

Steven J. Leinwand, Chm.; Stephen T. Gionfriddo, Vice-Chm. Louis A. Carta, Seb J. Passanesi, Emanuel A. Pattavina, Rose Sbalcio, Alternates: George L. Augustine, Sebastian Garafalo

COMMISSION  
MEMBERS  
PRESENT

Mayor Michael J. Cubeta, Jr., Ex-Officio, Cos Giuffrida, Sec'y; Alternate: Vincent J. Loffredo

MEMBERS  
ABSENT

Alternate George Augustine acted for disqualified Chm. Leinwand. Also Sebastian Garafalo acted for disqualified Seb. Passanesi. Vice-Chm. Gionfriddo acted for Chm. Leinwand, who disqualified himself on the first Item of the Public Hearing.

ACTING MEMBERS

George A. Reif, Director, Althea Rinaldi, Recorder, Hope Kasper Transcriber

STAFF

Phillip G. Bauer, Engr., Public Works Dept.; Robert Frank, Building Division; Lucas Held, reporter, Middletown Press; Rosemary Keogh, reporter, Hartford Courant; also 15 members of the audience.

OTHERS

#### CHM. LEINWAND

I wish to apologize starting at 11 after 7:00 P.M. I wish to call the Regular Meeting of the Planning & Zoning Commission to order. The first item on our Agenda tonight is the Public Hearing that is a continuation of the Public Hearing of February 10th and the first item on that Public Hearing is the proposed Special Exception as an adaptive historic preservation use by EVLO Associates. Since we are in the same position we were in two weeks ago at this particular moment, we are going to wait for Atty. Carta, not for Attorney, but Comm. Carta. If in the next 15 minutes, Comm. Carta does not enter the room, we are going to conduct the Public Hearing regardless and we will see that when we can vote on that which is obviously could not be tonight we will have the appropriate number of non, the appropriate number of people who do not have to disqualify themselves voting on it because they will be able to have the transcript. Does that make sense to everyone up here? I hope that makes sense to people in the public. What it means is that we are going to have the Public Hearing tonight on that matter. Hopefully within the next 10 minutes, completely kosher and possibly slipping through a loop hole. Therefore, I am going to not even open the Public Hearing at this point in time and go to Item #3 which is, "Discussion with public concerning items on the Agenda which are not or have not been the subject of a Public Hearing". If there is anyone from the Public that wishes to speak on any matter not on the Agenda. Ah ha, I see Comm. Carta racing in. Wonderful, my face just changed about six shades of red less than it was. Thank you. I will declare the Public Hearing open and as I said, it is a continuation of the February 10, 1982. Now for the first item on the Agenda which is a, "Proposed Special Exception as an adaptive historic preservation use by Tri County Alcohol Council as a care home located at 77-83 Crescent Street. Off-street parking requirement modification is requested. Applicant/Agent Salvatore A. Mazzotta, Esq., representing EVLO Associates". It's my understanding that Comm. Passanesi as well as myself will disqualify themselves for reasons that have already been mentioned, I will turn the gavel over to Comm. Gionfriddo and we will legally proceed finally.

ITEM #2.1  
TRI-COUNTY  
ALCOHOL COUNCIL  
77-83 CRESENT  
ST. - EVLO  
ASSOCIATES

#### COMM. GIONFRIDDO

ust for the record, we will repeat that legal notice of this item was published in the Middletown Press on January 29, 1982 and February 5th. I don't

COMM. GIONFRIDDO (Continued from Page 1)

believe it had to be published again. Did it? For this item, Comm. Augustine will sit for Comm. Leinwand and Comm. Garafalo will sit for Comm. Passanesi. O.K. The proponent, maker of the motion will speak first.

VINCENT MARINO

Ladies and gentlemen, my name is Vincent Marino, I am an Attorney practicing at 100 Riverview Center, in Middletown and I am here tonight for Atty. Mazzotta representing EVLO Associates in requesting a special exception to designate 77-83 Crescent St. as a historic architectural preservation site and structure and for its use, or a portion of it, as an alcohol rehabilitation treatment center. As part of the adaptive use, I would like to start by asking Liz Warner, who is the Administrative Assistant to Jan Cunningham, of the Preservation Trust to come up here and address you briefly on the historical significance of the building.

LIZ WARNER

This statement was prepared by Jan Cunningham of the Trust. "The Crescent Street "Row Houses," known historically as the "Hotchkiss Block," were surveyed by the Greater Middletown Preservation Trust in 1978 and designated historically and architecturally significant. Further, they are located in and contribute to the historic character of the South Green National Register District.

Their historic significance derives from their associations with prominent state and local civic leaders. They were built in 1866-67 by Julius Hotchkiss, a Middletown resident who served as a State Representative and Lt. Governor of Connecticut. Other important citizens who lived in these houses include the son-in-law of Hotchkiss, Charles Vinal, mayor of Middletown in 1894, Judge of Probate, State Senator and Secretary of State, and George Coles, a local manufacturer, President of the Middletown Savings Bank, a Director of the Middlesex Mutual Assurance Company and a member of the Middletown Common Council in 1872 and 1875.

As the sole remaining row houses in the city these buildings have particular architectural significance. In addition, they are well preserved examples of the Second Empire style which was popular in the last half of the nineteenth century and is characterized by the use of the mansard roof."

VINCENT MARINO

I would like to present this letter for the record. Beyond that the building was for a long time the home or location of the Crescent St. Hospital, and for several years has been used for other uses including a nursing home and a dormitory for some of the nurses at Middlesex Hospital. Now the section of the zoning code 44.08.26, dealing with the criteria for historic designation lists several factors which I believe from the presentation just made, this particular building falls within, and two of those factors are that they are associated with the lives of persons significant in our past. Per the recent presentation, Julius Hotchkiss was a builder of these units were the former Congressman and Lt. Governor of the State of Connecticut. Mr. Coles and Mr. Vinal were also mentioned with Mr. Vinal having been a former Mayor of the City of Middletown. Another criteria is that they embodied the distinctive characteristics of a style type period or method of construction and I believe the presentation in the letter indicates that particularly being the last of the row houses in the City of Middletown. In addition for many years at the

VINCENT MARINO (Continued from Page 2)

hospital, many Middletown residents were born in the hospital and if that contributes to the first criteria associated with events that make our history, maybe some of us are, come within that section also. Before I get to the one issue that will be addressed, that is any parking requirements, I would like to just go into briefly the use that we intend to put the property if this passes tonight. Right now the tenants in the building in 83 Crescent St. is a law firm of Shaw & Howard, they would remain in that building, Tri-County would take over the remainder of building 77, 79, and 81 with the exception of a small office for Easter seals which has been there for some time. Tri-County would occupy the majority of the first floor as its administrative offices, it will also utilize the second and third floor for patients. That will be explained a little later. In addition and I think at this time I would like to call Dr. Manohar, who is the Director of Alcohol Services at Middlesex Hospital to explain briefly some of the program and the reason why its use by Tri-County is good for the citizens of Middletown and the area.

DR. MANOHAR

Good evening ladies and gentlemen. I don't know whether all of you have a copy of the letter signed by Mr. Gordon McWilliams, President of Middlesex Hospital and I understand that Mr. Ted Horwitz has also written to you. You should be getting a letter shortly. Basically I want to completely under-score the contents of the letter from Mr. Gordon McWilliams and proceed and give you an idea of how I have been involved in this project. Since August of 81 when this plan for providing alternative method of serving alcoholic individuals came up from the Connecticut Commission on Alcohol and Drug Abuse. We became involved as a local planning group and who are the people involved as a local planning group, Mr. Jeff Walter, myself, and other personnel from Middlesex Hospital including the Chairman of the Dept. of Pyschiatry and Emergency Room Mr. Leon Vinci, from the City Health Dept., the members of the Police Dept. Sister Pat from the Soup Kitchen, the Director of the Community Health Center, and the Director of the Alcohol and Drug Abuse at C.V.H. We sat down with the Commission on Alcohol and Drug Abuse and said as a planning group we have some concerns about the plans. We would like to upgrade the requirements that you have so that people of this county can have a safe and successful treatment, and we worked on it for about 3 months, and we sought the help of Mr. Gionfriddo, and certainly Senators Wright and Fahey to get the required appropriations because we needed more money to provide a decent program. And all this has come to (inaudible) of the State. We believe that when you read our plans, you will find it responsible and safe program. The location of the (inaudible) and that is what I would like to confine my remarks to. As it stands we invasion people who are intoxicated who in the old days would have stood a great risk of being arrested for public drunkenness, and were subsequent to the change in the laws being brought to the Emergency Room, to be brought to the non-hospital detox facility. We feel that from the past five years, not only feel from alot of conferences with other Chairmans of Depts. in hospitals which deal with the Emergency Room, we believe that most of these people can be handled outside of an Emergency Room extremely well, and perhaps even better, and therefore, in our county we wish that they be brought to the non-hospital detox where they would be carefully examined and so to speak (inaudible). About 10 per cent of these people, we are (inaudible), we are not sure, but nationally it is about 6 or 10 person of these people will need to go to a hosptial and therefore it is helpful to have a hospital around the corner, than several miles away for obvious reasons, and vice-versa if people by mistake walk into the Emergency Room or stagered in or somebody brought them to the doorstep and they don't need to be there, it makes sense that if the non-hospital detox

