's outdoor water conservation program. To increase recycled water use, LADWP is expanding the recycled water distribution system to provide water for irrigation, industrial use, and groundwater recharge.

Based on the related project list and projections provided in adopted plans, it is anticipated that LADWP would be able to meet the water demands of the Project and future growth through 2025 and beyond. Therefore, cumulative impacts associated water supply would be less than significant.

b) Water Infrastructure

The geographic context for the cumulative impact analysis on water infrastructure is the vicinity of the Project Site (i.e., the water infrastructure that would serve both the Project and specific related projects). Development of the Project and future new development in the vicinity of the Project Site would cumulatively increase demands on the existing water infrastructure system. However, as with the Project, other new development projects would be subject to LADWP review to assure that the existing public infrastructure would be adequate to meet the domestic and fire water demands of each project, and individual projects would be subject to LADWP and City requirements regarding infrastructure improvements needed to meet respective water demands, flow and pressure requirements, etc. All six fire hydrants have the capacity to provide a minimum 1,500 gpm with residual pressure of 20 psi under the scenario in which all six hydrants are operating simultaneously. Therefore, LADWP would be able to supply sufficient flow and pressure to satisfy the needs of the fire suppression for the Project. Furthermore, as provided in Project Design Feature I-2, in Section IV.I, Public Services—Fire Protection, of the Draft EIR, the Project would include the installation of automatic fire sprinklers, which would reduce or eliminate the public hydrant demands. Furthermore, LADWP, Los Angeles Department of Public Works, and the LAFD would conduct on-going evaluations of its infrastructure to ensure facilities are adequate. Therefore, Project impacts on water infrastructure would not be cumulatively considerable, and cumulative impacts on the water infrastructure system would be less than significant.

4. Project Design Features

The Project would comply with applicable regulatory requirements of the Office of Statewide Health Planning and Development (OSHPD) and the City. The Project would include conservation features such as low-flow faucets and toilets, a water efficient irrigation system, and use of water efficient landscapes.

Utilities and Service Systems—Wastewater

1. Construction

Construction activities for the Project would result in a temporary increase in wastewater generation as a result of on-site construction workers. Wastewater generation would occur incrementally throughout the construction duration of the Project, which is anticipated to

commence in 2018 and to be completed between 2022 and 2025. However, such use would be temporary and nominal when compared with the wastewater generated by the Project during operation. In addition, construction workers would typically utilize portable restrooms, which would not contribute to wastewater flows to the City's wastewater conveyance system. As such, wastewater generation from Project construction activities is not anticipated to cause a measurable increase in wastewater flows at a point where, and at a time when, a sewer's capacity is already constrained or that would cause a sewer's capacity to become constrained. For these same reasons, construction of the Project is not anticipated to generate wastewater flows that would substantially or incrementally exceed the future scheduled capacity of any one treatment plant by generating flows greater than those anticipated in the Integrated Resources Plan (IRP). In addition, most construction impacts associated with the installation of on-site wastewater facilities and off-site connections are expected to be confined to trenching and would be temporary in nature. Therefore, Project construction impacts to the wastewater conveyance or treatment system would be less than significant.

2. Operation

a) Wastewater Generation

Development of the Project would result in a net increase in wastewater flows from the Project Site. Wastewater generated by the Project was estimated using wastewater generation factors provided by the City of Los Angeles Bureau of Sanitation, for each of the proposed uses. It is estimated that the Project would generate a net increase in the average daily wastewater flow from the Project Site of approximately 7,845 gpd.

b) Wastewater Treatment

Wastewater generated by the Project would be conveyed via the existing wastewater conveyance systems for treatment at the Hyperion Water Reclamation Plant. The Project would generate a net increase wastewater flow from the Project Site of approximately 7,845 gpd, or approximately 0.008 mgd. The Project's increase in average daily wastewater flow of 0.008 mgd would represent approximately 0.005 percent of the current 175 mgd remaining available capacity of Hyperion Water Reclamation Plant. Therefore, the Project-generated wastewater would be accommodated by the existing capacity of the Hyperion Water Reclamation Plant and impacts with respect to treatment capacity would be less than significant.

Various factors, including future development of new treatment plants, upgrades and improvements to existing treatment capacity, development of new technologies, etc., will ultimately determine the available capacity of the Hyperion Service Area in 2025, the latest year by which construction of the Project is expected to be completed. While it is anticipated that future iterations of the Integrated Resources Plan would provide for improvements beyond 2020 to serve future population needs, it is conservatively assumed that no new improvements to the wastewater treatment plants would occur prior to 2025. Thus, based on this conservative assumption, the 2025 effective capacity of the Hyperion Service Area would continue to be approximately 550 million gallons per day. Similarly, the capacity of the Hyperion Water Reclamation Plant in 2025 will continue to be 450 mgd.

The Project's net increase in average daily wastewater generation of 0.008 mgd would represent approximately 0.0015 percent of the Hyperion Service Area's assumed future capacity of 550 mgd and approximately 0.0018 percent of the Hyperion Water Reclamation Plant's design capacity of 450 mgd. In addition, the Project's net increase in average daily wastewater generation of 0.008 mgd plus the current flows of approximately 275 mgd to the

Hyperion Water Reclamation Plant would represent approximately 61 percent of the Hyperion Water Reclamation Plant's assumed future capacity of 450 mgd. The Project's net increase in average daily wastewater generation of 0.008 mgd plus the current flows of approximately 338.2 mgd to the Hyperion Service Area would represent approximately 61.5 percent of the Hyperion Service Area's assumed future capacity of 550 million gallons per day. Thus, the Project's additional wastewater flows would not substantially or incrementally exceed the future scheduled capacity of any treatment plant. Impacts with respect to wastewater treatment capacity would be less than significant and no mitigation measures would be required.

c) Wastewater Infrastructure

Sewer service for the Project would be provided utilizing new or existing on-site sewer connections to the existing sewer lines adjacent to the Project Site, which includes the 8-inch sewer main on Burbank Boulevard. A Sewer Capacity Availability Request, was obtained from the City of Los Angeles Bureau of Sanitation to evaluate the capability of the existing wastewater system to serve the Project's estimated wastewater flow. Based on the current approximate flow levels and design capacities in the sewer system, and the Project's estimated wastewater flow, the City determined that the existing 8-inch sewer main on Burbank Boulevard would have adequate capacity to accommodate the additional demand generated by the Project, future growth and existing demand. The City specifically approved an additional 32,999 gpd of wastewater to be discharged to this 8-inch sewer main. The Project's net increase of 7,845 gpd would be well below the approved discharge. In addition, the Project's net increase in wastewater would represent less than 3 percent of the pipe's capacity. Furthermore, additional detailed gauging and evaluation, as required by LAMC Section 64.14, would be conducted to obtain final approval of sewer capacity and connection permit for the Project during the Project's permitting process. All Project-related sanitary sewer connections and on-site infrastructure would be designed and constructed in accordance with applicable standards.

In conclusion, the Project would not cause a measurable increase in wastewater flows at a point where, and at a time when, a sewer's capacity is already constrained or that would cause a sewer's capacity to become constrained. Thus, impacts with regard to wastewater generation and infrastructure capacity would be less than significant.

3. Cumulative Impacts

The geographic context for the cumulative impact analysis on the wastewater conveyance system is the area that includes the Project Site and the related projects that would potentially utilize the same infrastructure as the Project. The geographic context for the cumulative impact analysis on wastewater treatment facilities is the Hyperion Service Area. The Project, in conjunction with growth forecasted in the Hyperion Service Area through 2025, would generate wastewater, potentially resulting in cumulative impacts on wastewater conveyance and treatment facilities. Cumulative growth in the greater Project area through 2025 includes specific known development projects, as well as general ambient growth projected to occur.

a) Wastewater Generation

Development of the Project, in conjunction with the related projects, would result in an increase in the demand for sanitary sewer service in the Bureau of Sanitation's Hyperion Service Area. As identified in Section III, Environmental Setting, of the Draft EIR, there are nine related projects located in the Project vicinity. Assuming that each of these related projects would connect to some or all of the City sewers serving the Project Site, forecasted growth from the related projects would generate an average daily wastewater flow of approximately 198,004 gpd

or approximately 0.198 mgd. Combined with the Project's net increase in wastewater generation of 7,845 gpd (0.008 mgd), this equates to a cumulative increase in average daily wastewater flow of approximately 205,879 gpd, or 0.2 mgd.

b) Wastewater Treatment

Based on City of Los Angeles Bureau of Sanitation's average flow projections for the Hyperion Service Area, it is anticipated that the average flow in 2025 will be approximately 456 mgd. In addition, the Hyperion Service Area's total treatment capacity would be approximately 550 mgd in 2025, which is the same as its existing capacity.

The Project wastewater flow of approximately 0.008 mgd combined with the specific related projects flow of approximately 0.198 mgd and the forecasted 2025 wastewater flow of 456 mgd for the Hyperion Service Area would result in a total cumulative wastewater flow of approximately 456.2 mgd. Based on the Hyperion Service Area's estimated future capacity of approximately 550 mgd, the Hyperion Service Area is expected to have adequate capacity to accommodate the cumulative wastewater flow of approximately 456.2 mgd from the Project and related projects, and forecasted growth by 2025. The 456.2 mgd of cumulative wastewater would represent approximately 82.9 percent of the Hyperion Service Area's existing design capacity of 550 mgd. Therefore, Project impacts on the wastewater treatment systems would not be cumulatively considerable, and cumulative impacts would be less than significant.

c) Wastewater Infrastructure

The City has conducted an analyses of existing and planned capacity and determined that adequate capacity exists to serve the Project. As with the Project, new development projects occurring in the Project vicinity would be required to coordinate with the City of Los Angeles Bureau of Sanitation via a Sewer Capacity Availability Request to determine adequate sewer capacity. In addition, new development projects would be subject to LAMC Sections 64.11 and 64.12, which require approval of a sewer permit prior to connection to the sewer system. In order to connect to the sewer system, related projects in the City of Los Angeles would be subject to payment of the City's Sewerage Facilities Charge. Payment of such fees would help offset the costs associated with infrastructure improvements that would be needed to accommodate wastewater generated by overall future growth. If system upgrades are required as a result of a given project's additional flow, arrangements would be made between the related project and the City of Los Angeles Bureau of Sanitation to construct the necessary improvements. Furthermore, each related project would be required to comply with applicable water conservation programs. Therefore, Project impacts on the City's wastewater infrastructure would not be cumulatively considerable, and cumulative impacts would be less than significant.

4. Project Design Features

No specific project design features beyond those set forth in Section II, Project Description, of the Draft EIR are proposed with regard to wastewater.

Utilities and Service Systems—Energy

1. Construction

During Project construction, energy would be consumed in the form of electricity associated with the conveyance of water used for dust control and, on a limited basis, powering lights, electronic equipment, or other construction activities necessitating electrical power. As discussed below, construction activities, including the construction of new buildings and facilities, typically do not

involve the consumption of natural gas. Project construction would also consume energy in the form of petroleum-based fuels associated with the use of off-road construction vehicles and equipment on the Project Site, construction worker travel to and from the Project Site, and delivery and haul truck trips (e.g., hauling of demolition material to off-site reuse and disposal facilities).

A total of 3,025 kWh of electricity, 279,549 gallons of gasoline, and 64,043 gallons of diesel is estimated to be consumed during Project construction. Project construction is expected to be completed as early as 2022 to 2025.

a) Electricity

During construction of the Project, electricity would be consumed to supply and convey water for dust control and, on a limited basis, may be used to power lighting, electronic equipment, and other construction activities necessitating electrical power. As discussed in the Utility Technical Report, electricity would be supplied to the Project Site by existing electrical services within the Project Site and would not affect other services.

A total of approximately 3,025 kWh of electricity is anticipated to be consumed during Project construction. The electricity demand at any given time would vary throughout the construction period based on the construction activities being performed, and would cease upon completion of construction. When not in use, electric equipment would be powered off so as to avoid unnecessary energy consumption. Therefore, the use of electricity during Project construction would not be wasteful, inefficient, or unnecessary.

Construction of the Project's electrical infrastructure would primarily occur within the Project Site although some off-site construction activities to connect the Project's electrical infrastructure with primary electrical distribution lines could occur. As discussed further in the Utility Report, a new LADWP medium voltage electrical service would come off of Burbank Boulevard, directly north of the Project Site. The Project may also include a potential tie-in between the two service entrance points on Burbank Boulevard and Clark Street. All required infrastructure improvements will comply with applicable LADWP requirements, which would avoid potential impacts to existing energy systems and adjacent properties. As such, construction of the Project's electrical infrastructure is not anticipated to adversely affect the electrical infrastructure serving the surrounding uses or utility system capacity.

The estimated construction electricity usage represents approximately 0.14 percent of the estimated net annual operational demand for the Project which, as discussed below, would be within the supply and infrastructure service capabilities of LADWP. Construction of the Project would not result in an increase in demand for electricity that exceeds available supply or distribution infrastructure capabilities that could result in the construction of new energy facilities or expansion of existing facilities, the construction of which could cause significant environmental effects. Therefore, construction-related impacts to electricity supply and infrastructure would be less than significant.

b) Natural Gas

Construction activities, including the construction of new buildings and facilities, typically do not involve the consumption of natural gas. Accordingly, natural gas would not be supplied to support Project construction activities; thus there would be no demand generated by construction. However, the Project would involve installation of new natural gas connections to serve the Project Site. Since the Project Site is located in an area already served by existing

natural gas infrastructure, it is anticipated that the Project would not require extensive off-site infrastructure improvements to serve the Project Site. Construction impacts associated with the installation of natural gas connections are expected to be confined to trenching in order to place the lines below surface. Prior to ground disturbance, Project contractors would notify and coordinate with SoCal Gas to identify the locations and depth of all existing gas lines and avoid disruption of gas service to other properties. Therefore, construction of the Project would not result in an increase in demand for natural gas to affect available supply or distribution infrastructure capabilities and would not result in the construction of new energy facilities or expansion of existing facilities, the construction of which could cause significant environmental effects. Construction-related impacts to natural gas supply and infrastructure would be less than significant.

c) Transportation Energy

On- and off-road vehicles would consume an estimated 279,549 gallons of gasoline and approximately 64,043 gallons of diesel fuel throughout the Project's construction. For comparison purposes, the fuel usage during Project construction would represent approximately 0.007 percent of the 2016 annual on-road gasoline-related energy consumption and 0.009 percent of the 2016 annual diesel fuel-related energy consumption in Los Angeles County, as shown in Appendix K, of the Draft EIR.

The City has adopted several plans and regulations to promote the reduction, reuse, recycling, and conversion of solid waste going to disposal systems. These regulations include the City of Los Angeles Solid Waste Management Policy Plan, the RENEW LA Plan, and the Exclusive Franchise System Ordinance (Ordinance No. 182,986). In compliance with these plans and polices, the Project would integrate sustainable and green building techniques by incorporating various standards and guidelines to encourage solid waste recycling. Specifically, the Project design would prioritize local and regional materials made from sustainably sourced, recycled, and recyclable or rapidly renewable feedstocks, including use of rapidly renewable materials. In addition, as discussed in Section II, Project Description, at least 75 percent of construction and demolition debris from Project construction would be diverted from landfills. Thus, through compliance with the City's construction-related solid waste recycling programs and project design features, the Project would contribute to reduce fuel-related energy consumption. As such, Project construction would not result in the wasteful, inefficient, and unnecessary consumption of transportation-related energy resources.

2. Operation

During operation of the Project, energy would be consumed for multiple purposes, including, but not limited to, heating/ventilating/air conditioning (HVAC); refrigeration; lighting; and the use of electronics, equipment, and machinery. Energy would also be consumed during Project operations related to water usage, solid waste disposal, and vehicle trips. The Project's net new energy demand would be approximately 2,154 MWh of electricity per year, 4,383,987 cf of natural gas per year, 105,404 gallons of gasoline per year, and 124,309 gallons of diesel fuel per year.

a) Electricity

With consistency of the Energy Independence and Security Act, which requires approximately 25 percent greater efficiency for light bulbs by phasing out incandescent light bulbs between 2012 and 2014, buildout of the Project would result in a projected net increase in the on- site demand for electricity totaling approximately 2,154 MWh/year. In addition to complying with the

Energy Independence and Security Act, the Project Applicant would also implement: (1) Project Design Feature D-1 in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, which states that the Project would achieve the sustainability intent of the LEED-HC rating system to achieve LEED Silver certification equivalency; (2) Project Design Feature D-4 in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, which states that the Project Applicant shall install low flow bathroom faucets, kitchen faucets, toilets, and showers; and (3) Project Design Feature D-5 in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, which states the Project Applicant shall install a water efficient irrigation system. These measures would further reduce the Project's energy demand. While the project design features would serve to reduce the Project's electricity consumption, this analysis conservatively only quantified the reduction in energy demand from Project Design Feature D-4 and D-5. These two features would reduce Project related water consumption by approximately 20 percent, which would reduce the amount of electricity necessary to: (1) supply the water from the source; (2) treat the water to potable standards; and (3) distribute the water to the Project Site. Project Design Feature D-1 would reduce electricity by approximately 15 percent over Title 24 baseline model for hospitals. However, the model used to calculate electricity usage (CalEEMod) currently does not provide the capability to calculate the reduction of electricity associated with this use. Project Design Features D-2 and D-3 would result in at least 20 percent of the total parking spaces provided in the New Parking Structure capable of supporting EVSE and at least five percent of the spaces equipped with EV charging stations, respectively. It is anticipated that these measures would marginally include additional usage of electricity, but that any additional electricity usage would be offset by energy savings of gasoline and diesel from the electric vehicles using the equipment.

The Project would also include various design methods and technologies to reduce energy demand such as a centralized chiller plant with rooftop heat rejection; insulating glass that is non- reflective, treated with a non-reflective coating or applied film, or consist of back-painted, spandrel glass; appropriately oriented shading devices; high-efficiency HVAC systems and boilers; LED lighting systems; enhanced insulation to minimize solar and thermal gain; and cool roofing. In addition, the roof area of the New Parking Structure would install wiring conduits for potential future electrical solar systems. Therefore, the Project would not cause wasteful, inefficient, and unnecessary consumption of electricity during operation.

Based on LADWP's 2015 Power Integrated Resource Plan, LADWP forecasts that its total energy sales in the 2022–2023 fiscal year (the Project's buildout year) will be 24,403 GWh of electricity and total energy sales in the 2025–2026 fiscal year (a conservative estimate of project completion) will be 25,621 GWh of electricity. As such, the Project-related net increase in annual electricity consumption of 2,154 MWh/year would represent approximately 0.008 percent of LADWP's projected sales in both 2022 (the Project's build out year) and 2025 (a conservative estimate of project completion). In addition, LADWP has confirmed that the Project's electricity demand can be served by the facilities in the Project area. Furthermore, as previously described, the Project would incorporate a variety of energy conservation measures to reduce energy usage. Additionally, the Project would implement any necessary connections and upgrades required by LADWP to ensure that LADWP would be able to adequately serve the Project. Therefore, it is anticipated that LADWP's existing and planned electricity capacity and electricity supplies would be sufficient to support the Project's electricity demand. Accordingly, operation of the Project would not result in an increase in demand for electricity that exceeds available supply or distribution infrastructure capabilities that could result in the construction of new energy facilities or expansion of existing facilities, the construction of which could cause significant environmental effects.

In conclusion, operational impacts to electricity supply and infrastructure would be less than significant.

b) Natural Gas

Buildout of the Project is projected to generate a net increase in the on-site demand for natural gas totaling approximately 4,383,987 cf/year. In addition, the Project Applicant would implement Project Design Feature D-1 in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, which states that where Leadership in Energy and Efficiency and Design (LEED®) standards for Healthcare are applicable, the design of new buildings would include features so as to be capable of achieving LEED Silver certification equivalency. Therefore, the Project would not cause wasteful, inefficient, and unnecessary consumption of natural gas during operation.

The Project's estimated net increase in demand for natural gas is 4,383,987 cf/year, or approximately 12,010 cf/day. Based on the 2016 California Gas Report, the California Energy and Electric Utilities estimates natural gas consumption within SoCal Gas' planning area will be approximately 2.50 billion cf/day in 2022 (the Project's buildout year) and 2.46 billion cf/day in 2025 (a conservative estimate of project completion). The Project would account for approximately 0.001 percent of the 2022 (the Project's buildout year) and 2025 (a conservative estimate of project completion) forecasted consumption in SoCal Gas' planning area. In addition, SoCal Gas has confirmed that the Project's natural gas demand can be served by the facilities in the Project area. The Project would implement any necessary connections and upgrades required by SoCal Gas to ensure that SoCal Gas would be able to adequately serve the Project. Therefore, it is anticipated that SoCal Gas' existing and planned natural gas supplies would be sufficient to support the Project's net increase in demand for natural gas.

In conclusion, operation of the Project would not result in an increase in demand for natural gas that exceeds available supply or distribution infrastructure capabilities that could result in the construction of new energy facilities or expansion of existing facilities, the construction of which could cause significant environmental effects. Operational impacts to natural gas supply and infrastructure would be less than significant.

c) Transportation Energy

During operation, Project-related traffic would result in the consumption of petroleum-based fuels related to vehicular travel to and from the Project Site. As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, the Project Site is located approximately 0.6 mile from the Metro Orange Line (Reseda Station). In addition, Project Site is served by seven Metro bus lines, one LADOT Commuter Express bus line, and one Antelope Valley Transit Authority bus line. These transit lines would provide employees and patients/guests with various public transportation opportunities. Additionally, bicycle amenities would be installed at various locations within and around the Project Site. The Project Site is also located in a HQTA designated by SCAG, which indicates that the Project Site is an appropriate site for increased density and employment opportunities from a "smart growth," regional planning perspective. Furthermore, various Project characteristics are consistent with the California Air Pollution Control Officers Association (CAPCOA) guidance document, Quantifying Greenhouse Gas Mitigation Measures, which provides quantified emission reduction values for recommended mitigation measures, and would reduce VMT and vehicle trips to the Project Site. Measures applicable to the Project include the following; a brief description of the Project's relevance to the measure is also provided:

Increase Diversity of Urban and Suburban Developments (Mixed-Uses) (LUT-3): The Project would co-locate complementary hospital land uses in proximity to existing off-site medical office and residential uses. The increases in land use diversity and mix of uses on the Project Site would reduce vehicle trips and VMT by encouraging walking and non-automotive forms of transportation, which would result in corresponding reductions in transportation-related emissions.

Increase Transit Accessibility (LUT-5): The Project would be located approximately 0.6 mile from the Metro Orange Line (Reseda Station). The Project would also provide adequate bicycle parking spaces for employees and guests to encourage utilization of alternative modes of transportation.

Improve Design of Development (LUT-9): The Project would locate a development in an area with approximately 100 intersections per square mile which improves street accessibility and connectivity.

Provide Pedestrian Network Improvements (SDT-1): Providing pedestrian access that minimizes barriers and links the Project Site with existing or planned external streets encourages people to walk instead of drive. The Project would provide an internal pedestrian network that links to the existing off-site pedestrian network including existing off-site sidewalks, to encourage and increase pedestrian activities in the area, which would further reduce VMT and associated transportation-related emissions. Furthermore, existing pedestrian access would also be enhanced along Burbank Boulevard with the installation of a new traffic signal providing a pedestrian crosswalk.

In addition, the Project is expected to reduce VMT relative to future without Project conditions because patients would need to travel further for the same health care services. Improvements proposed on the Project Site would replace existing hospital infrastructure with updated infrastructure that would accommodate updated health care technologies. These improvements will allow the Hospital to continue to provide proximate health services for many patients within its service area. Examples of certain health care services patients would need to visit other hospitals in the city of Los Angeles if the Project improvements are not implemented include 24-hour in-house pediatric surgical resources, neonatologists (trained specifically to handle the most complex and high-risk pediatric situations), intensive care unit, vascular service (inside blood vessels), and specialty robotics. As such, the Project's siting would minimize transportation fuel consumption through the reduction of VMT.

When accounting for the measures that would be implemented to reduce VMT, the Project's estimated petroleum-based fuel usage would be approximately 105,404 gallons of gasoline and 18,905 gallons of diesel per year, or a total of 124,309 gallons of petroleum-based fuels annually. In addition, the Project would not cause wasteful, inefficient, and unnecessary consumption of petroleum-based fuel during operation. Impacts associated with operational transportation-related energy use would be less than significant.

3. Regulatory Consistency

The Project would comply with applicable regulatory requirements for the design of new buildings, as specified by OSHPD.

Furthermore, the Project would be consistent with regional planning strategies that address energy conservation. As discussed in Section IV.G, Land Use, of the Draft EIR, SCAG's 2016–2040 RTP/SCS focuses on creating livable communities with an emphasis on sustainability and

integrated planning, and identifies mobility, economy, and sustainability as the three principles most critical to the future of the region. As part of the approach, the 2016–2040 RTP/SCS focuses on reducing fossil fuel use by decreasing VMT, reducing building energy use, and increasing use of renewable sources. The Project would be consistent with the energy efficiency policies emphasized in the 2016–2040 RTP/SCS. Most notably, the Project is a hospital development, which would provide greater proximity to jobs and would be well-served by existing public transportation, including Metro, LADOT Commuter Express, and Antelope Valley Transit Authority bus lines and rail line. This is evidenced by the Project Site's location within a designated HQTA. The introduction of new job opportunities within a HQTA, as proposed by the Project, is consistent with numerous policies in the 2016–2040 RTP/SCS related to locating new jobs near transit. All of these features would serve to reduce the consumption of electricity, natural gas, and transportation fuel associated with VMT.

In conclusion, the Project would not conflict with adopted energy conservation plans, or violate state or federal energy standards. Impacts associated with regulatory consistency would be less than significant.

4. Cumulative Impacts

a) Electricity

Buildout of the Project, related projects, and additional forecasted growth in LADWP's service area would cumulatively increase the demand for electricity supplies and infrastructure capacity. LADWP forecasts that its total energy sales in the 2022–2023 fiscal year (the Project's buildout year) will be 24,403 GWh of electricity and total energy sales in the 2025–2026 fiscal year (a conservative estimate of project completion) will be 25,621 GWh of electricity. As such, the Project-related net increase in annual electricity consumption of 2,154 MWh/year would represent approximately 0.008 percent of LADWP's projected sales in both 2022 (the Project's build out year) and 2025 (a conservative estimate of project completion). Thus, although Project development would result in the use of renewable and non-renewable electricity resources during construction and operation, which could limit future availability, the use of such resources would be on a relatively small scale, would be reduced by measures rendering the Project more energy-efficient, and would be consistent with growth expectations for LADWP's service area. Accordingly, the Project's contribution to cumulative impacts related to electricity consumption would not be cumulatively considerable and, thus, would be less than significant. Furthermore, during construction and operation, other future development projects would be expected to incorporate energy conservation features, comply with applicable regulations including CALGreen and state energy standards under Title 24, and incorporate mitigation measures, as necessary.

Electricity infrastructure is typically expanded in response to increasing demand, and system expansion and improvements by LADWP are ongoing. As described in LADWP's 2015 Power Integrated Resource Plan, LADWP would continue to expand delivery capacity as needed to meet demand increases within its service area at the lowest cost and risk consistent with LADWP's environmental priorities and reliability standards. LADWP has indicated that the Power Integrated Resource Plan incorporates the estimated electricity requirement for the Project. The Power Integrated Resource Plan takes into account future energy demand, advances in renewable energy resources and technology, energy efficiency, conservation, and forecast changes in regulatory requirements. Development projects within the LADWP service area would also be anticipated to incorporate site-specific infrastructure improvements, as necessary. Each of the related projects would be reviewed by LADWP to identify necessary power facilities and service connections to meet the needs of their respective projects. Project

applicants would be required to provide for the needs of their individual projects, thereby contributing to the electrical infrastructure in the Project area. As such, the Project's contribution to cumulative impacts with respect to electricity infrastructure would not be cumulatively considerable and, thus, would be less than significant.

b) Natural Gas

Buildout of the Project, related projects, and additional forecasted growth in SoCal Gas' service area would cumulatively increase the demand for natural gas supplies and infrastructure capacity. Based on the 2016 California Gas Report, the California Energy and Electric Utilities estimates natural gas consumption within SoCal Gas' planning area will be approximately 2.50 billion cf/day in 2022 (the Project's buildout year) and 2.46 billion cf/day in 2025 (a conservative estimate of project completion).18 The Project would account for approximately 0.001 percent of the 2022 (the Project's buildout year) and 2025 (a conservative estimate of project completion) forecasted consumption in SoCal Gas' planning area. SoCal Gas' forecasts take into account projected population growth and development based on local and regional plans. Although Project development would result in the use of natural gas resources, which could limit future availability, the use of such resources would be on a relatively small scale, would be reduced by measures rendering the Project more energy-efficient, and would be consistent with regional and local growth expectations for SoCal Gas' service area. Furthermore, future development projects would be expected to incorporate energy conservation features, comply with applicable regulations including CALGreen and state energy standards under Title 24, and incorporate mitigation measures, as necessary. Accordingly, the Project's contribution to cumulative impacts related to natural gas consumption would not be cumulatively considerable and, thus, would be less than significant.

Natural gas infrastructure is typically expanded in response to increasing demand and system expansion and improvements by SoCal Gas occur as needed. It is expected that SoCal Gas would continue to expand delivery capacity if necessary to meet demand increases within its service area. Development projects within its service area would also be anticipated to incorporate site-specific infrastructure improvements, as appropriate. As such, the Project's contribution to cumulative impacts with respect to natural gas infrastructure would not be cumulatively considerable and, thus, would be less than significant.

c) Transportation Energy

Buildout of the Project, related projects, and additional forecasted growth would cumulatively increase the demand for transportation-related fuel in the state and region. At buildout, the Project's estimated petroleum-based fuel usage would be approximately 105,404 gallons of gasoline and 18,905 gallons of diesel per year, or a total of 124,309 gallons of petroleum- based fuels annually. For comparison purposes, the transportation-related fuel usage for the Project would represent approximately 0.003 percent of the 2016 annual on-road gasoline- related energy consumption and 0.003 of the 2016 annual diesel-related energy consumption in Los Angeles County, as shown in Appendix K, of the Draft EIR.

Additionally, petroleum currently accounts for 90 percent of California's transportation energy sources; however, over the last decade the state has implemented several policies, rules, and regulations to improve vehicle efficiency, increase the development and use of alternative fuels, reduce air pollutants and GHGs from the transportation sector, and reduce vehicle miles traveled which would reduce reliance on petroleum fuels. According to the CEC, gasoline consumption has declined by 6 percent since 2008, and the CEC predicts that the demand for gasoline will continue to decline over the next 10 years and that there will be an increase in the

use of alternative fuels, such as natural gas, biofuels, and electricity. As with the Project, other future development projects would be expected to reduce VMT by encouraging the use of alternative modes of transportation and other design features that promote VMT reductions.

Furthermore, the Project would be consistent with the energy efficiency policies emphasized by the 2016–2040 RTP/SCS. The Project is a hospital development, which would provide greater proximity to jobs and would be well-served by existing public transportation, including Metro, LADOT Commuter Express, and Antelope Valley Transit Authority bus lines and rail line. This is evidenced by the Project Site's location within a designated HQTA. Although there are no per capita GHG emission reduction targets for passenger vehicles set by CARB for 2040, the 2016–2040 RTP/SCS GHG emission reduction trajectory shows that more aggressive GHG emission reductions are projected for 2040. The 2016–2040 RTP/SCS would result in an estimated eight percent decrease in per capita GHG emissions by 2020, 18 percent decrease in per capita GHG emissions by 2035, and 21 percent decrease in per capita GHG emissions by 2040. By meeting and exceeding the SB 375 targets for 2020 and 2035, as well as achieving an approximately 21 percent decrease in per capita GHG emissions by 2040 (an additional three percent reduction in the five years between 2035 [18 percent] and 2040 [21 percent]), the 2016– 2040 RTP/SCS is expected to fulfill and exceed its portion of SB 375 compliance with respect to meeting the state's GHG emission reduction goals. As discussed in Section IV.D, Greenhouse Gas Emissions, of the Draft EIR, the Project results in a VMT reduction of approximately 36 percent which would be consistent with the reduction in transportation emission per capita provided in the 2016–2040 RTP/SCS. By its very nature, the 2016–2040 RTP/SCS is a regional planning tool that addresses cumulative growth and resulting environmental effects. Since the Project is consistent with the 2016–2040 RTP/SCS, its contribution to cumulative transportation energy use is not cumulatively considerable, and is, therefore, less than significant.

In conclusion, the Project's contribution to cumulative impacts related to energy consumption (i.e., electricity, natural gas, and fuel) would not result in a cumulatively considerable effect related to the wasteful, inefficient, and unnecessary consumption of energy during construction, operation, and/or maintenance; an increase in demand for electricity or natural gas that exceeds available supply or distribution infrastructure capabilities that could result in the construction of new energy facilities or expansion of existing facilities, the construction of which could cause significant environmental effects; a conflict with adopted energy conservation plans; or a violation of state or federal energy standards. As such, the Project's impacts would not be cumulatively considerable; therefore, cumulative energy impacts are concluded to be less than significant.

5. Project Design Features

The Project would include project design features designed to improve energy efficiency as set forth in Section IV.D, Greenhouse Gas Emissions. Those project design features are listed here as they would also apply to the energy analysis.

Project Design Feature D-1: Where Leadership in Energy and Efficiency and Design (LEED®) standards for Healthcare are applicable, the design of new buildings shall include features so as to be capable of achieving LEED Silver certification equivalency. Project energy savings would be 15 percent over Title 24 baseline model for hospitals.

Project Design Feature D-2: The Project Applicant shall provide at least twenty (20) percent of the total parking spaces provided in the New Parking Structure, capable of supporting future electric vehicle supply equipment (EVSE). Plans shall indicate the proposed type and location(s) of EVSE and also include raceway method(s), wiring schematics and electrical calculations to

verify that the electrical system has sufficient capacity to simultaneously charge all electric vehicles at all designated EV charging locations at their full rated amperage. Plan design shall be based upon Level 2 or greater EVSE at its maximum operating capacity. Only raceways and related components are required to be installed at the time of construction. When the application of the 20 percent results in a fractional space, round up to the next whole number. A label stating “EV CAPABLE” shall be posted in a conspicuous place at the service panel or subpanel and next to the raceway termination point.

Project Design Feature D-3: At least 5 percent of the total parking spaces provided in the New Parking Structure shall be equipped with EV charging stations. Plans shall indicate the proposed type and location(s) of charging stations. Plan design shall be based on Level 2 or greater EVSE at its maximum operating capacity. When the application of the 5 percent requirement results in a fractional space, round up to the next whole number.

Project Design Feature D-4: In non-clinical areas, the Project Applicant shall install low flow bathroom faucets, kitchen faucets, toilets, and showers.

Project Design Feature D-5: The Project Applicant shall install a water efficient irrigation system.

Further, as discussed in Section II, Project Description, of the Draft EIR, the Project would also include various sustainability features that would serve to reduce energy demand. Examples of design methods and technologies that could be implemented may include a centralized chiller plant with rooftop heat rejection; insulating glass that is non-reflective, treated with a non-reflective coating or applied film, or consist of back-painted, spandrel glass; appropriately oriented shading devices; high-efficiency HVAC systems and boilers; LED lighting systems; enhanced insulation to minimize solar and thermal gain; and cool roofing. In addition, the roof area of the New Parking Structure would install wiring conduits for potential future electrical solar systems. While the sustainability features would serve to reduce energy demand, this analysis conservatively only quantified the reduction in energy demand from Project Design Features D-4 and D-5.

G. IMPACTS FOUND TO BE LESS THAN SIGNIFICANT AFTER MITIGATION

The following impact areas were concluded by the EIR to be less than significant with the implementation of mitigation measures described in the EIR and included in the MMP. Based on that analysis and other evidence in the administrative record relating to the project, the City finds and determines that mitigation measures described in the Final EIR and included in the MMP will reduce potentially significant impacts identified for the following environmental impact categories to below the level of significance:

Air Quality

1. Construction

a) Regional Construction Impacts

Construction of the Project has the potential to create air quality impacts through the use of heavy-duty construction equipment and through vehicle trips generated from construction workers traveling to and from the Project Site. In addition, fugitive dust emissions would result from demolition and construction activities. Mobile source emissions, primarily NOX, would result from the use of construction equipment, such as dozers, loaders, and cranes. During the finishing phase of a building, paving operations and the application of architectural coatings (e.g., paints) and other building materials would potentially release VOCs. The assessment of

construction air quality impacts considers each of these potential sources. Construction emissions can vary substantially from day to day, depending on the level of activity, the specific type of operation, and, for dust, the prevailing weather conditions. As evaluated in Section IV.B, Air Quality, of the Draft EIR, construction-related daily maximum regional construction emissions would not exceed the SCAQMD daily significance thresholds for VOC, CO, SOX, PM10, and PM2.5. However, maximum regional emissions would exceed the SCAQMD daily significance thresholds for NOX during periods of heavy construction equipment use. Therefore, regional construction emissions resulting from the Project would result in a significant short-term impact without incorporation of mitigation measures.

2. Cumulative Impacts

a) Construction

The Project would comply with regulatory requirements, including SCAQMD Rule 403 requirements. In addition, the Project would comply with adopted AQMP emissions control measures. Per SCAQMD rules and mandates, as well as the CEQA requirement that significant impacts be mitigated to the extent feasible, all construction projects Basin-wide would comply with these same requirements (i.e., SCAQMD Rule 403 compliance) and would also implement all feasible mitigation measures when significant impacts are identified.

According to the SCAQMD, individual construction projects that exceed the SCAQMD's recommended daily thresholds for project-specific impacts would cause a cumulatively considerable increase in emissions for those pollutants for which the Air Basin is in non-attainment. Construction- related daily emissions at the Project Site would not exceed the SCAQMD's regional and localized significance thresholds with the exception of regional NOX. With incorporation of Mitigation Measure B-1, discussed further below, this impact would be reduced to less than significant. Therefore, construction of the Project would have a less-than-significant impact with regard to regional and localized emissions and impacts would not be cumulatively considerable.

Similar to the Project, the greatest potential for TAC emissions at each related project would generally involve DPM emissions associated with heavy equipment operations during demolition and grading/excavation activities. Construction activities at each related project would not result in a long-term (i.e., 70-year) substantial source of TAC emissions. Additionally, the SCAQMD CEQA guidance does not require a HRA for short-term construction emissions. As such, cumulative TAC emission impacts during construction would be less than significant.

3. Project Design Features

No specific project design features are proposed with regard to air quality. The Project would incorporate project design features to support and promote environmental sustainability as discussed under Section IV.D, Greenhouse Gas Emissions, of the Draft EIR. While these features are designed primarily to reduce greenhouse gas emissions, they would also serve to reduce criteria air pollutants discussed herein.

4. Mitigation Measures

The following mitigation measure is designed to reduce the Project's air quality impacts during construction.

Mitigation Measure B-1: Off-road diesel-powered equipment, equal to or greater than 50 horsepower, that will be used an aggregate of 40 or more hours during any portion of the

construction activities shall meet Tier 3 standards. The Project representative shall make available to the lead agency and SCAQMD a comprehensive inventory of off-road construction equipment. The inventory shall include the horsepower rating, engine production year, and certification of the specified Tier standard. A copy of each unit's certified tier specification, Best Available Control Technology documentation, and CARB or SCAQMD operating permit shall be available on-site at the time of mobilization of each applicable unit of equipment.

5. Findings

Changes or alterations have been required in, or incorporated into, the proposed Project that avoid or substantially lessen potential significant environmental effects on Air Quality, as identified in the EIR, to less than significant levels.

6. Rationale for Findings

Implementation of Mitigation Measure B-1 would reduce maximum regional construction emissions from 120 pounds per day to 97 pounds per day and less than the SCAQMD's 100 pounds per day regional significance threshold. As such, Project-level and cumulative impacts with regard to construction air quality would be less than significant. No adverse impacts associated with Air Quality would occur as a result of the development of the proposed Project with incorporation of Mitigation Measure B-1 set forth in the MMP.

7. Reference

For a complete discussion of environmental impacts with respect to Air Quality, see Section IV.B, Air Quality, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

Geology and Soils

1. Seismic Hazards

a) Strong Seismic Ground Shaking

The Project Site is located within the seismically active region of Southern California and would potentially be subject to strong ground motion if a moderate to strong earthquake occurs on a local or regional fault. The Project would not exacerbate existing environmental conditions related to seismic ground shaking at the Project Site because the Project would not involve mining operations, deep excavation into the earth, or boring of large areas creating unstable seismic conditions that would exacerbate ground shaking. Therefore, the following discussion about building and seismic codes is provided for informational purposes.

As discussed in the Geotechnical Report, the intensity of ground shaking at a given location depends primarily upon the earthquake magnitude, the distance from the source, and the site response characteristics. Based on review of strong-motion data at the nearest earthquake monitoring station located approximately 0.7 mile south of the Project Site, the Geotechnical Report concluded that due to the presence of relatively deep bedrock within the Project Site, accelerations at the Project Site would have been significantly lower compared to those at the nearest earthquake monitoring station during the 1994 Northridge earthquake. In addition, no structural damage to the existing buildings was observed. Notwithstanding, state and local code requirements ensure that buildings are designed and constructed in a manner that, although the buildings may sustain damage during a major earthquake, would reduce the substantial risk that buildings would collapse. The State and City mandate compliance with numerous rules related to seismic safety, including the Alquist-Priolo Earthquake Fault Zoning Act, the Alfred E.

Alquist Hospital Facilities Seismic Safety Act, the Seismic Safety Act, Seismic Hazards Mapping Act, the General Plan Safety Element, and the Los Angeles Building Code. Pursuant to those laws, the Project must demonstrate compliance with the applicable provisions of these safety requirements before permits can be issued for the construction of the Project. Accordingly, the design and construction of the Project would comply with all applicable existing regulatory requirements, the applicable provisions of the Los Angeles Building Code relating to seismic safety, and the application of accepted and proven construction engineering practices.

Based on the Geotechnical Report, the Project Site is suitable for development and the Project may be constructed using standard, accepted, and proven engineering practices considering the seismic shaking potential and geologic conditions at the Project Site. As with other development projects in the Southern California region, the Project would comply with the Los Angeles Building Code, which incorporates current seismic design provisions of the 2016 California Building Code, with City amendments. The 2016 California Building Code incorporates the latest seismic design standards for structural loads and materials as well as provisions from the National Earthquake Hazards Reduction Program to mitigate losses from an earthquake and maximize earthquake safety. The Los Angeles Department of Building and Safety is responsible for implementing the provisions of the Los Angeles Building Code. The Project would also be required to comply with the permitting requirements of OSHPD as well as the Los Angeles Department of Building and Safety, including the recommendations provided in a final, site-specific geotechnical report, as set forth below in Mitigation Measure C-1 and Mitigation Measure C-2. Through compliance with regulatory requirements and site-specific geotechnical recommendations contained in a final design-level geotechnical engineering report, the Project would not exacerbate existing environmental conditions or cause or accelerate geologic hazards related to strong seismic ground shaking, which could result in substantial damage to structures or infrastructure, or expose people to substantial risk of injury. Thus, potential impacts related to strong seismic ground shaking would be less than significant.

b) Liquefaction

According to the State of California Seismic Hazard Zones Map for the Canoga Park Quadrangle, the Project Site is located within an area susceptible to liquefaction. In addition, the Safety Element, which, as previously discussed, classifies the Project Site as part of an area that is susceptible to liquefaction. Furthermore, the City's Zoning Information and Map Access System identifies the Project Site within a liquefiable area. However, as noted in the Geotechnical Report, the groundwater level within the Project Site is not anticipated to rise above 50 feet below ground surface during the design life of the existing and proposed buildings on the Project Site. Furthermore, the Project Site did not experience liquefaction during the 1994 Northridge earthquake. Therefore, the potential for liquefaction and any associated seismically induced settlement due to liquefaction is considered low. However, seismically induced settlement due to dry dynamic settlement may occur.

According to the Geotechnical Report, loose granular sandy soils that are generally susceptible to dry dynamic settlement were identified in the upper 20 feet of several of the borings and Cone Penetrometer Tests. As provided in the Geotechnical Report, the potentially significant impact associated with liquefaction and the associated seismically induced settlement would be addressed through the removal and recompaction of the upper 20 feet of loose granular soils or other recommended ground improvement methods, as set forth in Mitigation Measure C-3. In addition, the Project would be required to comply with the permitting requirements of OSHPD as well as the Los Angeles Department of Building and Safety, including the recommendations provided in a final design-level geotechnical report, as set forth below in Mitigation Measure C-1 and Mitigation Measure C-2. The final recommendations from that report would be enforced for

the construction of the Project. The State and City also mandate compliance with numerous rules related to seismic safety. Pursuant to those laws, and the mitigation measures proposed in the Draft EIR, the Project must demonstrate compliance with the applicable provisions of these safety requirements before permits can be issued for the construction of the Project.

In conclusion, through compliance with regulatory requirements, site-specific geotechnical recommendations contained in a final design-level geotechnical engineering report, and adherence to the mitigation measures provided below, the Project would not exacerbate existing environmental conditions related to liquefaction or associated seismically induced settlement, which would result in substantial damage to structures or infrastructure, or expose people to substantial risk of injury. As such, potential impacts related to liquefaction would be reduced to a less than significant level.

c) Expansive Soils

According to the Geotechnical Report, the on-site soils underlying the Project Site are considered expansive. Therefore, potential impacts related to expansive soils would be potentially significant. As provided in the Geotechnical Report, the potentially significant impact associated with expansive soils would be addressed through the removal of the upper soils and use of non- expansive fill soils, as set forth in Mitigation Measure C-4. In addition, the Project would be required to comply with the permitting requirements of OSHPD as well as the Los Angeles Department of Building and Safety, including the recommendations provided in a final design-level geotechnical report, as set forth below in Mitigation Measure C-1 and Mitigation Measure C-2.

In conclusion, through compliance with regulatory requirements, site-specific geotechnical recommendations contained in a final design-level geotechnical engineering report, and adherence to the mitigation measures provided below, the Project would not exacerbate existing environmental conditions related to expansive soils. With implementation of the mitigation measures provided below, impacts would be reduced to a less than significant level.

2. Project Design Features

No specific project design features are proposed with regard to geology and soils.

3. Mitigation Measures

The following mitigation measures would ensure that potential impacts associated with liquefaction and any associated seismically induced settlement would be reduced to less than significant levels:

Mitigation Measure C-1: Prior to issuance of grading permits for construction of the New Parking Structure, the Project Applicant shall submit final design plans and a geotechnical engineering report to the Los Angeles Department of Building and Safety for review and approval. The design-level geotechnical engineering report shall be used for final design of the foundation system for the proposed structure and would take into consideration the engineering properties beneath the proposed structure and the projected loads. The final report shall specify exact design coefficients that are needed by structural engineers to determine the type and sizing of structural building materials. The final report shall be subject to the specific performance criteria imposed by the Los Angeles Building Code, as applicable, and the proposed structure shall be designed and constructed in accordance with applicable provisions of the Los Angeles Building Code. The final geotechnical report shall be prepared by a

registered civil engineer or certified engineering geologist and include appropriate measures to minimize seismic hazards and ensure structural safety of the proposed structure, including, but not limited to the following:

- In-place ground improvement techniques, such as stone columns or rammed aggregate piers.
- Cast-in-drilled hole concrete piles or micropiles.
- Removal of all undocumented fill.
- Conventional shallow footing foundation systems established on a minimum of two feet of engineered fill soils.
- The existing artificial fill shall be removed and replaced as engineered fill.
- Exposed soils shall be scarified to a minimum of 12 inches, moisture conditioned, and compacted to at least 95 percent relative compaction.
- Shoring system consisting of soldier piles and lagging.

Mitigation Measure C-2: The Project Applicant shall submit final design plans and a geotechnical engineering report to the California Office of Statewide Health Planning and Development for the New Patient Wing, D&T Expansion, and Main Building Replacement. The design-level geotechnical engineering report shall be used for final design of the foundation system for the proposed structures and would take into consideration the engineering properties beneath the proposed structures and the projected loads. The final report shall specify exact design coefficients that are needed by structural engineers to determine the type and sizing of structural building materials. The final report shall be subject to the specific performance criteria imposed by the California Office of Statewide Health Planning. The proposed structures shall be designed and constructed in accordance with all applicable provisions of the California Office of Statewide Health Planning and Development. The final geotechnical report shall be prepared by a registered civil engineer or certified engineering geologist and include appropriate measures to minimize seismic hazards and ensure structural safety of the proposed structures.

Mitigation Measure C-3: The Project shall remove and recompact the upper 20 feet of loose granular soils or implement other ground improvement methods to reduce the anticipated seismically induced differential settlement to less than one inch. The zone of ground improvement shall cover the building footprints and extend a minimum horizontal distance of 10 feet beyond the footprints.

Mitigation Measure C-4: To address expansive soils, the Project shall remove the upper 2 feet of expansive soils (if and where encountered) and replace with non-expansive engineered fill, or implement an equivalent measure as determined by the geotechnical report approved by the Los Angeles Department of Building and Safety, the Office of Statewide Health Planning and Development and/or the California Geological Survey.

4. Findings

Changes or alterations have been required in, or incorporated into, the proposed Project that avoid or substantially lessen potential significant environmental effects on Geology and Soils, as identified in the EIR, to less than significant levels.

5. Rationale for Findings

No adverse impacts associated with Geology and Soils would occur as a result of the development of the proposed Project with incorporation of Mitigation Measures C-1 through C-4 set forth in the MMP. Considering the investigation process required under the engineering standard of care, compliance with State laws and City regulatory requirements, technical review and approval by the California Office of Statewide Health Planning and Development, and the Los Angeles Department of Building and Safety of a design-level geotechnical engineering report, and adherence to the mitigation measures proposed above, the Project's impacts related to geology and soils would be less than significant. In addition, cumulative impacts with regard to geology and soils would be less than significant.

6. Reference

For a complete discussion of environmental impacts with respect to Geology and Soils, please see Section IV.C, Geology and Soils, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

Traffic, Access, and Parking

1. Operational Impacts

a) Intersection Levels of Service

(1) Existing with Project Conditions

The analysis of Existing with Project Conditions evaluates potential Project-related traffic impacts as compared to existing conditions during the typical weekday morning and afternoon peak periods. Under both access patterns, 16 of the 17 signalized intersections are projected to operate at LOS D or better during both the morning and afternoon peak periods under the Existing with Project Conditions. The remaining intersection, Intersection No. 14 at White Oak Avenue and Burbank Boulevard would continue to operate at LOS E in the A.M. peak periods under the Existing and Existing with Project Conditions. Furthermore, the addition of Project traffic at Intersection No. 14 at White Oak Avenue and Burbank Boulevard would result in a change to the V/C ratio that would exceed the significance thresholds. As such, traffic impacts at Intersection No. 14 White Oak Avenue and Burbank Boulevard would be significant during the A.M. peak period under Existing with Project Conditions and under both the Existing Access Pattern and the Shifted Access Pattern. However, with the implementation of Mitigation Measure J-2, this impact would be reduced to a less than significant level.

With regard to the four unsignalized intersections, under both access patterns, all of the unsignalized intersections would operate at LOS D or better during the morning and peak afternoon period under Existing with Project Conditions. Thus, signal warrant analysis under this scenario is not required.

(2) Future with Project Conditions

The Future with Project Conditions identifies the potential incremental impacts of the Project at full buildout on projected future traffic operating conditions during the typical weekday morning and afternoon peak periods by adding the net Project-generated traffic to the Future without Project traffic forecasts for the year 2025. As discussed in Section IV.J, Traffic, Access, and Parking, of the Draft EIR, 12 of the 17 signalized study intersections are projected to operate at LOS D or better during both the morning and afternoon peak periods under Future with Project

Conditions. The remaining intersections are projected to operate at LOS E or F during at least one of the peak periods. Furthermore, Intersection No. 5, Reseda Boulevard & Burbank Boulevard, would be significantly impacted by Project traffic during the morning and afternoon peak hours under Future with Project Conditions with either access pattern. Also, as under Existing with Project Conditions, Intersection No. 14, White Oak Avenue & Burbank Boulevard, would be significantly impacted by Project traffic during the morning peak hour under either access pattern in Future with Project Conditions. However, with the implementation of Mitigation Measure J-2, impacts would be reduced to a level of less than significant.

With regard to the unsignalized intersections in the Study Area, they were evaluated to determine the need for the installation of a new traffic signal or other traffic control device through a traffic signal warrant analysis. As shown in Table 18 of the Traffic Study, under both access patterns, Intersection No. 20 Project Driveway and Burbank Boulevard is projected to operate at LOS F during the afternoon peak hour. Intersection No. 21 Project Driveway and Clark Street is projected to operate at LOS E under the Existing Access Pattern and LOS D under the Shifted Access Pattern during the afternoon peak hour. As shown in Table 19, of the Traffic Study, under both access patterns, Intersection No. 20 Project Driveway and Burbank Boulevard would meet the signal warrant, and would require signalization, but the driveway on Clark Street would not. In accordance with Project Design Feature J-1, the Project Applicant proposes to signalize the Project driveway on Burbank Boulevard.

2. Cumulative Impacts

a) Operational Impacts

(1) Intersection Levels of Service

Under cumulative conditions (Future with Project Conditions), the Project would result in significant impacts to two of the 17 signalized study intersections. However, with implementation of Mitigation Measure J-2 the Project's impacts would be reduced to less than significant levels. Therefore, the Project's contribution to impacts that would occur under the future cumulative conditions would not be considerable, and cumulative impacts at all study intersections would be less than significant.

3. Project Design Features

The following project design features are proposed with regard to traffic:

Project Design Feature J-1: Traffic Signal on Burbank Boulevard—The Project Applicant shall coordinate with LADOT to fund and implement the traffic signal on Burbank Boulevard at Driveway #1. With the traffic signal, left turns would be allowed from the Project Site onto westbound Burbank Boulevard (a movement which is currently restricted), and, to facilitate this movement, an exclusive left turn outbound lane would be installed within the Project Site for the left-turning vehicles. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US 101 Southbound on-ramp to the east. A pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway.

Project Design Feature J-2: Transportation Demand Management—The Project Applicant shall prepare and implement a Transportation Demand Management Plan that includes strategies to promote non-auto travel and reduce dependence on single-occupancy vehicles. The Transportation Demand Management Plan shall be subject to review and approval by the

Department of City Planning and LADOT. The Transportation Demand Management Plan may include, but is not limited to, the following:

- Identify a Hospital Transportation Coordinator responsible for:

– Providing all employees with information regarding rideshare/carpool programs, transit service, and bicycle routes within the Project vicinity; and

– Posting promotional/informational materials regarding these services in a prominent location in the Hospital, such as the Hospital's Main Lobby;

- Encourage the use of bicycles, including provision of long-term and short term bicycle spaces, showers and lockers, and provide incentives for employees who ride bicycles to the Project Site;

- Encourage the use of and provide incentives for rideshare/carpool, including designating preferential parking for registered carpools or vanpools;

- Encourage the use of and provide incentives for the use of public transportation; and

- Provide Guaranteed Ride Home service for carpool/vanpool/ transit/bicycle users.

4. Mitigation Measures

Mitigation Measure J-1: Prior to the start of construction, the Project Applicant shall prepare a Construction Management Plan and submit it to the City for review and approval. The Construction Management Plan shall include, but not be limited to the following:

- Prohibition of construction worker parking on nearby streets;

- Temporary traffic control during all construction activities adjacent to public rights-of-way to improve traffic flow on public roadways (e.g., flag men);

- Scheduling of construction activities to reduce the effect on the traffic flow on surrounding arterial streets;

- Safety precautions for pedestrian and bicyclists through such measures as alternate routing and protection barriers as appropriate; and

- Assurance that adequate and direct access to the emergency department of the Hospital is maintained at all times.

Mitigation Measure J-2: Transportation Systems Management Improvement— The Project Applicant shall coordinate with LADOT to fund and implement the installation of closed circuit television traffic monitoring camera at Intersection No. 5, Reseda Boulevard and Burbank Boulevard, and Intersection No. 14, White Oak Avenue and Burbank Boulevard. The Project Applicant would also fund the installation of the necessary fiber optic data cables to the nearest connection points.

5. Findings

Changes or alterations have been required in, or incorporated into, the proposed Project that avoid or substantially lessen potential significant environmental effects on Traffic, Access, and Parking, as identified in the EIR, to less than significant levels.

6. Rationale for Findings

a) Operation

(1) Intersection Levels of Service

a. Existing with Project Conditions

With implementation of Mitigation Measure J-2 included above, the Project's impact at Intersection No. 14 would be reduced a less than significant level under both access patterns. Therefore, with implementation of the mitigation measures, no significant impact to intersections would occur.

b. Future with Project with Mitigation

With implementation of Mitigation Measures J-2, included above, Project-level and cumulative impacts at Intersection No. 5 and Intersection No. 14 would be reduced a less than significant level under both access patterns. Therefore, with implementation of the mitigation measures, no significant impact to intersections would occur.

7. Reference

For a complete discussion of environmental impacts with respect to traffic, access, and parking, please see Section IV.J, Traffic, Access, and Parking, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

Tribal Cultural Resources

1. Description of Effects

In compliance with SB 18, a Sacred Sites/Lands File Search was conducted by the California Native American Heritage Commission (NAHC) for the Project on November 15, 2016 (Appendix I). The results of the Sacred Sites/Lands File search indicated negative results. However, the records maintained by the NAHC and the California Resources Information System are not exhaustive, and a negative response to these searches does not preclude the existence of a cultural place. In compliance with the requirements of AB 52, the City provided formal notification of the Project on July 22, 2016. The 30-day response period for consultation requests concluded on August 21, 2016.

In response to the Gabrieleño Band of Mission Indians—Kizh Nation's request for consultation, the City held a phone consult with Mr. Andrew Salas, the Chairman of the Gabrieleño Band of Mission Indians—Kizh Nation and his team on September 9, 2016.

Mr. Salas provided maps, an article, and a book excerpt indicating that the Project Site was in an area that could impact tribal cultural resources. A second letter was received on November 28, 2016, via email from Mr. Salas, requesting the presence of a Native American monitor "during any and all ground disturbances (including but not limited to pavement removal, post holing, auguring, boring, grading, excavation and trenching) to protect any cultural resources which may be effected during construction or development." Subsequent to receipt of the

second letter from Mr. Salas, a proposal for mitigation monitoring services was sent to the City via e-mail on December 1, 2016, by Dr. Christina Swindall, a representative from the Gabrieleño Band of Mission Indians—Kizh Nation. This was in response to the two letters sent by Mr. Salas related to AB 52 and SB 18. Copies of correspondence received from the NAHC and tribal representative for the Gabrieleño Band of Mission Indians—Kizh Nation are included as Appendix I of the Draft EIR.

Consultation under AB 52 and SB 18 with the Gabrieleño Band of Mission Indians—Kizh Nation has formally concluded (refer to Appendix I). Based on the documentation provided by Mr. Andrew Salas, on behalf of the Gabrieleño Band of Mission Indians—Kizh Nation, there is evidence to warrant a Native American monitor on-site during the excavation process to identify tribal cultural resources should any be discovered during the excavation phase of construction, as detailed in Mitigation Measure K-1, below. In addition, the Project would be subject to regulatory requirements, such as CEQA Guidelines Section 15064.5, PRC Section 21083.2, Health and Safety Code Section 7050.5, and PRC Section 5097.9, to ensure that in the event tribal cultural resources are found, the resources would be properly recovered and evaluated. No communication or request for consultation was received from any other the notified tribes within the 30-day response period. With implementation of Mitigation Measure K-1 and regulatory requirements, impacts relative to tribal cultural resources would be reduced to less than significant levels.

2. Cumulative Impacts

Any cumulative impacts to tribal cultural resources would be reduced by compliance with applicable regulatory requirements in the event of inadvertent discovery. In addition, related projects would be required to comply with the consultation requirements of AB 52 to determine and mitigate any potential impacts to tribal cultural resources. Therefore, cumulative impacts to tribal cultural resources would be less than significant and would not be cumulatively considerable.

3. Project Design Features

No specific project design features are proposed with regard to tribal cultural resources.

4. Mitigation Measures

Mitigation Measure K-1: Prior to commencing any ground disturbance activities including excavating, digging, trenching, plowing, drilling, tunneling, quarrying, grading, leveling, removing peat, clearing, pounding posts, augering, backfilling, blasting, stripping topsoil or a similar activity at the Project Site, the Applicant, or its successor, shall retain and pay for archeological monitors, determined by the City's Office of Historic Resources to be qualified to identify subsurface tribal cultural resources. The archeological monitors shall observe all ground disturbance activities on the Project Site at all times the ground disturbance activities are taking place. If ground disturbance activities are simultaneously occurring at multiple locations on the Project Site, an archeological monitor shall be assigned to each location where the ground disturbance activities are occurring.

Prior to the commencement of any ground disturbance activities at the Project Site, the Applicant, or its successor, shall notify any California Native American tribes that have informed the City they are traditionally and culturally affiliated with the geographic area of the proposed Project that ground disturbance activities are about to commence and invite the tribes to observe the ground disturbance activities, if the tribes wish to monitor.

In the event that any subsurface objects or artifacts that may be tribal cultural resources are encountered during the course of any ground disturbance activities, all such activities shall temporarily cease within the area of discovery, the radius of which shall be determined by the qualified archeologist, until the potential tribal cultural resources are properly assessed and addressed pursuant to the process set forth below:

1. Upon a discovery of a potential tribal cultural resource, the Applicant, or its successor, shall immediately stop all ground disturbance activities and contact the following: (1) all California Native American tribes that have informed the City they are traditionally and culturally affiliated with the geographic area of the proposed Project; (2) and the Department of City Planning, Office of Historic Resources.

2. If the City determines, pursuant to Public Resources Code Section 21074 (a)(2), that the object or artifact appears to be a tribal cultural resource in its discretion and supported by substantial evidence, the City shall provide any affected tribe a reasonable period of time, not less than 14 days, to conduct a site visit and make recommendations to the Applicant, or its successor, and the City regarding the monitoring of future ground disturbance activities, as well as the treatment and disposition of any discovered tribal cultural resources.

3. The Applicant, or its successor, shall implement the tribe's recommendations if a qualified archaeologist, retained by the City and paid for by the Applicant, or its successor, reasonably concludes that the tribe's recommendations are reasonable and feasible.

4. In addition to any recommendations from the applicable tribe(s), a qualified archeologist shall develop a list of actions that shall be taken to avoid or minimize impacts to the identified tribal cultural resources substantially consistent with best practices identified by the Native American Heritage Commission and in compliance with any applicable federal, state or local law, rule or regulation.

5. If the Applicant, or its successor, does not accept a particular recommendation determined to be reasonable and feasible by the qualified archaeologist, the Applicant, or its successor, may request mediation by a mediator agreed to by the Applicant, or its successor, and the City. The mediator must have the requisite professional qualifications and experience to mediate such a dispute. The City shall make the determination as to whether the mediator is at least minimally qualified to mediate the dispute. After making a reasonable effort to mediate this particular dispute, the City may: (1) require the recommendation be implemented as originally proposed by the archaeologist;(2) require the recommendation, as modified by the City, be implemented as it is at least as equally effective to mitigate a potentially significant impact; (3) require a substitute recommendation be implemented that is at least as equally effective to mitigate a potentially significant impact to a tribal cultural resource; or (4) not require the recommendation be implemented because it is not necessary to mitigate any significant impacts to tribal cultural resources. The Applicant, or its successor, shall pay all costs and fees associated with the mediation.

6. The Applicant, or its successor, may recommence ground disturbance activities outside of a specified radius of the discovery site, so long as this radius has been reviewed by a qualified archaeologist and determined to be reasonable and appropriate.

7. The Applicant, or its successor, may recommence ground disturbance activities inside of the specified radius of the discovery site only after it has complied with all of the recommendations developed and approved pursuant to the process set forth in paragraphs 2 through 5 above.

8. Copies of any subsequent prehistoric archaeological study, tribal cultural resources study or report, detailing the nature of any significant tribal cultural resources, remedial actions taken, and disposition of any significant tribal cultural resources shall be submitted to the South Central Coastal Information Center (SCCIC) at California State University, Fullerton and to the Native American Heritage Commission for inclusion in its Sacred Lands File.

9. Notwithstanding paragraph 8 above, any information determined to be confidential in nature, by the City Attorney's office, shall be excluded from submission to the SCCIC or the general public under the applicable provisions of the California Public Records Act, California Public Resources Code, section 6254(r), and shall comply with the City's AB 52 Confidentiality Protocols.

5. Findings

Changes or alterations have been required in, or incorporated into, the proposed Project that avoid or substantially lessen potential significant environmental effects on Tribal Cultural Resources, as identified in the EIR, to less than significant levels.

6. Rationale for Findings

No adverse impacts associated with Tribal Cultural Resources would occur as a result of the development of the proposed Project with incorporation of Mitigation Measure K-1 set forth in the MMP. With implementation of Mitigation Measure K-1 and regulatory requirements, impacts relative to tribal cultural resources would be reduced to less than significant levels. In addition, cumulative impacts associated with tribal cultural resources would also be less than significant.

7. Reference

For a complete discussion of environmental impacts with respect to Tribal Cultural Resources, please see Section IV.K, Tribal Cultural Resources, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

H. SIGNIFICANT IMPACTS WHICH REMAIN SIGNIFICANT AFTER MITIGATION MEASURES

The Project would result in the following impacts, which are found to be significant and unavoidable:

Noise

1. Construction Noise

a) On-Site Construction Noise

Noise impacts from Project-related construction activities occurring within or adjacent to the Project Site would be a function of the noise generated by construction equipment, the location of the equipment, the timing and duration of the noise-generating construction activities, and the relative distance to noise-sensitive receptors. Construction activities for the Project would generally include demolition, site grading and excavation for the parking garage, and building construction. Each phase of construction would involve the use of various types of construction equipment and would, therefore, have its own distinct noise characteristics. Demolition generally involves the use of backhoes, front-end loaders, and heavy-duty trucks. Grading and excavation typically requires the use of earth-moving equipment, such as excavators, front-end loaders,

and heavy-duty trucks. Building construction typically involves the use of cranes, forklifts, concrete trucks, pumps, and delivery trucks. Noise from construction equipment would generate both steady-state and episodic noise that could be heard within and adjacent to the Project Site.

Individual pieces of construction equipment anticipated to be used during construction of the Project could produce maximum noise levels (Lmax) of 74 dBA to 90 dBA at a reference distance of 50 feet from the noise source. These maximum noise levels would occur when equipment is operating under full power conditions (i.e., the equipment engine at maximum speed). However, equipment used on construction sites often operates under less than full power conditions, or part power. To more accurately characterize construction-period noise levels, the average (Hourly Leq) noise level associated with each construction phase is calculated based on the quantity, type, and usage factors for each type of equipment that would be used during each construction phase. These noise levels are typically associated with multiple pieces of equipment operating on part power, simultaneously.

To present a conservative impact analysis, the estimated noise levels were calculated for a scenario in which all pieces of construction equipment were assumed to operate simultaneously and be located at the construction area nearest to the affected receptors. These assumptions represent the worst-case noise scenario because construction activities would typically be spread out throughout the Project Site, and, thus, some equipment would be farther away from the affected receptors. In addition, the noise modeling assumes that construction noise is constant, when, in fact, construction activities and associated noise levels are periodic and fluctuate based on the construction activities.

Since construction activities would occur over a period longer than 10 days for all phases, the corresponding thresholds of significance used in the construction noise analysis is an increase in the ambient Leq noise level of 5 dBA at a noise-sensitive use. The highest noise levels would be generated during the site demolition phase. Construction noise levels during the other phases of construction would be approximately 1 to 7 dBA lower than this construction phase. The off-site sensitive receptors would be shielded from the Project construction areas by existing structures (i.e., buildings and the US-101) surrounding the Project construction areas. The maximum estimated noise levels associated with construction of the Project would be below the significance threshold at all off-site sensitive receptor locations, with the exception of Receptor R1 (associated with the D&T Expansion demolition phase). It is estimated that the maximum noise level associated with demolition activities for the D&T Expansion at Receptor R1 would be approximately 71.3 dBA, which would exceed the significance threshold by 3.8 dBA. In addition, the maximum noise levels associated with the seismic upgrades would be approximately 82 dBA at Receptor R1 and 66.5 dBA at Receptor R2, which would exceed the significance thresholds at these locations by up to 14.5 dBA and 8.2 dBA, respectively.

Based on the preliminary construction phasing schedule, construction of the Project components may overlap. In addition, there is also potential for overlap of the individual sub-phases within each component. Furthermore, overlap of the Project components and the seismic upgrades may also occur. Thus, the potential for construction within phases to overlap was also evaluated. To provide for a conservative analysis, representative overlapping periods were selected for the noise analysis based on the various scenarios with the potential for the highest noise levels. As shown in Section IV.H, Noise, of the Draft EIR, the overlapping construction activities would be below the significance threshold at off-site sensitive receptor locations R3 and R4. At receptor locations R1 and R2, the estimated overlapping construction noise levels would exceed the significance threshold by up to 14.5 dBA at R1 and 8.5 dBA at R2. Therefore, noise impacts associated with the Project's on-site construction activities would be significant without mitigation measures.

During construction, nighttime construction activities could occur during limited periods during the hours of 9:00 P.M. through 7:00 A.M. Specifically, nighttime construction activities could occur during the building construction phase for the New Parking Structure and during the foundation to street level construction phase for the New Patient Wing. The nighttime construction activities for these phases of construction would be limited to concrete pouring, with a maximum of one concrete pump and two concrete trucks located on-site for the New Parking Structure component, and two concrete pumps and four concrete trucks located on-site for the New Patient Wing component. Other nighttime construction activities may be required for the seismic upgrades that are not part of the Project. However, these activities would be limited to roof work and no construction equipment would be necessary. These nighttime construction activities would not be in addition to the daytime construction activities. Rather, the potential nighttime construction activities would result from shifting certain activities from daytime hours to nighttime hours.

Pursuant to the L.A. CEQA Thresholds Guide, the significance threshold for nighttime construction would be 5 dBA above the existing nighttime ambient noise levels. Based on the location of the possible nighttime construction activities, the off-site receptors would be shielded from the construction activities by existing structures. As shown in Section IV.H, Noise, of the Draft EIR, the estimated noise levels from the nighttime construction activities would be below the existing ambient noise levels at all off-site receptor locations. As discussed above, there may also be some nighttime construction activities during the seismic upgrades phase. However, no noise generating equipment would be used during nighttime construction. Therefore, noise impacts associated with the Project's on-site nighttime construction activities would be less than significant.

2. Cumulative Impacts

The Project, together with the related projects and future growth, could contribute to cumulative noise impacts. The potential for cumulative noise impacts to occur is specific to the distance between each related project and their stationary noise sources, as well as the cumulative traffic that these projects would add to the surrounding roadway network.

a) Construction Noise

(1) On-Site Construction Noise

As indicated in Section III, Environmental Setting, of the Draft EIR, there are nine related projects identified in the vicinity of the Project Site. Noise from construction of development projects is typically localized and has the potential to affect noise-sensitive uses within 500 feet from the construction site, based on the L.A. CEQA Thresholds Guide screening criteria. Thus, noise from construction activities for two projects within 1,000 feet of each other can contribute to a cumulative noise impact for receptors located midway between the two construction sites.

Seven of the nine related projects (Related Project Nos. 1, 2, 4, 5, 6, 8, and 9) are located 1,500 to 9,500 feet from the Project Site. Based on the sound attenuation provided by distance and intervening structures (between the related projects and the Project), construction noise from the Project and these Related Projects would not be cumulatively considerable.

Related Project No. 3, a medical office building development located at 5411 Etiwanda Avenue is located across the Project Site, to the southeast. There are existing noise-sensitive uses,

including residential uses on Clark Street (i.e., receptor R1) and on the east side of Etiwanda Avenue (i.e., receptor R2). The estimated Project-related construction noise levels at receptor locations R1 and R2 would be up to 64.5 dBA and 51.4 dBA, respectively. The estimated noise level from Project construction at receptor R1 is 2 dBA above the existing daytime ambient. Receptor R1 is adjacent to Related Project No. 3. Therefore, in the event of concurrent construction activities of the Project and Related Project No. 3, cumulative construction noise impacts associated with the Project and Related Project No. 3 would exceed the 5-dBA significance threshold at receptor locations R1 and R2. Thus, in the event concurrent construction occurs, construction noise impacts resulting from both projects would be cumulatively considerable and would be considered significant.

Related Project No. 7, a mixed-use development located at 5545 Reseda Boulevard, is located approximately 500 feet west of the Project Site. The nearest noise sensitive uses to Related Project No. 7 are the multi-family residential uses on Clark Street west of Reseda Boulevard (i.e., receptor R4) that would be exposed to construction-related noise from Related Project No. 7. The estimated Project-related construction noise levels at receptor R4 would be maximum of 53.1 dBA, which is well below the existing ambient noise levels of 60.4 dBA. Therefore, in the event concurrent construction of the Project and Related Project No. 7 occurs, the Project's impacts would not be cumulatively considerable.

Related Project No. 9, a 14-unit multi-family development at 18535 Burbank Boulevard, is located approximately 860 feet northwest of the Project Site. The nearest noise sensitive uses to the Related Project No. 9 are the multi-family residential uses on Burbank Boulevard, directly to the west and south of the Related Project No. 9. Project-related construction noise at these noise sensitive receptors would be approximately 53.1 dBA (based on estimated noise level at receptor R4, which has similar distance to the Project Site). The estimated Project-related construction noise at the multi-family residential uses adjacent to Related Project No. 9 would be well below the existing ambient noise level of approximately 68.7 dBA. Therefore, construction noise from the Project and Related Project No. 9 would not be cumulatively considerable.

In conclusion, cumulative noise impacts at the nearby sensitive uses located in proximity to the Project Site and Related Project No. 3 could occur. Construction-related noise levels from the related projects would be intermittent and temporary. Noise associated with cumulative construction activities would be reduced to the degree reasonably and technically feasible through proposed mitigation measures for each individual related project and compliance with locally adopted and enforced noise ordinances. Nonetheless, if nearby Related Project No. 3 were to be constructed concurrently with the Project, significant cumulative construction noise impacts could result.

(2) Off-Site Construction Noise

In addition to the cumulative impacts of on-site construction activities, off-site construction haul trucks would have a potential to result in cumulative impacts if the trucks for the related projects and the Project were to utilize the same haul route. Specifically, based on the existing daytime ambient noise level of 62.5 dBA (Leq) measured along Clark Street at receptor location R1, it is estimated that up to 30 truck trips per hour could occur along Clark Street without exceeding the significance thresholds of 5 dBA above ambient noise levels (i.e., 67.5 dBA). Therefore, if the total number of trucks from the Project and related projects were to add up to 31 truck trips per hour along Clark Street, the estimated noise level from 31 truck trips per hour would be 67.5 dBA, which would exceed the ambient noise levels by 5 dBA and exceed the significance threshold. Since the Project would generate up to 15 truck trips per hour along Clark Street

during peak hauling days, it is conservatively assumed that truck traffic related to construction of the Project and Related Project No. 3 could cumulatively add up to 31 or more hourly truck trips. Therefore, cumulative noise due to construction truck traffic from the Project and other related projects would exceed the ambient noise levels along the haul route by 5 dBA. As such, cumulative noise impacts from off-site construction would be significant.

3. Project Design Features

The following project design features are proposed with regard to noise and vibration:

Project Design Feature H-1: Power construction equipment (including combustion engines), fixed or mobile, would be equipped with state-of-the-art noise shielding and muffling devices (consistent with manufacturers' standards). Should they be required, generators would be solar powered. All equipment would be properly maintained to assure that no additional noise, due to worn or improperly maintained parts, would be generated.

Project Design Feature H-2: Project construction would not include the use of driven (impact) pile systems.

Project Design Feature H-3: During construction, the surface of the eastern access driveway shall remain even and free of potholes in order to minimize haul/delivery trucks vibration at the adjacent medical office building.

Project Design Feature H-4: All outdoor mounted mechanical equipment would be enclosed or screened from off-site noise-sensitive receptors.

4. Mitigation Measures

As analyzed above, construction of the Project would have the potential to result in significant impacts at the off-site noise sensitive receptors. Therefore, the following measures are included to minimize the construction-related noise levels:

Mitigation Measure H-1: During construction, the Project shall implement the following measures:

- Stationary construction equipment, such as, compressors, shall be located away from sensitive receptors to the extent practical.

- During the D&T Expansion demolition phase and Seismic Upgrade construction activities, a temporary sound barrier shall be erected along the southeast property line of the Project Site (along Clark Street). The temporary sound barrier shall be minimum of 8 feet in height, constructed using a sound control blanket, and have a minimum Sound Transmission Class rating of STC-25.

5. Findings

Specific economic, legal, social, technological or other considerations make infeasible additional mitigation measures or project alternatives identified in the EIR.

6. Rationale for Findings

a) Construction Noise

(1) On-Site Construction Noise

Project-level noise impacts from on-site construction would be reduced to the extent practical through implementation of Mitigation Measure H-1 provided above. Implementation of Mitigation Measure H-1 would provide approximately 5 to 10 dBA noise reduction at receptors R1 and R2. However, construction noise levels would still exceed the 5 dBA significance threshold. As such, the temporary on-site construction noise impacts (during the demolition phase of D&T Building Expansion and during the seismic upgrades at the southern portion of the existing D&T Building) would remain significant and unavoidable.

Implementation of Mitigation Measure H-1 would reduce the cumulative construction noise levels to the extent practical. However, cumulative construction noise impacts associated with on- site noise sources would remain significant and unavoidable if nearby Related Project No. 3 were to be constructed concurrently with the Project.

(2) Off-Site Construction Noise

Project-level noise impacts from off-site construction would be less than significant. However, cumulative noise due to construction truck traffic from the Project and other related projects is conservatively assumed to exceed the ambient noise levels along the haul route by 5 dBA. As such, cumulative noise impacts from off-site construction would be significant and unavoidable.

7. Reference

For a complete discussion of environmental impacts with respect to Noise, please see Section IV.H, Noise, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

Traffic, Access, and Parking

1. Construction Impacts

Potential traffic impacts from Project construction activities could occur as a result of the following types of activities:

- Increases in truck traffic associated with export or import of fill materials and delivery of construction materials;

- Increases in automobile traffic associated with construction workers traveling to and from the Project Site;

- Reductions in existing street capacity from temporary lane closures necessary for the construction of roadway/access improvements, utility connections, and drainage facilities; and

- Blocking existing vehicle or pedestrian access to other parcels fronting streets.

The following discussion addresses these potential impacts based on the construction characteristics of the Project.

a) Peak Haul Activity

Based on projections compiled for the Project, there would be up to 63 haul trips from the site per day during peak haul activity, along with up to 30 workers. Concurrently, there would be approximately 27 delivery/concrete/haul trucks per day and 130 workers on site associated with the Main Building Replacement's grading, foundation to street level, and construction stages and the New Patient Wing's foundation to street level stage. Thus, up to 180 daily truck trips (90 each inbound and outbound) are forecast to occur during this period, with approximately 30 trips per hour (15 inbound, 15 outbound) uniformly over a six-hour hauling workday (from 9:00 A.M. to 3:00 P.M.). A quantitative analysis was conducted of potential temporary traffic impacts from this construction activity. Despite the fact that haul activity would be restricted to the hours of 9:00 A.M. to 3:00 P.M., which is outside of the commuter peak hours analyzed in preceding chapters, this construction analysis assumes that the 30 inbound and 30 outbound Passenger Car Equivalent (PCE) haul trips per hour would occur during both the morning and afternoon peak hours along the route. Construction worker trips would only affect the afternoon peak hour and were distributed throughout the Study Area in a manner similar to Project trips (though more heavily weighted to US-101 because construction workers typically do not reside within close proximity to a construction site and, therefore, are more likely to arrive via the freeway than via local streets). Construction traffic would result in a temporary significant impact at Intersection No. 5, Reseda Boulevard & Burbank Boulevard, during peak haul activity. With the implementation of the Construction Management Plan described below, the impact at this location is expected to be substantially reduced; however, it would remain a temporary significant impact.

b) Peak Worker Activity

A similar analysis of potential construction impacts was conducted during the period of peak worker activity. Based on projections compiled for the Project, there would be approximately 15 trucks from the site per day (primarily delivery trucks or concrete trucks) along with up to 300 workers as part of the New Patient Wing's construction stage during peak worker activity. Concurrently, there would be approximately 25 delivery/concrete/ haul trucks per day and 105 workers on site associated with the Main Building Replacement's construction stage and the New Patient Wing's foundation to street level stage. Construction worker traffic would result in temporary significant impacts at Intersections No. 5, Reseda Boulevard & Burbank Boulevard, and No. 6, and Reseda Boulevard & Clark Street, in the afternoon peak hour during peak worker activity. With the implementation of the Construction Management Plan described below, the impacts at these locations are expected to be substantially reduced; however, they would remain temporary significant impacts.