DR. MANOHAR (Continued from Page 3)

is close by the Emergency Room so we can make the appropriate transfer. And certain emergencies can happen even if the ..... is very good, during the course of the treatment, and therefore it is of a sense that if these emergencies were to occur like a person going into a seizure that you couldn't really predict when you first examined them, you know, a convulsion. It makes sense that the hospital is near by to be of service to these people, either the doctor could run up there with suitable equipment where they were and the patient can be safely transferred. So the sense of this location is proximity to the hospital which we think is crucial for about 10 per cent of the people. Now there is another reason I think we like this location is that we have an out-patient program also at Middlesex Hospital which is down the street, and this project involves two components, detoxification component and the rehabilitation component, and we think the proximity with out-patient program that it will only enhance the possibility of these people getting involved in an out-patient program. If they are released from C.V.H. or another facility in another town, there are two many miles and two many bar rooms so to speak between the two places and there is a lot of things that can happen before they appear at the out-patient program. So we do feel that we can strengthen linkages with a very important alcoholism treatment between rehabilitation and detoxification out-patient. Also they are located near to us.

VINCENT MARINO

Doctor, can you briefly go into what affect this will have on the Emergency Room at the hospital?

DR. MANOHAR

We estimate, we cannot be sure in every case, we estimate there are about 100 visits a month on the low side to the hospital and about 40 per cent of these people need not have been in the Emergency Room on the particular day that they were and this would mean an enormous help to the people that I am talking about. Because usually they have to wait till people who are sicker are treated first and so they sit around for hours and just the sitting around has the way of sobering people up. But that is not the only way of handling this problem, I mean it has to be handled a little more effectively than just having people sit down at the Emergency Room. Another reason is that once a person comes to the Emergency Room, whoever it is, he must be thoroughly checked out, even if he or she has been thoroughly checked out a few hours ago or a day ago, and that means all the x-rays, all the blood tests, everything all over again, and many of these people I think are unnecessarily exposed to extremely high technology and medicine, and sometimes to their own hazard having all these x-rays taken every time they are in there, But in case you don't take the x-rays and you miss it there is a whole lot of other things about hospitals and liability and things that get in the way of this management so that we do think that they are better, from all the research I have done in the field of alcoholism or read about in the past 13 years, every State including Mass., where I worked before I came here has found that there is an effective way to go through especially to help these people outside of the Emergency Room unless they need a general hospital.

VINCENT MARINO

Any questions of the Doctor? Thank you Doctor. I would like to now call Mr. Jeff Walter, Director of Tri-County Alcohol.

JEFF WALTER

I wanted to briefly go over what I explained to the Commission, two weeks ago

JEFF WALTER (Continued from Page 4)

or I guess a month ago, that we were proposing a 24 bed facility, two levels of care as Doctor Manohar was explaining acute care or detoxification and rehabilitation. The total number of staff we are going to be employing is around 15, however this touches on the parking issue. The total net increase of staff that would be requiring parking space at any point in time would be 3, because we are talking about staffing for 24 hours, 3 different shifts, so those 15 people are not on all at the same time. I wanted to tell you the reasons why we are interested in the Crescent St. site. Tri-County Alcohol Council is presently housed at 77 Crescent St., it's administrative offices and we have been there for several years. Dr. Manohar mentioned ..... points, which is the proximity to the hospital and this key. The other reason why this facility is really ideal is it's previous use which was as a hospital. We are very concerned with issues such as safety, fire and so forth, it is a fully sprinkled building tied into the fire department and it has a number of exits including the fire escape that is exterior to the building. So we feel this is the kind of facility that we ought to be looking for and there are very few of them in the Middletown area. It's proximity to the C.V.H. and to other community services, to the downtown area are other reasons why this site is really quit suited for our use. It requires minimal renovations, no structural changes, we will use the building as is, basically with cosmetic changes and upgrading of bathroom facilities as the primary changes in the building. One of the other reasons that I think it is important for this site to be looked at is, its non-residential situation. It is in a hospital zone. We feel it is not going to disrupt the neighborhood in any way. To that point I would like to read a letter which Rev. Thomas Niblock, from the South Church gave me. He was unable to be here tonight because of Ash Wednesday but with your permission I would like to read the brief letter. "Dear Members of the Planning and Zoning Board: As minister of South Church I am writing in support of the proposed rehabilitation-detox program of Tri-County Alcohol Council. I understand that this program would take place in a building adjacent to South Church and such a location has my support. In addition to my support I can also report that Mrs. Lawrence Olson, President of South Church, has expressed her support for both the program and its proposed location. Her comments of support are recorded in the official record of a recent South Church Executive Committee meeting. It is my sincere wish, and the wish of South Church, that the Planning and Zoning Commission give careful and expeditious consideration to this matter this evening. Since today is Ash Wednesday, I am unable to attend in person. Sincerely, Thomas R. Niblock" I don't know if this is the appropriate time to take questions, but I will be here all evening, but my presentation is complete.

COMM. GIONFRIDDO

Attorney Marino, do you mind if any Commissioners have questions if they ask them?

VINCENT MARINO

Any Commissioners have questions they would like .....

COMM. GIONFRIDDO

Comm. Garafalo

COMM. GARAFALO

I don't know if the rest of the Commissioners feel. I have no problem with the use or the purpose of the use of the building. I wish we could address the problems that were brought up in a staff comment report which deal mainly with traffic

COMM. GARAFALO (Continued from Page 5)  
and parking and some Public Works comments on curbing. I think that is what it is going to get down to anyway, eventually. If anybody has a problem with the use of the building, you know, I just want to get down to the physical barriers that we are talking about here. (Inaudible multiple speakers)

DIR. REIF

Are you open to a specific question?

COMM. GIONFRIDDO

Is that a question? Or do you.....

JEFF WALTER

I do have an response that I am glad .....(inaudible multiple speakers)

DIR. REIF

If you have a specific question, if you are ready .....

COMM. GARAFALO

Go ahead.

DIR. REIF

We were told that the patients would arrive in an ambulance like they now go .....

JEFF WALTER

Right. Right

DIR. REIF

My question is, where is the ambulance going to stop.

JEFF WALTER

I have had the Director of the Professional Ambulance service consult with me, come to the site and there is a ramp behind the building. The driveway on Crescent St. diagonally across from the Emergency Dept. entrance which is adequate for an ambulance. It has been used for years for that purpose when it was a hospital and the ramp is adequate with entrance to the building from the rear. No problem from that aspect.

DIR. REIF

It won't be on a public street.

JEFF WALTER

Pardon me.

DIR. REIF

It will not be.....

JEFF WALTER

It will not be on a public street. If I may expand on that point, no patients will drive themselves to the facility obviously and they would not require parking. In addition, visiting is very restricted in this kind of program, we will be restricting it to 2 hours per day, 5:30 to 7:30, or there about, we have received letters from the hospital indicating that in addition to the available parking on the street and so forth which we know about and whatever parking is available behind our building, the hospital parking lot would be available for visitors. In addition, finally, we have gotten permission from the Y.M.C.A. to

JEFF WALTER (Continued from Page 6)  
use a limited number of parking spots in their lot if we need them, and I can negotiate that at a later time with them.