During construction, adequate parking for construction workers would be secured at or in the vicinity of the Project Site. The New Parking Structure would be constructed prior to the New Patient Wing, and upon its completion, substantial additional on-site parking would be available for construction workers. Nonetheless, restrictions against workers parking in the public right-of-way in the vicinity of (or adjacent to) the Project Site would be included as part of the Construction Management Plan included as Mitigation Measure J-1, below.

c) Peak Concrete Pour

On a single day during the New Patient Wing's foundation to street level stage, there would be a large concrete pour requiring approximately 100 concrete trucks. The New Patient Wing's foundation to street level stage also requires 45 workers on site. Concurrently, there are estimated to be an additional 15 delivery/concrete/haul trucks and 60 workers on-site associated with the Main Building Replacement construction stage. The peak concrete pour day would experience a temporary significant impact at Intersection No. 5, Reseda Boulevard &

Burbank Boulevard, during both peak hours. Intersection No. 5 was also projected to be impacted, prior to mitigation, by Project traffic as summarized in Chapters 5 and 6 of the Traffic Study, included as Appendix H of the Draft EIR. With the implementation of the Construction Traffic Management Plan described below, the impact at this location is expected to be substantially reduced; however, it would remain a temporary significant impact.

d) Nighttime Construction

As discussed above, Project construction may also include nighttime construction between the hours of 9:00 P.M. and 7:00 A.M. As many as 30 workers could be on-site for overnight work, potentially leaving the Project Site shortly after 7:00 A.M. Nighttime construction could also include delivery/concrete/haul truck activity, but the truck activity would occur during the nighttime construction period and therefore a minimal number of truck departures would occur at or shortly after 7:00 A.M. Worker and truck trips occurring shortly after 7:00 A.M. would occur during the morning peak period (which is 7:00 A.M. to 10:00 A.M. in this report) but before the morning peak hour, which begins at 7:30 or later based on the peak-period traffic counts conducted for this study and provided in Appendix B of the Traffic Study, provided in Appendix H, of the Draft EIR. Therefore, this nighttime activity would not affect traffic conditions during the morning peak hour.

e) Potential Impacts of Access, Transit, and Parking

Construction activities, with the exception of the signalization of the Project driveway at Burbank Boulevard, are expected to be fully contained within the Project Site boundaries. Temporary traffic controls and/or flag men would be provided to direct traffic in the vicinity of the Project driveways that are used for construction access as required in the Construction Management Plan. Travel lanes would be maintained in each direction on Burbank Boulevard and Clark Street throughout the construction period, and emergency access would not be impeded. Similarly, existing transit routes and stops would not be affected by Project construction. With regard to non- construction related deliveries during construction of the Project, temporary parking on-site would be provided for large and small delivery trucks to stage, unload, and off-load. In addition, temporary access routes would be provided into the Project Site depending on the phase of construction. These measures would be included as part of the Construction Management Plan and would not impact traffic.

Project construction is not expected to create hazards for roadway travelers, bus riders, or parkers, so long as commonly practiced safety procedures for construction are followed. Such procedures and other measures (e.g., to address temporary traffic control, lane closures, sidewalk closures, etc.) have been incorporated into the Construction Management Plan set forth below in Mitigation Measure J-1. The construction-related impacts associated with parking, access and transit are anticipated to be less than significant, and the implementation of the Construction Management Plan described below in Mitigation Measure J-1 would further reduce those impacts.

2. Cumulative Impacts

a) Construction Impacts

The construction of nine Related Projects is anticipated in the Project area. These nine Related Projects are dispersed throughout the Study Area and would draw upon a workforce from all parts of the Los Angeles region. It is anticipated that many of the construction workers would arrive and depart the individual construction sites during off-peak hours, thereby minimizing

construction-related trips during the A.M. and P.M. peak traffic periods. Nonetheless, the potential exists for the construction-related activities and/or haul routes of the Project and the Related Projects to overlap particularly with respect to Related Projects that access US-101 near the Project Site. Specifically, there is a potential for these Related Projects and the Project to use the same haul routes at the same time. In addition, as with the Project, other nearby Related Projects could require temporary lane closures during construction. Further, it is anticipated that the Related Projects would be required to prepare a Construction Management Plan to ensure that potential construction-related impacts are reduced. Nonetheless, to the extent that construction trips of Related Projects were to occur concurrently with the Project, cumulative construction traffic impacts would occur.

The Project would not require substantial roadway and/or sidewalk closures to the extent that a hazard to roadway travelers, including police and fire department staff, and/or pedestrians would occur. Furthermore, no transit stops are located in or adjacent to the Project Site. Therefore, the Project's impact to access and safety and to transit during construction would not be cumulatively considerable and would be less than significant.

3. Project Design Features

The following project design features are proposed with regard to traffic:

Project Design Feature J-1: Traffic Signal on Burbank Boulevard—The Project Applicant shall coordinate with LADOT to fund and implement the traffic signal on Burbank Boulevard at Driveway #1. With the traffic signal, left turns would be allowed from the Project Site onto westbound Burbank Boulevard (a movement which is currently restricted), and, to facilitate this movement, an exclusive left turn outbound lane would be installed within the Project Site for the left-turning vehicles. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US 101 Southbound on-ramp to the east. A pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway.

Project Design Feature J-2: Transportation Demand Management—The Project Applicant shall prepare and implement a Transportation Demand Management Plan that includes strategies to promote non-auto travel and reduce dependence on single-occupancy vehicles. The Transportation Demand Management Plan shall be subject to review and approval by the Department of City Planning and LADOT. The Transportation Demand Management Plan may include, but is not limited to, the following:

- Identify a Hospital Transportation Coordinator responsible for:

– Providing all employees with information regarding rideshare/carpool programs, transit service, and bicycle routes within the Project vicinity; and

– Posting promotional/informational materials regarding these services in a prominent location in the Hospital, such as the Hospital's Main Lobby;

- Encourage the use of bicycles, including provision of long-term and short term bicycle spaces, showers and lockers, and provide incentives for employees who ride bicycles to the Project Site;

- Encourage the use of and provide incentives for rideshare/carpool, including designating preferential parking for registered carpools or vanpools;

- Encourage the use of and provide incentives for the use of public transportation; and

- Provide Guaranteed Ride Home service for carpool/vanpool/ transit/bicycle users.

4. Mitigation Measures

Mitigation Measure J-1: Prior to the start of construction, the Project Applicant shall prepare Construction Management Plan and submit it to the City for review and approval. The Construction Management Plan shall include, but not be limited to the following:

- Prohibition of construction worker parking on nearby streets;

- Temporary traffic control during all construction activities adjacent to public rights-of-way to improve traffic flow on public roadways (e.g., flag men);

- Scheduling of construction activities to reduce the effect on the traffic flow on surrounding arterial streets;

- Safety precautions for pedestrian and bicyclists through such measures as alternate routing and protection barriers as appropriate;

- Assurance that adequate and direct access to the emergency department of the Hospital is maintained at all times; and

Mitigation Measure J-2: Transportation Systems Management Improvement— The Project Applicant shall coordinate with LADOT to fund and implement the installation of closed circuit television traffic monitoring camera at Intersection No. 5, Reseda Boulevard and Burbank Boulevard, and Intersection No. 14, White Oak Avenue and Burbank Boulevard. The Project Applicant would also fund the installation of the necessary fiber optic data cables to the nearest connection points.

5. Findings

Specific economic, legal, social, technological or other considerations make infeasible additional mitigation measures or project alternatives identified in the EIR.

6. Rationale for Findings

a) Construction

As provided above, Mitigation Measure J-1 would require the preparation and implementation of a Construction Management Plan that would require scheduling of construction- related deliveries, including haul trips, to occur outside the commuter peak hours to the extent feasible. The Construction Management Plan would also require temporary traffic control during all construction activities adjacent to public rights-of-way to improve traffic flow on public roadways (e.g., flag men). However, even with implementation of the Construction Management Plan, temporary significant impacts at Intersections No. 5, Reseda Boulevard & Burbank Boulevard, and No. 6, Reseda Boulevard & Clark Street, in the afternoon peak hour during peak worker activity would occur. Intersection No. 5 and Intersection No. 6 would remain temporarily significant and unavoidable.

The Construction Management Plan would also include safety precautions for pedestrians and bicyclists such as alternate routing and protection barriers, as appropriate, and would ensure

that adequate and safe access remains available within and surrounding the Project Site. In addition, Project construction is not expected to create hazards for roadway travelers, bus riders, or parkers, so long as commonly practiced safety procedures for construction are followed. Furthermore, implementation of the Construction Management Plan described above would further reduce impacts. Overall, construction-related impacts associated with parking, access and transit would be less than significant.

7. Reference

For a complete discussion of environmental impacts with respect to traffic, access, and parking, please see Section IV.J, Traffic, Access, and Parking, of the Draft EIR and Section II, Corrections and Additions, of the Final EIR.

I. ALTERNATIVES TO THE PROPOSED PROJECT

A. Summary of Findings

Based upon the following analysis, the City finds, pursuant to CEQA Guidelines section 15096(g)(2), that no alternative within its powers would substantially lessen or avoid any significant effect the Project would have on the environment.

B. Project Objectives

An important consideration in the analysis of alternatives to the proposed Project is the degree to which such alternatives would achieve the objectives of the proposed Project. To facilitate this comparison, the objectives of the proposed Project contained in Section II, Project Description, of the Draft EIR were compared to the alternatives.

The Project's specific objectives are as follows:

- Consistent with the Health and Wellness Element of the City's General Plan, improve Angelenos' health and well-being by providing improved access to quality healthcare through the upgrade of existing hospital facilities that accommodates updated health care technologies and updated seismic standards that meet state law requirements.

- Provide continued health care services for the San Fernando Valley consistent with the City's Health and Wellness Element policy to encourage the equitable distribution of health service providers to ensure that every Angeleno has access to preventative care and medical treatment.

- Provide adequately sized facilities that accommodate private patient rooms, expanded emergency department space, and expanded diagnostic and treatment areas to meet patient needs and house modern technologies.

- Integrate patient care and services with patient rooms by providing larger single bed rooms to allow for provision of services in patient rooms, thereby increasing convenience for patients and efficiency of care.

- Improve access to emergency services, consistent with the City's Health and Wellness Element policy to encourage access to emergency services.

• Implement a design that provides a centralized entrance to the Hospital, as well as connectivity between patient rooms, departments, and health care services to ensure the safe, efficient, and expedient movement of patients, doctors, employees, and visitors that is needed for the provision of quality care.

• Foster a built environment that promotes health and well-being, consistent with the City's Health and Wellness Element policy, and enhances the overall patient experience indoors as well as outdoors through the incorporation of landscaped gardens and pathways that provide sufficient and convenient access to transportation options including walking, bicycling, and vehicle parking within the Project Site.

• Invest in long-term and sustainable improvements in health care by providing patient buildings that incorporate sustainable design and energy conservation.

• Redesign existing site access and internal circulation to incorporate the new buildings and to enhance safety and internal circulation for private vehicles, bicycles, pedestrians, and emergency vehicles while minimizing potential vehicular conflicts on surrounding streets.

C. Project Alternatives

In accordance with CEQA Guidelines Section 15126.6(c), an EIR should identify any alternatives that were considered for analysis but rejected as infeasible and briefly explain the reasons for rejection. According to the CEQA Guidelines, among the factors that may be used to eliminate alternatives from detailed consideration is the alternative's failure to meet most of the basic project objectives, the alternative's infeasibility, or the alternative's inability to avoid significant environmental impacts. As discussed in Section V, Alternatives, of the Draft EIR, several alternatives were considered and three were retained for further analysis in the EIR as discussed below.

A. Alternative A: No Project/No Build Alternative

i. Description of Alternative

In accordance with the CEQA Guidelines, the No Project Alternative for a development project on an identifiable property consists of the circumstance under which the project does not proceed. Section 15126.6(e)(3)(B) of the CEQA Guidelines states in part that, "in certain instances, the No Project Alternative means 'no build' wherein the existing environmental setting is maintained." Accordingly, for purposes of this analysis, Alternative 1, the No Project/No Build Alternative, assumes that the Project would not be approved, no new permanent development would occur within the Project Site, and the existing environment would be maintained. Thus, the physical conditions of the Project Site would generally remain as they were at the issuance of the Notice of Preparation. Specifically, the existing Hospital, Magnetic Resonance Imaging (MRI) Center, Tarzana Garden Plaza, Cube Medical Office Building, eight modular buildings, parking structure, and various surface parking areas would continue to operate on the Project Site and new building construction or building expansion would not occur. The site plan under Alternative 1 would resemble existing conditions, as illustrated in Figure II-3 in Section II, Project Description, of the Draft EIR. In addition, Alternative 1 would not include the Main Building Replacement or other seismic improvements under Senate Bill 1953.

ii. Impact Summary of Alternative A

Alternative A would avoid the Project's significant and unavoidable impacts related to on-site noise and traffic during construction. In addition, Alternative 1 would avoid the Project's potentially significant cumulative on- and off-site construction noise impacts and construction traffic impacts. Impacts associated with the remaining environmental issues would be less than the less-than- significant impacts of the Project.

iii. Finding

Overall, Alternative A would reduce adverse environmental impacts when compared with the development of the proposed Project. Therefore, this Alternative would be an environmentally superior alternative to the Project. However, Alternative A would not address any of the project objectives. It is found pursuant to Public Resources Code Section 21081(a)(3), that specific economic, legal, social, technological, or other considerations, including considerations identified in Section XII of these Findings (Statement of Overriding Considerations), make infeasible the No Project Alternative described in the EIR.

iv. Rationale for Finding

Under the No Project/No Build Alternative, the existing hospital uses and parking areas would continue to operate on the Project Site, and no improvements to the Hospital would occur. As such, Alternative 1 would not meet the underlying purpose of the Project or the Project objectives. Specifically, Alternative 1 would not:

- Consistent with the Health and Wellness Element of the City's General Plan, improve Angelenos' health and well-being by providing improved access to quality healthcare through the upgrade of existing hospital facilities that accommodates updated health care technologies and updated seismic standards that meet state law requirements;

- Provide continued health care services for the San Fernando Valley consistent with the City's Health and Wellness Element policy to encourage the equitable distribution of health service providers to ensure that every Angeleno has access to preventative care and medical treatment;

- Provide adequately sized facilities that accommodate private patient rooms, expanded emergency department space, and expanded diagnostic and treatment areas to meet patient needs and house modern technologies;

- Integrate patient care and services with patient rooms by providing larger single bed rooms to allow for provision of services in patient rooms, thereby increasing convenience for patients and efficiency of care;

- Improve access to emergency services, consistent with the City's Health and Wellness Element policy to encourage access to emergency services;

- Implement a design that provides a centralized entrance to the Hospital, as well as connectivity between patient rooms, departments, and health care services to ensure the safe, efficient, and expedient movement of patients, doctors, employees, and visitors that is needed for the provision of quality care;

- Foster a built environment that promotes health and well-being, consistent with the City's Health and Wellness Element policy, and enhances the overall patient experience indoors as well as outdoors through the incorporation of landscaped gardens and pathways that provide

sufficient and convenient access to transportation options including walking, bicycling, and vehicle parking within the Project Site;

- Invest in long-term and sustainable improvements in health care by providing patient buildings that incorporate sustainable design and energy conservation; and

- Redesign existing site access and internal circulation to incorporate the new buildings and to enhance safety and internal circulation for private vehicles, bicycles, pedestrians, and emergency vehicles while minimizing potential vehicular conflicts on surrounding streets.

Overall, the No Project/No Build Alternative would not achieve the Project's underlying purpose of providing the community with access to modern health care facilities to provide quality care, including free and low-cost health care services. In addition, Alternative A would not include a traffic signal at the driveway on Burbank Boulevard, which would allow for left turns from the Project Site onto westbound Burbank Boulevard from a second outbound lane within the Project Site. Alternative A would also not include an eastbound through lane or the installation of a pedestrian crosswalk. Furthermore, without meeting the OSHPD seismic requirements, certain operations of the Providence Tarzana Medical Center would not be able to continue. Additionally, as Alternative 1 would no longer include improvements to replace existing hospital infrastructure with updated infrastructure that would accommodate updated health care technologies, the Hospital would no longer be able to continue to provide proximate health services for many patients within its service area.

B. Alternative B: OSPHD Improvements Alternative

i. Description of Alternative

Alternative B, the OSHPD Improvements Alternative, would include only Office of Statewide Health Planning and Development (OSHPD) improvements to the Project Site, which would consist of the seismic retrofit of the Main Building, the Existing Patient Building, and the Ancillary Wing. The existing MRI Center and eight modular buildings would not be removed, and would continue to operate on the Project Site. The Tarzana Garden Plaza, Cube Medical Office Building, Existing Parking Structure, and various surface parking areas would also remain unchanged.

The total floor area of the Providence Tarzana Medical Center would remain the same under Alternative B as under existing conditions. In addition, similar to existing conditions, Alternative B would provide a total of 249 beds. Since Alternative B would require limited grading and excavation, and would only include construction activities necessary to retrofit the Main Building, the Existing Patient Building, and the Ancillary Wing, overall construction activities and duration would be reduced when compared to the Project. In addition, the implementation of Alternative B would not require a General Plan Amendment, a Specific Plan Amendment, a Vesting Zone and Height District Change, a Major Development Project Conditional Use Permit, a Zone Variance, Waiver of Dedications and Improvements, or a Vesting Tentative Tract Map.

ii. Impact Summary of Alternative B

Alternative B would likely avoid the Project's significant and unavoidable impacts related to traffic during construction. However, cumulative impacts associated with construction traffic may occur. In addition, like the Project, significant Project and cumulative impacts related to noise would result from on-site construction activities and cumulative impacts related to noise would result from off-site construction activities, although such impacts would be reduced overall when

compared with the Project. Although Alternative B would not result in any operational impacts to surface water hydrology or surface water quality, surface water hydrology and surface water quality would improve under the Project conditions due to the proposed new landscape areas and BMPs that would be implemented as part of the Project. Impacts associated with the remaining environmental issues, including aesthetics, views, light/glare, and shading during construction and operation; regional emissions, localized emissions, and toxic air contaminants during construction; regional emissions and localized emissions during operation; geology and soils, hazards and hazardous materials; surface water hydrology during construction; surface water quality during construction; groundwater hydrology during construction and operation; groundwater quality during construction and operation; land use; noise during construction and operation; fire protection during construction and operation; traffic, access, and parking during construction and operation; tribal cultural resources, water supply and infrastructure during construction and operation; wastewater during construction and operation; and energy during construction and operation, would be less than the less-than-significant and less-than-significant-with-mitigation impacts of the Project.

iii. Finding

Overall, Alternative B would reduce some adverse environmental impacts when compared with the development of the proposed Project but would not eliminate all of the proposed Project's significant impacts. Alternative B would not fully meet any of the proposed Project's objectives. Rather, this Alternative would only partially meet or be incompatible with some of the proposed Project's objectives. It is found pursuant to Public Resources Code Section 21081(a)(3), that specific economic, legal, social, technological, or other considerations, including considerations identified in Section XII of these Findings (Statement of Overriding Considerations), make infeasible Alternative B described in the EIR.

iv. Rationale for Finding

Under the OSHPD Improvements Alternative, the Providence Tarzana Medical Center would continue to operate under existing conditions and no new development or building expansions would occur. As such, Alternative B would not meet the underlying purpose of the Project to provide the community with access to modern health care facilities to provide quality care, including free and low-cost health care services. In addition, Alternative B would not meet the Project's objectives to:

- Provide adequately sized facilities that accommodate private patient rooms, expanded emergency department space, and expanded diagnostic and treatment areas to meet patient needs and house modern technologies;

- Integrate patient care and services with patient rooms by providing larger single bed rooms to allow for provision of services in patient rooms, thereby increasing convenience for patients and efficiency of care;

- Improve access to emergency services, consistent with the City's Health and Wellness Element policy to encourage access to emergency services;

- Implement a design that provides a centralized entrance to the Hospital, as well as connectivity between patient rooms, departments, and health care services to ensure the safe, efficient, and expedient movement of patients, doctors, employees, and visitors that is needed for the provision of quality care;

- Foster a built environment that promotes health and well-being, consistent with the City's Health and Wellness Element policy, and enhances the overall patient experience indoors as well as outdoors through the incorporation of landscaped gardens and pathways that provide sufficient and convenient access to transportation options including walking, bicycling, and vehicle parking within the Project Site;

- Invest in long-term and sustainable improvements in health care by providing patient buildings that incorporate sustainable design and energy conservation; and

- Redesign existing site access and internal circulation to incorporate the new buildings and to enhance safety and internal circulation for private vehicles, bicycles, pedestrians, and emergency vehicles while minimizing potential vehicular conflicts on surrounding streets.

In addition, Alternative B would not include a traffic signal at the driveway on Burbank Boulevard, which would allow for left turns from the Project Site onto westbound Burbank Boulevard from an exclusive left-turn outbound lane within the Project Site. Additionally, Alternative B would not include an eastbound through lane or the installation of a pedestrian crosswalk.

C. Alternative C: Reconfigured Site Plan Alternative

i. Description of Alternative

Alternative C, the Reconfigured Site Plan Alternative, would include the same components as the Project, but under a reconfigured plan. Specifically, the Existing Parking Structure located just north of the existing Cube Medical Office Building would be removed and replaced with the New Patient Building and D&T Expansion as shown in Figure V1 on page V-44. The new building would have a maximum of six stories and would range in height from approximately 45 feet for the D&T Expansion to approximately 120 feet for the New Patient Building. The total floor area for the New Patient Building and D&T Expansion would be the same as the floor area proposed under the Project. Accordingly, Alternative C would also provide 244 new patient beds, similar to the Project. The New Patient Building and D&T Expansion would also include a basement, which would be allocated for inpatient pharmacy, pharmacy storage, and janitorial supply storage. Furthermore, the emergency department would be expanded under Alternative C and would be located in the proposed New Patient Building. Under Alternative C, the Main Building Replacement would occur, but would no longer serve as the main entry point to the entire Hospital as Alternative C would include a New Patient Building, D&T Expansion, and an emergency department that would be separate from the existing Hospital. The central utility plant would be renovated at its existing location (Central Utility Plant Renovation). In addition, the existing above-ground emergency generators would be consolidated in one area east of the proposed Central Utility Plant Renovation. This area would be fully screened around the perimeter. As the Existing Parking Structure would be removed, construction of a New Parking Structure located directly west of the proposed New Patient Building and D&T Expansion would occur. The new nine-level above-grade parking structure would provide 1,177 parking spaces and would have an approximate height of 90 feet, which would be taller than the New Parking Structure proposed under the Project, which would have an approximate height of 60 feet under the Project. Similar to the Project, construction for Alternative C is anticipated to be completed as early as 2022 to 2025.

Similar to the Project, Alternative C would include the removal of the eight existing modular buildings and MRI Center currently located on the northern portion of the Project Site. Further, Alternative C would also provide new landscaping and trees throughout the Project Site to buffer hospital uses, enhance the overall patient experience, and augment the green space in the neighborhood. Specifically, landscaping would be expanded in the areas where the MRI Center and modular buildings are currently located. Furthermore, under Alternative C, the paseo would continue to link the existing Hospital and proposed New Patient Building and D&T Expansion with the New Parking Structure. However, Alternative C would not include the Healing Garden as the areas in Alternative C would not be conducive to a quiet area of respite for patients, visitors, and staff. Specifically, while Healing Garden could be placed just north of the proposed New Patient Building, this area is directly adjacent to the ambulance driveway and without a buffer from traffic noise from Burbank Boulevard and the US-101. In addition, the Healing Garden could be placed northeast of the existing Hospital. However, this location would also not be buffered from traffic noise and would be inconvenient for patients and guests in the New Patient Building to access.

Architectural elements, lighting and signage would also be similar to that of the Project. In addition, Alternative C would require similar discretionary actions as the Project. Overall, the peak construction activities would be similar to that of the Project. However, the duration of construction under Alternative C would be greater than that of the Project due to the extended demolition period required to demolish the Existing Parking Structure.

ii. Impact Summary of Alternative C

Alternative C would not eliminate the Project's significant and unavoidable impacts from on- site construction noise and construction traffic. In addition, Alternative C would not eliminate the Project's potentially significant on- and off-site cumulative noise impacts or cumulative construction traffic impacts. Furthermore, impacts related to aesthetics during construction, light and glare during construction, TACs during construction, and energy during construction would be greater than the Project as Alternative C would also include demolition of the Existing Parking Structure. All other impacts would be similar to those of the Project.

iii. Finding

Overall, Alternative C would not reduce adverse environmental impacts when compared with the development of the proposed Project and would not eliminate any of the proposed Project's significant impacts. Alternative C would meet or partially meet some of the proposed Project's objectives, but to a lesser extent than the proposed Project, and would not meet some of the Project objectives due to the modified building layout. It is found pursuant to Public Resources Code Section 21081(a)(3), that specific economic, legal, social, technological, or other considerations, including considerations identified in in the Statement of Overriding Considerations, make infeasible Alternative C described in the EIR.

iv. Rationale for Finding

The Reconfigured Site Plan Alternative would include the same components and square footage as the Project. As such, Alternative C would achieve several of the Project objectives that support this underlying purpose. Specifically, Alternative C would meet the following Project objectives to the same extent as the Project:

- Consistent with the Health and Wellness Element of the City's General Plan, improve Angelenos' health and well-being by providing improved access to quality healthcare through the upgrade of existing hospital facilities that accommodates updated health care technologies and updated seismic standards that meet state law requirements;

- Provide continued health care services for the San Fernando Valley consistent with the City's Health and Wellness Element policy to encourage the equitable distribution of health service providers to ensure that every Angeleno has access to preventative care and medical treatment;

- Provide adequately sized facilities that accommodate private patient rooms, expanded emergency department space, and expanded diagnostic and treatment areas to meet patient needs and house modern technologies;

- Integrate patient care and services with patient rooms by providing larger single bed rooms to allow for provision of services in patient rooms, thereby increasing convenience for patients and efficiency of care; and

- Improve access to emergency services, consistent with the City's Health and Wellness Element policy to encourage access to emergency services.

- Invest in long-term and sustainable improvements in health care by providing patient buildings that incorporate sustainable design and energy conservation.

However, the modified building layout proposed under Alternative C would prevent Alternative C from achieving the following objectives:

- Implement a design that provides a centralized entrance to the Hospital, as well as connectivity between patient rooms, departments, and health care services to ensure the safe, efficient, and expedient movement of patients, doctors, employees, and visitors that is needed for the provision of quality care;

- Foster a built environment that promotes health and well-being, consistent with the City's Health and Wellness Element policy, and enhances the overall patient experience indoors as well as outdoors through the incorporation of landscaped gardens and pathways that provide sufficient and convenient access to transportation options including walking, bicycling, and vehicle parking within the Project Site; and

- Redesign existing site access and internal circulation to incorporate the new buildings and to enhance safety and internal circulation for private vehicles, bicycles, pedestrians, and emergency vehicles while minimizing potential vehicular conflicts on surrounding streets.

Overall, the layout under Alternative C would not provide for the level of accessibility between services and patient needs that is necessary for a modern facility. In particular, with the layout under Alternative C, the emergency needs of patients would not be efficient or timely due to the disconnected buildings and services. In addition, many of the services provided in the Hospital would need to be duplicated in the New Patient Building as the New Patient Building would require basic services that are currently located in the Hospital. Services that would be duplicated in the New Patient Building include operating rooms, imaging services, post anesthesia care units, dietary services, and support services, among others. Overall, although Alternative C would satisfy several of the Project's objectives, Alternative C would not provide a building layout that would be conducive to the provision of efficient and quality medical care.

In addition, Alternative C would not eliminate any of the proposed Project's significant impacts. Furthermore, impacts related to aesthetics during construction, light and glare during construction, TACs during construction, and energy during construction would be greater than the Project.

D. Environmentally Superior Alternative

Section 15126.6(e)(2) of the CEQA Guidelines indicates that an analysis of alternatives to a project shall identify an Environmentally Superior Alternative among the alternatives evaluated in an EIR. The CEQA Guidelines also state that should it be determined that the No Project Alternative is the Environmentally Superior Alternative, the EIR shall identify another Environmentally Superior Alternative among the remaining alternatives.

With respect to identifying an Environmentally Superior Alternative among those analyzed in the Draft EIR, the range of alternatives includes the No Project/No Build Alternative; the OSHPD Improvements Alternative; and the Reconfigured Site Plan Alternative. Section V, Alternatives, of the Draft EIR provides a comprehensive summary of the environmental impacts anticipated under each alternative with the environmental impacts associated with the Project. Pursuant to Section 15126.6(c) of the CEQA Guidelines, the analysis below addresses the ability of the alternatives to "avoid or substantially lessen one or more of the significant effects" of the Project.

Of the alternatives analyzed in the Draft EIR, Alternative A, the No Project/No Build Alternative, would avoid all of the Project's significant environmental impacts, including the Project's significant and unavoidable impacts related to noise and traffic impacts during construction. In addition, Alternative A would eliminate all of the Project's less-than-significant and less-than-significant-with-mitigation impacts. However, Alternative A would not meet the Project's underlying purpose to provide the community with access to modern health care facilities to provide quality care.

In accordance with the CEQA Guidelines requirement to identify an Environmentally Superior Alternative other than the No Project Alternative (Alternative A—No Project/No Build Alternative), a comparative evaluation of the remaining alternatives analyzed in the Draft EIR indicates that Alternative B, the OSHPD Improvements Alternative, would be the Environmentally Superior Alternative. As discussed above, Alternative B would avoid the Project's construction traffic impacts. However, cumulative impacts associated with construction traffic may occur. In addition, significant Project and cumulative impacts related to noise would result from on-site construction activities and off-site construction activities (cumulative impacts only), although such impacts would be reduced overall when compared with the Project. Alternative B would retrofit several of the existing buildings to meet the OSHPD seismic requirements. However, the OSHPD Improvements Alternative would not achieve most of the Project objectives or achieve the Project's underlying purpose of providing the community with access to modern health care facilities to provide quality care.

In addition, as discussed above, Alternative C would not eliminate any of the Project's impacts and in some cases, impacts would be greater when compared with the Project. Furthermore, many of the Project objectives would not be met and the underlying purpose of the Project would not be fulfilled. Therefore, Alternative B, the OSHPD Improvements Alternative, would be the Environmentally Superior Alternative.

J. FINDINGS REGARDING GENERAL IMPACT CATEGORIES

1. Potential Secondary Effects

Section 15126.4(a)(1)(D) of the CEQA Guidelines states that "if a mitigation measure would cause one or more significant effects in addition to those that would be caused by the project as proposed, the effects of the mitigation measure shall be discussed but in less detail than the significant effects of the project as proposed." With regard to this section of the CEQA Guidelines, the potential impacts that could result with the implementation of each mitigation measure proposed for the Project was reviewed. The following provides a discussion of the potential secondary impacts that could occur as a result of the implementation of the proposed mitigation measures, listed by environmental issue area.

a) Aesthetics, Views, Light/Glare, and Shading

Project-level and cumulative impacts with regard to aesthetics, views, light/glare, and shading would be less than significant. Therefore, no mitigation measures are required, and no potential secondary impacts would occur.

b) Air Quality

Mitigation Measure B-1 addresses the Project's impacts during construction. Specifically, Mitigation Measure B-1 requires that off-road diesel-powered equipment, equal to or greater than 50 horsepower that will be used for an aggregate of 40 or more hours during any portion of the construction activities shall meet Tier 3 standards. This mitigation measure represents a procedural action and, as such, would not result in physical changes to the environment. Therefore, this mitigation measure would not result in adverse secondary impacts.

c) Geology and Soils

Mitigation Measures C-1 and C-2 require the Project Applicant to submit final design plans and a geotechnical engineering report to the Los Angeles Department of Building and Safety and the California OSHPD for review and approval. Mitigation Measures C-1 and C-2 are procedural requirements that would ensure that geotechnical impacts would be reduced to less-than-significant levels. As such, implementation of these mitigation measures would not result in adverse secondary impacts.

Mitigation Measure C-3 requires that the Project remove and recompact the upper 20 feet of loose granular soils or implement other ground improvement methods. In addition, Mitigation Measure C-4 requires that the Project remove the upper two feet of expansive soils and replace the soils with non-expansive engineered fill. Implementation of these mitigation measures would be beneficial in reducing geological hazards and would not result in adverse secondary impacts.

d) Greenhouse Gas Emissions

Impacts related to greenhouse gas emissions would be less than significant, and no mitigation measures are required. Therefore, no potential secondary impacts would occur.

e) Hazards and Hazardous Materials

Project-level and cumulative impacts with regard to hazards and hazardous materials would be less than significant. Thus, no mitigation measures are required and no potential secondary impacts would occur.

f) Hydrology, Surface Water Quality, Groundwater

Project-level and cumulative impacts with regard to surface water and groundwater hydrology and quality would be less than significant. Thus, no mitigation measures are required and no potential secondary impacts would occur.

g) Land Use

Project-level and cumulative impacts with regard to land use would be less than significant. Thus, no mitigation measures are required and no potential secondary impacts would occur.

h) Noise

Mitigation Measure H-1 requires the Project to implement several measures including locating stationary construction equipment away from sensitive receptors to the extent practical and erecting a sound barrier along the southeast property line of the Project Site. This mitigation measure would be beneficial in addressing the Project's construction noise impacts. As such, implementation of Mitigation Measure H-1 would not result in adverse secondary impacts.

i) Fire Protection

Project-level and cumulative impacts related to fire protection would be less than significant, and no mitigation measures are required. Therefore, no potential secondary impacts would occur.

j) Traffic, Access, and Parking

Mitigation Measure J-1 requires implementation of a Construction Management Plan, which would formalize how construction would be carried out and identify specific actions that would be required to reduce effects on the surrounding community. This mitigation measure is a procedural requirement that would address potential construction traffic impacts. As such, implementation of Mitigation Measure J-1 would not result in adverse secondary impacts.

Mitigation Measure J-2 requires implementation of Transit System Management Improvements to fund and implement the installation of a closed-circuit television monitoring camera at Intersection No. 5, Reseda Boulevard and Burbank Boulevard, and Intersection No. 14, White Oak Avenue and Burbank Boulevard. The Project Applicant would also fund the installation of the necessary fiber optic data cables to the nearest connection points. Mitigation Measure J-2 would require minimal changes in road facilities to install the closed-circuit television monitoring camera and fiber optic data cables. As such, implementation of Mitigation Measure J-2 would not result in adverse secondary impacts.

k) Water Supply and Infrastructure

Project-level and cumulative impacts with regard to water supply and infrastructure would be less than significant. Therefore, no mitigation measures are required and no potential secondary impacts would occur.

l) Wastewater

Project-level and cumulative impacts related to wastewater would be less than significant, and no mitigation measures are required. Therefore, no potential secondary impacts would occur.

m) Energy

Project-level and cumulative impacts related to energy would be less than significant, and no mitigation measures are required. Therefore, no potential secondary impacts would occur.

2. Growth Inducing Impacts

Section 15126.2(d) of the CEQA Guidelines requires that growth-inducing impacts of a project be considered in a Draft EIR. Growth-inducing impacts are characteristics of a project that could directly or indirectly foster economic or population growth or the construction of additional housing, either directly or indirectly, in the surrounding environment. According to the CEQA Guidelines, such projects include those that would remove obstacles to population growth (e.g., a major expansion of a waste water treatment plant that, for example, may allow for more construction in service areas). In addition, as set forth in the CEQA Guidelines, increases in the population may tax existing community service facilities, thus requiring construction of new facilities that could cause significant environmental effects. The CEQA Guidelines also require a discussion of the characteristics of projects which may encourage and facilitate other activities that could significantly affect the environment, either individually or cumulatively. Finally, the CEQA Guidelines also state that it must not be assumed that growth in an area is necessarily beneficial, detrimental, or of little significance to the environment.

a) Employment

The Project would have the potential to generate indirect population growth in the vicinity of the Project Site as a result of the employment opportunities generated by the Project.

During construction, the Project would create temporary construction-related jobs. However, construction workers would not be expected to relocate their households' places of residence as a direct consequence of working on the Project as the work requirements of most construction projects are highly specialized so that construction workers remain at a job site only for the time in which their specific skills are needed to complete a particular phase of the construction process. Therefore, given the availability of construction workers, the Project would not be considered growth-inducing from a short-term employment perspective, but rather the Project would provide a public benefit by providing new employment opportunities during the construction period.

With regard to employment during operation of the Project, the Project is not expected to have a significant increase in the number of employees due to the slight decrease in number of hospital beds and relocation of existing uses to other buildings on the Project Site. Notwithstanding, it is anticipated that the Project could include a range of full-time and part-time positions that may be filled by persons already residing in the vicinity of the workplace, and who would not relocate their households due to such employment opportunities. It is also possible that some of the employment opportunities offered by the Project would be filled by persons moving into the surrounding area, which could increase demand for housing. However, it is anticipated that some of this demand would be filled by then-existing vacancies in the housing market and others by any new residential developments that may occur in the vicinity of the Project Site. Therefore, given that the Project would not directly contribute to population growth in the Project area and as some of the employment opportunities generated by the Project would be filled by people already residing in the vicinity of the Project Site, the potential growth associated with Project employees who may relocate their place of residence would not be substantial. As such, the Project would not result in a notable increase in demand for new housing, and any new

demand, should it occur, would be minor in the context of forecasted growth for the City of Los Angeles or the Encino–Tarzana Community Plan area.

b) Utility Infrastructure Improvements

The area surrounding the Project Site is already developed with residential, commercial, and medical office uses, and the Project would not remove impediments to growth. The Project Site is located within an urban area that is currently served by existing utilities and infrastructure. While the Project may require minor local infrastructure upgrades to maintain and improve water, sewer, electricity, and natural gas lines on-site and in the immediate vicinity of the Project Site, such improvements would be limited to serving Project-related demand, and would not necessitate major local or regional utility infrastructure improvements that have not otherwise been accounted for and planned for on a regional level.

c) Conclusion

Overall, the Project would be consistent with the growth forecast for the City of Los Angeles Subregion and would be consistent with regional policies to reduce urban sprawl, efficiently utilize existing infrastructure, reduce regional congestion, and improve air quality through the reduction of vehicle miles traveled. In addition, the Project would not require any major roadway improvements nor would the Project open any large undeveloped areas for new use. As part of the Project, the existing west driveway on Burbank Boulevard would be modified to include a traffic signal control, which would allow for left turns from the Project Site onto westbound Burbank Boulevard. To facilitate this movement, an exclusive left-turn outbound lane would be installed within the Project Site for the left-turning vehicles onto Burbank Boulevard. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US-101 Southbound on-ramp to the east. Furthermore, a pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway. The traffic signal control would improve Project Site access, as well as help to further traffic calming goals and pedestrian safety on Burbank Boulevard. Therefore, direct and indirect growth-inducing impacts would be less than significant.

3. Significant Irreversible Impacts

Section 15126.2(c) of the CEQA Guidelines indicates that an EIR should evaluate significant irreversible environmental changes that would be caused by implementation of a proposed project. As stated in CEQA Guidelines Section 15126.2(c), "[u]ses of nonrenewable resources during the initial and continued phases of the project may be irreversible since a large commitment of such resources makes removal or nonuse thereafter unlikely. Primary impacts and, particularly, secondary impacts (such as highway improvement which provides access to a previously inaccessible area) generally commit future generations to similar uses. Also, irreversible damage can result from environmental accidents associated with the project. Irretrievable commitments of resources should be evaluated to assure that such current consumption is justified."

The Project would necessarily consume a limited amount of slowly renewable and non-renewable resources that could result in irreversible environmental changes. This consumption would occur during construction of the Project and would continue throughout its operational lifetime. The development of the Project would require a commitment of resources that would include: (1) building materials and associated solid waste disposal effects on landfills; (2) water; and (3) energy resources (e.g., fossil fuels) for electricity, natural gas, and transportation. As

demonstrated below, the Project would not consume a large commitment of natural resources or result in significant irreversible environmental changes.

a) Building Materials and Solid Waste

Construction of the Project would require consumption of resources that do not replenish themselves or which may renew so slowly as to be considered non-renewable. These resources would include certain types of lumber and other forest products, aggregate materials used in concrete and asphalt (e.g., sand, gravel and stone), metals (e.g., steel, copper and lead), and petrochemical construction materials (e.g., plastics).

As discussed in Section II, Project Description, of the Draft EIR, during construction of the Project, at least 75 percent of construction and demolition debris from Project construction would be diverted from landfills. In addition, during operation, the Project would prioritize local and regional materials made from sustainably sourced, recycled, and recyclable or rapidly renewable feedstocks. Examples include “fly ash” (a byproduct of burning pulverized coal in the operation of power plants, properties of which are similar to that of Portland cement), in concrete materials extracted and manufactured within 500 miles of the site, and materials with high values of recycled content with a prioritization on post-consumer recycled content. Thus, the consumption of non-renewable building materials such as lumber, aggregate materials, and plastics would be reduced.

b) Water

Consumption of water during construction and operation of the Project is addressed in Section IV.L, Utilities and Service Systems—Water Supply and Infrastructure, of the Draft EIR. As evaluated therein, given the temporary nature of construction activities, the short-term and intermittent water use during construction of the Project would be less than the net new water consumption of the Project at buildout. In addition, based on a review of construction projects that are similar in size and duration to that of the Project, a conservative estimate of construction water use ranges from 1,000 to 2,000 gpd. Given that the estimated water usage during operation of the Project has been demonstrated to be met by the City of Los Angeles Department of Water and Power (LADWP) and would not exceed available supplies, it is reasonably assumed that there would also be no impact from the estimated water usage during construction of the Project, which is substantially less than the estimated water usage during operation of the Project. Furthermore, as concluded in the 2015 Urban Water Management Plan (UWMP) prepared by the LADWP, projected water demand for the City would be met by the available supplies during an average year, single-dry year, and multiple-dry year in each year from 2015 through 2040. Project construction would begin in the year 2018, and is anticipated to be completed by as early as 2022 or the latest by 2025. Therefore, the Project’s temporary and intermittent demand for water during construction could be met by the City’s available supplies during each year of Project construction.

During operation, the estimated water demand for the Project would not exceed the available supplies projected by LADWP. Thus, LADWP would be able to meet the water demand of the Project, as well as the existing and planned future water demands of its service area. Furthermore, the Project would comply with applicable regulatory requirements of the Office of Statewide Health Planning and Development (OSHPD) and the City. The Project would include conservation features such as low-flow faucets and toilets, a water efficient irrigation system, and use of water efficient landscapes.

Thus, as evaluated in Section IV.L, Utilities and Service Systems—Water Supply and Infrastructure, of the Draft EIR, while Project construction and operation would result in some irreversible consumption of water, the Project would not result in a significant impact related to water supply.

c) Energy Consumption

During ongoing operation of the Project, non-renewable fossil fuels would represent the primary energy source, and thus the existing finite supplies of these resources would be incrementally reduced. Fossil fuels, such as diesel, gasoline, and oil, would also be consumed in the use of construction vehicles and equipment. Project consumption of non-renewable fossil fuels for energy use during construction and operation of the Project is addressed in Section IV.N, Utilities and Service Systems—Energy, of the Draft EIR. As discussed therein, construction activities for the Project would not require the consumption of natural gas, but would require the use of electricity and fossil fuels. As the consumption of fossil fuels would occur on a temporary basis during construction, impacts related to the consumption of fossil fuels during construction of the Project would be less than significant.

During operation, the Project's increase in electricity and natural gas demand would be within the anticipated service capabilities of LADWP and the Southern California Gas Company, respectively. As discussed in Section IV.N, Utilities and Service Systems—Energy, of the Draft EIR, the Project would implement various project design features to reduce water usage which would in turn reduce the Project's energy demand. In addition, the Project would have a 10 percent reduction in natural gas generation from the Project without Project features. Furthermore, various Project characteristics would reduce vehicle miles traveled and vehicle trips to the Project Site. Therefore, the Project would not cause the wasteful, inefficient, and unnecessary consumption of energy and would be consistent with the intent of Appendix F to the CEQA Guidelines. In addition, Project operations would not conflict with adopted energy conservation plans. Refer to Section IV.N, Utilities and Service Systems—Energy, of the Draft EIR, for further analysis regarding the Project's consumption of energy resources.

d) Environmental Hazards

The Project's potential use of hazardous materials is addressed in Section IV.E, Hazards and Hazardous Materials, of the Draft EIR. As discussed therein, construction of the Project would involve the temporary use of potentially hazardous materials, including equipment and vehicle fuels and oils, paints, solvents, coatings, adhesives, caustic or acidic cleaners, and concrete additives. Project operations would involve the use of potentially hazardous materials typical of those used in hospitals, including biohazards and radioactive waste, cleaning agents, paints, and lab chemicals. All hazardous materials on the Project Site would be acquired, handled, used, stored, and disposed of in accordance with manufacturers' instructions and with all applicable federal, state, and local requirements. Furthermore, the Project would continue to implement a Hazardous Materials and Waste Management Plan as part of the Project. As such, compliance with all applicable local, state, and federal laws and regulations relating to environmental protection and the management of hazardous materials, as well as the continued implementation of a Hazardous Materials and Waste Management Plan at the Project Site, would serve to protect against significant and irreversible environmental change that could result from the accidental release of hazardous materials.

e) Conclusion

Based on the above, Project construction and operation would require the irretrievable commitment of limited, slowly renewable, and non-renewable resources, which would limit the availability of these resources and the Project Site for future generations or for other uses. However, the consumption of such resources would not be considered substantial and would be consistent with regional and local growth forecasts and development goals for the area. The loss of such resources would not be highly accelerated when compared to existing conditions and such resources would not be used in a wasteful manner. Therefore, although irreversible environmental changes would result from the Project, such changes are concluded to be less than significant. Considering that the Project would consume an immaterial amount of natural resources, and it is replacing an existing urban use on a redevelopment site, the limited use of nonrenewable resources is justified.

K. OTHER CEQA CONSIDERATIONS

1. The City, acting through the Department of City Planning, is the "Lead Agency" for the project evaluated in the EIR. The City finds that the EIR was prepared in compliance with CEQA and the CEQA Guidelines. The City finds that it has independently reviewed and analyzed the EIR for the Proposed Project, that the Draft EIR which was circulated for public review reflected its independent judgment and that the Final EIR reflects the independent judgment of the City.

2. The City finds that the EIR provides objective information to assist the decision makers and the public at large in their consideration of the environmental consequences of the Project. The public review periods provided all interested jurisdictions, agencies, private organizations, and individuals the opportunity to submit comments regarding both the Draft EIR and Final EIR. The Final EIR was prepared after the review period and responds to comments made during the public review period.

3. The Department of City Planning evaluated comments on environmental issues received from persons who reviewed the Draft EIR. In accordance with CEQA, the Department of City Planning prepared written responses describing the disposition of the significant environmental issues raised. The Final EIR provides adequate, good faith and reasoned responses to the comments. The Department of City Planning reviewed the comments received and responses thereto and has determined that neither the comments received nor the responses to such comments add significant new information regarding environmental impacts to the Draft EIR. The Lead Agency has based its actions on a full appraisal of all viewpoints, including all comments received up to the date of adoption of these findings, concerning the environmental impacts identified and analyzed in the EIR.

4. The EIR evaluated the following potential Project and cumulative environmental impacts: Aesthetics; Air Quality; Geology and Soils; Greenhouse Gas Emissions; Hazards and Hazardous Materials; Hydrology and Surface Water Quality; Land Use; Noise; Public Services—Fire Protection; Traffic, Access, and Parking; Utilities and Service Systems—Water Supply; Utilities and Service Systems—Wastewater; and Utilities and Service Systems—Energy. Additionally, the EIR considered, in separate sections, Significant Irreversible Environmental Changes, Growth Inducing Impacts and potential secondary effects of the Project. The significant environmental impacts of the Project and the alternatives were identified in the EIR.

5. The project design features and mitigation measures identified for the proposed project were included in the Draft EIR and Final EIR. The final project design features and mitigation

measures for the proposed project are described in the Mitigation Monitoring Program ("MMP"). Each of the project design features and mitigation measures identified in the MMP is incorporated into the project. The City finds that the impacts of the project have been mitigated to the extent feasible by the mitigation measures identified in the MMP.

6. The responses to the comments on the Draft EIR, which are contained in the Final EIR, clarify and amplify the analysis in the Draft EIR.

7. Having reviewed the information contained in the EIR and in the administrative record, as well as the requirements of CEQA and the state CEQA Guideline regarding recirculation of Draft EIRs, the City finds that there is no new significant information in the Final EIR and fins that recirculation of the Draft EIR is not required.

8. CEQA requires the Lead Agency approving a project to adopt an MMP for the changes to the project which it has adopted or made a condition of project approval in order to ensure compliance with the mitigation measures during project implementation. The mitigation measures included in the EIR as certified by the City and included in the MMP as adopted by the City serves that function. The MMP includes all of the mitigation measures adopted by the City in connection with the approval of the Project and has been designed to ensure compliance with such measures during implementation of the Project. In accordance with CEQA, the MMP provides the means to ensure that the mitigation measures are fully enforceable. In accordance with the requirements of Public Resources Code Sec. 21081.6, the City hereby adopts the MMP.

9. In accordance with the requirements of Public Resources Code § 21081.6, the City hereby adopts each of the mitigation measures expressly set forth herein as conditions of approval for the project.

10. The custodian of the documents or other material which constitute the record of proceedings upon which the City's decision is based, is the City of Los Angeles, Department of City Planning.

11. The City finds and declares that substantial evidence for each and every finding made herein is contained in the EIR, which is incorporated herein by this reference, or is in the record of proceedings in the matter.

12. The City is certifying an EIR for, and is approving and adopting findings for, the entirety of the actions described in these Findings and in the EIR as comprising the Project. It is contemplated that there may be a variety of actions undertaken by other state and local agencies (who might be referred to as "responsible agencies" under CEQA). Because the City is the Lead Agency for the Project, the EIR is intended to be the basis for compliance with CEQA for each of the possible discretionary actions by other state and local agencies to carry out the Project.

13. The EIR is a Project EIR for purposes of environmental analysis of the project. A Project EIR examines the environmental effects of a specific project. The EIR serves as the primary environmental compliance document for entitlement decisions regarding the project by the City and the other regulatory jurisdictions.

L. STATEMENT OF OVERRIDING CONSIDERATIONS

The Final EIR identified unavoidable significant impacts resulting from the implementation of the Project. Section 21081 of the California Public Resources Code and Section 15093(b) of the

CEQA Guidelines provide that when the decision of the public agency allows the occurrence of significant impacts that are identified in the EIR but are not at least substantially mitigated, the agency must state in writing the reasons to support its action based on the completed EIR and/or other information in the record. State CEQA Guidelines require, pursuant to CEQA Guidelines Section 15093(b), that the decision-maker adopt a Statement of Overriding Considerations at the time of approval of a project if it finds that significant adverse environmental effects have been identified in the EIR which cannot be substantially mitigated to an insignificant level or be eliminated. These findings and the Statement of Overriding Considerations are based on substantial evidence in the record, including but not limited to the EIR, including the reference library to the EIR, and documents and materials that constitute the record of proceedings.

The following impacts are not mitigated to a less than significant level for the Project, as identified in the EIR: Noise (On-Site Construction); and Traffic, Access, and Parking (Construction). In addition, implementation of the proposed Project will result in significant and unavoidable cumulative impacts related to Noise (On-Site Construction); Noise (Off-Site Construction); and Traffic, Access, and Parking (Construction).

Accordingly, the City adopts the following Statement of Overriding Considerations. The City recognizes that significant and unavoidable impacts will result from implementation of the proposed Project. Having (i) adopted all feasible mitigation measures, (ii) rejected alternatives to the proposed Project, as discussed above, (iii) recognized all significant, unavoidable impacts, and (iv) balanced the benefits of the Project against the Project's significant and unavoidable impacts, the City hereby finds that the benefits outweigh and override the significant unavoidable impacts for the reasons stated below.

These overriding considerations of economic, social, aesthetic, and environmental benefits for the Project justify adoption of the Project and certification of the completed EIR. Each of the following overriding considerations separately and independently (i) outweighs the adverse environmental impacts of the Project, and (ii) justifies adoption of the Project and certification of the completed EIR. In particular, achieving the underlying purpose for the Project will be sufficient to override the significant environmental impacts of the Project.

1. The Project will promote the Health and Wellness Element of the City's General Plan by improving Angelenos' health and well-being by modernizing healthcare facilities and improved access to quality health care;

2. The Project will promote the Health and Wellness Element of the City's General Plan by providing continued health care services for the San Fernando Valley and encourage the equitable distribution of health service providers to ensure that every Angeleno has access to preventive care and medical treatment;

3. The Project will provide adequately sized facilities that accommodate private patient rooms, expanded emergency department space, and expanded diagnostic and treatment areas to meet patient needs and house modern technologies providing better access to care;

4. The Project will comply with seismic safety requirements of the Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1994;

5. The proposed Project will be designed and constructed to incorporate environmentally sustainable design features that would, where Leadership in Energy and Efficiency and Design

(LEED®) standards for Healthcare are applicable, be capable of achieving LEED Silver certification equivalency.

6. The Project will redesign existing site access and internal circulation to enhance safety and internal circulation for private vehicles, bicycles, pedestrians, and emergency vehicles while minimizing potential vehicular conflicts on surrounding streets while enhancing the overall patient experience indoors as well as outdoors through the incorporation of landscaped gardens and pathways;

7. The Project will promote the City's objectives in the Mobility Plan to increase work trips and non-work trips made on public transit, pursue transportation management strategies that can maximum vehicle occupancy, and provide employee incentives for utilizing alternatives to the automobile;

8. The Project will provide healthcare-related employment opportunities that will maintain and enhance the economic vitality of the regional and provided livable wages with benefits to those employees; and

9. The Project is expected to provide over 1,000 local construction jobs during construction of the Project which will enhance the economy of the region.

PUBLIC HEARING AND COMMUNICATIONS

Public Hearing

A joint public hearing was held for the Proposed Project and related subdivision on November 14, 2017, and was attended by approximately 60 individuals. At the public hearing, testimony was provided by the Project Applicant, Project Representatives, and approximately 21 speakers, including community members and individuals representing the Ventura-Cahuenga Boulevard Corridor Plan Review Board, Tarzana Neighborhood Council, Our Lady of Grace, Chabad of the Valley, VICA, Encino Chamber of Commerce, LA/Orange County Building and Construction Trades, The Child Development Institute, Providence Tarzana Hospital Foundation Board, Providence Tarzana Medical Center staff, National Union of Healthcare Workers (NUHW), and United Chambers.

Summary of Public Hearing Testimony

At the hearing, the Project applicant highlighted the Project's elements as summarized below:

- Providence Tarzana Medical Center has provided excellent and compassionate care for over 4 decades in the San Fernando Valley;
- 540 million dollar investment in health care in the San Fernando Valley;
- In 2016, served nearly 50,000 Emergency Department visits;
- Improvements include: single patient room occupancy; in-room patient service; height will provide advances in medical technology; built to current seismic standards; improved emergency vehicle and public emergency access;
- Promotes General Plan Health and Wellness Element by providing proved access to high quality health care services;
- Enhanced landscaping; garden, pedestrian walkways, gathering spaces for patients, visitors and guests; buffers along Clark Street and Burbank Boulevard, including 115 newly planted trees;
- New crosswalk and signal at Burbank Driveway;
- Screen of New Parking Structure;

Oral testimony provided support for the renovation and improvement of the Project providing the following comments:

- Superior level of quality care; one of Nation's top 100 hospitals out of 6,500; world class hospital;
- In dire need of upgrading outdated facilities; private rooms better;
- Ventura-Cahuenga Boulevard Corridor PRB approval of Specific Plan Amendment; no justification for including Providence Tarzana Medical Center within the boundary in the first place;
- Neighborhood Council support;
- Great community involvement;
- Commitment to care; whole person, body mind and spirit;
- Excited about landscaping including meditation garden [Healing Garden];
- Everyone welcome;
- Providence will invest 500 million dollars to improve access to critical healthcare services for the community;
- Will provide 1,000 good construction jobs;

- Trades support specialty seismic standards provided by a special trained workforce;
- Providence is a community partner with many non-profits in the area;
- Services provided for women and children;
- Medical staff supports investment in new facilities to provide quality care to growing families across the San Fernando Valley;
- Neighborhood council support;

Two speakers, who also spoke in support of the Project expressed the following concerns:

- Any plans for construction trucks along Clark Street in an already congested area?
- Providence Tarzana Medical Center should provide a 15-million dollar development agreement to address priorities of affordable housing and access to psychiatric emergency care in the Valley rather than in Downtown LA or LA County.

Communications Received

The time of the hearing, twenty letters of unanimous support were received for the Project as follows: Chabad of the Valley; Tarzana Neighborhood Council; Los Angeles Police Protective League; Our Lady of Grace Parish; Temple Judea; Valley Industry & Commerce Association; St. Mel Parish; St. James Presbyterian Church; St. Paul's United Methodist Church; Los Angeles / Orange Counties Building and Construction Trades Council; Boys & Girls Club of the West Valley; Valley Village; ONE Generation; Los Angeles Area Chamber of Commerce; Biz Fed – Los Angeles County Business Federation; Matthew Dababneh, Assemblymember, California Legislature, Forty-Fifth District; Encino Chamber of Commerce; Child Development Institute; The Valley Economic Alliance; and United Chamber of Commerce San Fernando Valley & Region.

Exhibit A
Architectural Plans

PROVIDENCE TARZANA MEDICAL CENTER REIMAGINED

LOCATION MAP

PROJECT SUMMARY

LEGAL DESCRIPTION

PARCEL 1
18365 W. Clark Street
TRACT 31470, FRAC
LOT 2
APN 2160011028

PARCEL 2
18370 W. Burbank
Boulevard
TRACT 31470, LOT 1 &
FRAC LOT 2
APN 2160011029

PARCEL 3
18321 W. Clark Street
TRACT 31470, FRAC 3
APN 2160011030

PARCEL 4
18411 W. Clark Street
PARCEL MAP 3187,
LOT A
APN 2160010037

PARCEL 5
18410 W. Burbank
Boulevard
TRACT 5692,
FRAC 63, ARB 2
APN 2160010012

PARCEL 6
TRACT 5692,
FRAC 63, ARB 1
APN 2160010035

PARCEL 7
18420 W. Burbank
Boulevard
TRACT 5692,
FRAC 64
APN 2160010036

PROJECT ADDRESS
PROVIDENCE TARZANA MEDICAL CENTER
18321 CLARK STREET
LOS ANGELES, CA. 91356

OWNER
PROVIDENCE HEALTH SYSTEM-SOUTHERN CALIFORNIA
20555 EARL STREET
TORRANCE, CA. 90503

INDEX OF DRAWINGS

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

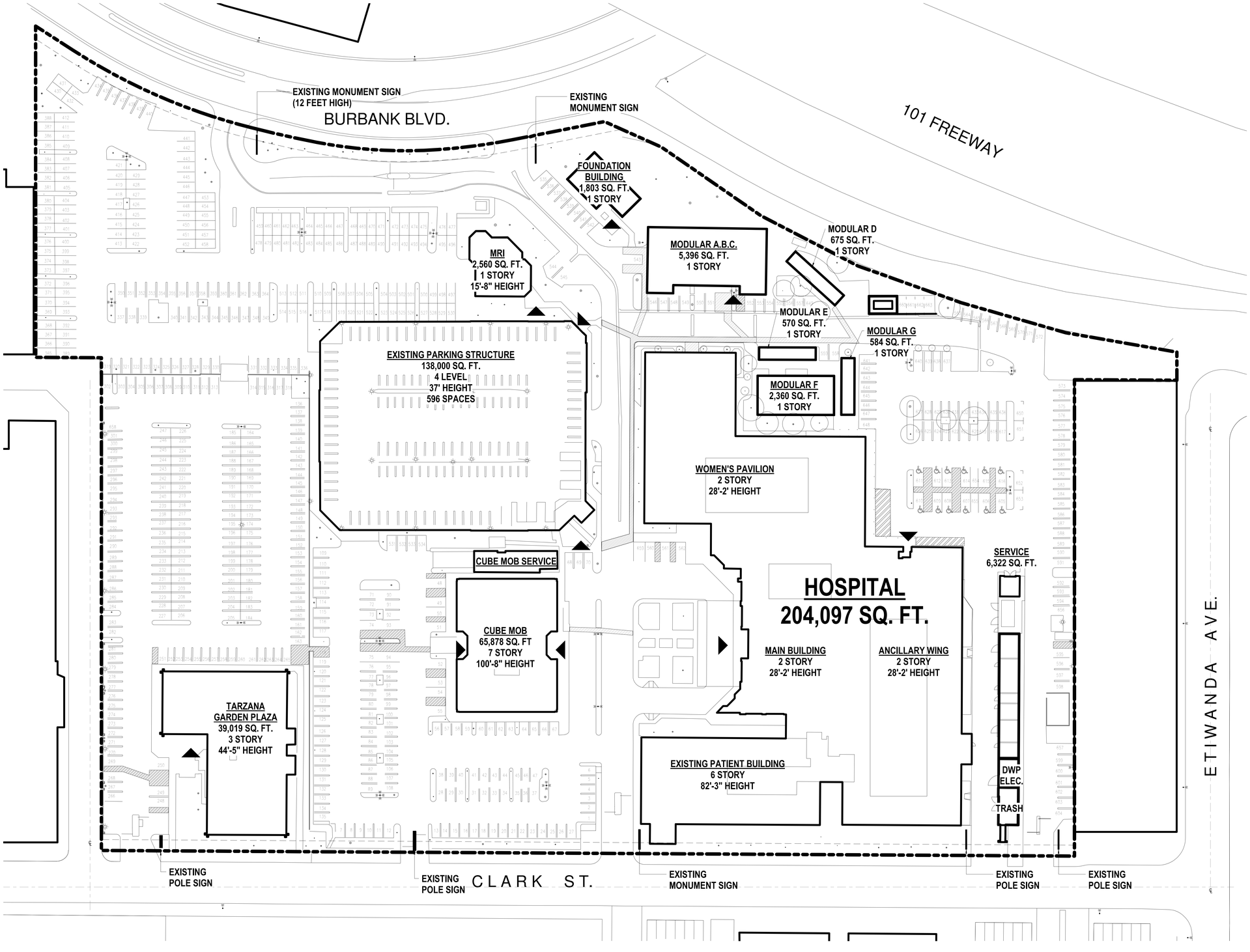
Project
Providence Tarzana Medical Center Reimagined
18321 Clark Street
Tarzana, CA 91356

EXHIBIT A

Title
COVER SHEET

SHEET
G0-0

1/4/2018 6:42:46 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



1 EXISTING PLOT PLAN
1/32" = 1'-0"

PROJECT SUMMARY

FLOOR AREA
SEE TABLE

BUILDING HEIGHT
AS NOTED ON PLOT PLAN

EXISTING PARKING COUNT:

	STD	HC	TOTAL
PS P1	120	6	126
PS P2	142	8	150
PS P3	159	8	167
PS P4 ROOF	145	8	153
SURFACE	628	35	663
SUB TOTAL	1194	65	TOTAL 1259

TOTAL SITE AREA = 12.977 ACRES
NET SITE AREA = 12.913 ACRES

ZONING INFORMATION
[Q]C2-1L, C2-1, P1

BUILDING	YEAR BUILT	FLOOR AREA[1]	# STORIES	HEIGHT[2]
EXISTING				
HOSPITAL				
MAIN BUILDING	1972	204,097	2	28'-2"
ACILLARY WING	1972		2	28'-2"
WOMEN'S PAVILION	1993		2	28'-2"
EXISTING PATIENT BUILDING	1972		6	82'-3"
CUBE MOB	1975	65,878	7	100'-8"
MRI BUILDING	1989	2,560	1	15'-8"
MODULAR (FOUNDATION)	2009	1,803	1	15'-6"
MODULAR A,B,C	2002	5,396	1	15'-6"
MODULAR D	2002	675	1	15'-6"
MODULAR E	2006	570	1	15'-6"
MODULAR F	2001	2,360	1	15'-6"
MODULAR G	2001	584	1	15'-6"
TARZANA GARDEN PLAZA	1979	39,019	3	44'-5"
TOTAL EXISTING:		322,942		

FOOTNOTES:
1. FLOOR AREA PER LAMC, SECTION 12.03; Floor Area -- Is that area in square feet confined within the exterior walls of a building, but not including the area of the following: exterior walls, stairways, shafts, rooms housing building-operating equipment or machinery, parking areas with associated driveways and ramps, space for the landing and storage of helicopters, and basement storage areas. (Added by Ord. No. 163,617, Eff. 6/21/88.)

2. HEIGHT IS PER LAMC SECTION 12.03: Height of Building or Structure -- Is the vertical distance above grade measured to the highest point of the roof, structure, or the parapet wall, whichever is highest. (Added by Ord. No. 160,657, Eff. 2/17/86, Oper. 6/17/86.)

LEGEND

- PROPERTY LINE
- (E) BUILDING OUTLINE
- PEDESTRIAN ENTRANCE

NORTH

32' 16' 0' 32' 64'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

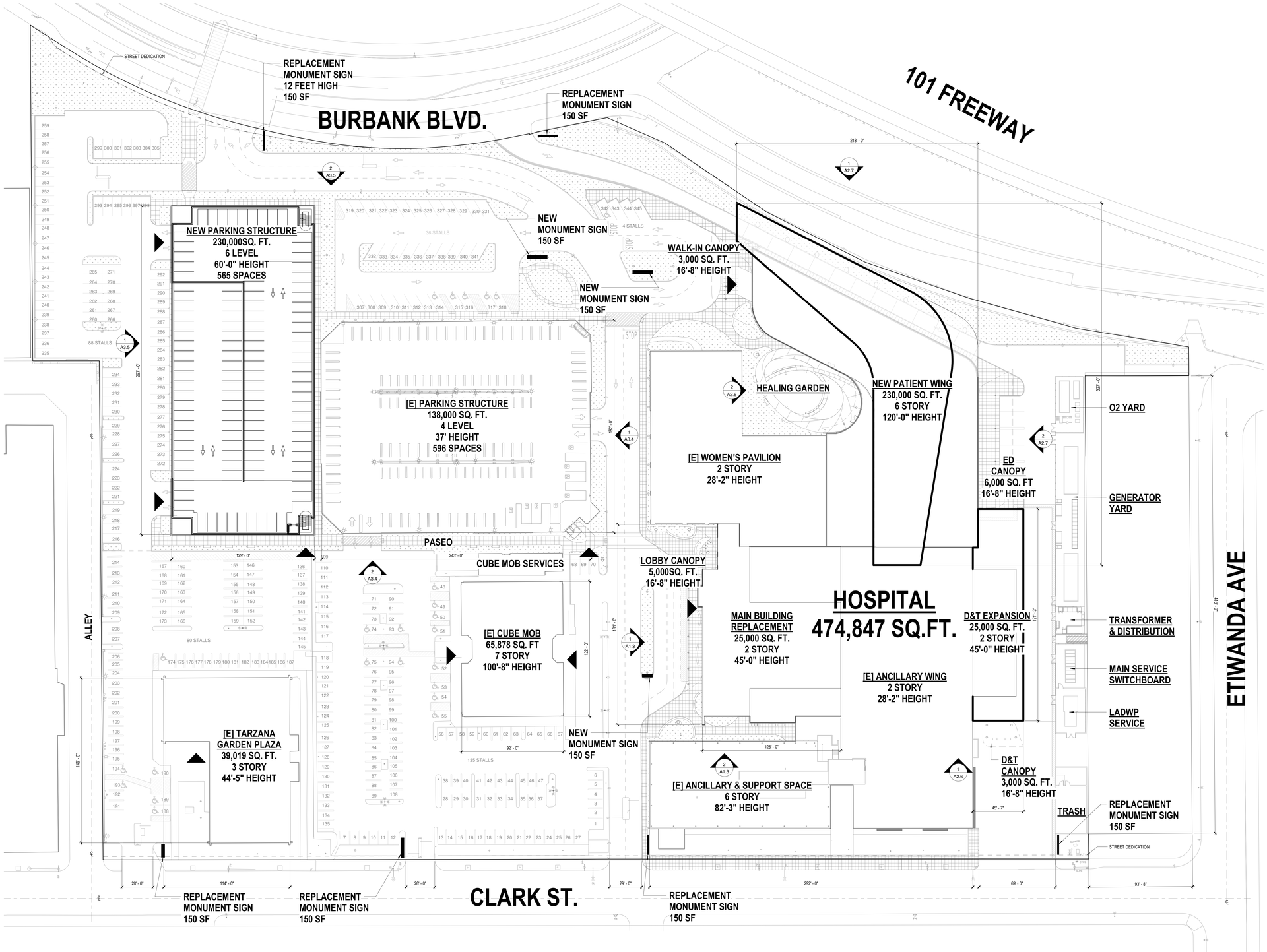
18321 Clark Street
Tarzana, CA 91356

Title

EXISTING PLOT PLAN

SHEET
A0.1

1/4/2018 6:46:10 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



1 PROPOSED PLOT PLAN
1/32" = 1'-0"

PROJECT SUMMARY

FLOOR AREA
SEE TABLE

PROPOSED PARKING COUNT:

PROPOSED PARKING STALL COUNT			
	STD	HC	TOTAL
(E)PS P1	120	6	126
(E)PS P2	142	8	150
(E)PS P3	159	8	167
(E)PS P4 ROOF	145	8	153
SURFACE	317	22	339
PS P1	67	13	80
PS P2	97		97
PS P3	97		97
PS P4	97		97
PS P5	97		97
PS P6	97		97
SUB TOTAL	1435	65	TOTAL 1500

BICYCLE PARKING
SHORT TERM 26
LONG TERM 52 (IN NEW PARKING STRUCTURE)
TOTAL 78

TOTAL SITE AREA = 12.977 ACRES
NET SITE AREA = 12.913 ACRES

ZONING INFORMATION
C2-1 (PROPOSED ZONING)
CODE FAR = 1.5:1
PROJECT FAR = 1.03:1

FLOOR AREA					
BUILDING	EXISTING SF [1]	PROPOSED DEMOLITION [1]	PROPOSED CONSTRUCTION [1]	NET NEW (SF) [1]	TOTAL WITH PROJECT (SF) [1]
HOSPITAL	204,097	(23,250)	294,000	270,750	474,847
[E] CUBE MOB	65,878	0	0	0	65,878
[E] MRI BUILDING	2,560	(2,560)	0	(2,560)	0
[E] MODULAR BUILDINGS	11,388	(11,388)	0	(11,388)	0
[E] TARZANA GARDEN PLAZA	39,019	0	0	0	39,019
TOTAL	322,942	(37,198)	294,000	256,802	579,744

FOOTNOTES:
1. FLOOR AREA PER LAMC, SECTION 12.03; Floor Area -- Is that area in square feet confined within the exterior walls of a building, but not including the area of the following: exterior walls, stairways, shafts, rooms housing building-operating equipment or machinery, parking areas with associated driveways and ramps, space for the landing and storage of helicopters, and basement storage areas. (Added by Ord. No. 163,617, Eff. 6/21/88.)

2. HEIGHT IS PER LAMC SECTION 12.03: Height of Building or Structure -- Is the vertical distance above grade measured to the highest point of the roof, structure, or the parapet wall, whichever is highest. (Added by Ord. No. 160,657, Eff. 2/17/86, Oper. 6/17/86.)

LEGEND
- PROPERTY LINE
- STREET DEDICATION
- (E) BUILDING OUTLINE
- (N) BUILDING OUTLINE
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NORTH

32' 16' 0' 32' 64'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

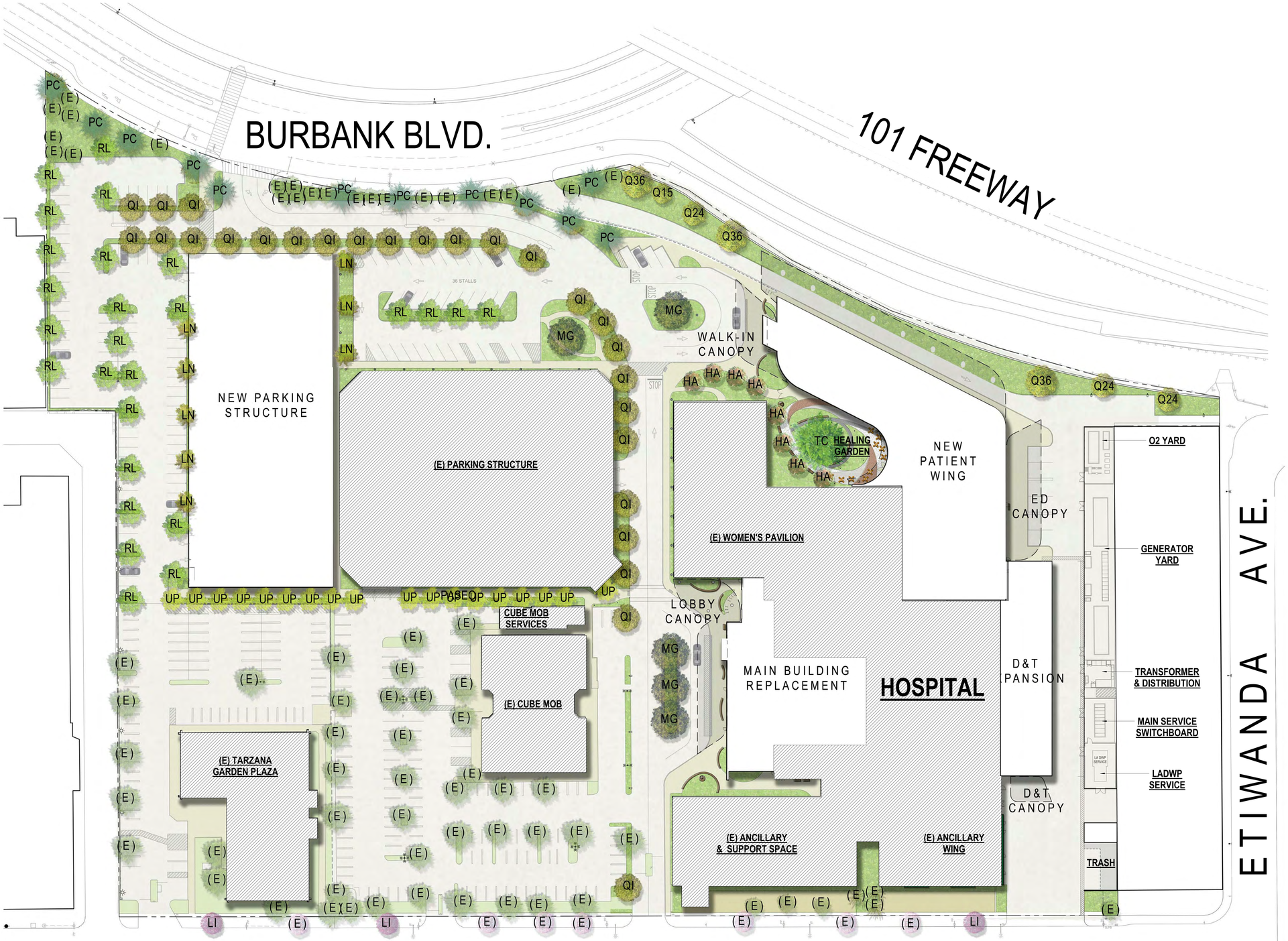
NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project
Providence Tarzana Medical Center Reimagined
18321 Clark Street
Tarzana, CA 91356

Title
PROPOSED PLOT PLAN

SHEET
A0.2

1/4/2018 6:42:52 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



PROPOSED TREE TYPES*

	BOTANICAL NAME	COMMON NAME	QTY	SIZE
PC	Pinus canariensis	Canary Island Pine	12	36" box
UP	Ulmus parvifolia 'True Green'	True Green Chinese Elm	18	24" box
RL	Rhus lancea	African Sumac	26	36" box
LN	Laurus nobilis	Sweet Bay	8	24" box
QI	Quercus ilex	Holly Oak	27	36" box
MG	Magnolia grandiflora	Southern Magnolia	5	48" box
HA	Heteromeles arbutifolia	Toyon	8	24" box
TC	Tristania conferta	Brisbane Box	1	72" box
Q15	Quercus agrifolia	Coast Live Oak	1	15 gal
Q24	Quercus agrifolia	Coast Live Oak	3	24" box
Q36	Quercus agrifolia	Coast Live Oak	3	36" box
LI	Lagerstroemia indica (At street)	Crape Myrtle	3	36" box

OPEN SPACE TABLE:

LANDSCAPE:	68,100 SF	(12%)
PEDESTRIAN PAVING:	38,610 SF	(7%)
TOTAL OPEN SPACE:	**106,710 SF**	**(19%)**
NON-PEDESTRIAN PAVING:	242,384 SF	(43%)
BUILDING AREA:	213,400 SF	(38%)
SITE TOTAL:	**562,494 SF**	**(100%)**

TREE COUNT:

TOTAL EXISTING ON-SITE TREES:	187
EXISTING ON-SITE TREES TO REMAIN:	72
NEW ON-SITE TREES PROPOSED:	115
FINAL PROJECT ON-SITE TOTAL:	**187**

GENERAL NOTE:
1. SITE WORK AND LANDSCAPING TO BE COMPLETED IN PHASES OVER THE DURATION OF THE PROJECT.

*NOTE: Species shown for illustrative purposes only.

*NOTE: Southern California Native Trees
There are twenty-seven Western Sycamore (Platanus racemosa), which are Southern California native trees. Pursuant to the City of Los Angeles Native Tree Ordinance (Ordinance No. 177404), Southern California native trees that were planted or grown as part of a tree planting program are not "Protected Trees." The Western Sycamore on this site were intentionally installed as part of the initial development and construction of the facilities on this property. Therefore, the Western Sycamore are not naturally occurring and are not "Protected Trees" subject to the City of Los Angeles Native Tree Ordinance. Therefore, there are no Protected Trees under the City of Los Angeles Native Tree Ordinance (Tree Report, Providence Tarzana Medical Center (May 3, 2016). Prepared by Lisa E. Smith, Registered consulting arborist #464, ISA certified arborist #we3782, ISA Tree Risk Assessment Qualified Member of American Society of Consulting Arborists.)