COMM. GIONFRIDDO  
Mr. Reif

DIR. REIF  
So far we have not received any letter from the hospital stating anything about parking being available.

VINCENT MARINO  
You will. I have left that until the end.....

COMM. GIONFRIDDO  
Comm. Pattavina

COMM. PATTAVINA  
That was my question and if I remember correctly at the last meeting, I think Atty. Marino did mention that you have authorization from the hospital to use their parking facilities, and I have a letter in front of me from Lt. Anziano and he does mention reference to Mr. Osora saying that their parking at the hospital right now was taxed, and there would be some problems as far as supplying additional parkers. We also have a letter from Gordon McWilliams that you are probably aware of which does not mention any parking at all also.

VINCENT MARINO  
That is correct.

COMM. PATTAVINA  
If you can clarify that later, I will appreciate that.

VINCENT MARINO  
Well, why don't I do it now and try to relay some of these questions. First of all, here is a letter to Atty. Mazzotta from Theodore Horwitz, who is the Executive Vice President and Administrator of Middlesex Hospital. "The Middlesex Memorial Hospital has several areas restricted for public parking within the overall Hospital parking system. These spaces could be used, as available, for the public in conjunction with the Tri-County Alcohol Council's program for an alcohol rehabilitation hospital. This would, of course, only apply to public areas and use and would not include areas otherwise restricted for use by Hospital outpatients, staff, or other special uses." I present that.

COMM. AUGUSTINE  
Mr. Horwitz mentioned as available. What is the availability?

VINCENT MARINO  
The public parking section if you have been at the hospital is just that, it is public parking. It is not public parking for somebody who obviously wants to go down to the Y.M.C.A. or somebody who wants to go down Main St. It is parking for the hospital. And to that end, they will make available, obviously, if there are 50 cars that come in they are not going to be able to accommodate them. If you are talking, you know 5 cars in any one time, they will be able to accommodate them. But for me to come here tonight and say under all circumstances Middlesex Hospital will accept all the cars to go down there, I can't do that. What cars, what spaces are available will be available to people who visit Tri-County as though they were visiting the hospital. Beyond that the ....., if I'm

VINCENT MARINO (Continued from Page 7)

correct, I think what would happen on this parking is that the parking would require approximately 30 spaces if it were figured out on a per foot basis with all the different tenants in there, and if each thing were individually set out under Section 40 of the Code. We have proposed approximately 10 spaces. O.K. There might be as few as 8 spaces. I would think you would probably be talking 8 to 10 spaces available. In addition, while we don't plan to utilize it completely, EVLO Associates also owns a building on Pleasant St. where the parking area abutts and is connected to the rear parking area of this location. Presently, that rooming house has 4 people who room there, who utilize that facility, who drive cars. The balance of the people in the rooming house do not. So some of that may be available. In addition, I have spoken to Mr. Mayo of the Y. and quite frankly, we all know what is going on with the proposed hotel, and the crunch that may come on parking. What he said was this, that at night time there would be no problem utilizing, giving them space for parking. During the day there might be some spaces available subject to the Planning and Zoning Commission restrictions, I guess there is an area where they I think intend to expand or try to expand, and also subject to any other situation that occurs with the new hotel. Now, I don't mean to skirt the issue, but I would like to confront it out front. I think that I have heard nothing but parking, parking, parking, from a number of sources since this thing has come up. And what I would like to do is this, the parking requirement under Section 44.08.26 E. says as follows: "Off-street parking requirements for architecturally and historically significant buildings with adaptive uses may be modified when a proponent can show (a) needed off-street parking is or could be available in the vicinity." I think from what Mr. Walter said and the Doctor, you are not going to have 15 people at that hospital at anytime, you are not going to have 10 people parking there, you are going to have 3 or 4 parking at the hospital or at the former hospital. So I think we have provided some alternative parking for those who can't park in the facility, both behind Pleasant St. building which I don't really think we should, or we really don't intend to utilize that much, but which is available. Also, you know we presented some the letter from the hospital. In addition the second portion "(b) the economic feasibility of the project depends on the waiving of some or all of the off-street parking requirements." Now, I think it does, I think if you require this building to have 30 spaces for parking behind it, you are out of luck, we are out of luck. If you expect 30 spaces for anything in that building; it just doesn't accommodate it. Few if any buildings in the center of Middletown especially if they are old enough to fall within the historic designation are going to have satisfactory parking requirements to satisfy the existing regulations. These regulations have been waived when a restaurant wanted to go into the old Huntington's book store. They have no parking at all there from what I can see. They have waived for Middlesex Mutual in the older building that they are putting up. I understand that they have been waived for the fruitery, and I understand the only thing that plaza that is going to require parking is the new building that goes up there. I may be wrong, but certainly I don't see much parking around Huntington's building when there was a restaurant in there, and I think to require 30 parking spaces or anything of that nature certainly violates I consider to be the obvious intent of this whole section. So I don't think that, I think that the parking should be adjusted to accommodate what we consider to be something which the people of Middletown and surrounding areas need. Now, in addition before I get off that subject, let me say this that there is a number of other projects like this going on in the State of Conn. There is one in New Haven, I believe there is one in Bridgeport or Norwich, and one in Hartford. We're not going to be a dumping ground for every alcoholic in the State of Connecticut, and I get some feeling that some people feel that way. You know, we are close to the hospital, it's an old building, you're not going to

VINCENT MARINO (Continued from Page 8)

satisfy all those parking requirements and I don't think we should have to.

COMM. GIONFRIDDO

Any other questions?

COMM. CARTA

(inaudible) There are some base things that I definitely want cleared up for my self. The way I look at this is that we are being asked to change this to a historic zone with what appears to be and I grant that the building is historic, and it is one of the buildings in town that I would like to see totally restored and saved. I have personally no problem with alcoholics and it is a thing that in our society we need to face, here in the City and throughout the Nation. It needs to be dealt with and I am in favor of it being dealt with right in this town; however it appears to be me what we're doing here is taking a building which has the potential for historic designation and designating it that way in order to handle the parking problem. Now, and I hope you can correct me on this but in the historic designation it says or part of that when including it designated as historic, you shall renovate, restore the exterior building and the site on which it sits to bring it back to its you know its original or the original condition. Now as I read it, it appears that that is one of the things that is part of the criteria, and it hasn't been addressed here at all, and anywhere in the literature it appears that isn't going to be touched.

VINCENT MARINO

Well, O.K.

COMM. CARTA

So that is the first thing for me in order to designate a building historical, and the City has set aside this particular thing to be available to these buildings, but there is criteria, there is criteria that needs to be met. (inaudible) That is the first place that I'm going to start to know exactly what you plan to do with the building, and I want to go from there into the parking because I think it is intricately connected in that if we give you the historic designation then in fact we must you know waive the parking, which is something that we must look at all together, if not, then not one piece at a time. In our addressing the parking, I want to be real specific about the Police Dept's report. Well, it says here that EVLO Associates in regard to possible use of the off-street parking facilities at the hospital, Mr. Osora has stated that their parking facilities are being taxed at present, and it is extremely doubtful that the hospital officials will sanction the use of anything other than what you just stated was the public area, and it should also be noted that parking has been extended on Main St., that is our City public parking has been extended on Main St. and on South Main St. primarily to accommodate hospital personnel. To add to the existing levels of parking in this area would greatly decrease public safety. So they're already at a situation where their own public parking doesn't work and private parking doesn't work. It's not, in other words, I want this to be specific. I think that the picture that is being painted is a bit vague, and I agree with you to look for 30 spaces on this site simply does not work, but to vaguely state that someone might let us use something, and someone might let us use something else, I have much trouble with that. In other words what that does is create a situation the Police Dept. is addressing here. I need to have it specific with letters as to who will give what. That's simply the way I feel on that matter and I've not seen that here. In order for me to actually serve you, if I deal with something vague, then I going to have to judge based on public safety and that sort thing and that probably will not serve you and your cause. There is another thing I want

COMM. CARTA (Continued from Page 9)

to address on parking and that is the site itself. The entrance on Crescent St. is 14 feet wide. It is extremely narrow and difficult to get in, the curbing is decaying, bent over the opening there, very difficult to get in and out of. I have personally surveyed the site at various times during the day, and not only will your parking lot be emptying onto that 14 foot very long right-of-way but the parking lot abutting that which takes care of the rooming house, which at various times of the day that I was there was 75 to 85 per cent full. That parking lot that we spoke of that there are only 3 people from the rooming house use. If someone else tends to be using that whether authorized or unauthorized, I don't know. The actual parking spaces behind the facility in question, there were at least even at 8:00 in the morning, not 8:00 in the morning, I'm sorry, approximately 9:00 or 9:30 in the morning, there were 4 of those filled up, so left very few and the day had not yet begun. The ambulances coming in and out of there, I assume are going to use their ramp which is shown on this print.