NORTH

32' 16' 0' 32' 64'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

Title

PROPOSED LANDSCAPE PLAN

SHEET
A0.3

1/4/2018 6:46:51 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

VIEW OF NEW PATIENT WING FROM 101 FREEWAY LOOKING EAST

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

Title

RENDERING

SHEET
A0.4

1/4/2018 6:47:57 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

VIEW OF NEW PATIENT WING & EMERGENCY DEPARTMENT ENTRANCE AND HEALING GARDEN

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

Title

RENDERING

SHEET
A0.5

1/4/2018 6:47:12 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

VIEW NORTH AT MAIN HOSPITAL ENTRANCE AND CANOPY
WITH NEW PATIENT WING IN BACKGROUND

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE
Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

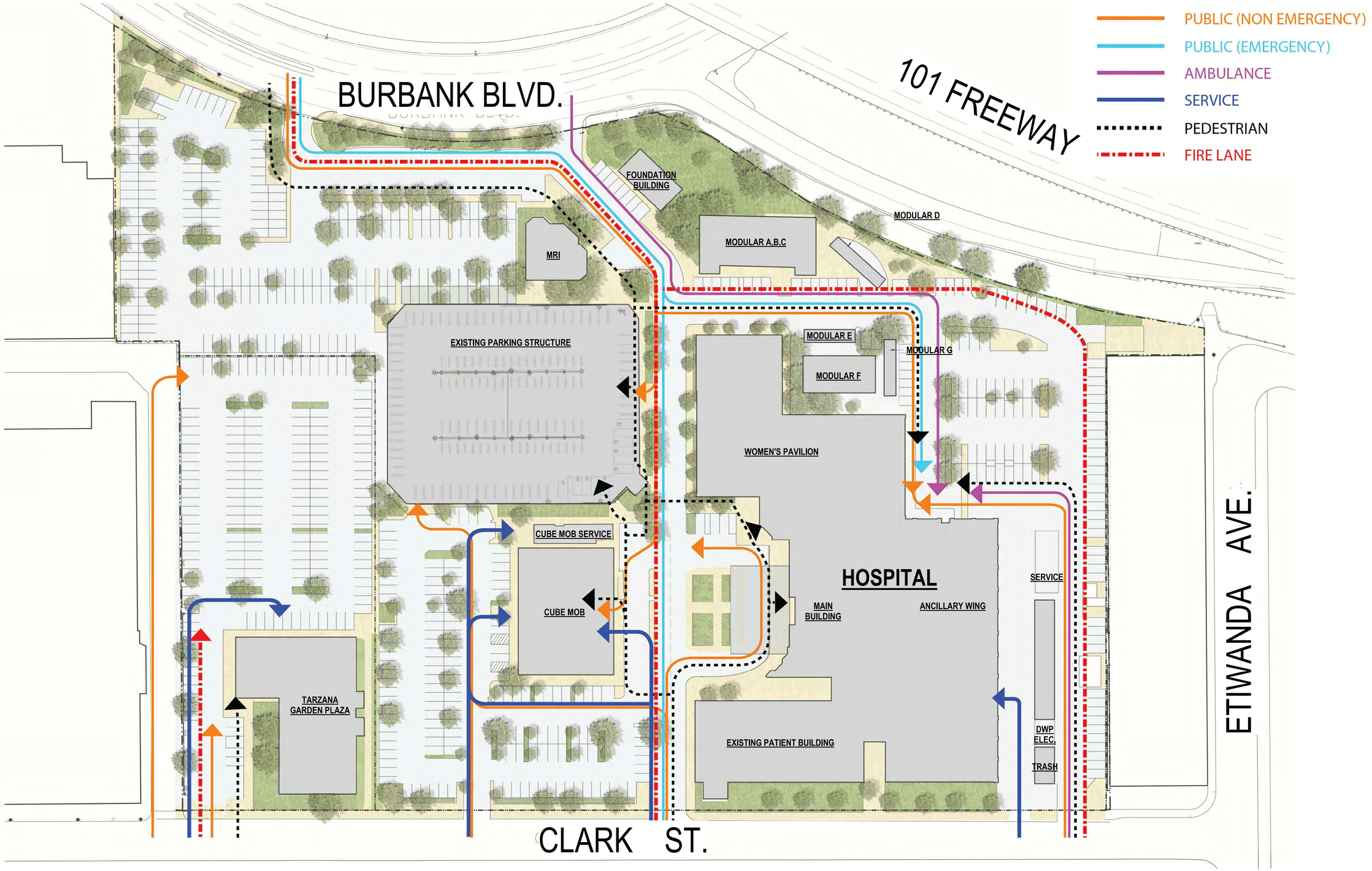
18321 Clark Street
Tarzana, CA 91356

Title

RENDERING

SHEET
A0.6

1/4/2018 6:47:34 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

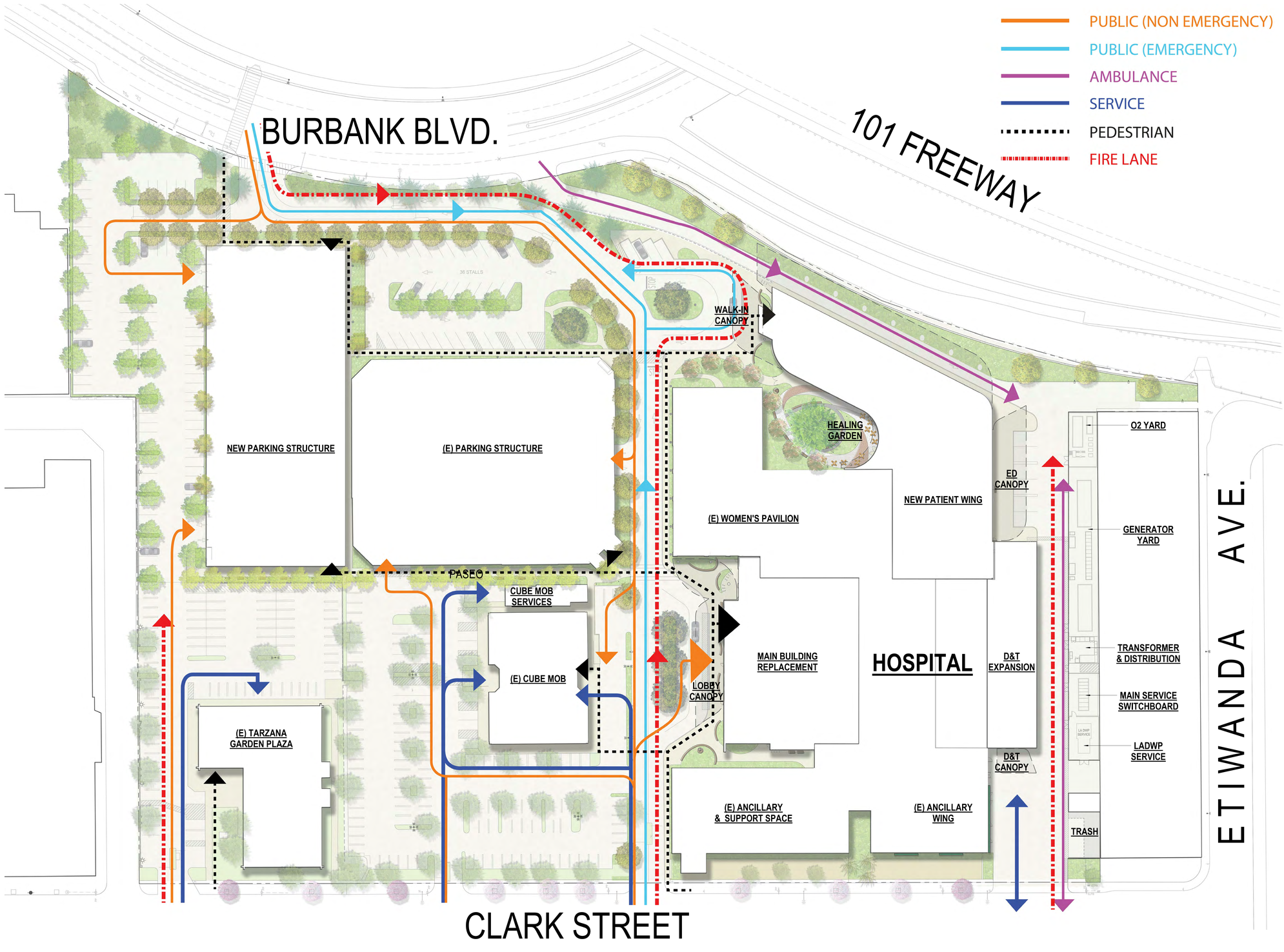
18321 Clark Street
Tarzana, CA 91356

Title

EXISTING CIRCULATION PLAN

SHEET
A0.7

1/4/2018 6:48:06 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



NORTH

32' 16' 0' 32' 64'

PERKINS+WILL

617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

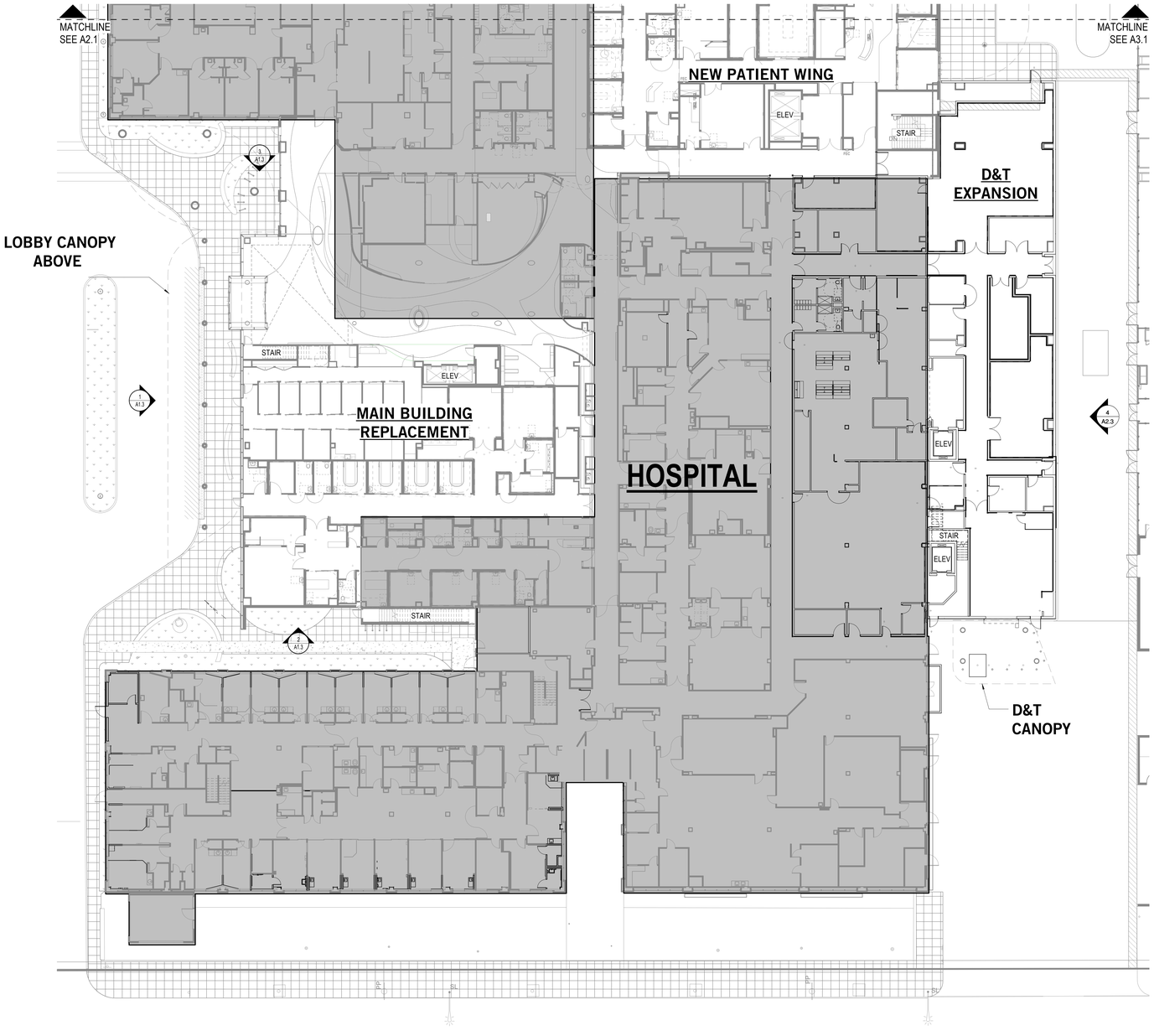
Title

PROPOSED CIRCULATION PLAN

SHEET

A0.8

1/4/2018 6:48:17 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

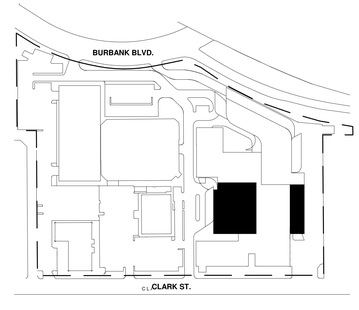


1 MAIN BUILDING AND D&T LEVEL 01 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

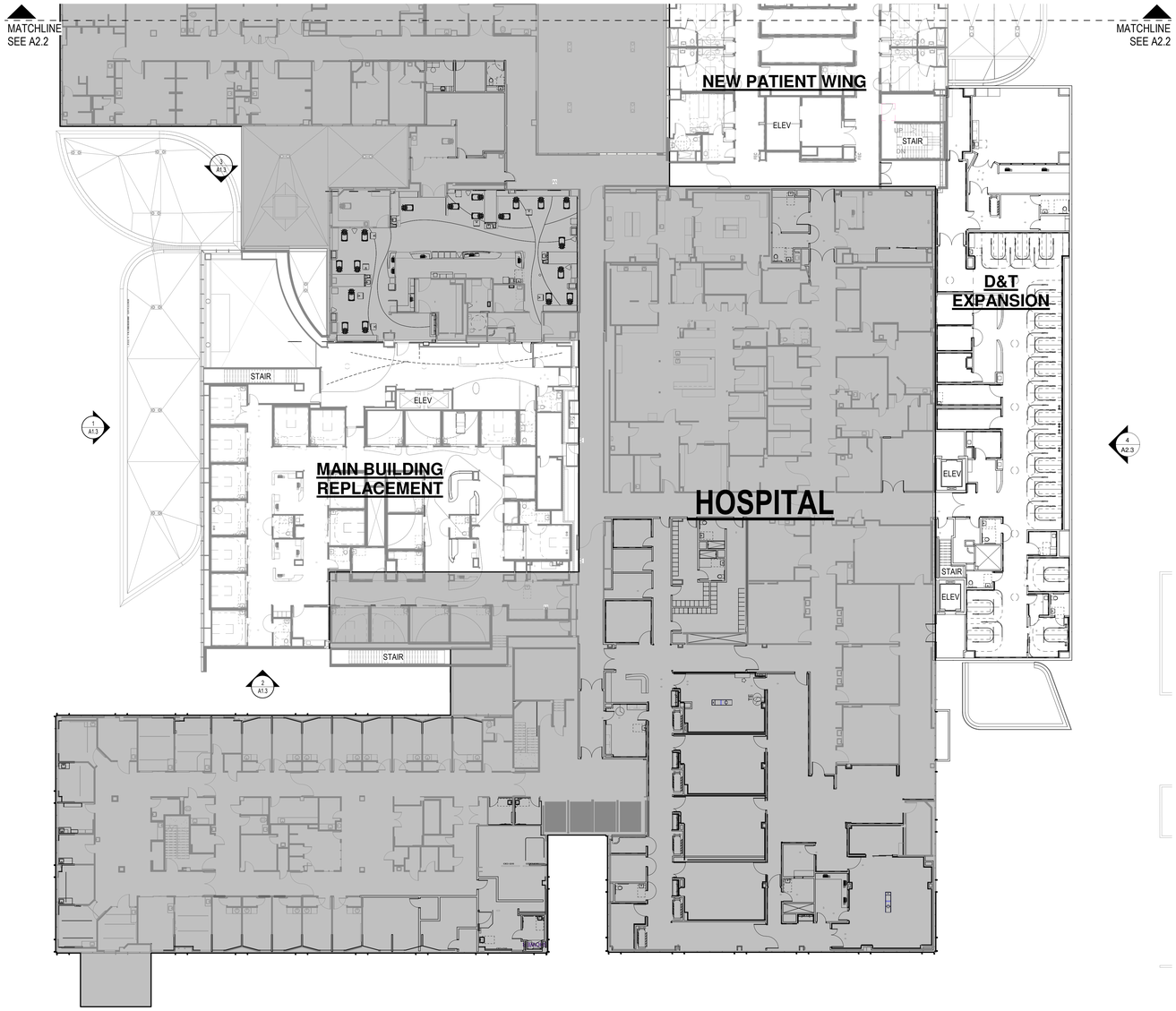
18321 Clark Street
Tarzana, CA 91356

Title

MAIN BUILDING AND D&T LEVEL 01 FLOOR PLAN

SHEET
A1.1

1/4/2018 6:51:44 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



A2.6 1

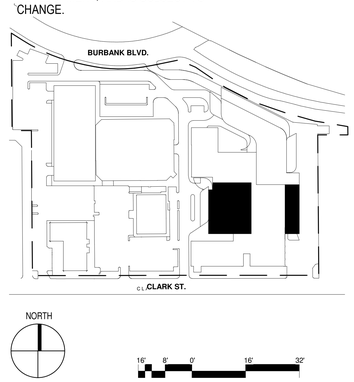
1 MAIN BUILDING AND D&T LEVEL 02 FLOOR PLAN

1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

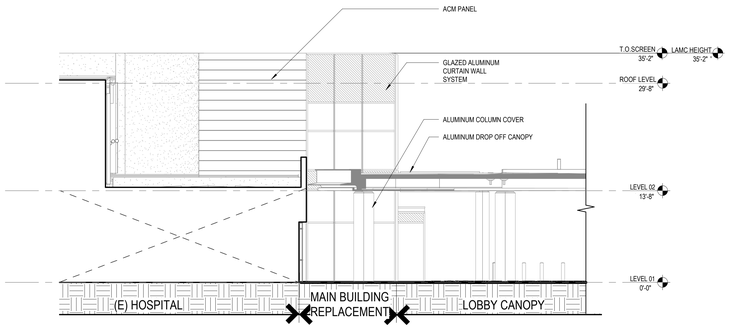
18321 Clark Street
Tarzana, CA 91356

Title

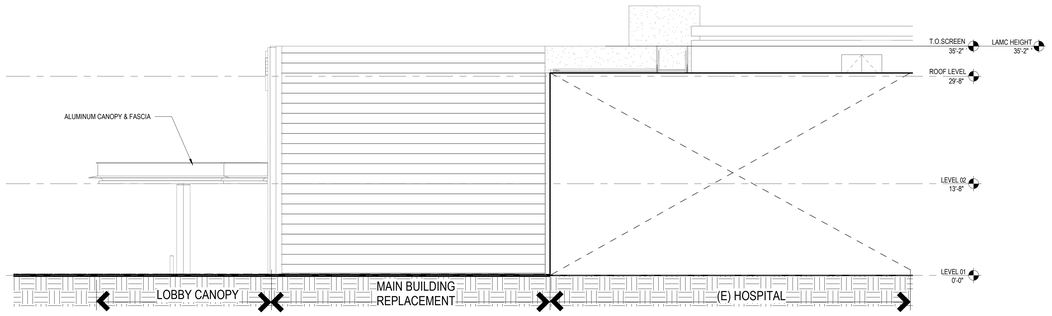
MAIN BUILDING AND D&T LEVEL 02 FLOOR PLAN

SHEET
A1.2

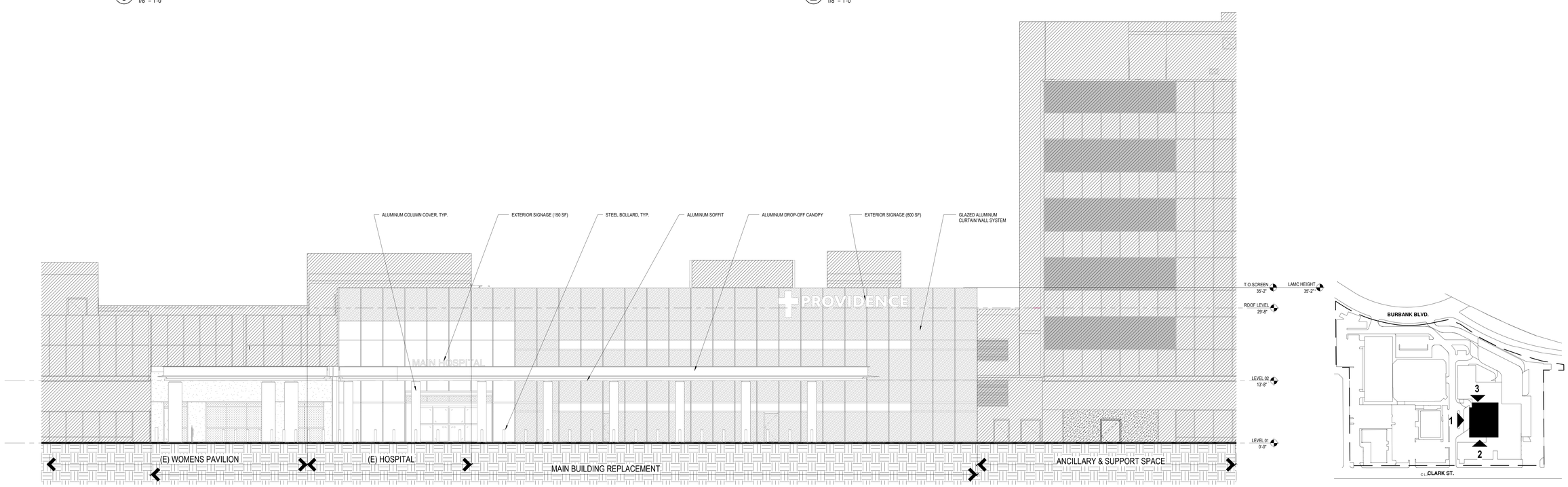
1/4/2018 6:45:48 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



3 LOBBY ENTRANCE NORTH ELEVATION.
1/8" = 1'-0"



2 LOBBY ENTRANCE SOUTH ELEVATION.
1/8" = 1'-0"



1 BUILDING 1 ELEVATOIN
1/8" = 1'-0"

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

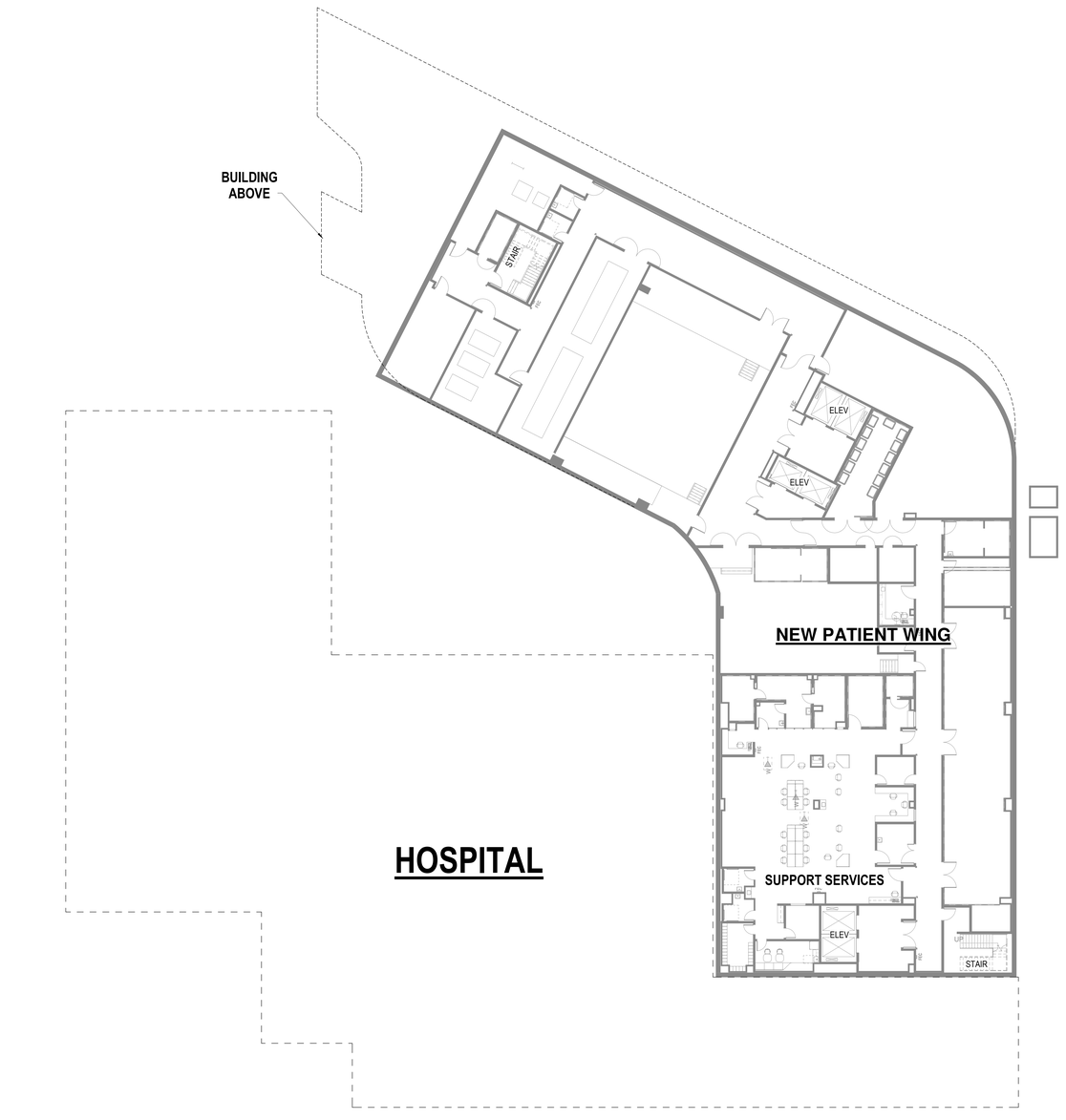
18321 Clark Street
Tarzana, CA 91356

Title

MAIN BUILDING ELEVATIONS

SHEET
A1.3

1/4/2018 6:48:45 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

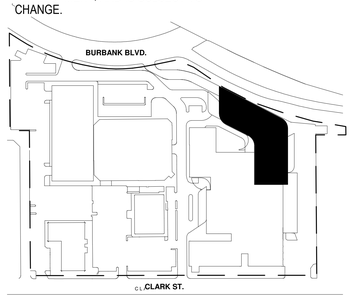


1 NEW PATIENT WING BASEMENT FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

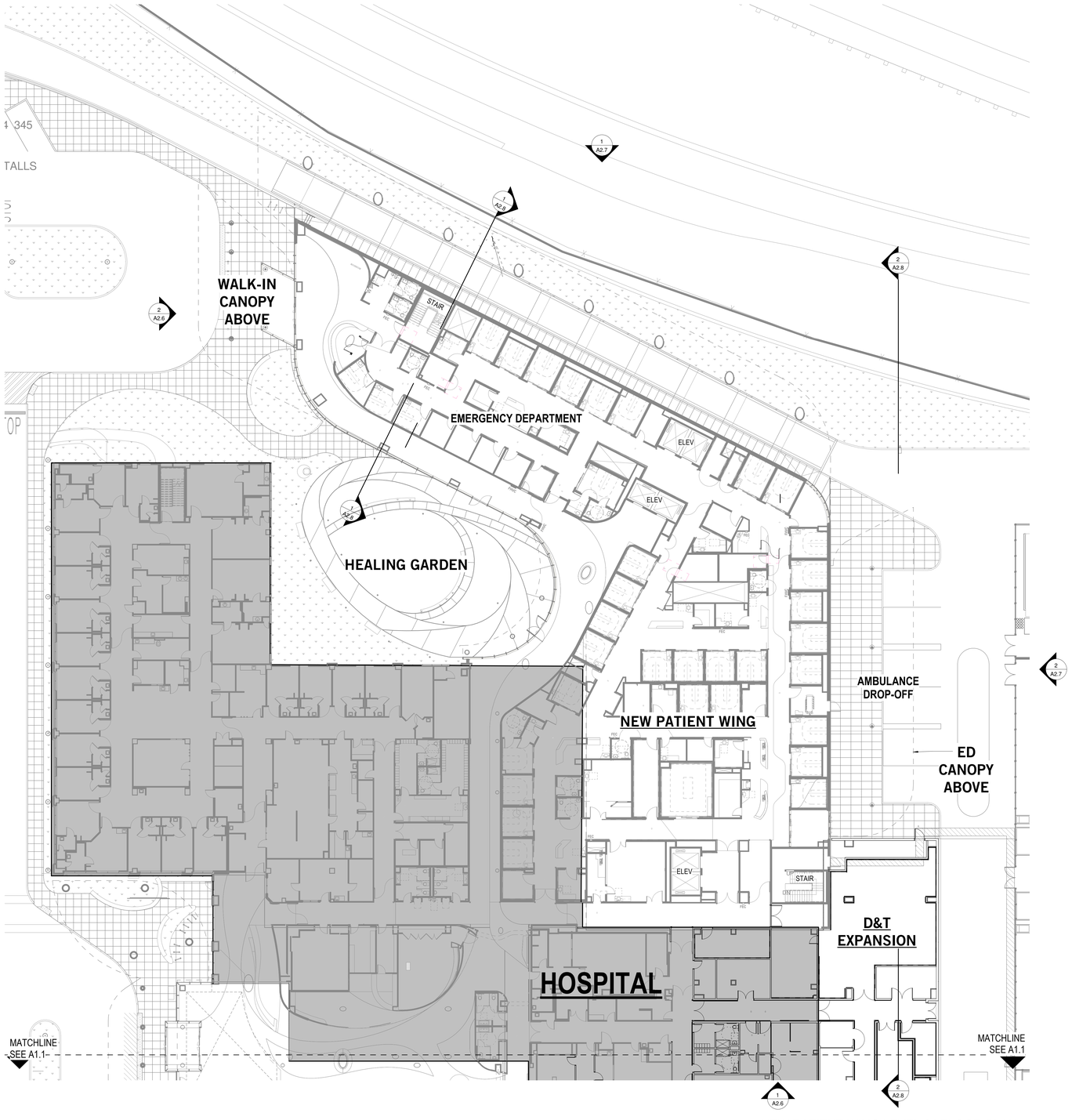
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING BASEMENT FLOOR PLAN

SHEET
A2.0

1/4/2018 6:43:51 PM
PTNC_AR_ENTITLEMENT_CENTRAL_detached.rvt

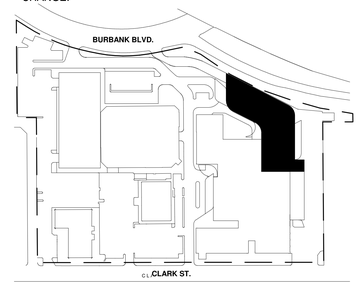


1 NEW PATIENT WING LEVEL 01 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

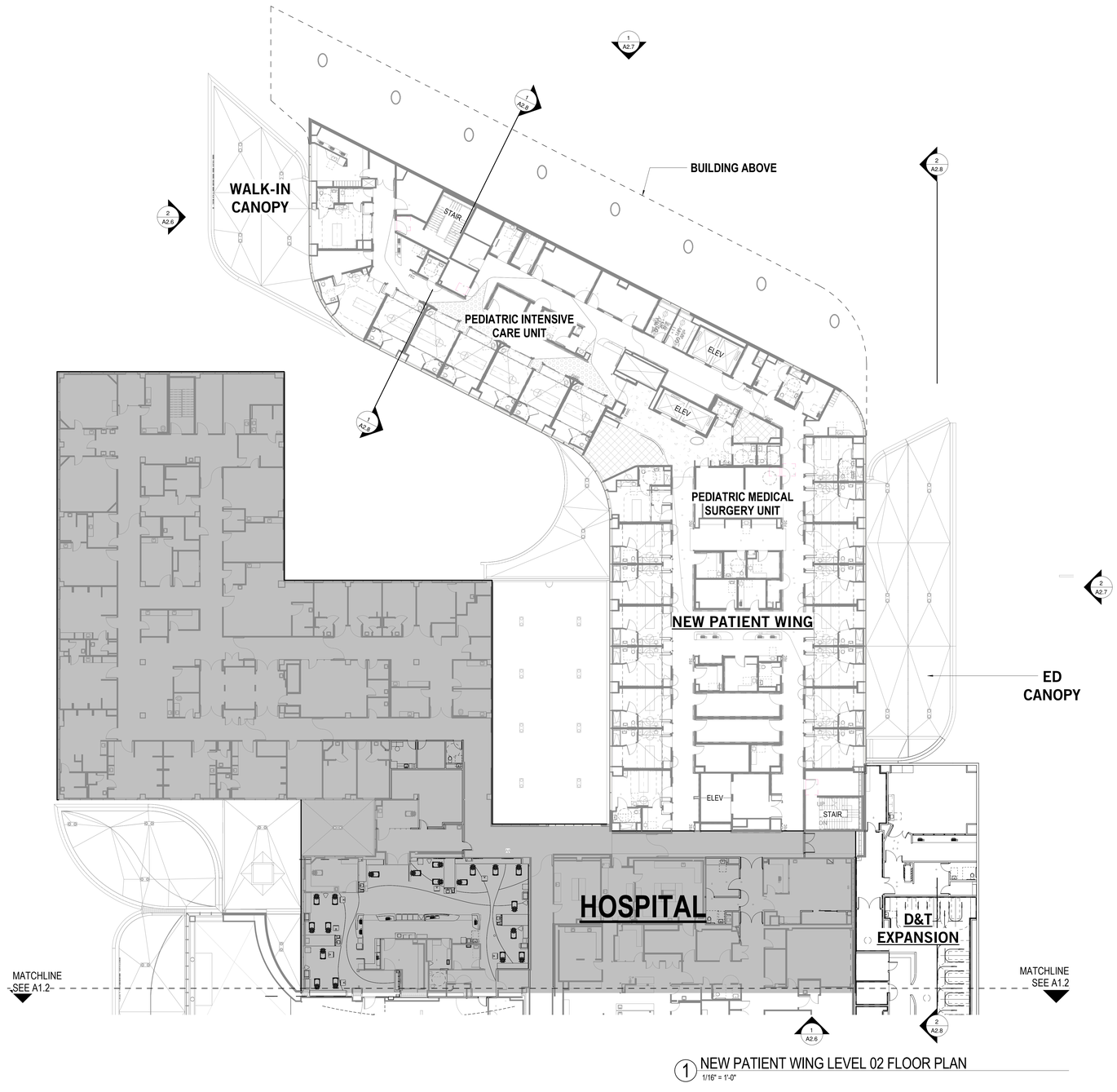
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING LEVEL 01 FLOOR PLAN

SHEET
A2.1

1/4/2018 6:44:11 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

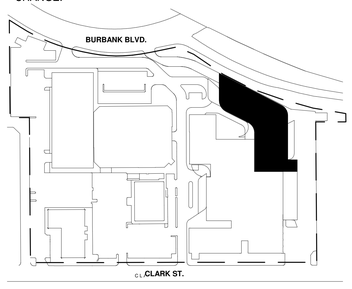


1 NEW PATIENT WING LEVEL 02 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

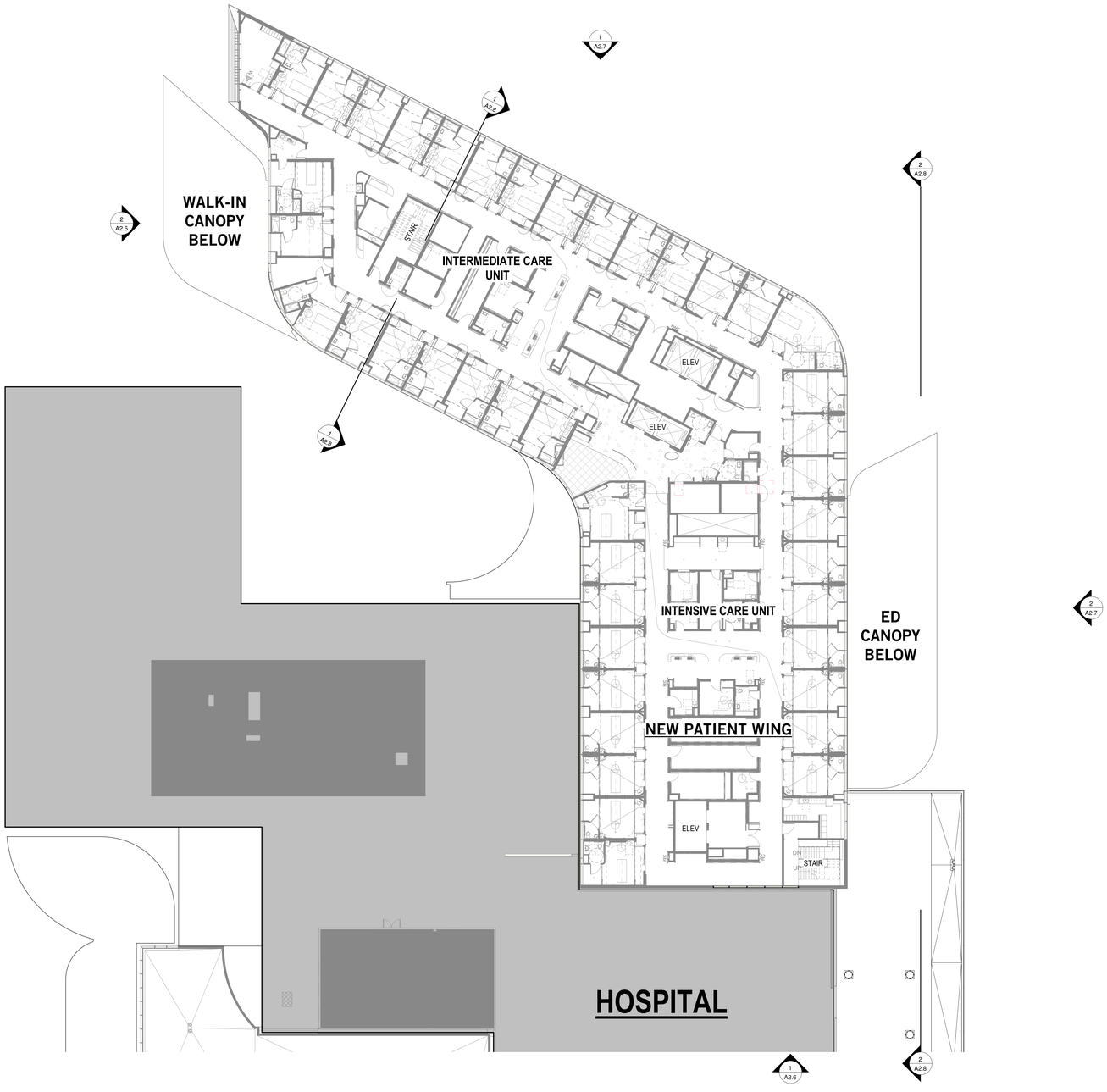
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING LEVEL 02 FLOOR PLAN

SHEET
A2.2

1/4/2018 6:44:40 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

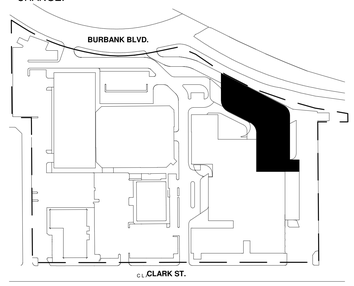


1 NEW PATIENT WING LEVEL 03 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

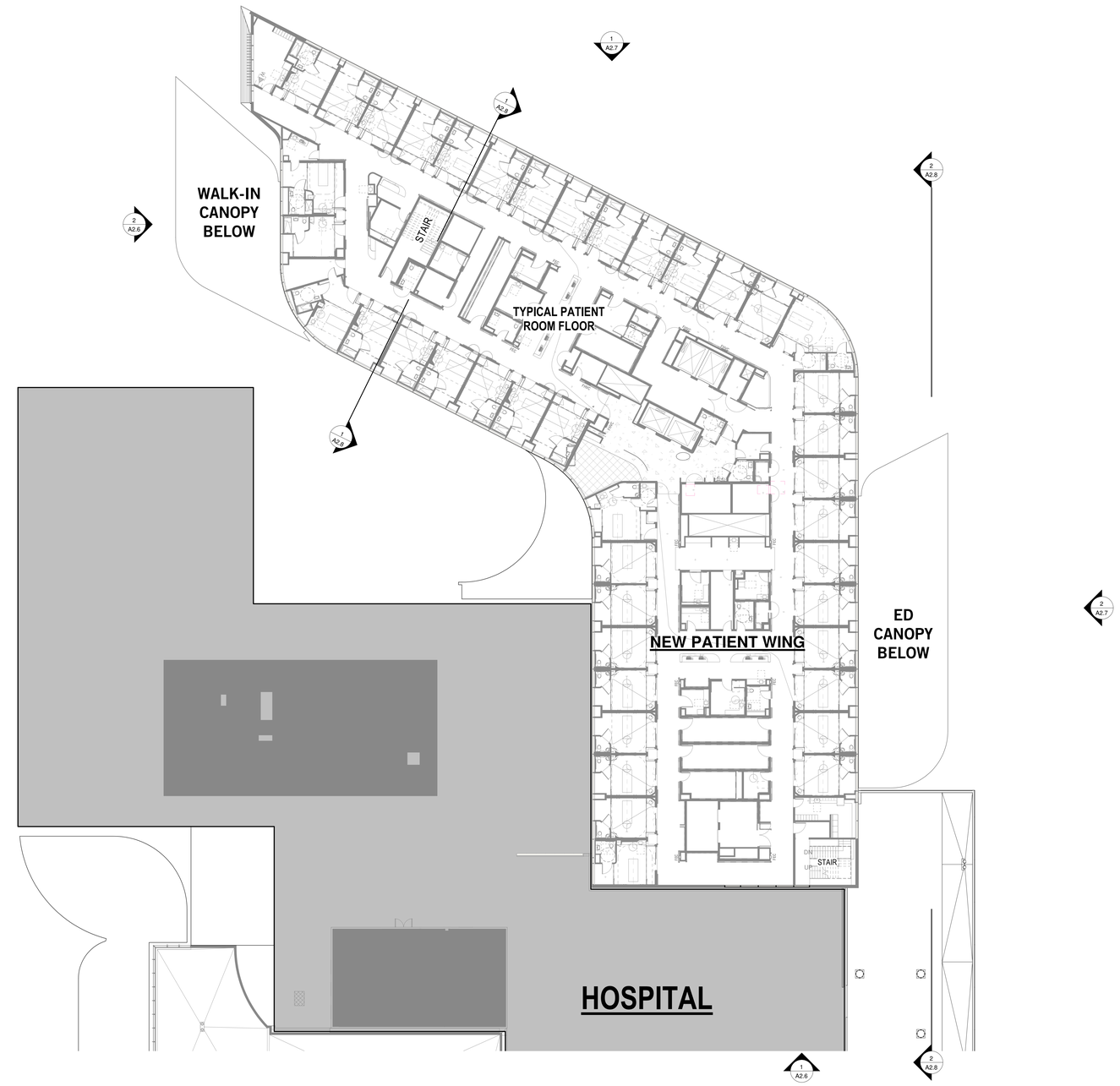
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING LEVEL 03 FLOOR PLAN