DIR. REIF

Yes

COMM. CARTA

Which there's ..... I have difficulty reading that slot there, but George is that handicapped parking?

DIR. REIF

Yes, that is what is says.

COMM. CARTA

Actually if an ambulance pulls in there is no way for the ambulance to get the building. In other words, the parking places are at 90 degree to the building and the ambulance must stop there and try to get between these cars to get to where the ramp is. The foot of the ramp, well according to this I see, you don't agree with, according to your print there is no way to back an ambulance up to the building, parking spaces are between the building and the ambulance .....unless I'm not looking correctly.

JEFF WALTER

I am at a disadvantage because I don't have the picture in front of me, but... I don't ...We saw the ambulance backing right into the handicapped spot and making another spot next to it handicapped. I'm not sure where, what's the problem?

COMM. CARTA

Apart from the parking, the request for parking spaces is causing what I believe to be another problem. That is the ambulance coming in there with a person can't in fact get to the ramp because you have designated parking spaces right at the foot of the ramp, and if they are full, the ambulance can't get to them.

JEFF WALTER

The spots from what says handicapped and the 3 spots next to them are all designated, they are intended to be used for the purpose of getting people up that ramp and using at the present Easter seals and at a later date our facility. I don't see any problem with controlling the use of those particular spots. I don't, those are not designated for office workers or that kind of thing right now.

COMM. CARTA

Would you wipe them out as parking spaces or would you in fact .....

JEFF WALTER

I don't see those spots having, creating a problem with the ambulance backing into the larger spot, which is the handicapped spot. They wouldn't be used, those spots wouldn't be used for people who would be parking all day, but for people who would be loading, unloading. That was the intent.

COMM. GIONFRIDDO

Any other questions?

VINCENT MARINO

He had some questions that I would like .....He had like a 3 or 4 part question there.

COMM. CARTA

They do need to be addressed.

VINCENT MARINO

First of all the historic designation, if you require any building, in my opinion, in this city to fit within that historic designation to be put back as it was the day it was built, you are going to have almost no buildings designated historic. There has got to be some difference; just by time there has to be a difference. The hospital itself has been, the building has been in existence for over a 110-115 years. There was a change in front on the building in about 1938 and there was one or two changes in back of the building in the late thirtys or early fortys. That did not seem to bother the, Mrs. Cunningham from the Trust as ruining its architectural signifiene. They were put there at a great cost and I don't think that regulation is intended to dismantle a building from what it is today to what it was. I think the intent is to make the building at a reasonable cost as close to what it was as possible. Also it's provided its here so that the building will be saved or not changed in the future. Now quite frankly, your concerns are parking I understand; however if Middlesex Hospital .....

COMM. CARTA

Stop there. Have you any proposals to actually do something to the outside, let's say the front and sides of the building verses the rear exterior which has been modified obviously for hospital use which is appropriate?

VINCENT MARINO

We have no plans at this time to change anything on the building. What I say is on the front, there has only been one change that is mentioned in the copy of the Commissions, Historical Commission's report, which was attached to the application. There is one change and that was on one of the porches to go on there. As far as the sides of the building if you will note we're talking about 77-81. O.K. We are not talking about I think it is 75, which is the small building on the very end. If we were I would be glad to have it included in here, but we don't own that so we can't. So what we are talking about, the only other side of the building is the side on the church which is pretty well boarded, or abutts the church. There is about 6 foot wide path there that I don't think anybody uses. The cars that you saw going into the EVLO building on Pleasant St. are unauthorized. I think there is some sort of a shop, thrift shop or something right around that area and cars have been parking in there. They have no right to park in there. The only people in that 15 Pleasant St. that are entitled to park there, there are 4 people who have cars at this time. We would utilize whatever space, there is quite a bit of space there, there was an old hostelry, hostelry I guess is the name of it, there some time ago, or carriage barn that was torn down just so there could be additional parking and if you desire on a

VINCENT MARINO (Continued from Page 11)

plan we can show where the additional parking is going to be. But I think that and the reason quite frankly when I said earlier 8, there may be up to 8 spots not 11 was just because of what you raised on the ambulance pulling in there. Some of those spots may not be able to be utilized. But there will be at least 8 there, and I would expect there would be at least at any one time in that building another 4 to 6 spots available if they were needed.

COMM. CARTA

Just one more point in looking over the outside of the building, their ambulance approach on that ramp. At the foot of that ramp where it actually faces a brick wall there, in other words as you come down the ramp, you must turn left to get out from looking at a brick wall. You could barely roll a wheelchair in that little space, let alone the treachery, in my ....., I want to address that. There is just no room at the foot of the ramp. Actually it abutts a brick wall and you have barely 3 feet at the end and you're in a box.....

VINCENT MARINO

As far as the ramp is concerned, I don't consider, I suppose I'm not considering that part of the building as such, that ramp is in there I believe because of the laws today and for us to ....., We can certainly change it and you are going to have to if you are going to be carrying people up there, but you know for us to eliminate the ramp, for instance, to get the building back, I know you're not asking that, but to get the building back to the way it was (inaudible) to make adjustments to be able to carry somebody in there.

COMM. CARTA

The ..... proposal physically does not work. The...I just find alot of vagueness in the plan, the proposal, and the solutions. I would like you to address one more thing that ties in again directly with the parking and I have no idea what, how you run these facilities. Yet, I would like to have you clear it up for me. In your proposal it says the basement area will be used primarily for kitchen facilities, that's one floor, the second floor will be used for 24 bed along with the third floor.

JEFF WALTER

No, 12 and 12

COMM. CARTA

(inaudible multiple speakers) Second and third floor will be used for 24 beds, spread out over 3 stories, and yet you are telling me that there will be only 3 people in attendance. (inaudible) kitchen personnel?

JEFF WALTER

Let me address that because frankly we are in a quandary. We understand the concern about the parking. Our feeling on a programmatic level because I can't deal with legal aspects, that's not my area, our parking needs, we anticipate our parkings needs to be minimal and yet we want to .... Perhaps the vagueness was because we didn't feel the need to actually have spaces designated in this place and that place because we feel the need is going to be minimal for additional parking. If you asking a question about staffing....

COMM. CARTA

Yes, it is little hard to believe that you can run the kitchen and the rest of facility with 3 staff personnel.

JEFF WALTER

I didn't say 3. I said a net increase of 3. We presently have 5 employees.

JEFF WALTER (Continued from page 12)

We are in the building now. We have five employees. We will probably lose 2 of our existing employees in the next year and I figured we would have 4 to 5 people at any given time in this new program. So I figured a net increase of 3 individuals. That doesn't mean that all those individuals will actually require parking on site. We have a bus, the municipal bus drives right in front of the building, stops at the corner, leaves people off. There is an opportunity for people to arrive and depart from our facility by public transportation. There is a number, it's within walking distance of any point downtown, so right now not all of my staff parks right behind the building, nor do they all drive to work. I have one employee right now who lives about 400 yards from the facility and walks to work almost everyday. I'm being very honest with you, and we don't think the parking needs for this facility are going to be very large. In fact, for all the potential uses of the building, I would think this would have the least demand for parking. If it was residences, row houses, each apartment would have 1 or 2 or perhaps 3 cars.

COMM. GIONFRIDDO

Comm. Augustine, did you have a question?

COMM. AUGUSTINE

Yea, I have two questions. Getting back to staff, you say 15 staff for 24 beds. You divide 15 by 3, 3 shifts, that gives me 5 people for a staff per shift with a staff to handle 24 patients. Now as Comm. Carta says you got your kitchen downstairs, you might have one or two people, so what are you going to have 3 people in the whole hospital handling 24. You got a director who is going to be sitting in an office, then you are going to have 2 people handling 24 beds. I'm behooved by the staffing of 15 people.