SHEET
A2.3

1/4/2018 6:46:39 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

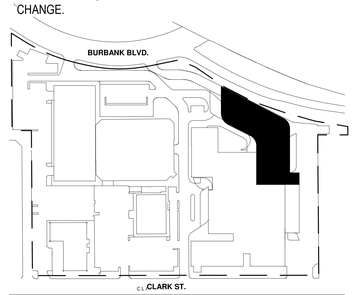


1 NEW PATIENT WING LEVEL 04 - 06 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

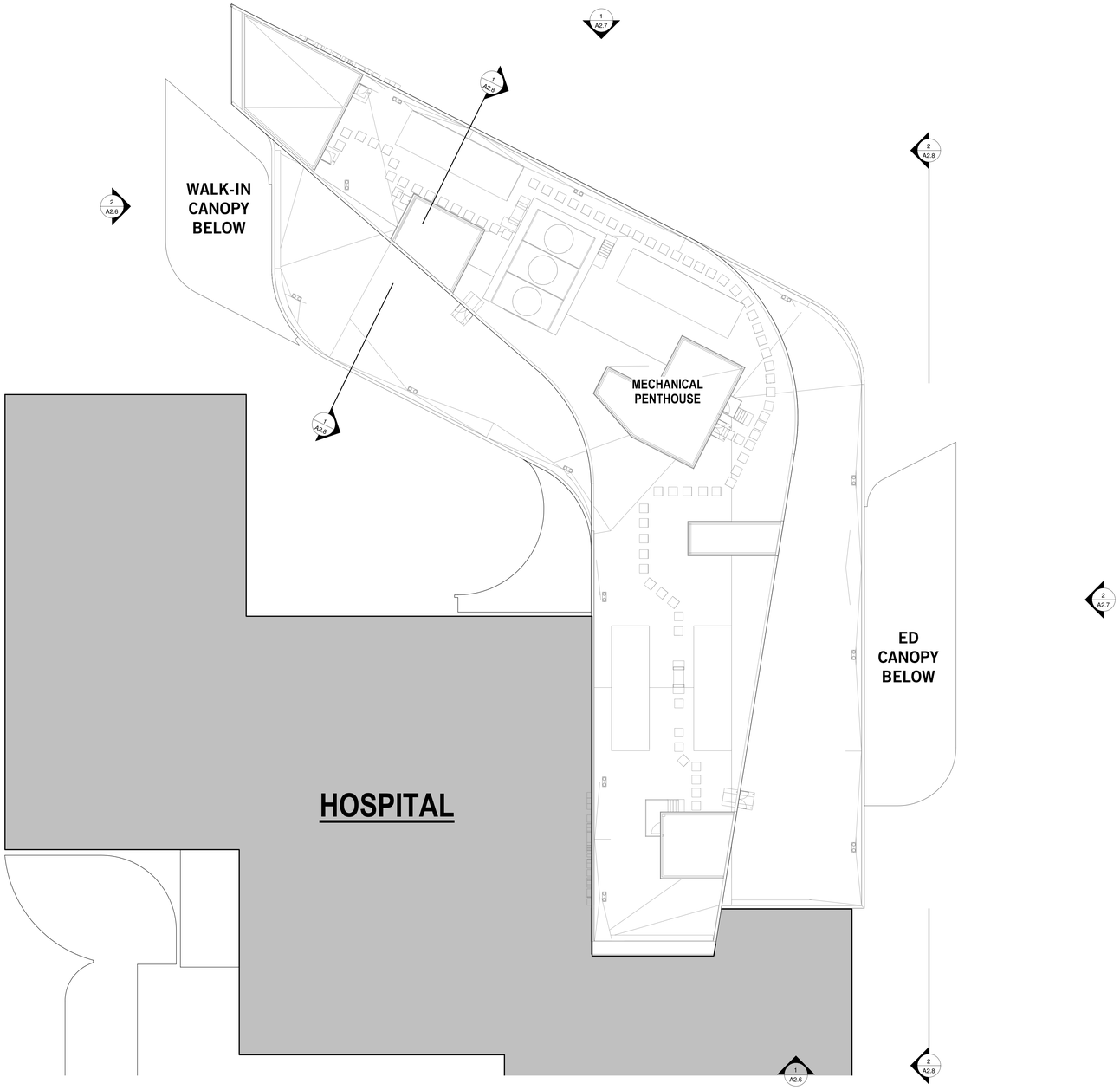
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING TYPICAL FLOOR PLAN (LEVELS 04 - 06)

SHEET
A2.4

1/4/2018 6:45:11 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

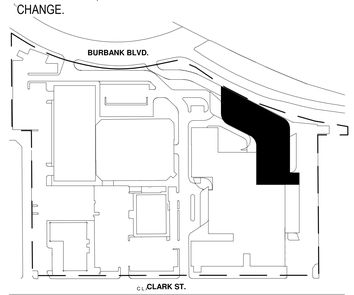


1 NEW PATIENT WING LEVEL ROOF PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

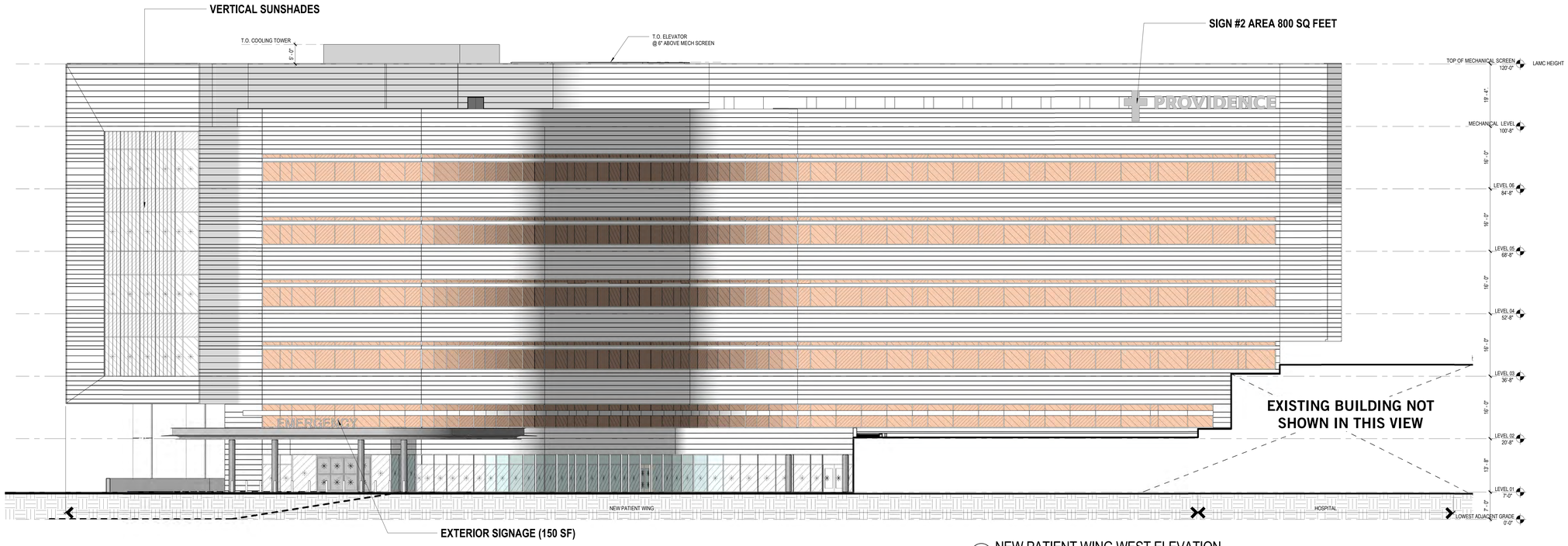
18321 Clark Street
Tarzana, CA 91356

Title

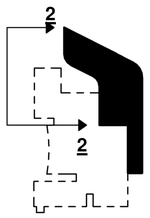
NEW PATIENT WING ROOF PLAN

SHEET
A2.5

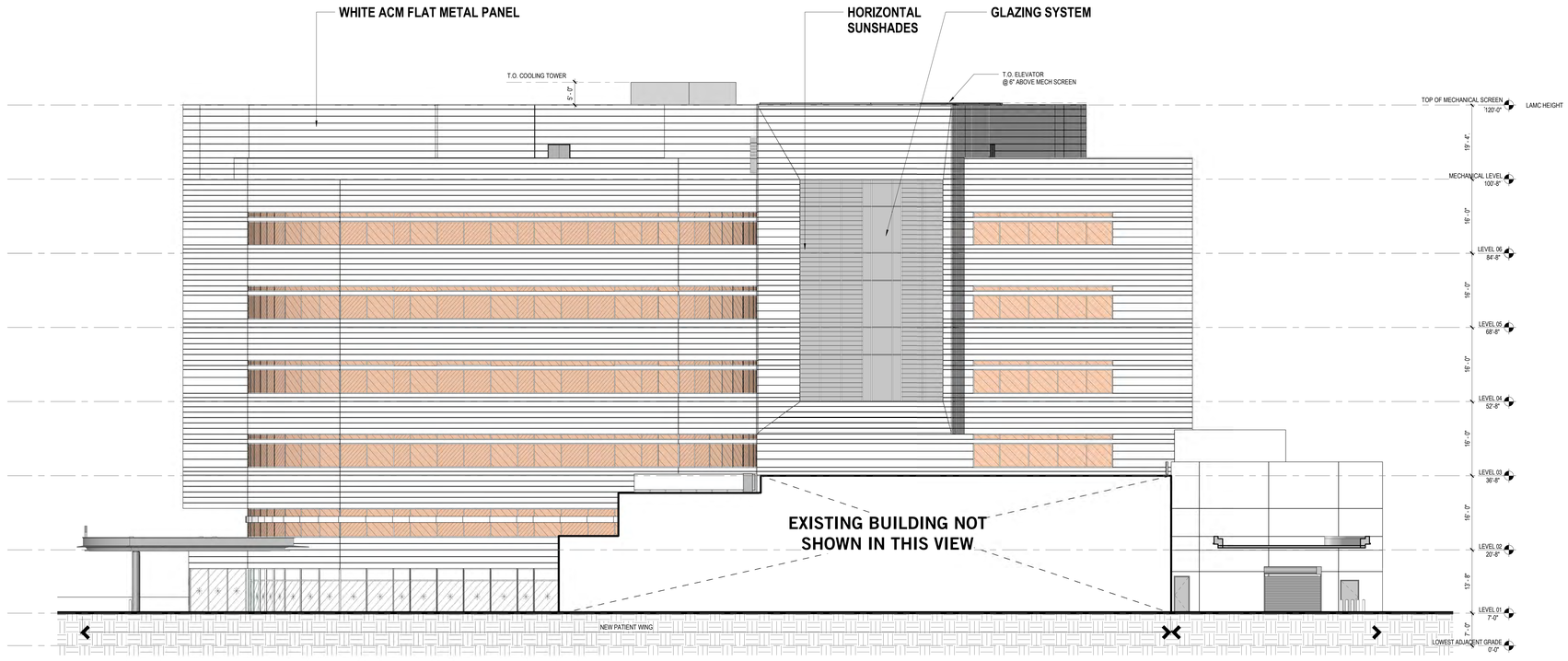
1/4/2018 6:45:20 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



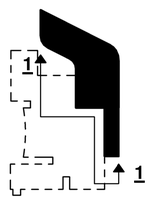
2 NEW PATIENT WING WEST ELEVATION
3/32" = 1'-0"



VIEW KEY



1 NEW PATIENT WING SOUTH ELEVATION
3/32" = 1'-0"



VIEW KEY

32' 16' 0' 32' 64'

1/5/2018 3:17:21 AM
P:\MC_AR_ENTITLEMENT_CENTRAL_detached.rvt

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

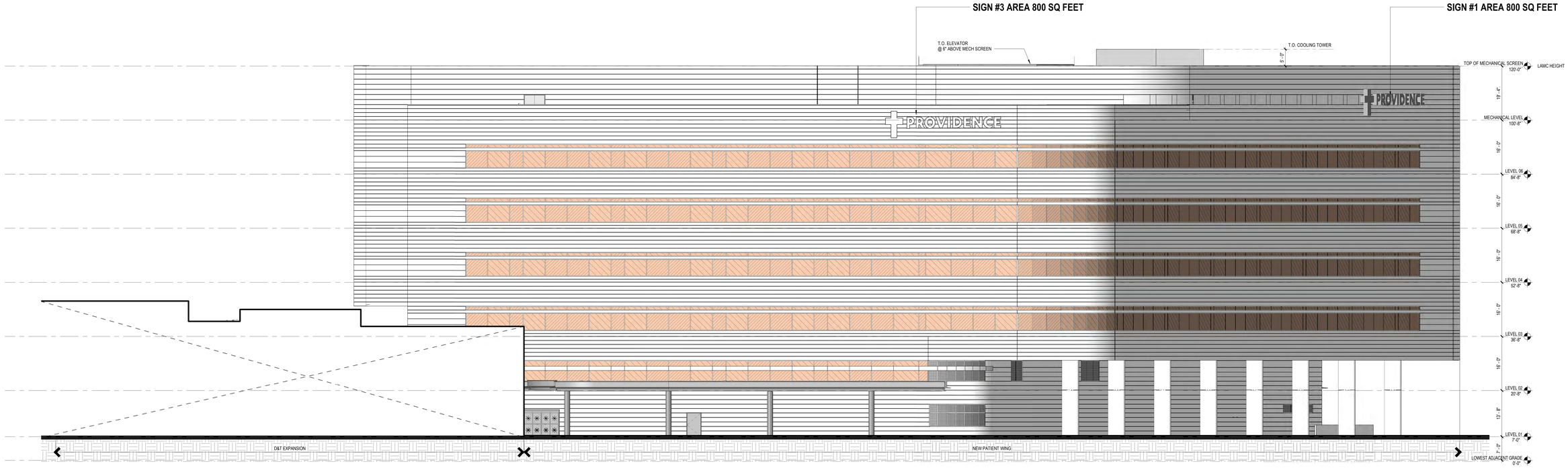
Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

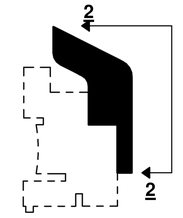
Title

NEW PATIENT WING ELEVATIONS

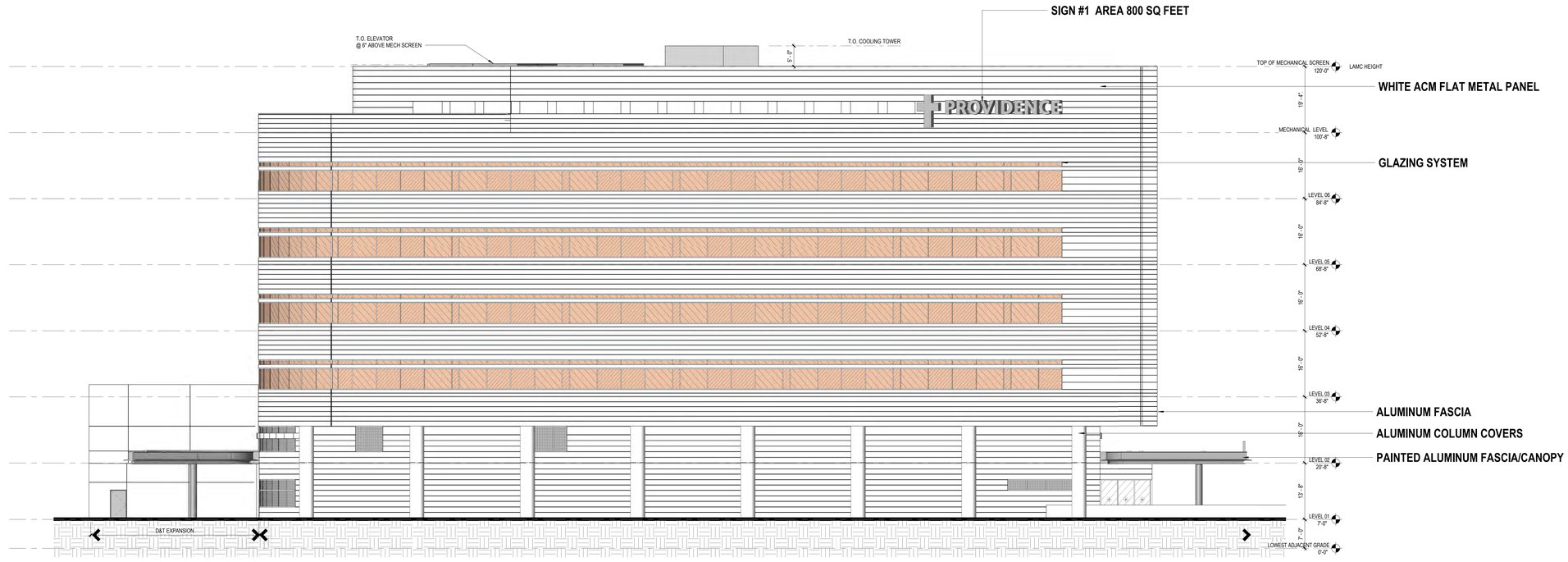
SHEET
A2.6



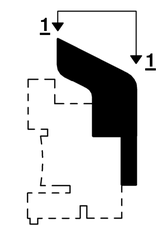
2 NEW PATIENT WING EAST ELEVATION
3/32" = 1'-0"



VIEW KEY



1 NEW PATIENT WING NORTH ELEVATION
3/32" = 1'-0"



VIEW KEY

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

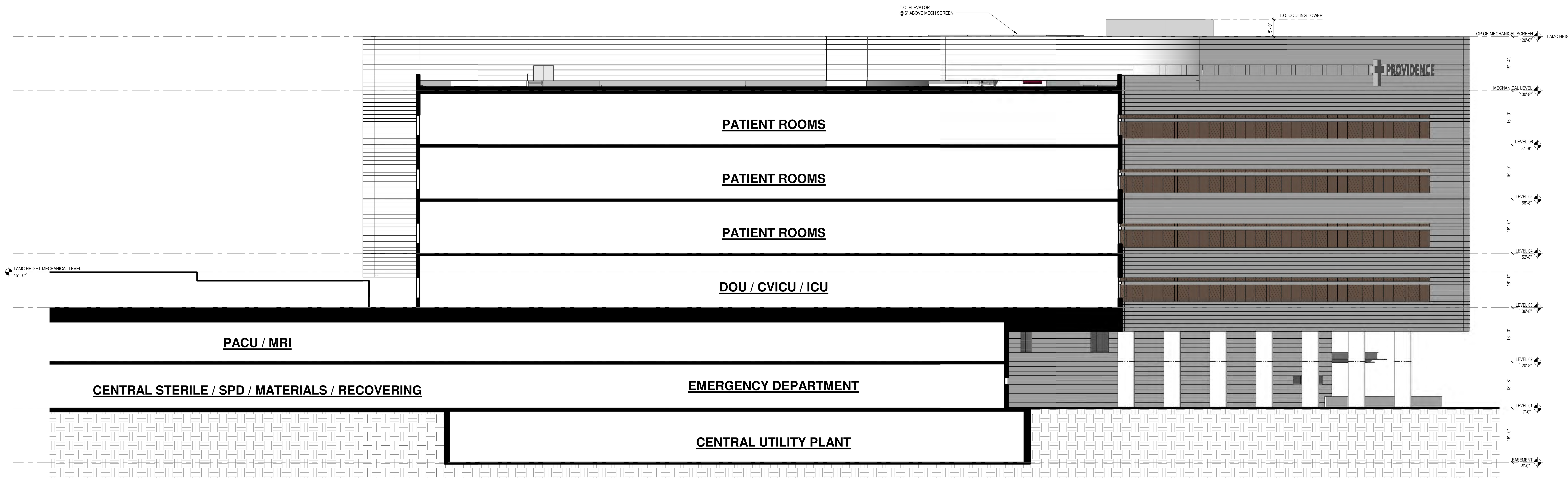
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING ELEVATIONS

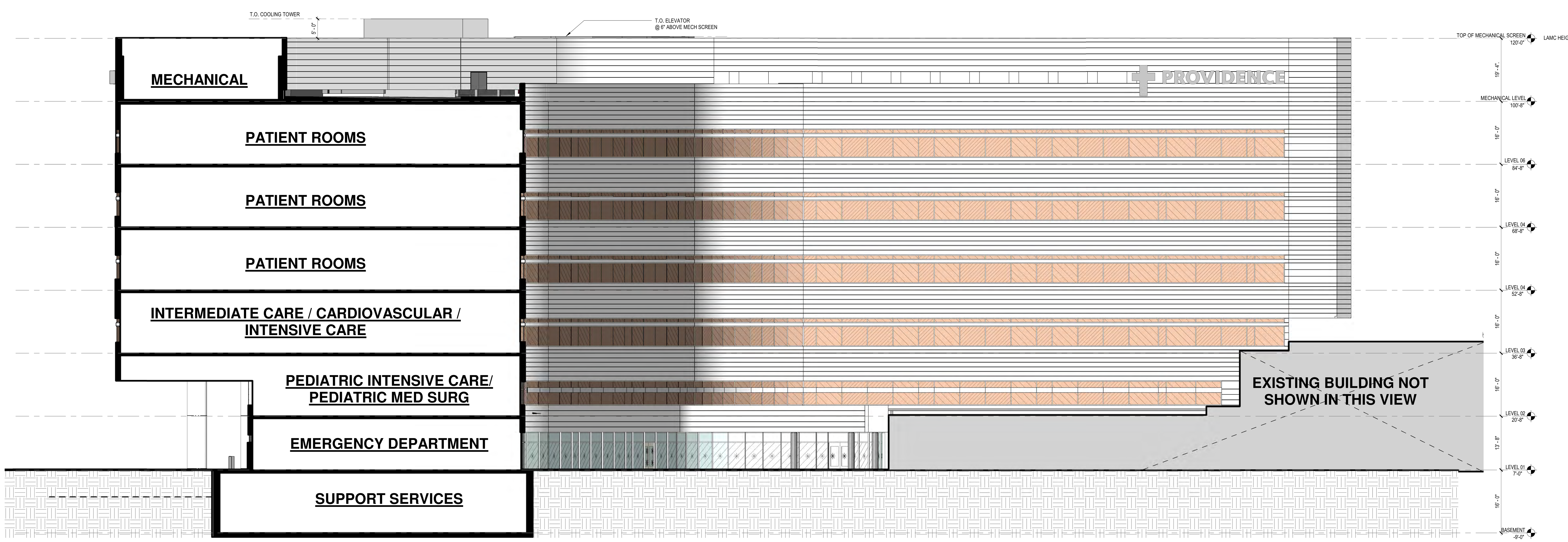
SHEET
A2.7

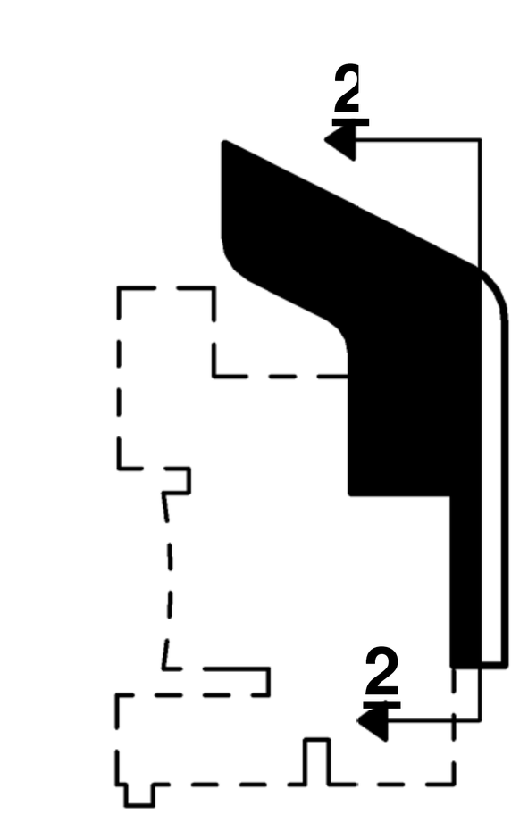
1/5/2018 3:12:47 AM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



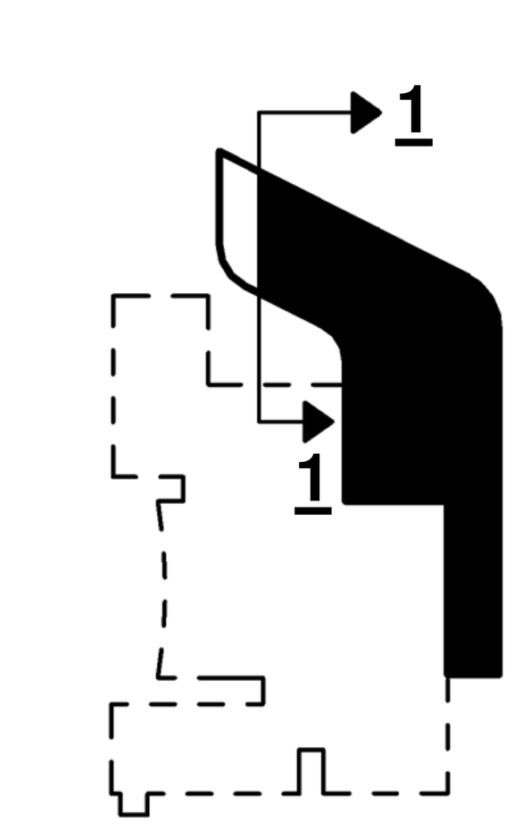
NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.

(2) NEW PATIENT WING SECTION EAST
3/32" = 1'-0"





VIEW KEY



VIEW KEY

NOTE: PRECISE LOCATION OF PROPOSED PROGRAM IS IN DEVELOPMENT; AND IS SUBJECT TO CHANGE.

(1) NEW PATIENT WING SECTION WEST
3/32" = 1'-0"

32' 16' 0' 32' 64'

PERKINS+WILL

617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

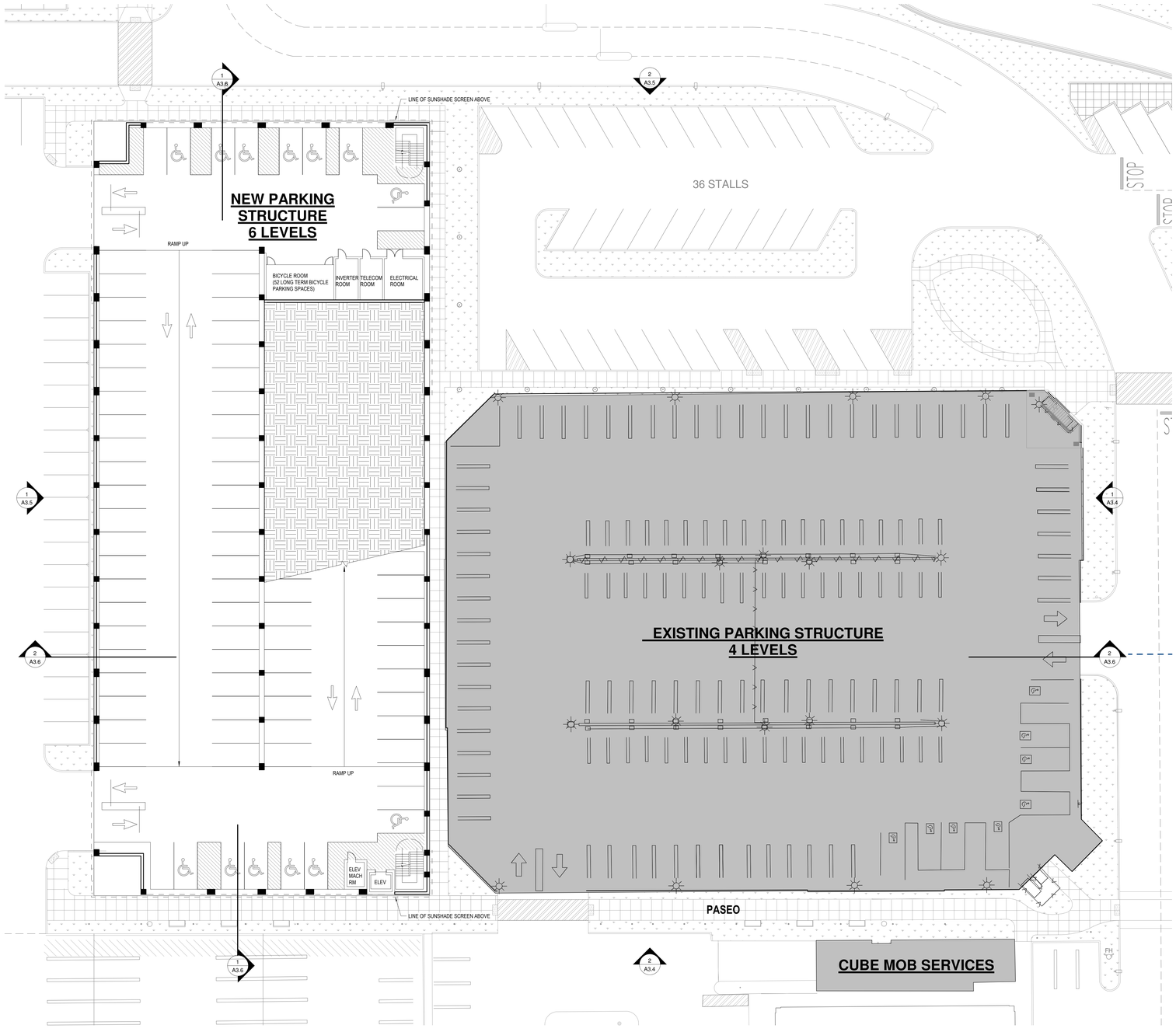
18321 Clark Street
Tarzana, CA 91356

Title

NEW PATIENT WING SECTIONS

SHEET
A2.8

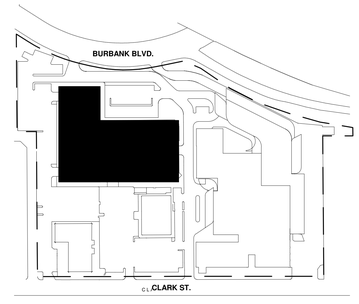
1/5/2018 3:21:37 AM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



1 PARKING STRUCTURE LEVEL 1 FLOOR PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

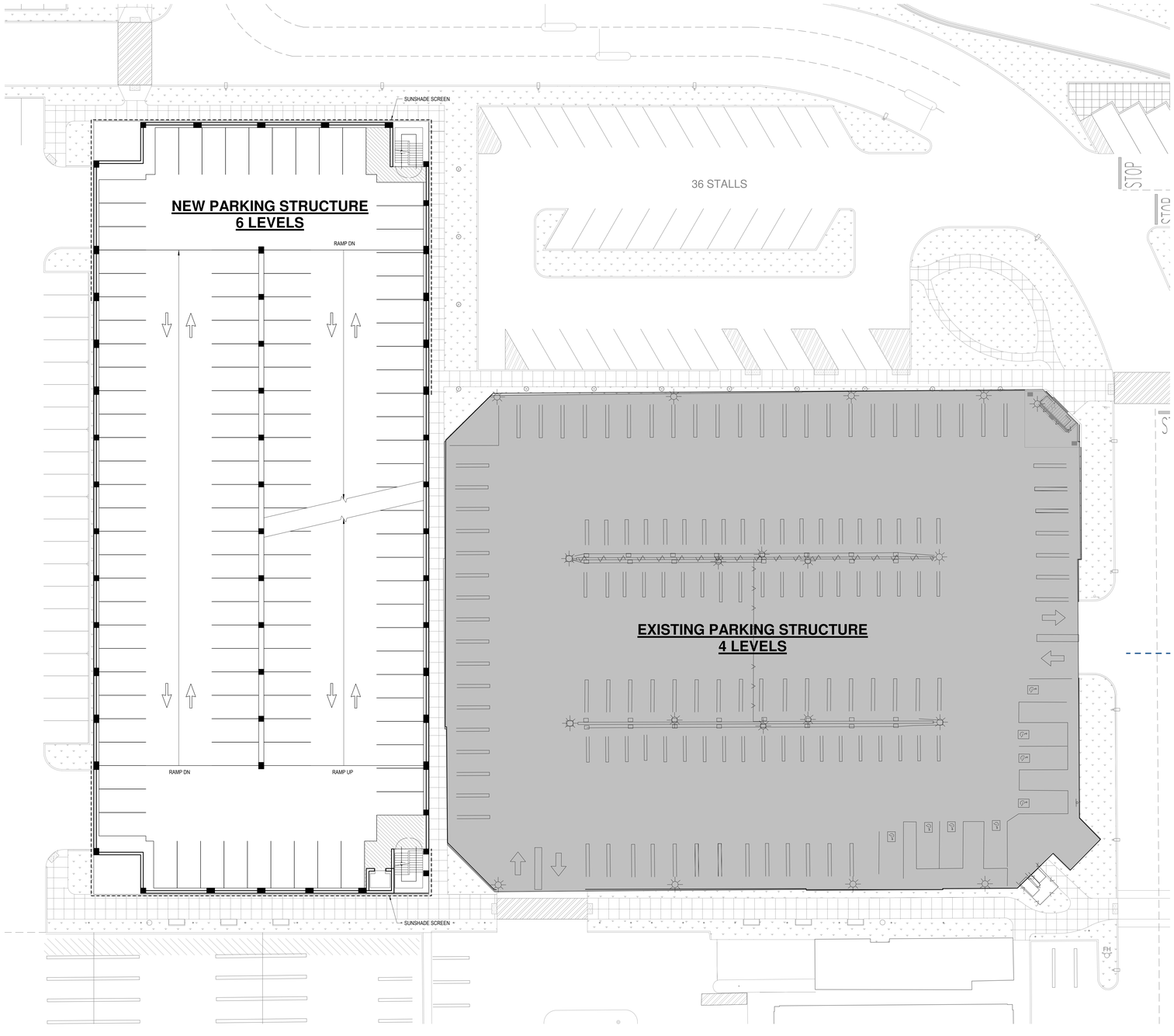
18321 Clark Street
Tarzana, CA 91356

Title

PARKING STRUCTURE LEVEL 01 FLOOR PLAN

SHEET
A3.1

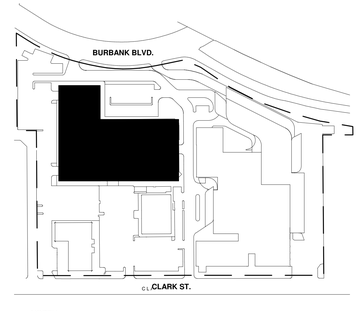
1/4/2018 8:45:26 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



1 PARKING STRUCTURE TYPICAL FLOOR PLAN (Level 2 - 5)
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

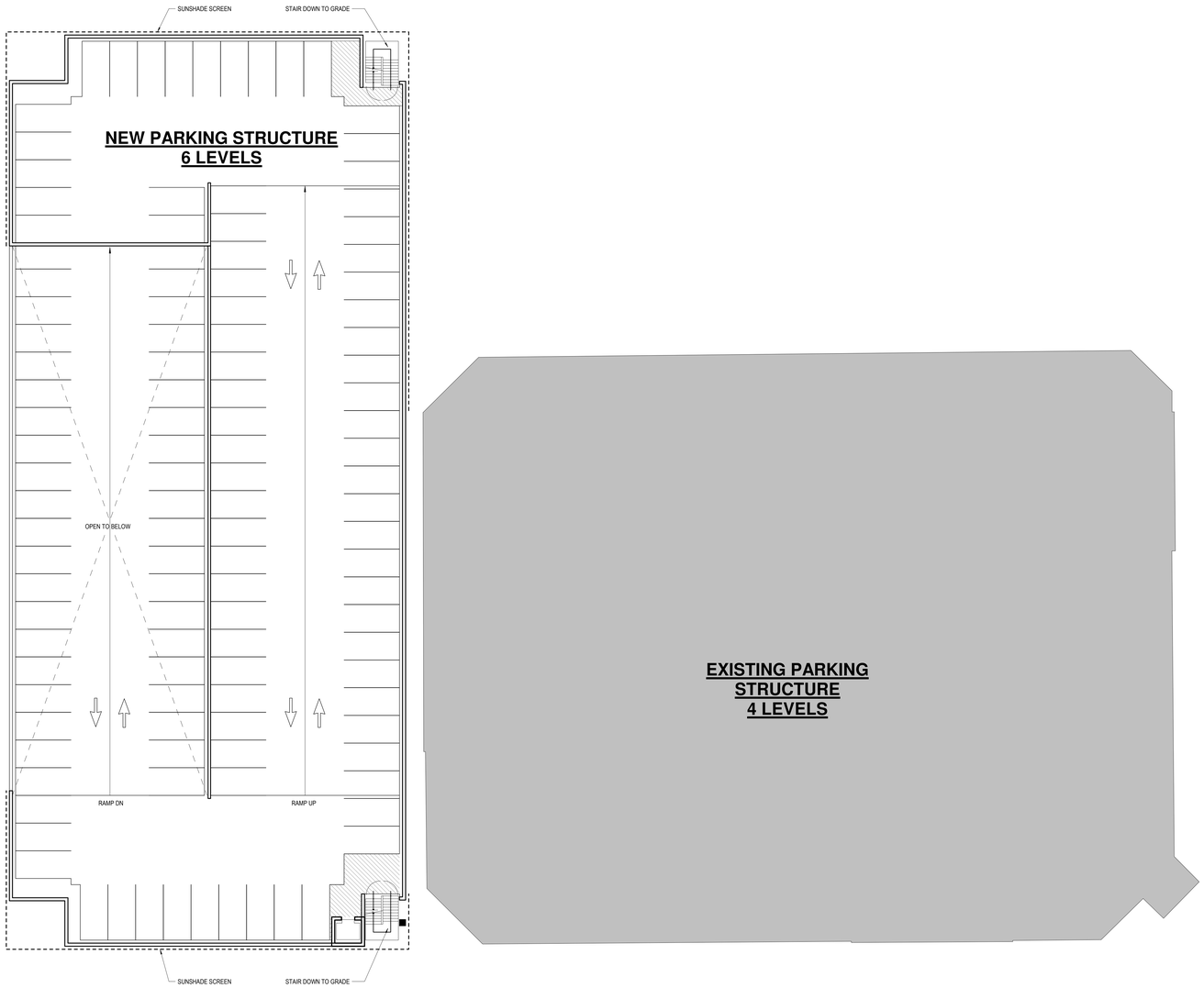
18321 Clark Street
Tarzana, CA 91356

Title

PARKING STRUCTURE TYPICAL FLOOR PLAN

SHEET
A3.2

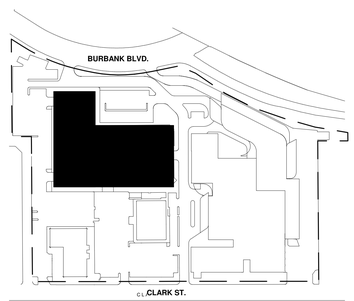
1/4/2018 8:42:58 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