JEFF WALTER

The staffing pattern that we are proposing is standard and it's required for licensing, in order to comply with licensing, our expectations, first of all you don't have the same number of staff on every shift. Night shift people sleep and on the 12 people on the third floor are people who are an advanced part of the rehabilitation program. They work during the day, they sleep there at night, they require minimal supervision and one person is quite sufficient especially in the evening and night, just to be there for counselling programs and coverage. That is really not a problem. On the second floor, 2 to 3 people depending on the part of the day is standard for that number of beds for this type of program, in addition to volunteers. And then the kitchen staff are day time people, they're on the ground floor as mentioned previously. This is, it is a small facility and it may seem like alot of people, but if you look at the hospital, they don't necessarily have more than 2 people, or 1 person per 5 people, which is what we basically are going to be having at most times.

COMM. GIONFRIDDO

Comm. Pattavina

COMM. AUGUSTINE

I have a question yet.

COMM. GIONFRIDDO

You have one more?

COMM. AUGUSTINE

On parking. I still feel the hospital is giving you something they don't have.

COMM. AUGUSTINE (Continued from Page 13)

If my memory serves me right, back a few years ago the hospital had an agreement with the St. Mary's Church to provide parking for their own employee. If they do not have enough parking for their own people, how are they going to allocate you on a piece of paper saying that you can come over there and park also. I don't understand that either.

VINCENT MARINO

Let me answer that. Let me say this. In the past 6 months, o.k., both my parents were in the hospital. They were in the hospital for a combined total of about 4 or 5 weeks. During that time that I visited them, I visited them on numerous occasions. I used the hospital parking lot every time. Every time I went in there, I had no problem finding a space during the entire day. So, you know, maybe there is something I don't know, maybe I didn't go at the peak times, but the times I went in there, there was additional parking available. That's the best I can answer that.

COMM. GIONFRIDDO

Comm. Pattavina

COMM. PATTAVINA

With due respect to Atty. Marino, I will get off the subject of parking.

VINCENT MARINO

Thank you,

COMM. PATTAVINA

I have just one question I guess of Mr. Walter.

JEFF WALTER

Yes

COMM. PATTAVINA

Maybe you can answer for me. I guess this facility would take up residents from all over the Middlesex County and thereabouts.

JEFF WALTER

Yes

COMM. PATTAVINA

O.K. My question is is that after they are done or rehabilitated, do you have any facilities available or any program that when you release these people that you don't just open the door and say that you're cured and there you go, or do you have another facility for them after this?

JEFF WALTER

There are a number of facilities available that we would use. Part of, nobody would be released from the rehabilitation phase of the program without a place to go, and one of the facilities for treatment is the one that Dr. Manohar suggested that was his own out-patient clinic. But if you are talking about residents, people would return to the residence that they came from. They had a home before they came to the program and in most cases they would go back to that same home.

COMM. PATTAVINA

O.K. Through my experience with people who are probably alcoholics and so forth,

COMM. PATTAVINA (Continued from Page 14)

I have found numerous cases that and I am sure you have, that individuals did not necessarily have a home to go to. They might have had a room that they are paying 2 - 3 dollars for and so forth and that was their location at the time. Basically my concern is is that I think there is alot of residents and people in the City of Middletown or any town that would be handling something such as this, is that too many times towns are being taxed by individuals that might be re-habilitated at a certain area, and at the time of their release they become dependent on the City's welfare rolls and so forth. I sort of have a concern that this might happen here and I would like you to enlighten me at this is not possible or not to any extreme if you can.

JEFF WALTER

Yea, I understand you concern and we have discussed that in our own planning for how we are going to operate and so forth. There is several things that you need to know I think. One is that, that people, that our intent is to provide a continue of care so that as I said we don't just release somebody to the street, and if they're in downtown Middletown, that's about, if they have no money, that is about as far as they are going to get. But if they started in Middletown they will probably end up in Middletown after and there is no question there. We, one of the things we will be doing in terms of the financial end is we would be billing the welfare dept. from the town that they came from and that's very clear that if an ambulance, if they were brought in by a parent, or by an ambulance from Clinton, they wouldn't be going knocking on the welfare .....

COMM. PATTAVINA

I can understand the initial time that they do come in.

JEFF WALTER

When they are released, I guess you are talking two types of people and not categorize or stigmatize anybody but you got people who have a place to go home and you have people who do not that are fairly homeless, transient perhaps, and those people are presently coming through and going to C.V.H. and they're releasing them directly onto Main St. One of the reasons that we are setting up this program is to try to cut into that revolving door syndrome where they dump out onto Main St. and to keep them for a longer period of time till they get sober until they get on their feet and then try to find a location for them. I cannot promise you that a 100 per cent of the time we'll succeed in that effort, but that is the reason for setting this program up is to cut down on that population that you're concerned with.

COMM. PATTAVINA

So what you might be saying to me is right now that we might have, let's say we have 15 people who might be going to Conn. Valley, rather than go up there, they might necessarily be coming to your place, so it isn't going to be duplicating an effort where some might....

JEFF WALTER

Exactly, there is only a certain number of people that need this service. The reason for setting it up is to provide an alternative to C.V.H., and so we won't be increasing the numbers of people.

COMM. PATTAVINA

O.K., Thank you,

COMM. GIONFRIDDO

Comm. Garafalo

COMM. GARAFALO

Are the applicants aware of the comments that the staff has made, George, you know the copy that we get like Public Works?

inaudible, multiple speakers

COMM. GARAFALO

Under Public Works there are 3 area that I have some concerns with dealing with the inadequate maneuvering area for those 3 cars that we talked about down in this corner. Small concern, but still a concern is the curbing by the ramp. Do you have any plans to remove that so handicapped won't have any problems getting to the ramp and up it and the width of the driveway or you know I guess the driveway, it doesn't permit two way traffic. We can talk all we want about parking and all that but that's not always the problem. If traffic moves then parking can be less of a problem. Is that going to be problem, is there any way of rectifying that particular problem?

VINCENT MARINO

Well as far as making it accessible to the handicapped by removing any, I am trying to think from memory what these things looked like and.....  
inaudible Well, I'm to think what they look like on the ground.

JEFF WALTER

I got the picture in my mind and I know exactly what curb you're talking about and I know exactly the width of the driveway. Your right it's .....

DIR. REIF

There is not enough back out space.

JEFF WALTER

You're exactly right that there is only one way traffic available to access to the road. Our reading of it is that an ambulance can back in and back out. If there is a car trying to get out, then the ambulance will have to wait until that car exits. There is no question about that. There is a curb, a bumper I guess that is about this long that should be removed and I don't see any reason why it couldn't be removed. Wheelchairs can get onto to the ramp, they are now getting onto the ramp. Stretchers can get onto the ramp but the, your right, if you pull up the ambulance all the way up to the ramp, then there is no place to get the person out of the ambulance. But, it is, it's a, if you look at the .... Let's see .... I don't have the pages that we're talking about.....

COMM. GARAFALO

In other words this shows the curbing all the way across.

JEFF WALTER

There is not a curbing all the way across. There are several distinct curbs and this ..... this is the end of the ramp here. The ambulance would be right here and there is no question that it won't bang into .... There is a curb that goes right along here and I don't see any problem with them backing in this way, and then exiting this way.

COMM. GARAFALO

These 3 cars, do they have enough area to back out?

JEFF WALTER

They do now, they back out now. But again those spots, we are going to have a

JEFF WALTER (Continued from Page 16)

problem if those are spots that somebody parks at at 8 O'clock in the morning and wants to stay there until 9 O'clock at night. Those spots should not be used for that purpose and we would have to make that kind of accommodation. They are not used for that purpose right now. To my knowledge there is never cars there all day in those 4 spots.

VINCENT MARINO

Also that garage is not on our property so to .... there is just no way we can....

COMM. GIONFRIDDO

Anyone else have any.....I have one question. The people on the third floor that you are talking about being in the rehabilitation area, are those people that you transport back and forth to their places. You said they would be working. Do you transport them yourself?

JEFF WALTER

Not necessarily, it depends on where they work.

COMM. GIONFRIDDO

Does that mean if you're not going to transport them, some of them might be there with their own automobile for instance?

JEFF WALTER

We can control that. We can set up and we would set up a rule where no client could have a car on the premises. If they wanted to have a car somewhere in the area, they would have to make arrangements. There would no reason for them or a need for them to have a car. There is public transportation within the City and if they had to drive outside the City we would certainly make arrangements to either transport them or to help or they would find a car pooling situation.

COMM. GIONFRIDDO

Any other questions? Atty. Marino, it is my understanding or I think it has been stated at the last meeting that you were looking for a decision on this this evening. Is that correct?

VINCENT MARINO

That's correct. We...

COMM. GIONFRIDDO

Is that an essential element as far as you're concerned?

VINCENT MARINO

Well to get going it's very important. We're delayed unavoidably I'll admit last time and quite frankly some of the questions here tonight, they're good questions, but I wish they had been asked at the preliminary hearing so I could have prepared more satisfactory answers to those questions. There were none at the preliminary hearing.

COMM. GIONFRIDDO

I guess what I'm asking is, if this is not decided this evening, in order to try to get some answers to some of these questions, would you be greatly prejudiced? Let's put it that way.

JEFF WALTER

Perhaps I should respond from our point of view. This step is the first in a

JEFF WALTER (Continued from Page 17)

long series of steps before the facility can get under way. So we are interested in expediting it. I'm also interested in responding to all of your questions as best we can. As you can see there is some questions, things that are not, we can't make the driveway wider and so forth. But, if there is information that you need, that would take a week or so to get, we would be glad to do our best to get them.

COMM. PATTAVINA

Mr. Chairman

COMM. GIONFRIDDO

Comm. Pattavina

COMM. PATTAVINA

As far as the questions I have asked, I've got reasonable answers and I don't know whether I would have to have a delay on this. I don't know about other....

COMM. GIONFRIDDO

That's something we'll have to decide when we.....

JEFF WALTER

See our problem is that we were delayed for a month where now we put everything else off and we are going into a new year starting July 1. So we are concerned about that, but again, it's your pleasure.

COMM. GIONFRIDDO

Thank you.

VINCENT MARINO

If I could just add one more thing. What we are trying to do with this building and remind you that it was a former hospital, but what we are trying to do with this building, is to adapt this building that was built in the horse and buggy days when these requirements were not what they are today, and to utilize it for something that I think will benefit the entire county, but certainly the City of Middletown. We'll do whatever we can to expedite the parking but there is certain things with this building that we cannot change and I don't care if we have residents in there or whatever we have, if we utilize that other space, there will always be a parking problem in that building. There's just no physical way short of selling to the hospital and having them utilize it any way they want.

COMM. GIONFRIDDO

Thank you very much. Is there anyone from the public that wishes to speak in favor of this proposal? Will you come up to the microphone and give your name and address for the record.

DIANE MORIN

My name is Diane Morin, I'm from Middletown, Conn., 24 Plymouth St., and I am very much in favor of this facility being located in our community. Having taught school for several years, I see a direct increase in alcohol abuse in the school system where I teach. I don't teach in the Middletown School System, but I'm sure this is true elsewhere and I also have an immediate interest in alcoholism and the problem of this particular disease as it is in my family. There are several detox centers around, many of which are out of State and make it very inconvenient for people to get adequate treatment. If a family is lucky enough to have two spouses working then provisions can be made. But many people in our community are not working. Many people with this disease

DIANE MORIN (Continued from Page 18)  
are in the situation where they can't get out of this vicious cycle, can't be treated adequately, and I feel that is part of our community responsibility to make provisions for them. I feel Tri-County Alcohol Council has done a tremendous amount of work and has given our community alot of assets in this regard, both for the alcoholic and the alcoholic family, and I certainly go along with everything that Mr. Walter and the Doctor from the hospital has contributed this evening in terms of the remarks for the need. I understand the problem of zoning, something that I didn't really consider, but I feel that in regard to parking, it's something that can be worked out. I see no big problem if Mr. Walter plans on restricting the visiting hours, say 5 to 7, then that is a very limited amount of time in a 24 hour cycle. I really feel that the issue of parking has been discussed enough and the issue should be voted upon this evening. Thank you.

COMM. GIONFRIDDO

Yes sir.

MIKE ROGALSKY

Well, good evening, my name is Mike Rogalsky, 139 Birchwood Drive, Middletown, and I am an alcoholic. I have been into a detox center. I have been from the detox center transferred over to the treatment center. Unfortunately I did hear a word tonight and they drilled it into us. I don't mean to use that terminology, but there was a statement made tonight about, and the word that was used was "cured". Unfortunately there is no cure for us. Now the detox unit that I was in, I went to Edge Hill in Newport, R.I. detox unit. When I got there I had a medical problem which had me in Middlesex here for 22 days before I went to the treatment center. In that 22 days because of medical problems, I detoxed here. But when I got to Edge Hill, I got there on Friday, they do not transfer over weekends, so I had the opportunity to spend Friday, Saturday, and Sunday in detox. It was a 24 bed unit. Two staff nurses, they could handle it with no problem. They were very shocked when I arrived at there, that I drove myself, that I had a personal vehicle there. Edge Hill, when I was there, there was approximately 120 I'd say people going through the treatment program. Out of this program, maybe 7 of us had cars there and that was it for the patients. I don't believe parking is one thing that won't be a problem here at all. The only parking that I can honestly see is for the staff people. I do believe that the hospital does have adequate parking for them or else that parking lot that is in the back that the tenement owner has agreed to them to use. I see no reason at all, that there is any problem. I feel it should be voted on, it should be approved 100 per cent. The reason I speak of this is, is because I am grateful now to be alive and be able to be here tonight and to listen to this. I think something like this is needed in this area. Now, I did go to Newport for my own choice. I could have gone over across the river, I could have gone up to C.V.H., why Newport came up was Dr. Manohar's suggestion, was suppose to be one of the top treatment centers around. Which to me means that Dr. Manohar, who will be helping out with this detox center and treatment center, must believe very highly in Edge Hill's program, and I believe also he'll try to see that Middletown follows this program. And I think anybody who gets into it, it's going to benefit him. But it will benefit them if they want to be helped, that is the one problem. And I thank you very much.

COMM. GIONFRIDDO

Thank you.

MIKE ROGALSKY

Excuse me. If I can, if there is anybody and if it is allowable, wants to ask a question about it. What I saw there or anything, I am more than happy to answer a question on it.

COMM. GIONFRIDDO

Thank you very much. Anyone else wishing to speak in favor of this proposal? Anyone from the Public wishing to speak in opposition to the proposal?

ROBERT ARMSTRONG

My name is Rob Armstrong and it seems to be a little known secret, but we live at 71 Crescent, which is the fifth row house built in 1896 by Amelia and Charles Vinal. Now we bought this place in 1980 and we put a slate roof on it, restored it to its original character, restored the original wood trim. What I would like to do is read a written statement and then maybe ask Tri-County Alcohol a few questions. While this is not a total objection, I would say it is a limited objection, I would like to qualify it and I would like to raise certain issues and hope that they could be answered. As the owners and residents of 71 Crescent St., the fifth in the series of row houses, we, my wife and I, wish to express our concern about the proposed detoxification center immediately adjacent to our dwelling. While we support the work of the Tri-County Alcohol Council, and this I want to reiterate, we do support their work, and we take no issue with the renting of a vacant building. We are concerned that adequate measures be taken to insure the peace, quiet, and safety of the immediate neighborhood. Because our dwelling is a row house and boundary line is the north wall common to both structures, we urge that adequate sound proofing measures be taken on the second floor to insure our peace. Since we have experienced sound transmission through the walls of the first floor, we feel that the proposed community room adjacent to our bedroom must be sound proof. Furthermore, we are concerned that the integrity of our two car garage which borders on the only entrance to the proposed center be maintained. I do not want to see this hit, knocked down, it would be in violation of the present day zoning laws. I need that garage to store our two vehicles. Since the driveway, and this is the driveway, not the entrance, but the driveway itself is only 9 feet wide and 8 feet wide from the garage overhang, we urge that the driveway be expanded or another exit be found. One possibility might be the exiting through the Middlesex Memorial Hospital property or perhaps the South Church. To further the safety of the cars exiting EVLO Associates driveway, we suggest that no parking zones immediately adjacent to our driveway and their driveway be increased by one space. Many times a car will block or half block the driveway, and if we are parked in our driveway, they have to go across our driveway or vice-versa. It is very hard to enter both of these driveways. Also the M.M.H. drop box, which is for the used clothing, which is adjacent to the driveway, perhaps might be moved to another location to prevent cars from blocking both driveways. Many times people will park the car right in the driveway, will go in, or either drop clothes off, or will go in the office and drop clothes off to get a tax receipt, so they are there for a few minutes, five minutes. Lastly, our concern is that adequate security measures be taken to insure the personal property and safety that exists at present. Unless these issues are addressed, we do not feel that the location for the proposed center should be approved. And I have a number of questions. If large vehicles such as a step van or step, the large vans that are used for ambulances are to enter this driveway, are these going to be night admissions, or are they going to take care that they don't hit the garage? The garage virtually sits on the proposed border line. Are these type of vehicles going to be used or what?