1 PARKING STRUCTURE LEVEL 6 PLAN
1/16" = 1'-0"

FLOOR PLAN LEGEND

- PROPERTY LINE
- (E) BUILDING
- PEDESTRIAN ENTRANCE
- SHORT-TERM BICYCLE PARKING
- LONG-TERM BICYCLE PARKING



NORTH

16' 8' 0' 16' 32'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

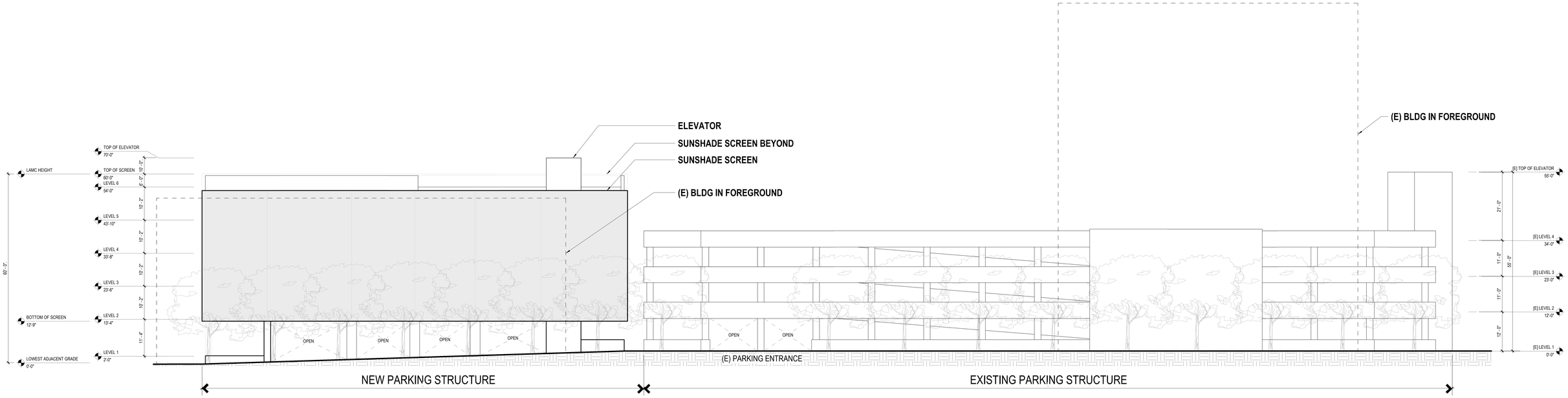
18321 Clark Street
Tarzana, CA 91356

Title

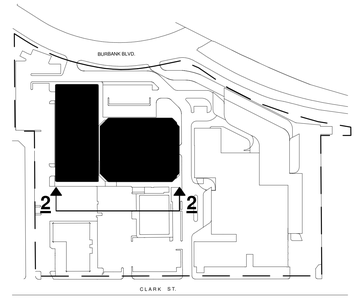
PARKING STRUCTURE LEVEL 6 PLAN

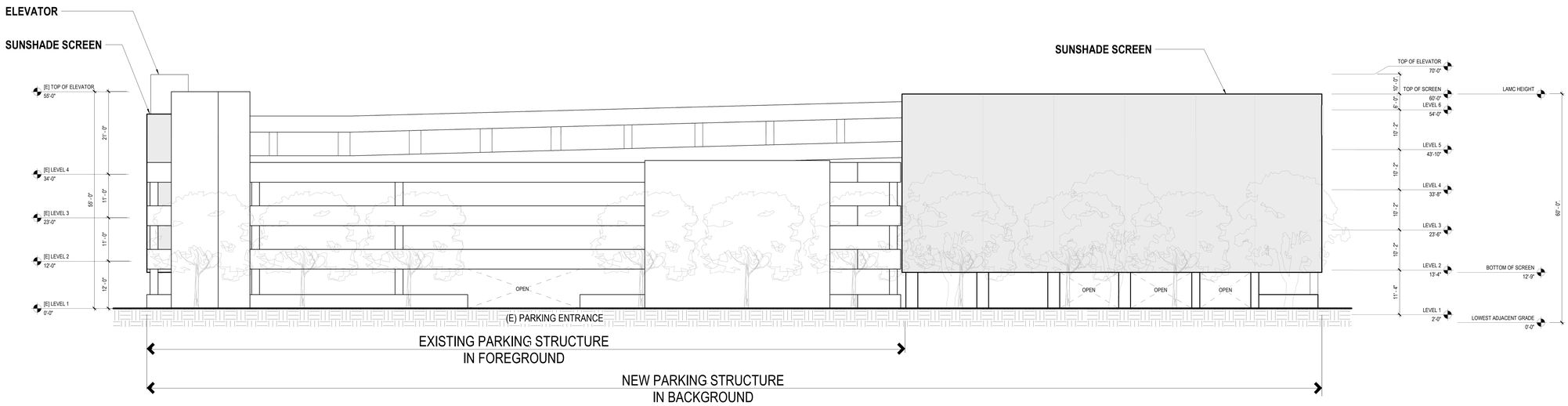
SHEET
A3.3

1/4/2018 6:48:23 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

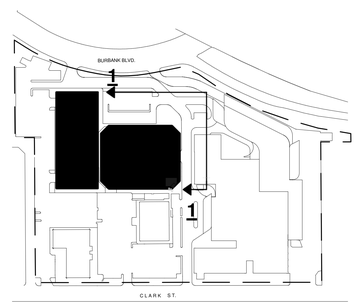


2 NEW PARKING STRUCTURE SOUTH ELEVATION
3/32" = 1'-0"





1 NEW PARKING STRUCTURE EAST ELEVATION
3/32" = 1'-0"



32" 16" 0" 32" 64"

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

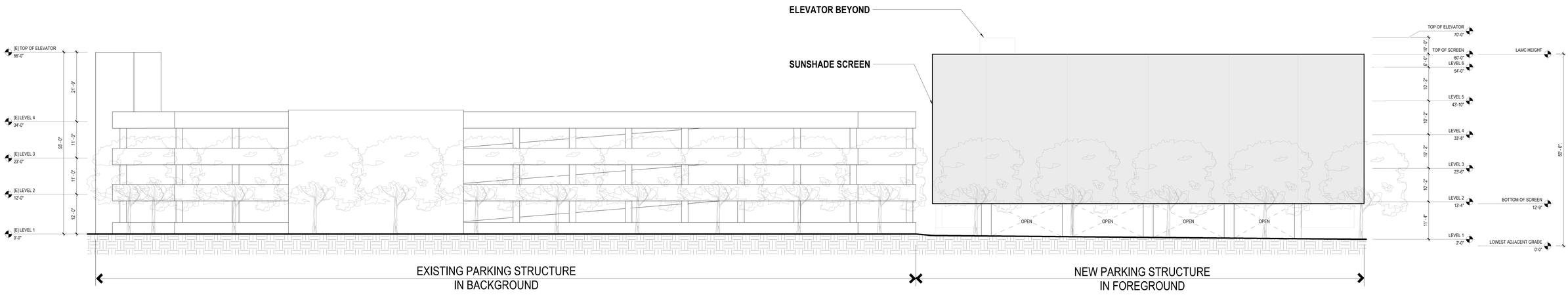
18321 Clark Street
Tarzana, CA 91356

Title

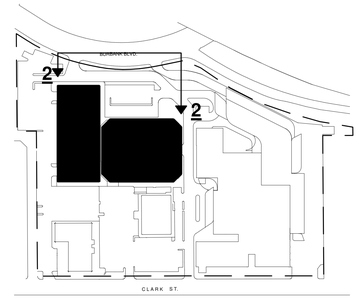
NEW PARKING STRUCTURE ELEVATIONS

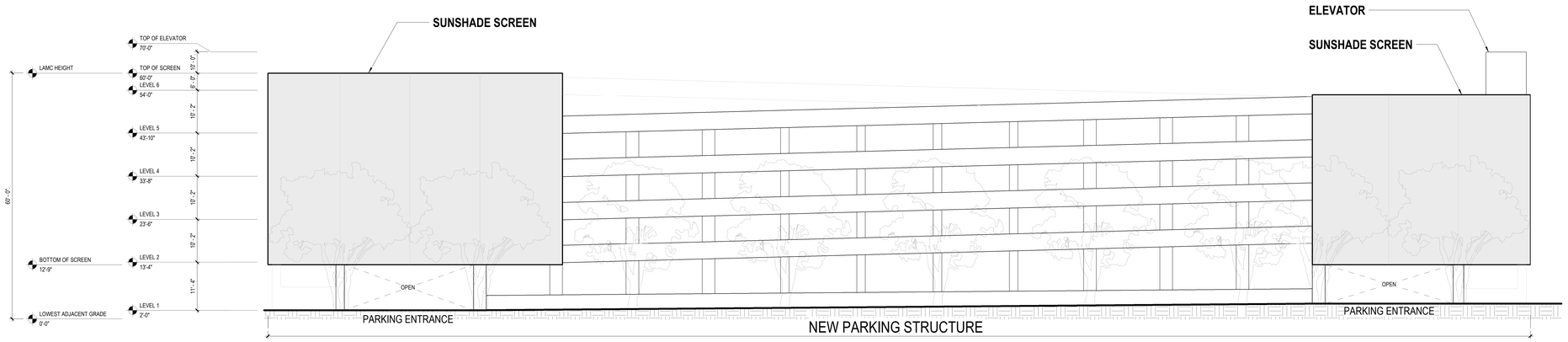
SHEET
A3.4

1/4/2018 6:43:06 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

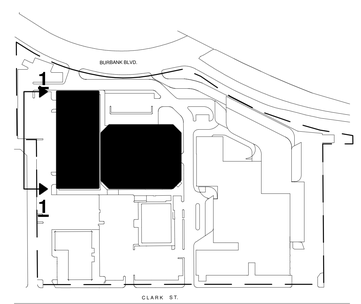


2 NEW PARKING STRUCTURE NORTH ELEVATION
3/32" = 1'-0"





1 NEW PARKING STRUCTURE WEST ELEVATION
3/32" = 1'-0"



32" 16" 0" 32" 64"

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

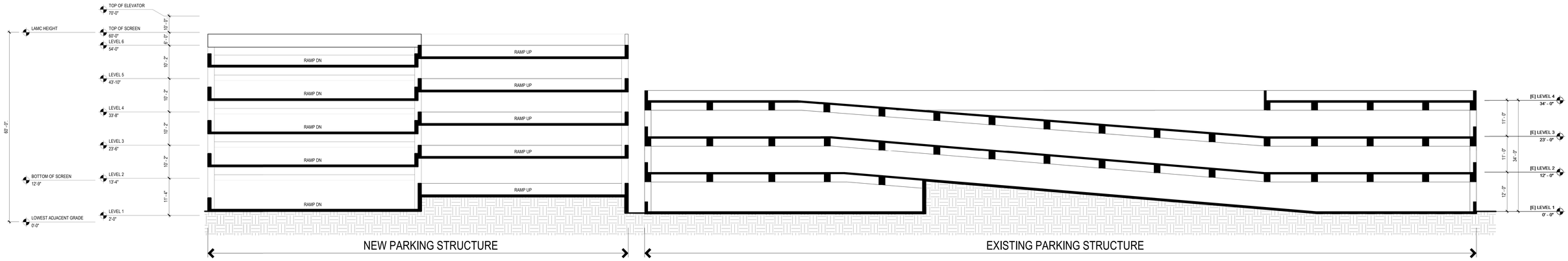
18321 Clark Street
Tarzana, CA 91356

Title

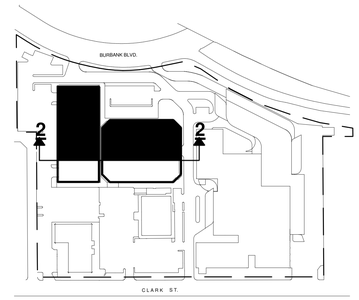
NEW PARKING STRUCTURE ELEVATIONS

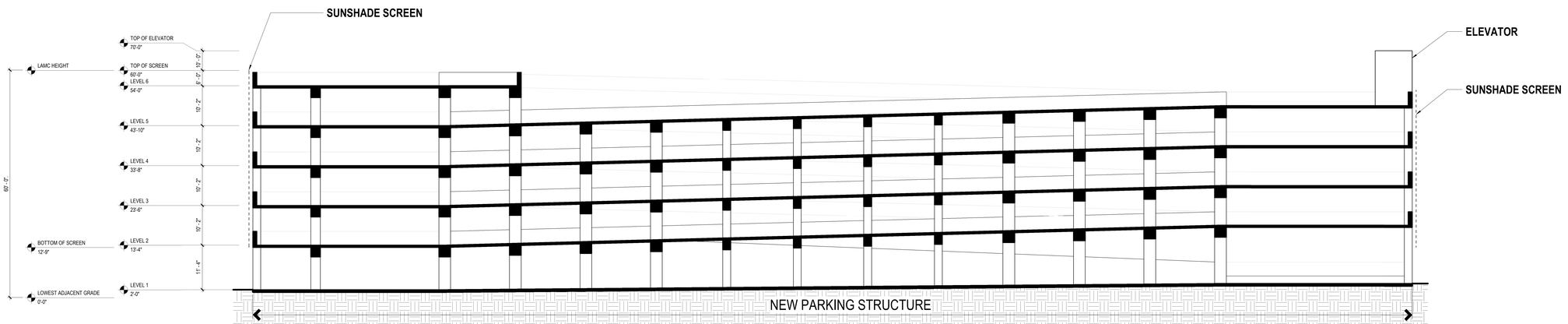
SHEET
A3.5

1/4/2018 6:43:33 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

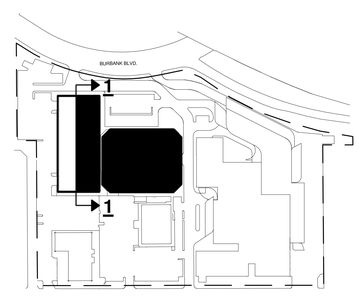


2 NEW PARKING STRUCTURE SECTION EAST-WEST
3/32" = 1'-0"





1 NEW PARKING STRUCTURE SECTION NORTH-SOUTH
3/32" = 1'-0"



32' 16' 0' 32' 64'

PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
1	MLUPA SUBMITTAL	06/24/2016
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

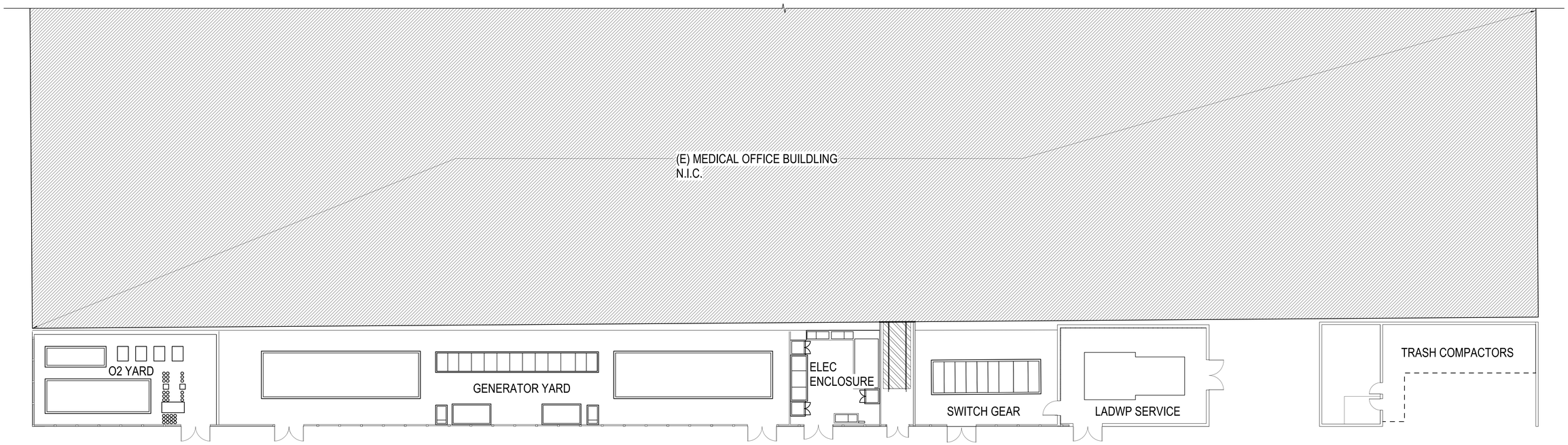
18321 Clark Street
Tarzana, CA 91356

Title

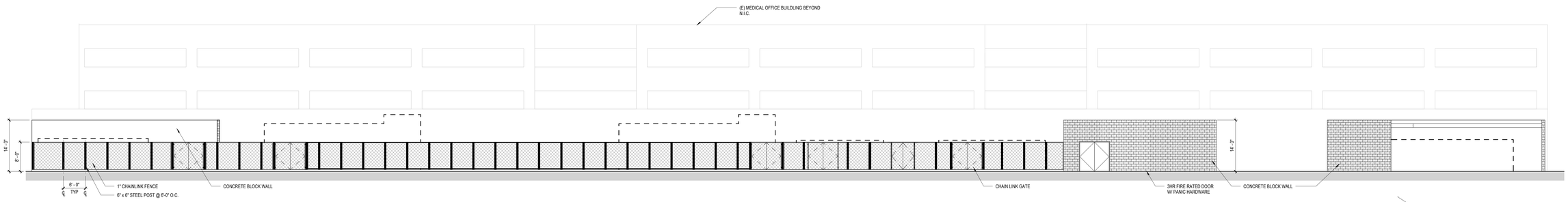
NEW PARKING STRUCTURE SECTIONS

SHEET
A3.6

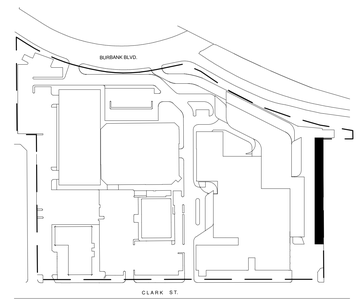
1/4/2018 6:45:55 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt



2 NEW UTILITY YARD PLAN
1" = 10'-0"



1 NEW UTILITY YARD ELEVATION
1" = 10'-0"



PERKINS+WILL
617 West 7th St., Suite 1200
t 213.270.8400
www.perkinswill.com

PROVIDENCE Tarzana Medical Center

Revisions

NO.	ISSUE	DATE
2	UPDATED MLUPA SUBMITTAL	09/18/2017
3	UPDATED MLUPA SUBMITTAL	10/25/2017
4	UPDATED MLUPA SUBMITTAL	12/13/2017
5	UPDATED MLUPA SUBMITTAL	01/05/2018

Project

Providence Tarzana Medical Center Reimagined

18321 Clark Street
Tarzana, CA 91356

Title

NEW UTILITY YARD PLAN AND ELEVATION

SHEET
A3.7

1/4/2018 6:51:48 PM
PTMC_AR_ENTITLEMENT_CENTRAL_detached.rvt

Exhibit B

Mitigation Monitoring Program

EXHIBIT B

IV. Mitigation Monitoring Program

1. Introduction

To ensure that the mitigation measures identified in an Environmental Impact Report (EIR) or Mitigated Negative Declaration (MND) are implemented, the California Environmental Quality Act (CEQA) requires the Lead Agency for a project to adopt a program for monitoring or reporting on the revisions it has required for a project and the measures it has imposed to mitigate or avoid significant environmental effects. As specifically set forth in Section 15097(c) of the CEQA Guidelines, the public agency may choose whether its program will monitor mitigation, report on mitigation, or both. As provided in Section 15097(c) of the CEQA Guidelines, "monitoring" is generally an ongoing or periodic process of project oversight. "Reporting" generally consists of a written Compliance review that is presented to the decision-making body or authorized staff person.

An EIR has been prepared to address the Project's potential environmental impacts. The evaluation of the Project's impacts takes into consideration project design features, which are measures proposed by the Applicant as a feature of the Project and which are detailed in the EIR. Where appropriate, the EIR also identifies mitigation measures to avoid or substantially lessen any significant impacts. This MMP is designed to monitor implementation of those project design features and mitigation measures.

This MMP has been prepared in Compliance with the requirements of CEQA Section 21081.6 and CEQA Guidelines Section 15097. It is noted that while certain agencies outside of the City of Los Angeles (City) are listed as the monitoring/enforcement agencies for individual project design features and mitigation measures listed in this MMP, the City, as Lead Agency for the Project, is responsible for overseeing and enforcing implementation of the MMP as a whole.

2. Purpose

It is the intent of this MMP to:

1. Verify compliance with the project design features and mitigation measures identified in the EIR;

2. Provide a framework to document implementation of the identified project design features and mitigation measures;

3. Provide a record of mitigation requirements;

4. Identify monitoring and enforcement agencies;

5. Establish and clarify administrative procedures for the clearance of project design features and mitigation measures;

6. Establish the frequency and duration of monitoring; and

7. Utilize the existing agency review processes wherever feasible.

3. Organization

As shown on the following pages, each identified project design feature and mitigation measure for the Project is listed and categorized by environmental issue area, with accompanying discussion of:

- Enforcement Agency—the agency with the power to enforce the project design feature or mitigation measure.

- Monitoring Agency—the agency to which reports involving feasibility, compliance, implementation, and development are made.

- Monitoring Phase—the phase of the Project during which the project design feature or mitigation measure shall be monitored.

- Monitoring Frequency—the frequency at which the project design feature or mitigation measure shall be monitored.

- Action(s) Indicating Compliance—the action(s) by which the enforcement or monitoring agency indicates that compliance with the identified project design feature or required mitigation measure has been implemented.

4. Administrative Procedures and Enforcement

This MMP shall be enforced throughout all phases of the Project. The Applicant shall be responsible for implementing each project design feature and mitigation measure and shall be obligated to provide certification, as identified below, to the appropriate

monitoring agency and the appropriate enforcement agency that each project design feature and mitigation measures has been implemented. The Applicant shall maintain records demonstrating compliance with each project design feature and mitigation measure. Such records shall be made available to the City upon request. Further, specifically during the Construction phase and prior to the issuance of building permits, the Applicant shall retain an independent Construction Monitor (either via the City or through a third-party consultant), approved by the Department of City Planning, who shall be responsible for monitoring implementation of project design features and mitigation measures during Construction activities consistent with the monitoring phase and frequency set forth in this MMP. The Construction Monitor shall also prepare documentation of the Applicant's compliance with the project design features and mitigation measures during Construction every 90 days in a form satisfactory to the Department of City Planning. The documentation must be signed by the Applicant and Construction Monitor and be included as part of the Applicant's Annual Compliance Report. The Construction Monitor shall be obligated to immediately report to the Enforcement Agency any non-Compliance with the mitigation measures and project design features within two businesses days if the Applicant does not correct the non-Compliance within a reasonable time of notification to the Applicant by the monitor or if the non-Compliance is repeated. Such non-Compliance shall be appropriately addressed by the Enforcement Agency.

5. Program Modification

After review and approval of the final MMP by the Lead Agency, minor changes and modifications to the MMP are permitted, but can only be made by the Applicant or its successors subject to City approval. The Lead Agency, in conjunction with any appropriate agencies or departments, will determine the adequacy of any proposed change or modification. This flexibility is necessary in light of the nature of the MMP and the need to protect the environment with a workable program. No changes will be permitted unless the MMP continues to satisfy the requirements of CEQA, as determined by the Lead Agency.

6. Mitigation Monitoring Program

A.1 Aesthetic, Views, Light/Glare, and Shading

(1) Project Design Features

Project Design Feature A-1: The Project Applicant shall place temporary construction fencing along the periphery of construction areas on the Project Site, as necessary, to screen construction activity from view at the street level from off-site.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Once during Field inspection
- **Action Indicating Compliance:** Field inspection sign-off

Project Design Feature A-2: The Project Applicant shall ensure, through appropriate postings and daily visual inspections, that no unauthorized materials are posted on any temporary construction barriers or temporary pedestrian walkways that are accessible/visible to the public, and that such temporary barriers and walkways are maintained in a visually attractive manner (i.e., free of trash, graffiti, peeling postings and of uniform paint color or graphic treatment) throughout the construction period.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** During field inspection(s)
- **Action Indicating Compliance:** Field inspection sign-off

Project Design Feature A-3: During construction and operation of the Project, on-site lighting shall be shielded or directed toward the areas to be lit so that no direct beam illumination would fall outside of the Project Site boundary.

- **Enforcement Agency:** City of Los Angeles Department of City Planning and City of Los Angeles Department of Building and Safety (for construction of the Project and operation of the New Parking Structure and outdoor lighting); Office of Statewide Health Planning and Development and City of Los Angeles Department of City Planning (for operation of the Hospital)
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety (for construction of the Project and operation of the New Parking Structure and outdoor lighting); Office of Statewide Health Planning and Development and City of Los Angeles Department of City Planning (for operation of the Hospital)
- **Monitoring Phase:** Construction

- **Monitoring Frequency:** Once during field inspection during construction; Once at Project plan check and once during field inspection for operation
- **Action Indicating Compliance:** Field inspection sign-off for construction; Submittal of Approved Plans for New Patient Wing, Main Building Replacement, D&T Expansion; Plan approval and issuance of Certificate of Occupancy for New Parking Structure

Project Design Feature A-4: In order to minimize glare from reflected sunlight, the exterior windows and glass used on the exterior of the New Patient Wing facing the US-101 shall: (1) be non-reflective; (2) be treated with a non-reflective coating or applied film; or (3) consist of back-painted, spandrel glass.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; Office of Statewide Health Planning and Development
- **Monitoring Agency:** City of Los Angeles Department of City Planning; Office of Statewide Health Planning and Development
- **Monitoring Phase:** Construction
- **Monitoring Frequency**: Once at Project plan check
- **Action Indicating Compliance:** Submittal of Approved Plans for New Patient Wing

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

B. Air Quality

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

Mitigation Measure B-1: Off-road diesel-powered equipment, equal to or greater than 50 horsepower, that will be used an aggregate of 40 or more hours during any portion of the construction activities shall meet Tier 3 standards. The Project representative shall make available to the lead agency and SCAQMD a comprehensive inventory of off-road construction equipment. The inventory shall include the horsepower rating, engine production year, and certification of the specified Tier standard. A copy of each unit's certified tier specification, Best

Available Control Technology documentation, and CARB or SCAQMD operating permit shall be available on-site at the time of mobilization of each applicable unit of equipment.

- **Enforcement Agency:** South Coast Air Quality Management District
- **Monitoring Agency:** City of Los Angeles Department of City Planning
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Compliance Report

C. Geology and Soils

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

Mitigation Measure C-1: Prior to issuance of grading permits for construction of the New Parking Structure, the Project Applicant shall submit final design plans and a geotechnical engineering report to the Los Angeles Department of Building and Safety for review and approval. The design-level geotechnical engineering report shall be used for final design of the foundation system for the proposed structure and would take into consideration the engineering properties beneath the proposed structure and the projected loads. The final report shall specify exact design coefficients that are needed by structural engineers to determine the type and sizing of structural building materials. The final report shall be subject to the specific performance criteria imposed by the Los Angeles Building Code, as applicable, and the proposed structure shall be designed and constructed in accordance with applicable provisions of the Los Angeles Building Code. The final geotechnical report shall be prepared by a registered civil engineer or certified engineering geologist and include appropriate measures to minimize seismic hazards and ensure structural safety of the proposed structure, including, but not limited to the following:

- In-place ground improvement techniques, such as stone columns or rammed aggregate piers.
- Cast-in-drilled hole concrete piles or micropiles.

- Removal of all undocumented fill.
- Conventional shallow footing foundation systems established on a minimum of two feet of engineered fill soils.
- The existing artificial fill shall be removed and replaced as engineered fill.
- Exposed soils shall be scarified to a minimum of 12 inches, moisture conditioned, and compacted to at least 95 percent relative compaction.
- Shoring system consisting of soldier piles and lagging.
- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Pre-construction
- **Monitoring Frequency:** Once at Project plan check
- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit

Mitigation Measure C-2: The Project Applicant shall submit final design plans and a geotechnical engineering report to the California Office of Statewide Health Planning and Development for the New Patient Wing, D&T Expansion, and Main Building Replacement. The design-level geotechnical engineering report shall be used for final design of the foundation system for the proposed structures and would take into consideration the engineering properties beneath the proposed structures and the projected loads. The final report shall specify exact design coefficients that are needed by structural engineers to determine the type and sizing of structural building materials. The final report shall be subject to the specific performance criteria imposed by the California Office of Statewide Health Planning. The proposed structures shall be designed and constructed in accordance with all applicable provisions of the California Office of Statewide Health Planning and Development. The final geotechnical report shall be prepared by a registered civil engineer or certified engineering geologist and include appropriate measures to minimize seismic hazards and ensure structural safety of the proposed structures.

- **Enforcement Agency:** California Office of Statewide Health Planning and Development
- **Monitoring Agency:** California Office of Statewide Health Planning and Development

- **Monitoring Phase:** Pre-construction
- **Monitoring Frequency:** Once at Project plan check
- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit by California Office of Statewide Health Planning and Development

Mitigation Measure C-3: The Project shall remove and recompact the upper 20 feet of loose granular soils or implement other ground improvement methods to reduce the anticipated seismically induced differential settlement to less than one inch. The zone of ground improvement shall cover the building footprints and extend a minimum horizontal distance of 10 feet beyond the footprints.

- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Once during field inspection
- **Action Indicating Compliance:** Field inspection sign-off

Mitigation Measure C-4: To address expansive soils, the Project shall remove the upper 2 feet of expansive soils (if and where encountered) and replace with non-expansive engineered fill, or implement an equivalent measure as determined by the geotechnical report approved by the Los Angeles Department of Building and Safety, Office of Statewide Health Planning and Development and/or the California Geological Survey.

- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Once during field inspection
- **Action Indicating Compliance:** Field inspection sign-off

D. Greenhouse Gas Emissions

(1) Project Design Features

Project Design Feature D-1: Where Leadership in Energy and Efficiency and Design (LEED®) standards for Healthcare are applicable, the design of new buildings shall include features so as to be capable of achieving LEED Silver certification equivalency. Project energy savings would be 15 percent over Title 24 baseline model for hospitals.

- **Enforcement Agency:** City of Los Angeles Department of City Planning
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Pre-construction; construction
- **Monitoring Frequency:** Once at Project plan check
- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit

Project Design Feature D-2: The Project Applicant shall provide at least 20 percent of the total parking spaces provided in the New Parking Structure, capable of supporting future electric vehicle supply equipment (EVSE). Plans shall indicate the proposed type and location(s) of EVSE and also include raceway method(s), wiring schematics and electrical calculations to verify that the electrical system has sufficient capacity to simultaneously charge all electric vehicles at all designated EV charging locations at their full rated amperage. Plan design shall be based upon Level 2 or greater EVSE at its maximum operating capacity. Only raceways and related components are required to be installed at the time of construction. When the application of the 20 percent results in a fractional space, round up to the next whole number. A label stating "EV CAPABLE" shall be posted in a conspicuous place at the service panel or subpanel and next to the raceway termination point.

- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Pre-Construction; Construction
- **Monitoring Frequency:** Once at Project plan check; once during Field inspection

- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit; issuance of Certificate of Occupancy

Project Design Feature D-3: At least 5 percent of the total parking spaces provided in the New Parking Structure shall be equipped with EV charging stations. Plans shall indicate the proposed type and location(s) of charging stations. Plan design shall be based on Level 2 or greater EVSE at its maximum operating capacity. When the application of the 5 percent requirement results in a fractional space, round up to the next whole number.

- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Pre-Construction; Construction
- **Monitoring Frequency:** Once at Project plan check; once during Field inspection
- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit; issuance of Certificate of Occupancy

Project Design Feature D-4: In non-clinical areas, the Project Applicant shall install low flow bathroom faucets, kitchen faucets, toilets, and showers.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; Office of Statewide Health Planning and Development
- **Monitoring Agency:** City of Los Angeles Department of City Planning; Office of Statewide Health Planning and Development
- **Monitoring Phase:** Construction
- **Monitoring Frequency**: Once at Project plan check
- **Action Indicating Compliance:** Submittal of Approved Plans for New Patient Wing

Project Design Feature D-5: The Project Applicant shall install a water efficient irrigation system.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Pre-Construction; Construction
- **Monitoring Frequency:** Once at Project plan check; once prior to issuance of Certificate of Occupancy

- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit; issuance of Certificate of Occupancy

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

E. Hazards and Hazardous Materials

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

F. Hydrology and Surface Water Quality

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

G. Land Use

(1) Project Design Features

Project Design Feature G-1: The Project Applicant shall coordinate with the Los Angeles Police Department regarding the design of the Project.

- **Enforcement Agency:** City of Los Angeles Police Department, City of Los Angeles Department of City Planning
- **Monitoring Agency:** City of Los Angeles Department of City Planning
- **Monitoring Phase:** Pre-Construction
- **Monitoring Frequency:** Once prior to the issuance of applicable building permit

- **Action Indicating Compliance:** Issuance of building permit

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

H. Noise

(1) Project Design Features

Project Design Feature H-1: Power construction equipment (including combustion engines), fixed or mobile, would be equipped with state-of-the-art noise shielding and muffling devices (consistent with manufacturers' standards). Should they be required, generators would be solar powered. All equipment would be properly maintained to assure that no additional noise, due to worn or improperly maintained parts, would be generated.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Compliance Report

Project Design Feature H-2: Project construction would not include the use of driven (impact) pile systems.

- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Compliance Report

Project Design Feature H-3: During construction, the surface of the eastern access driveway shall remain even and free of potholes in order to minimize haul/delivery trucks vibration at the adjacent medical office building.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; City of Los Angeles Department of Building and Safety

- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Compliance Report

Project Design Feature H-4: All outdoor mounted mechanical equipment would be enclosed or screened from off-site noise-sensitive receptors.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; Office of Statewide Health Planning and Development
- **Monitoring Agency: C**ity of Los Angeles Department of Building and Safety**;** Office of Statewide Health Planning and Development
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Approved Plans for New Patient Wing, Main Building Replacement, and D&T Expansion

(2) Mitigation Measures

Mitigation Measure H-1: During construction, the Project shall implement the following measures:

- Stationary construction equipment, such as, compressors, shall be located away from sensitive receptors to the extent practical.
- During the D&T Expansion demolition phase and Seismic Upgrade construction activities, a temporary sound barrier shall be erected along the southeast property line of the Project Site (along Clark Street). The temporary sound barrier shall be minimum of 8 feet in height, constructed using a sound control blanket, and have a minimum Sound Transmission Class rating of STC-25.
- **Enforcement Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Agency:** City of Los Angeles Department of Building and Safety
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** Field inspection
- **Action Indicating Compliance:** Submittal of Compliance Report

I. Public Services—Fire Protection

(1) Project Design Features

Project Design Feature I-1: The Project Applicant shall consult with the Los Angeles Fire Department regarding the design of the Project.

- **Enforcement Agency:** Los Angeles Fire Department
- **Monitoring Agency:** Los Angeles Fire Department
- **Monitoring Phase**: Pre-construction
- **Monitoring Frequency**: Once prior to issuance of applicable building permit
- **Action Indicating Compliance:** Issuance of building permit

Project Design Feature I-2: The Project shall include the installation of automatic fire sprinklers.

- **Enforcement Agency:** Office of Statewide Health Planning and Development
- **Monitoring Agency:** Los Angeles Fire Department; Office of Statewide Health Planning and Development
- **Monitoring Phase:** Pre-construction; construction
- **Monitoring Frequency:** Once at Project plan check; once during field inspection
- **Action Indicating Compliance:** Plan approval and issuance of applicable building permit; issuance of Certificate of Occupancy

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

J. Traffic, Access, and Parking

(1) Project Design Features

Project Design Feature J-1: Traffic Signal on Burbank Boulevard—The Project Applicant shall coordinate with LADOT to fund and implement the traffic signal on Burbank Boulevard at Driveway #1. With the traffic signal, left turns would be allowed from the Project Site onto westbound Burbank Boulevard (a movement which is currently restricted), and, to facilitate this movement, an exclusive left turn outbound lane would be installed within the Project Site for the left-

turning vehicles. Additionally, an eastbound through lane would be installed along the Project Site's Burbank frontage providing right-turn access into the Project Site and leading to the US 101 Southbound on-ramp to the east. A pedestrian crosswalk would be installed across Burbank Boulevard on the west side of the driveway.

- **Enforcement Agency:** City of Los Angeles Department of Transportation
- **Monitoring Agency:** City of Los Angeles Department of Transportation; City of Los Angeles Department of Public Works, Bureau of Engineering
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** When New Patient Wing is Occupied With Patients[1]
- **Action Indicating Compliance:** When New Patient Wing is Occupied With Patients

Project Design Feature J-2: Transportation Demand Management—The Project Applicant shall prepare and implement a Transportation Demand Management Plan that includes strategies to promote non-auto travel and reduce dependence on single-occupancy vehicles. The Transportation Demand Management Plan shall be subject to review and approval by the Department of City Planning and LADOT. The Transportation Demand Management Plan may include, but is not limited to, the following:

- Identify a Hospital Transportation Coordinator responsible for:
  - Providing all employees with information regarding rideshare/carpool programs, transit service, and bicycle routes within the Project vicinity; and
  - Posting promotional/informational materials regarding these services in a prominent location in the Hospital, such as the Hospital's Main Lobby;
- Encourage the use of bicycles, including provision of long-term and short term bicycle spaces, showers and lockers, and provide incentives for employees who ride bicycles to the Project Site;

[1] *It is anticipated that the California Department of Health would issue a license to the Hospital in the third quarter of Year 2022, approximately six months after completion of construction. A license would allow for the occupation of patients in the New Patient Wing.*

- Encourage the use of and provide incentives for rideshare/ carpool, including designating preferential parking for registered carpools or vanpools;
- Encourage the use of and provide incentives for the use of public transportation; and
- Provide Guaranteed Ride Home service for carpool/vanpool/ transit/bicycle users.
- **Enforcement Agency:** City of Los Angeles Department of Transportation
- **Monitoring Agency:** City of Los Angeles Department of Transportation
- **Monitoring Phase:** When New Patient Wing is Occupied With Patients
- **Monitoring Frequency:** Annually
- **Action(s) Indicating Compliance:** Annual compliance report

(2) Mitigation Measures

Mitigation Measure J-1: Construction Management Plan—Prior to the start of construction, the Project Applicant shall prepare a Construction Management Plan and submit it to the City for review and approval. The Construction Management Plan shall include, but not be limited to the following:

- Prohibition of construction worker parking on nearby streets;
- Temporary traffic control during all construction activities adjacent to public rights-of-way to improve traffic flow on public roadways (e.g., flag men);
- Scheduling of construction activities to reduce the effect on the traffic flow on surrounding arterial streets;
- Safety precautions for pedestrian and bicyclists through such measures as alternate routing and protection barriers as appropriate;
- Assurance that adequate and direct access to the emergency department of the Hospital is maintained at all times; and
- **Enforcement Agency:** City of Los Angeles Department of Transportation
- **Monitoring Agency:** City of Los Angeles Department of Transportation

- **Monitoring Phase:** Pre-construction; construction
- **Monitoring Frequency:** Once at Project plan check prior to issuance of grading or building permit; once during field inspection
- **Action Indicating Compliance:** Plan approval and issuance of grading permit; field inspection sign-off

Mitigation Measure J-2: Transportation Systems Management Improvement—The Project Applicant shall coordinate with LADOT to fund and implement the installation of closed circuit television traffic monitoring camera at Intersection No. 5, Reseda Boulevard and Burbank Boulevard, and Intersection No. 14, White Oak Avenue and Burbank Boulevard. The Project Applicant would also fund the installation of the necessary fiber optic data cables to the nearest connection points.

- **Enforcement Agency:** City of Los Angeles Department of Transportation
- **Monitoring Agency:** City of Los Angeles Department of Transportation; City of Los Angeles Department of Public Works, Bureau of Engineering
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** When New Patient Wing is Occupied With Patients
- **Action Indicating Compliance:** When New Patient Wing is Occupied With Patients

K. Tribal Cultural Resources

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

Mitigation Measure K-1: Prior to commencing any ground disturbance activities including excavating, digging, trenching, plowing, drilling, tunneling, quarrying, grading, leveling, removing peat, clearing, pounding posts, augering, backfilling, blasting, stripping topsoil or a similar activity at the project site, the Applicant, or its successor, shall retain and pay for archeological monitors, determined by the City's Office of Historic Resources to be qualified to identify subsurface tribal cultural resources. The archeological monitors shall observe all ground

disturbance activities on the project site at all times the ground disturbance activities are taking place. If ground disturbance activities are simultaneously occurring at multiple locations on the project site, an archeological monitor shall be assigned to each location where the ground disturbance activities are occurring.