COMM. GIONFRIDDO

I would just ask that if you have any particular questions that you just read them out.

ROBERT ARMSTRONG

Alright.

COMM. GIONFRIDDO

I will give him an opportunity maybe. I don't want to get into a debate.

ROBERT ARMSTRONG

O.k., O.k., that's fine. The second is the wooden ramp which is extremely noisy. That it has been built within the last six months, which I take no issue of it, but it also if I could bring up, I don't want to raise the point, but I will. It sits within a right-of-way behind our garage. If soundproofing could be made on this ramp, perhaps a sturdier ramp, something like that, a concrete ramp that would take away the noise maybe, and we wouldn't have the problem there. And the gentleman who was an alcoholic, I would hope that not too many people would be entering with their own cars, because it is a very narrow driveway. I'd hope that security arrangements would be provided by the hospital if not by Tri-County Alcohol. We have experienced people that smash bottles on street for no reason other than they're drunk. And it is obvious that there is a need for this sort of center, but ..... security. Thank God that the security at the hospital is there, because they protect the neighborhood, they keep the neighborhood what it is. It is actually a quiet neighborhood and well maintained, but we have had people walk along drunk, kick over our garbage cans in the middle of the street. This is for no reason other than they're drunk. So we would hope that some kind of security would be maintained. That's about it.

COMM. GIONFRIDDO

Anybody on the Commission have any questions? Thank you very much. I would... I don't want to get into a debate pro and con. If Mr. Walter or somebody would like to respond briefly..... I don't want to get into.....

JEFF WALTER

No problem. I'd ask Bob to give me a copy of the letter. I don't .... There is a few things.....We can't move his garage, but we can certainly take the safe guards that he requested. The ramp, I don't see that as a major problem. We probably wouldn't want to build a concrete one because they cost about \$8,000, but soundproofing, a all weather coating on it. There is a number of things that come to mind. I don't see any difficulty in most of it. I think Vin will probably want to respond to the soundproofing because we already talked about that. Again, I don't see a problem with providing some soundproofing if we need it. I'm not convinced ..... I don't know what we are going to need until we go up there with Bob, and maybe we can bang on the walls and see what the noise is and we would take care of it.

VINCENT MARINO

I think that's essentially what I was going to say. We don't want to spend money soundproofing if it is not necessary. If it is necessary to maintain good neighbors, we will be glad to do it. We have talked about it already and I'm not sure how, without us physically going in there and listening to what goes on on the other side, we can't know what the sound problem is, if there is one. I don't know what type sounds he heard. He may have said it but I was looking at something else for a minute. If it is noise of voices and things, then we may need soundproofing. If it is noises from hammering or something like that we may not. I don't know if we will ever be able to completely soundproof something like this. We'll do whatever we can and we will be happy to maintain good neighbors. We don't want to cause any problems at all.

COMM. GIONFRIDDO

Brief questions. I don't really want to get back and forth on this.

COMM. PATTAVINA

Mr. Chairman, it's just a brief question. Do you have any sort of a time that you would have to have lights out for this facility?

JEFF WALTER

Yea, I think it's a point to add that our ....The type of program that we want to run is one where there is, people are in bed, they're quiet, part of the therapy is peace and quiet, lights low, lights out, no personal radios, especially on the second floor where you got people who are fairly ill. So I don't see it as a problem and we are putting wall to wall carpeting which would deaden alot of sound from the floor which is linoleum now. But there is going to be a number of house rules. I don't see a problem, but we will work with them and if there is sound we will take care of it.

COMM. GIONFRIDDO

Comm. Garafalo

COMM. GARAFALO

Probably what I had to say probably come before us when we are discussing this.

COMM. GIONFRIDDO

O.k., thank you. Is there anyone else that wishes to speak in opposition to this proposal? Well, I guess we have to at this point, before I pound the gavel, we have to decide.... try to make some kind of determination. Am I right, George, is stating that if we close the Public Hearing and the Commission decides not to vote on this this evening that we can't accept any further information from the proponents?

DIR. REIF

Yes

COMM. GIONFRIDDO

So my question that I pose to the Commission before I decide if we are going to continue or close the Public Hearing is what is the consensus on the part of the Commission. Do you want to close it and vote on it this evening or do you feel you need more information? Commissioner Garafalo.

COMM. GARAFALO

My concern seems to be there's one primary couple here that stand to lose or gain whatever the case may be by this approval, and I would think at the very most that we could probably make a decision in two weeks after they have had a chance to discuss all their fears and concerns and come back to us next time and be ready to vote on it at that particular time. I would hate to think that I would approve something on the potential of something being done and then it doesn't get done. I would like to have them satisfied because they have to live with it. Both of them have to live with it, and I think we should do that up front. We are going to meet in two weeks and I don't see the great delay in that. I know it has been delayed.

COMM. GIONFRIDDO

What is the consensus of the body? That's is what I would like to know rather than just close it on .....

COMM. PATTAVINA

I would have to agree with Mr. Garafalo on that.

COMM. GIONFRIDDO

Alright, then I'll rather than close the Public Hearing, I will continue the Public Hearing until the next meeting of the Commission.

VINCENT MARINO

Could I ask one question? I believe there may be some problems getting some people into the building without approval from this Commission. Getting the Fire Dept. in, getting the Building Dept. in, whether we can do that at this point. We'll do whatever we have to do, but I don't want to say that we will do something and find out because you didn't reach a decision we cannot do anything other than go into their house and listen to see if somebody on the other side makes noise.

COMM. GIONFRIDDO

Yes, I understand your position. I think what the Commission is interested in is that you would meet with the parties involved and see if there is a possibility of satisfying whatever their problems are, and I guess basically report back to us in two weeks as to what you could or couldn't do.

VINCENT MARINO

We would have no problem in doing that. I would say this though, and this is on a purely personal level. The first Public Hearing was on I believe on Feb. 10th, the next one is on March 10, I believe that is within the 30 days. My great and abiding fear is that at the next meeting you will have 5 people present to vote or less. That is my only concern.

COMM. PATTAVINA

Mr. Chairman. Can't we..... I know if this is protocol, but can't we discuss this with the couple that is here, the concerned couple, and find out whether they would be willing to possibly go along with our decision tonight and hopefully in good faith and have things that are supposedly done in their behalf done. If he would agree, I would go along with it. Now it's probably not protocol, but this thing has been extended and constantly extended over the weeks. Could we do that, would we be putting him on a spot?

COMM. GIONFRIDDO

Yea, I don't really.....

COMM. AUGUSTINE

I don't feel comfortable making a decision tonight.

COMM. GIONFRIDDO

I think the general consensus of the Commission is that they would prefer to have the extra two weeks. That's the.....

COMM. CARTA

Did ....want you to vote on this?

COMM. GIONFRIDDO

There was a request made but there was no, there never can be a commitment that we would vote on it. O.k. So as far as I'm concerned the Public Hearing is to be continued for two weeks at which time hopefully everybody here will have to present because we are the group that's going to have to vote on this. So I please request everybody here.....

COMM. PATTAVINA

Mr. Chairman. Beyond my circumstances I might not be here at that meeting.

COMM. GIONFRIDDO

I mean.... We never know where we are going to be in two weeks.

COMM. PATTAVINA

Right

COMM. GIONFRIDDO

I mean.....Let's .....Let us all hope that barring unforeseen eventualities, we'll all be here in two weeks and be prepared to vote on it at that time.