Prior to the commencement of any ground disturbance activities at the project site, the Applicant, or its successor, shall notify any California Native American tribes that have informed the City they are traditionally and culturally affiliated with the geographic area of the proposed project that ground disturbance activities are about to commence and invite the tribes to observe the ground disturbance activities, if the tribes wish to monitor.

In the event that any subsurface objects or artifacts that may be tribal cultural resources are encountered during the course of any ground disturbance activities, all such activities shall temporarily cease within the area of discovery, the radius of which shall be determined by the qualified archeologist, until the potential tribal cultural resources are properly assessed and addressed pursuant to the process set forth below:

1. Upon a discovery of a potential tribal cultural resource, the Applicant, or its successor, shall immediately stop all ground disturbance activities and contact the following: (1) all California Native American tribes that have informed the City they are traditionally and culturally affiliated with the geographic area of the proposed project; (2) and the Department of City Planning, Office of Historic Resources.
2. If the City determines, pursuant to Public Resources Code Section 21074 (a)(2), that the object or artifact appears to be a tribal cultural resource in its discretion and supported by substantial evidence, the City shall provide any affected tribe a reasonable period of time, not less than 14 days, to conduct a site visit and make recommendations to the Applicant, or its successor, and the City regarding the monitoring of future ground disturbance activities, as well as the treatment and disposition of any discovered tribal cultural resources.
3. The Applicant, or its successor, shall implement the tribe's recommendations if a qualified archaeologist, retained by the City and paid for by the Applicant, or its successor, reasonably concludes that the tribe's recommendations are reasonable and feasible.
4. In addition to any recommendations from the applicable tribe(s), a qualified archeologist shall develop a list of actions that shall be taken to avoid or minimize impacts to the identified tribal cultural

resources substantially consistent with best practices identified by the Native American Heritage Commission and in compliance with any applicable federal, state or local law, rule or regulation.

5. If the Applicant, or its successor, does not accept a particular recommendation determined to be reasonable and feasible by the qualified archaeologist, the Applicant, or its successor, may request mediation by a mediator agreed to by the Applicant, or its successor, and the City. The mediator must have the requisite professional qualifications and experience to mediate such a dispute. The City shall make the determination as to whether the mediator is at least minimally qualified to mediate the dispute. After making a reasonable effort to mediate this particular dispute, the City may: (1) require the recommendation be implemented as originally proposed by the archaeologist; (2) require the recommendation, as modified by the City, be implemented as it is at least as equally effective to mitigate a potentially significant impact; (3) require a substitute recommendation be implemented that is at least as equally effective to mitigate a potentially significant impact to a tribal cultural resource; or (4) not require the recommendation be implemented because it is not necessary to mitigate any significant impacts to tribal cultural resources. The Applicant, or its successor, shall pay all costs and fees associated with the mediation.
6. The Applicant, or its successor, may recommence ground disturbance activities outside of a specified radius of the discovery site, so long as this radius has been reviewed by a qualified archaeologist and determined to be reasonable and appropriate.
7. The Applicant, or its successor, may recommence ground disturbance activities inside of the specified radius of the discovery site only after it has complied with all of the recommendations developed and approved pursuant to the process set forth in paragraphs 2 through 5 above.
8. Copies of any subsequent prehistoric archaeological study, tribal cultural resources study or report, detailing the nature of any significant tribal cultural resources, remedial actions taken, and disposition of any significant tribal cultural resources shall be submitted to the South Central Coastal Information Center (SCCIC) at California State University, Fullerton and to the Native American Heritage Commission for inclusion in its Sacred Lands File.
9. Notwithstanding paragraph 8 above, any information determined to be confidential in nature, by the City Attorney's office, shall be

excluded from submission to the SCCIC or the general public under the applicable provisions of the California Public Records Act, California Public Resources Code, section 6254(r), and shall comply with the City's AB 52 Confidentiality Protocols.

- **Enforcement Agency:** City of Los Angeles Department of City Planning; Office of Historic Resources
- **Monitoring Agency:** City of Los Angeles Department of City Planning; Office of Historic Resources
- **Monitoring Phase:** Construction
- **Monitoring Frequency:** To be determined by consultation with archaeologist if resource(s) are discovered
- **Action Indicating Compliance:** If unanticipated discoveries are found, submittal of compliance report by a qualified archaeologist

L. Utilities and Service Systems—Water Supply

(1) Project Design Features

Several of the project design features set forth in Section IV.D, Greenhouse Gas emissions, above, including Project Design Feature D-4 and Project Design Feature D-5, also pertain to the analysis of water supply. No additional project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

M. Utilities and Service Systems—Wastewater

(1) Project Design Features

No project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

N. Utilities and Service Systems—Energy

(1) Project Design Features

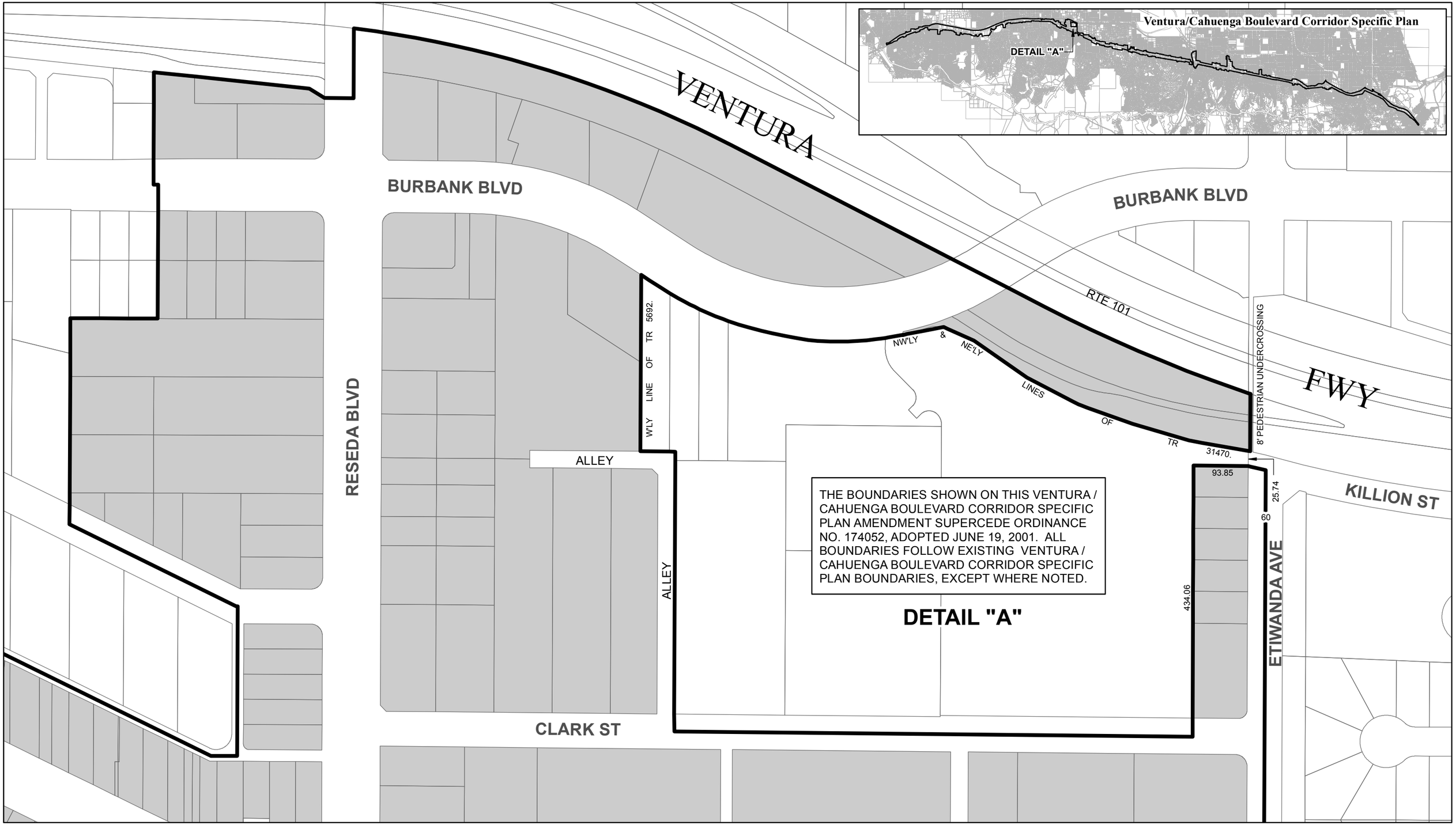
Several of the project design features set forth in Section IV.D, Greenhouse Gas Emissions, above, including Project Design Features D-1, D-4, and D-5, also pertain to the analysis of energy. No additional project design features are identified in the EIR for this environmental issue.

(2) Mitigation Measures

No mitigation measures are identified in the EIR for this environmental issue.

Exhibit C

Specific Plan Amendment: Map 5



Ventura / Cahuenga Boulevard Corridor Specific Plan Amendment

SPECIFIC PLAN AREAS

SPECIFIC PLAN BOUNDARY LINE

NORTH

250 125 0 250 Feet

CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI

CF/

Encino - Tarzana

052317

EXHIBIT C

City of Los Angeles

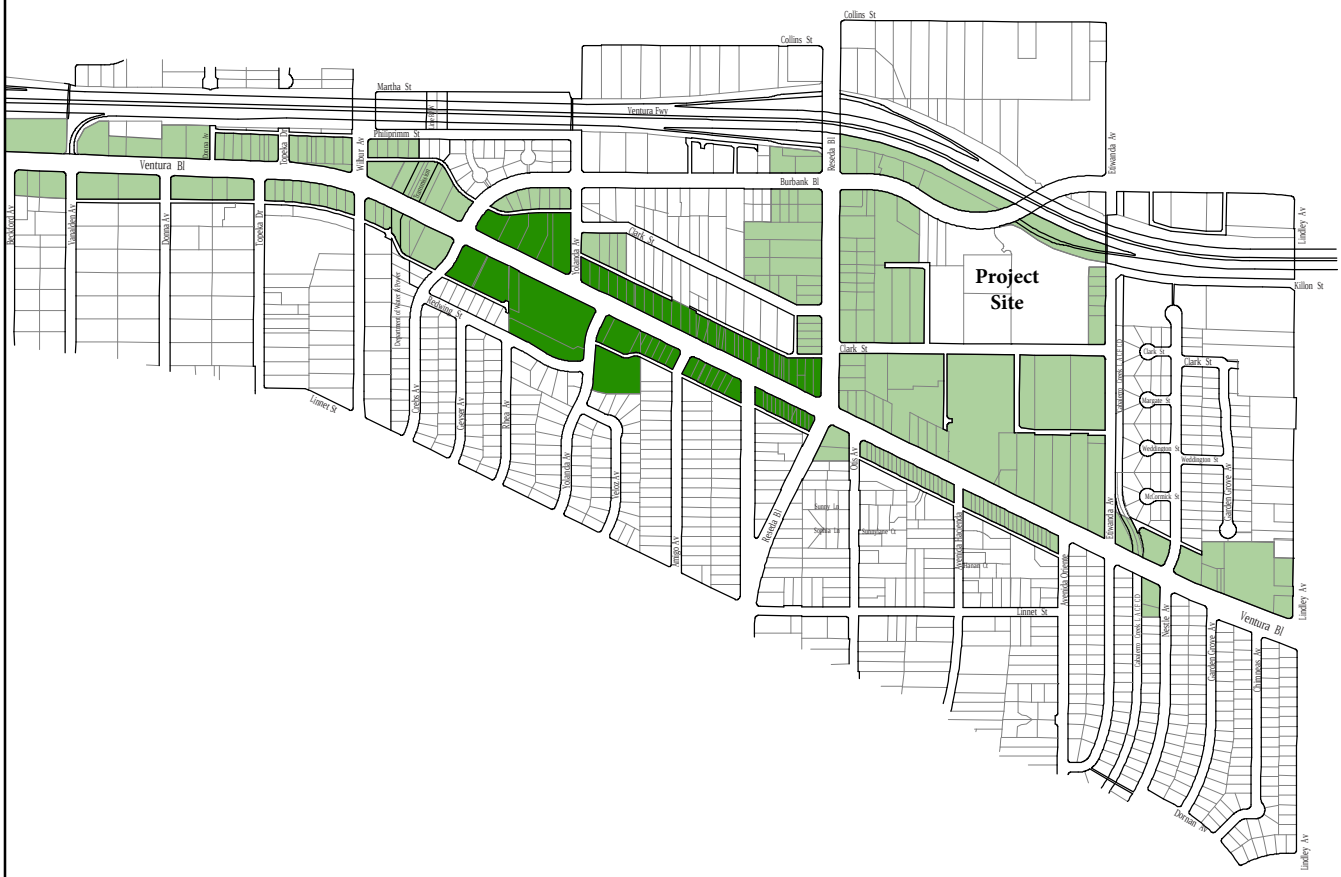
Encino - Tarzana

Exhibit D

Specific Plan Amendment: Exhibit B Map

Ventura / Cahuenga Boulevard Corridor Specific Plan

EXHIBIT D



CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI

Specific Plan Area

Pedestrian Oriented Area

Exhibit B - Tarzana Section

Pedestrian Oriented Areas

0 400 800 ft

N

mc:023.Tarzana_Exhibit B:08.26.04

Exhibit E

Conceptual Sign Program

PROVIDENCE
Tarzana
Medical Center

EXHIBIT E

Providence Tarzana Medical Center Reimagined

Conceptual Sign Program

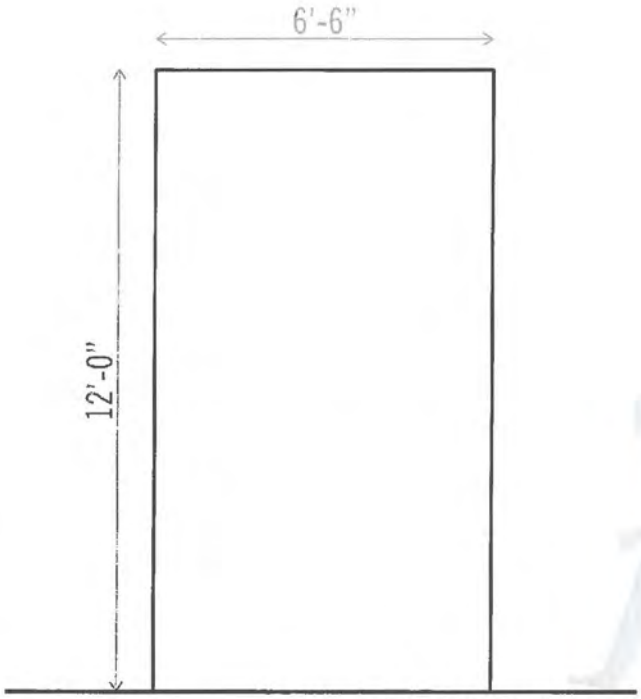
October 2017
Updated December 2017

PERKINS+WILL

This Sign Program provides an overview of existing, existing to be removed and/or replaced, and proposed signs at the Providence Tarzana Medical Center as part of the Providence Tarzana Medical Center Reimagined Project. The following signs are designed to be exterior signs that identify the Medical Center and provide information such as directions to various Medical Center building and services, as well as the Emergency Department: m1, m2, m3, m4, m5, m6, w1, i1, i2, and i3. The following signs are designed to be interior signs that provide information to visitors within the Medical Center such as directions to various Medical Center building and services, as well as the Emergency Department: w2, w3, w4, w5, w6, w7, m7, m8, m9, and i4. Because the interior signs may be visible from adjacent rights-of-way, these interior signs are included in the calculations for allowable and proposed signage within the Medical Center.

Providence may provide monument signs, wall signs, and identification signs in addition to those depicted in this Sign Program provided such additional signs are consistent with the LAMC Sign Regulations and within the allowable sign area permitted by the Code for the Medical Center.

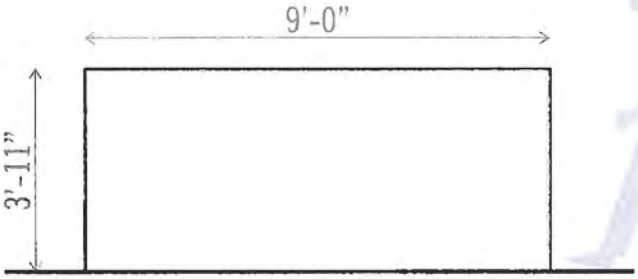
The content shown within this Sign Program for the proposed signs is provided as a concept and, while representative of anticipated signage for the Medical Center, is illustrative.



EXISTING MONUMENT SIGN (Double Sided: 78 sf per side)

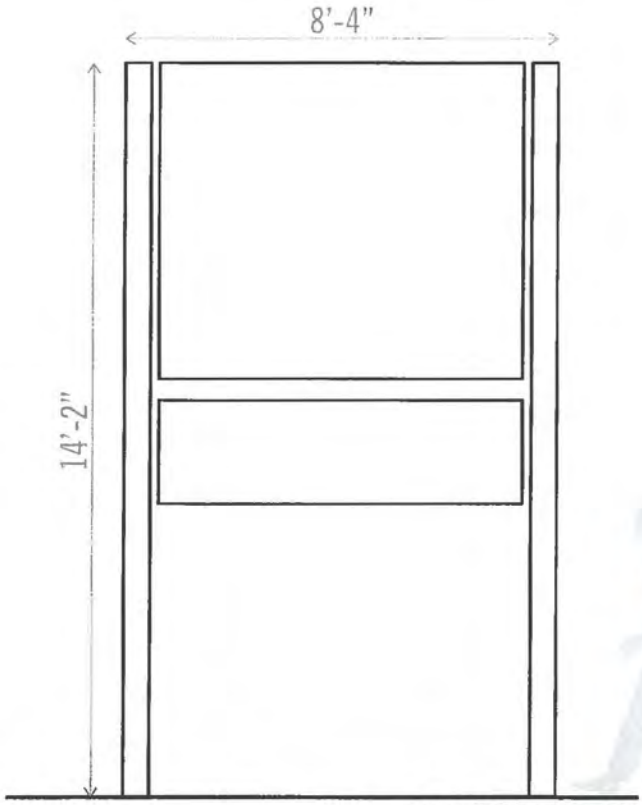
PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)

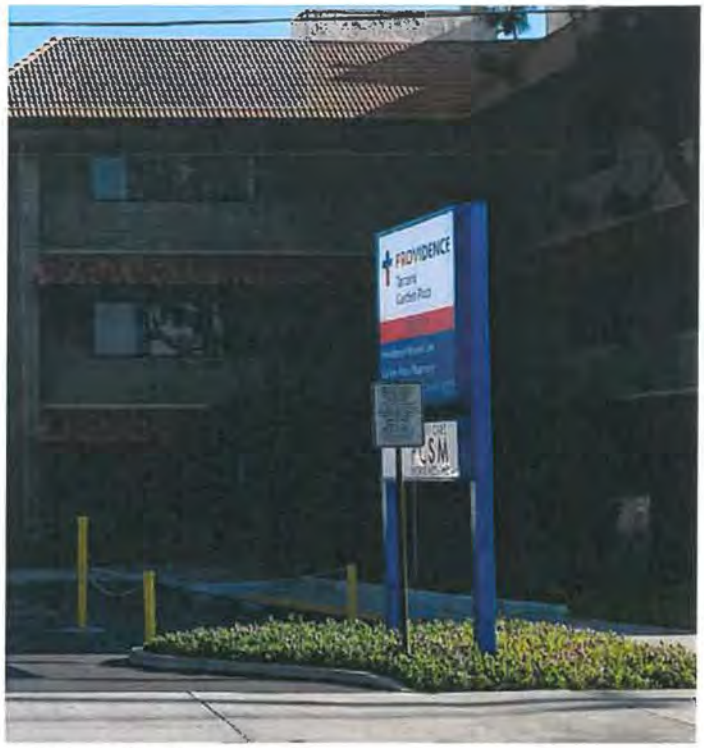
Note: 1. The Project Applicant is seeking a variance for sign m1.
2. Rather than replace m1, Providence may elect to reface the existing monument sign.



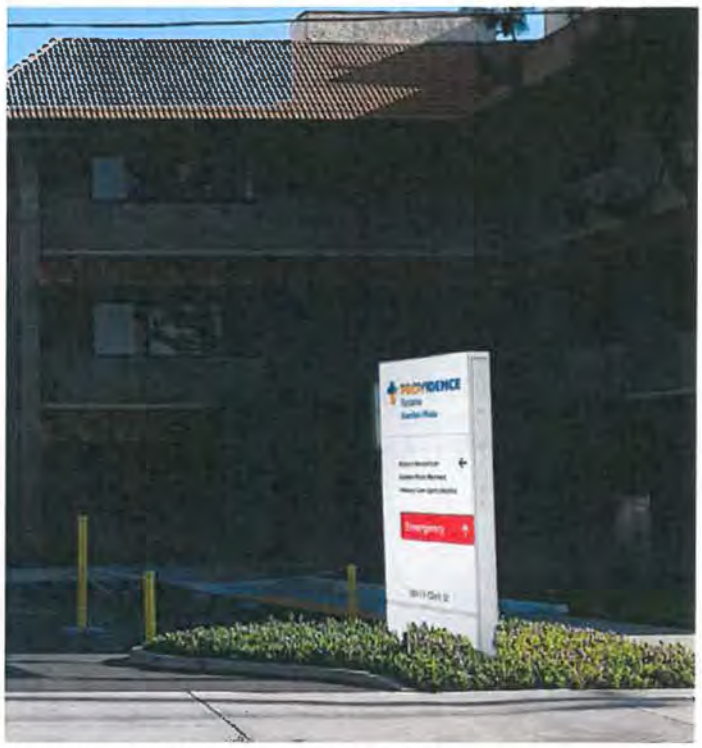
EXISTING MONUMENT SIGN (Double Sided: 35.25 sf per side)

PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)

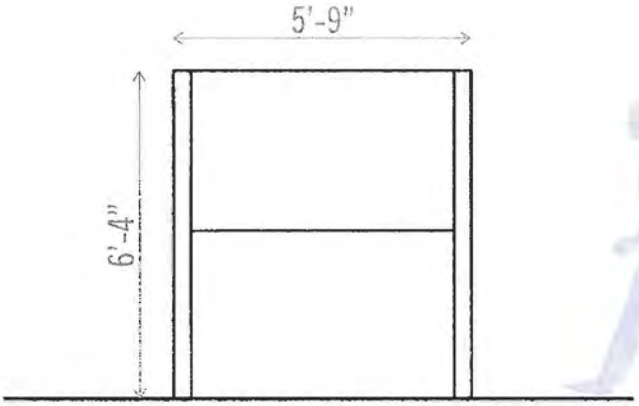




EXISTING POLE SIGN (Double Sided: 57 sf per side)

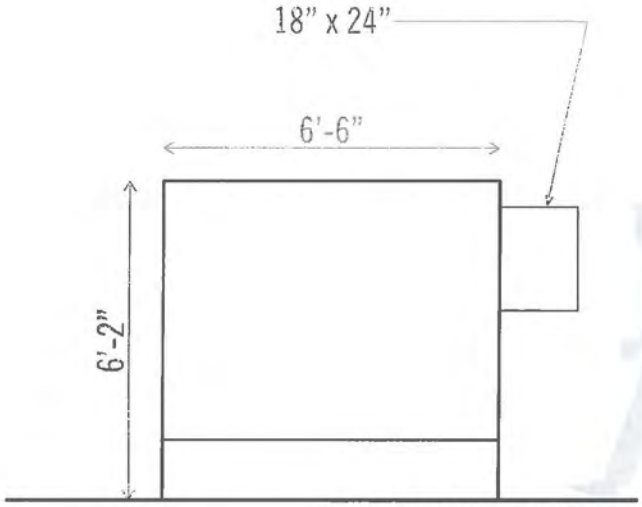


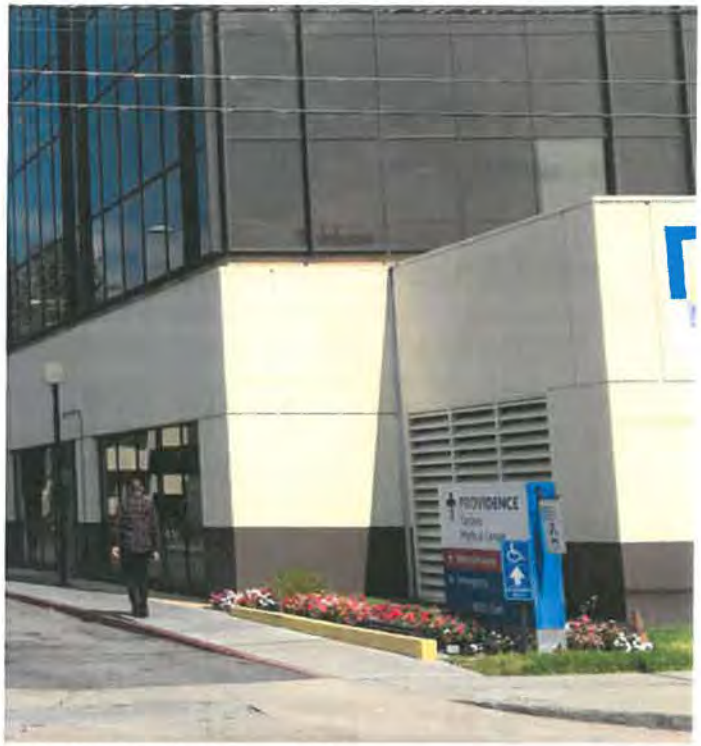
PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)



EXISTING POLE SIGN (Double Sided: 16 sf per side)

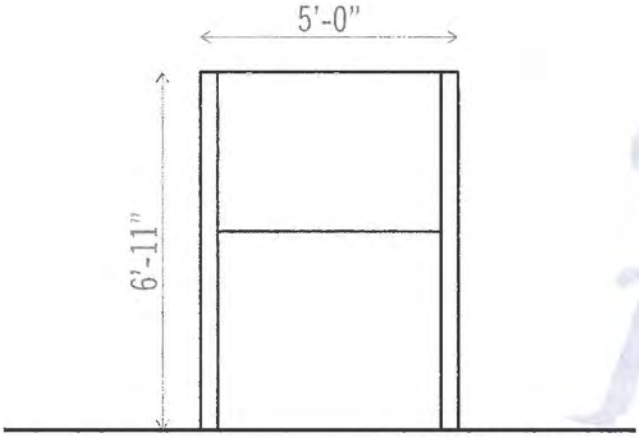
PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)



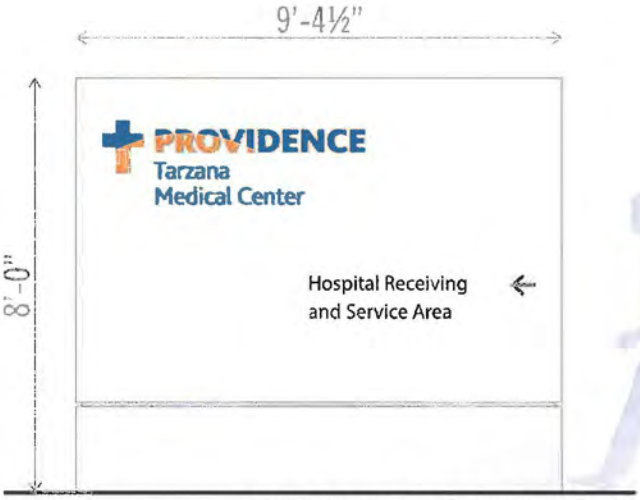


EXISTING MONUMENT SIGN (Double Sided: 43 sf per side)

PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)



EXISTING MONUMENT SIGN (Double Sided: 14 sf per side)



PROPOSED, REPLACEMENT MONUMENT SIGN (Double Sided: 75 sf per side)

PROPOSED IDENTIFICATION SIGN (800 sf)

PROPOSED, NEW IDENTIFICATION SIGNS (i1, i2 & i3, 800 sf each)

Note: The Project Applicant is seeking a variance for sign i2.

The following signs are designed to be interior signs that provide information to visitors within the Medical Center such as directions to various Medical Center building and services, as well as the Emergency Department. Because the interior signs may be visible from adjacent rights-of-way, these interior signs are included in the calculations for allowable and proposed signage within the Medical Center.

Monument Sign

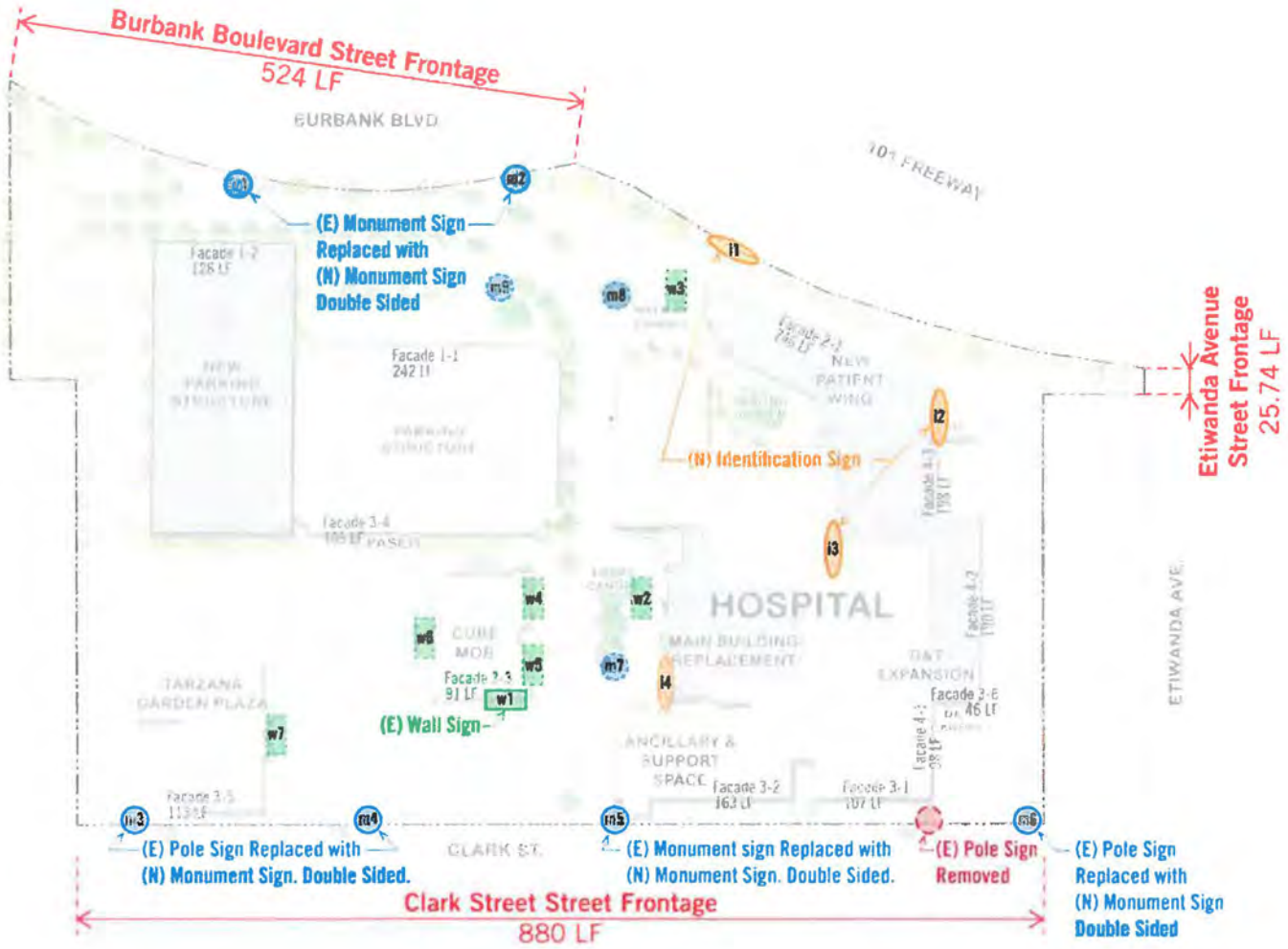
m7:	*Proposed*	*Double Sided*	*75 sf per side*
m8:	*Proposed*	*Double Sided*	*75 sf per side*
m9:	*Proposed*	*Double Sided*	*75 sf per side*

Wall Sign

w2:	*Proposed*	*150 sf*
w3:	*Proposed*	*150 sf*
w4:	*Existing*	*55 sf*
w5:	*Existing*	*44 sf*
w6:	*Existing*	*55 sf*
w7:	*Existing*	*30 sf*

Identification Sign

i4:	*Proposed*	*800 sf*


Burbank Boulevard Street Frontage
524 LF
BURBANK BLVD
101 FREEWAY
(E) Monument Sign
Replaced with
(N) Monument Sign
Double Sided
Facade 1-2
128 LF
NEW PARKING STRUCTURE
Facade 1-1
242 LF
Facade 3-4
105 LF
(N) Identification Sign
NEW PATIENT WING
Etiwanda Avenue
Street Frontage
25.74 LF
HOSPITAL
MAIN BUILDING REPLACEMENT
CUBE MOB
TARZANA GARDEN PLAZA
(E) Wall Sign
ANCILLARY & SUPPORT SPACE
Facade 3-2
163 LF
Facade 3-1
107 LF
ETIWANDA AVE.
CLARK ST.
(E) Pole Sign Replaced with
(N) Monument Sign. Double Sided.
(E) Monument sign Replaced with
(N) Monument Sign. Double Sided.
(E) Pole Sign
Removed
(E) Pole Sign
Replaced with
(N) Monument Sign
Double Sided
Clark Street Street Frontage
880 LF

Allowable Combined Sign Area

The LAMC Sign Regulations provide that the combined sign area of wall signs and monument signs shall not exceed four square feet for each foot of street frontage. [1]

The Medical Center's allowable combined sign area is as follows:

Burbank Boulevard	524 feet of street frontage x 4 = 2,096 square feet of sign area
Clark Street	880 feet of street frontage x 4 = 3,520 square feet of sign area
Etiwanda Avenue	25.74 feet of street frontage x 4 = 102.96 square feet of sign area
Total	5,718.96 square feet of sign area

The Project proposes 5,078 square feet of sign area as follows:

Sign	Square Feet
m1	150
m2	150
m3	150
m4	150
m5	150
m6	150
m7	150
m8	150
m9	150
w1	44
w2	150
w3	150
w4	55
w5	44
w6	55
w7	30
i1	800
i2	800
i3	800
i4	800
Total	5,078 square feet of sign area

The proposed signs are within the allowable combined sign area for the Medical Center.

[1] See LAMC Sections 14.4.8.A.2 and 14.1.10.A.5. The combined sign area in the LAMC Sign Regulations also includes projecting signs, illuminated architectural canopy signs, roof signs, and window signs; the Project does not include these sign types.

Wall Signs

The LAMC Sign Regulations provide that the total sign area of wall signs facing a street shall not exceed two square feet for each foot of street frontage, plus one square foot for each foot of building frontage for a single story building and certain percentages.[1]

The Medical Center's allowable wall sign area is as follows:

Burbank Boulevard	524 feet of street frontage x 2 + 482 feet of building frontage = 1,530 square feet
Clark Street	880 feet of street frontage x 2 + 833 feet of building frontage = 2,593 square feet
Etiwanda Avenue	25.74 feet of street frontage x 2 + 38.61 feet of building frontage = 64.35 square feet
Total	4,187.35 square feet of wall sign area

The Project proposes the following walls signs:

	Sign	Square Feet
Burbank Boulevard	w3 i1[2]	950 square feet
Clark Street	w1, w2, w4, w5, w6, w7, i3[3], i4	1,978 square feet
Etiwanda Avenue / 101 Freeway	i2	800 square feet
	Total	3,728 square feet of wall sign area

The proposed wall signs are within the allowable combined wall sign area for the Medical Center. If the Sign Regulations are interpreted such that the allowable sign are is per street, the Burbank Boulevard and Clark Street wall signs are within the allowable wall sign area for Burbank Boulevard and Clark Street, respectively. However, because of special circumstances based on the location of the Medical Center along the Caltrans right-of-way for the 101 Freeway and set back from Etiwanda Avenue, sign i2 would require a sign variance. The Project Applicant is seeking a sign variance for sign i2.

High Rise Signs

To the extent in the final design signs i1, i2, and i3 are located over 100 feet above grade and are used as identification signs, these signs would be considered high rise signs under the LAMC Sign Regulations. The area of high rise signs may constitute up to 5 percent of the area of the wall where the signs are attached.

The Medical Center's allowable high rise sign area for signs i1, i2, and i3 is as follows:

i1	23,042 square feet x 5% = 1,152 square feet
i2	28,122 square feet x 5% = 1,406 square feet
i3	30,535 square feet x 5% = 1,527 square feet

As each of these signs is 800 square feet, the proposed wall signs are within the allowable sign area for high rise signs.

---

[1] See LAMC Section 14.4.10.A.1 and.2.

[2] i1 is also visible from the 101 Freeway.

[3] Portions of i3 may also be visible from Burbank Boulevard, as well as the 101 Freeway.

Monument Signs

The LAMC Sign Regulations provide that the sign area of monument signs shall not exceed 1.5 square feet per foot of street frontage nor a maximum of 75 square feet for the sign face visible to the same direction of traffic.[1]

Each of the proposed monument signs is a maximum of 75 square feet for the sign face visible to the same direction of traffic.

The Medical Center's allowable sign area for monument signs is as follows:

Burbank Boulevard	524 feet of street frontage x 1.5 = 786 square feet of sign area
Clark Street	880 feet of street frontage x 1.5 = 1,320 square feet of sign area

The Project proposes the following monument signs:

	Signs	Square Feet
Burbank Boulevard	m1, m2, m8, m9	600 square feet
Clark Street	m3, m4, m5, m6, m7	750 square feet

The proposed monument signs are within the allowable monument sign area for the Medical Center.

[1] See LAMC Section 14.4.8.A.1.

Freeway Exposure[1]

The LAMC Sign Regulations provide that signs shall not be within 2,000 feet of a freeway unless the Department of Building and Safety has first determined that the sign will not be viewed primarily from a main traveled roadway of a freeway or an on-ramp/off-ramp. Viewed primarily from a freeway means that the "message may be seen with reasonable clarity for a greater distance by a person traveling on the main traveled roadway of a freeway or on-ramp/off-ramp than by a person traveling on a street adjacent to the sign."

The following signs are not visible from a freeway: m1, m2, m3, m4, m5, m6, m7, m8, m9, w1, w2, w4, w5, w6, w7, and i4. Sign w3 may be visible from a freeway, but is not viewed primarily from a freeway.

It has not been determined whether signs i1, i2, and i3 are viewed primarily from a freeway. Even if i1, i2, and i3 were determined to be viewed primarily from a freeway, these signs are exempt from the freeway exposure limitations:

> Identification signs identifying the building where the sign is located, providing the area of the sign is not more than 50 square feet or is not larger than five person of the area of the side of the building, which faces primarily to the freeway, whichever is greater[.]

The Medical Center's allowable sign area for signs i1, i2, and i3 is as follows:

i1	23,042 square feet x 5% = 1,152 square feet
i2	28,122 square feet x 5% = 1,406 square feet
i3	30,535 square feet x 5% = 1,527 square feet

Each of these signs is 800 square feet and within the allowable sign area for the freeway exposure exemption.

[1] See LAMC Section 14.4.6.A.

Exhibit F

Zone Change Map

BURBANK BLVD

VENTURA

BURBANK BLVD

RESEDA BLVD

W'LY LINE OF TR 5692.

NW'LY & NE'LY LINES OF TR 31470.

RTE 101

8' PEDESTRIAN UNDERCROSSING

FWY

93.85

25.74

60

KILLION ST

ALLEY

[T][Q]C2-1

ALLEY

434.06

ETIWANDA AVE

CLARK ST

THE INTENT OF THIS ORDINANCE IS FOR THE BOUNDARIES OF THIS ZONE CHANGE TO COINCIDE WITH THOSE OF RECORDED TR 74314.

NORTH

200 100 0 200 Feet

CPC-2016-2248-GPA-VZC-HD-SP-CU-ZV-WDI

CF/

071917

EXHIBIT F

City of Los Angeles

Encino - Tarzana