VINCENT MARINO

I will make one further comment. That is that if it cannot be voted on next time for some reason and you are beyond the 30 days, and I believe Mr. Reif will agree with, the Law is somewhat unclear as to what happens.

DIR. REIF

No, it isn't unclear that you can extend the 30 days for another 30 days. If you would like to agree to that, there's no problem.

VINCENT MARINO

Well, I'd....that....I don't want this to go quite frankly.....

DIR. REIF

Alright, but that is a possibility. Now that you have had the Public Hearing, you're sort of over that hurdle. It's written into the State Laws that you can extend the Public Hearing another 30 days. That's been done.

COMM. GIONFRIDDO

I think Vinny..... I think the general consensus is that at the next meeting that we are all present which hopefully will be in two weeks, we will vote.

CHM. LEINWAND

Thank you. We have while we are still in Public Hearing, two other items both continued from February 10th. Item 2.2 on the Agenda, "Proposed Subdivision of four lots located on Randolph Rd. and South Main St., an R-1 Zone. Applicant/Agent, Tom Mickiewicz, representing Beatrice M. Christensen, owner." We continued this because we did not have all the information. We are not the only people that have troubles with quorums. My understanding is that Water and Sewer did not have a quorum. The Public Hearing is open. Tom if you wish to speak on this, you can do that now.

ITEM 2.2  
PROPOSED  
SUBDIVISION  
RANDOLPH  
& S. MAIN  
ST. 4 LOTS  
TOM  
MICKIEWICZ

DIR. REIF

I don't think he wishes to speak. He has filed a letter for our file requesting that it be continued until at least the next meeting.

CHM. LEINWAND

Fine. (inaudible multiple speakers) The chair sees no problem in continuing that. We can't make a decision till we have that information. So we have no choice but to continue it. Which moves us to 2.3, the Mobile Vending Units, I don't think I have to read the entire text once again. We continued this. Comm. Garafalo, did you want to speak to this just quickly?

ITEM 2.3  
PROPOSED  
AMENDMENT  
MOBILE  
VENDING  
UNITS

COMM. GARAFALO

Yea, I was asked to speak at the Board of Health Meeting with reference to why this was being put to the P & Z, and if this was a deterrent to the individual getting a license without approval from P & Z, or without some kind of a zoning change. And thankfully witnessed by Comm. Gionfriddo, I posed a question, and the question was, this is not a deterrent to him applying to the Board of Health. It can't be used as an excuse for not giving him a license. If there is another problem within the Board of Health, then it is between them, but the Planning and Zoning had nothing to do with you not getting a license. And that was agreed to.

CHM. LEINWAND

Since we ought to be official, the Public Hearing is open and if there's anyone from the Public that wishes to speak on this matter, now is the time to do that. What I would like..... Oh sir .....

ARTHUR MICHAEL

Good evening, my name is Arthur Michael, a Middletown resident, I spoke with you a couple of weeks ago. Since that time I have looked over the proposed amendment once more, and I find that there's a great deal of vagueness and ambiguity in the wording of this proposed amendment, which I would like clarified. I have 4 or 5 points which I would like to address. For instance, the term ready to consume food or drink which is a portion of part A of the amendment, I have not yet met a vendor yet offering refreshments on the street that wasn't ready for consumption at the moment he offered it for sale. It is not a do it yourself deal, if you want a hot dog it is already cooked. I think that there's some clarification must be made with that term. Use permitted in any zone. Are you opening up R-1 zones for an incursion of a large number of vendors perhaps preventing any sort of thing. Another point, vendors of unprepared foods are addressed in the Conn. State Code Section 2137 which deals with the granting to towns the right to make reasonable ordinances regarding vending and peddling upon its streets. It specifically disallows towns from interfering with the sales of produce by gardeners and farmers along with several other classes of merchandise including meat, baked goods, and groceries. Are you truly requiring that annual events such as a crafts fair or Main St. sale appear every year and apply for a special exception? That hardly sounds like an accommodation as mentioned on the Agenda itself. O.k., thank you.

CHM. LEINWAND

Thank you. Anyone else wishing to speak on this matter?

JOSEPH MASSELLI, JR.

(inaudible) I would just like to say that it seems to me to include the sellers of merchandise under the special exception is not really necessary. I think that if you would, you could include the sellers of merchandise in with the prepared foods since there is no real health problem involved there. We have been selling on the street for 5 or 6 years now and there has been no problem from our point of view, and I just hope that you could include us in Part A as opposed to making us a special exception. Thank you,

CHM. LEINWAND

Thank you. Anyone else wishing to speak on this matter?

DIR. REIF

Someone called. They are not here tonight and they've asked that.....

A voice - He's here.

CHICK CUBETA

I would just like .....I'm Chick Cubeta, East St., Middletown, Conn. If the Public Hearing is closed tonight, does that mean the existing laws are verbatim, that is what it will be for vending within the City of Middletown or can special City Ordinances be provided to the City Code to expand on what we do with vending in the City of Middletown.

CHM. LEINWAND

George, can you answer that?

DIR. REIF

We are not dealing with the City Ordinances. That is the Common Council who.... (inaudible multiple speakers) What we are trying to do, the Planning Commission is authorized under State Law to deal with land uses. We're trying to concentrate on land uses. Right now in the Zoning Code, it says on Page 124 under the title of "Prohibited Uses, Any use not specified as a permitted use, special exception use, accessory use, permitted home occupation use or use by temporary permit are prohibited uses." So there is no refernece in the Zoning Code at all about mobile vending units.

CHICK CUBETA

Correct

DIR. REIF

I think it is the objective of this Commission to either put something in the Code or not put something in the Code to eliminate the mystery. We are not trying to take over the responsibility as authorized by State Law about the Council taking action as we heard about. We are dealing with Land Uses.

CHICK CUBETA

O.k., my question being that no matter how a vendor works, he has to use the land. If within the City Ordinances and again I get back to that even if there is no participation within the Planning and Zoning of the City Ordinances. The question still remains if you are zoning streets of Middletown for the use of mobile vending units, don't you have to work in conjunction with those City Ordinances to approve plans?

DIR. REIF

The Planning Commission is authorized to zone the entire City. It doesn't exclude the streets.

CHICK CUBETA

I see.

DIR. REIF

The Zoning map up here includes all the streets.

CHICK CUBETA

So in other words if you zone for vending now, if you close these Public Hearings with the Planning and Zoning Commission now as it stands, does that mean that vending will be opened?

DIR. REIF

It depends on what the Commission adopts. They don't have to adopt exactly what they put forth in their legal notice.

CHICK CUBETA

O.K.

DIR. REIF

This has done the job. It has brought people out to discuss it. They don't have to adopt what it says in there, they can make some modification.

CHICK CUBETA

Good. O.k., thank you.

CHM. LEINWAND

Anyone else wishing to speak to this matter? (inaudible)

DIR. REIF

Chick, you encouraged me to put on this Agenda the fact that you thought that this thing ought to be continued because you were going to supply material from other cities.

CHICK CUBETA

I do have material, I do have a meeting with the Mayor, and hopefully to sit down with other members to propose plans that I have from the City of Chicago and from the City of Dallas, much larger than the City of Middletown as it is, but very well constructed plans for vending which benefit the vendor and they also benefit the City, and they also benefit the streets and the public.

DIR. REIF

Will you give us a chance to look at that?

CHICK CUBETA

Oh, yes. Oh, Yes.

DIR. REIF

When?

CHICK CUBETA

As soon as I ..... I have a meeting on March 4th. After that time I am hoping to have copies for anyone who wishes to have them, if that is feasible with all of you.

CHM. LEINWAND

O.k., good, thank you.

CHICK CUBETA

O.k., thank you.

CHM. LEINWAND

Anyone else wishing to address this issue? I think that we have dealt with that one and may as well close the Public Hearing. May as well. But we have heard from people and I would suggest that issues that come up with the Mayor and other such Ordinances, we can put it back on our Agenda at anytime we see fit. I think that the discussions we have had, there's some real questions as to what this really says and whether it is really needed, and at this point I will close the Public Hearing on Item 2.3.

ADJOURNMENT 8:45 P.M.

Respectfully submitted,



Hope Kasper  
Transcriber

Stephen T. Gionfriddo, Vice Chairman  
Steven J. Leinwand, Chairman  
PLANNING AND ZONING COMMISSION

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