

ATTACHMENT “A”



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CITY OF OAKLAND
APPEAL FORM
FOR DECISION TO PLANNING COMMISSION, CITY
COUNCIL OR HEARING OFFICER

PROJECT INFORMATION

Case No. of Appealed Project: DR13 -177
Project Address of Appealed Project: 3600 Broadway (Kaiser Permanente
Assigned Case Planner/City Staff: Ann Clevenger Planner III Oakland Medical Center)
Scott, Miller, Zoning Manager

APPELLANT INFORMATION:

Printed Name: Sarah Cohen, et al Phone Number: (510) 414-6005
Mailing Address: 3626 Richmond Blvd Alternate Contact Number: (510) 658-0108
City/Zip Code Oakland 94611 Representing: Richmond Blvd
Email: slcohen@att.net (Oak Glen Park) Neighbors

An appeal is hereby submitted on:

☒ **AN ADMINISTRATIVE DECISION (APPEALABLE TO THE CITY PLANNING COMMISSION OR HEARING OFFICER)**

YOU MUST INDICATE ALL THAT APPLY:

- ☒ Approving an application on an Administrative Decision
☐ Denying an application for an Administrative Decision
☐ Administrative Determination or Interpretation by the Zoning Administrator
☐ Other (please specify) _____

Please identify the specific Administrative Decision/Determination Upon Which Your Appeal is Based Pursuant to the Oakland Municipal and Planning Codes listed below:

- ☐ Administrative Determination or Interpretation (OPC Sec. 17.132.020)
☐ Determination of General Plan Conformity (OPC Sec. 17.01.080)
☒ Design Review (OPC Sec. 17.136.080)
☐ Small Project Design Review (OPC Sec. 17.136.130)
☐ Minor Conditional Use Permit (OPC Sec. 17.134.060)
☐ Minor Variance (OPC Sec. 17.148.060)
☐ Tentative Parcel Map (OMC Section 16.304.100)
☐ Certain Environmental Determinations (OPC Sec. 17.158.220)
☐ Creek Protection Permit (OMC Sec. 13.16.450)
☐ Creek Determination (OMC Sec. 13.16.460)
☐ City Planner's determination regarding a revocation hearing (OPC Sec. 17.152.080)
☐ Hearing Officer's revocation/impose or amend conditions (OPC Secs. 17.152.150 &/or 17.156.160)
☐ Other (please specify) _____

(continued on reverse)

ATTACHMENT A

(Continued)

- ☐ **A DECISION OF THE CITY PLANNING COMMISSION (APPEALABLE TO THE CITY COUNCIL)** ☐ Granting an application to: OR ☐ Denying an application to:

YOU MUST INDICATE ALL THAT APPLY:

Pursuant to the Oakland Municipal and Planning Codes listed below:

- ☐ Major Conditional Use Permit (OPC Sec. 17.134.070)
- ☐ Major Variance (OPC Sec. 17.148.070)
- ☐ Design Review (OPC Sec. 17.136.090)
- ☐ Tentative Map (OMC Sec. 16.32.090)
- ☐ Planned Unit Development (OPC Sec. 17.140.070)
- ☐ Environmental Impact Report Certification (OPC Sec. 17.158.220F)
- ☐ Rezoning, Landmark Designation, Development Control Map, Law Change (OPC Sec. 17.144.070)
- ☐ Revocation/impose or amend conditions (OPC Sec. 17.152.160)
- ☐ Revocation of Deemed Approved Status (OPC Sec. 17.156.170)
- ☐ Other (please specify) _____

FOR ANY APPEAL: An appeal in accordance with the sections of the Oakland Municipal and Planning Codes listed above shall state specifically wherein it is claimed there was an error or abuse of discretion by the Zoning Administrator, other administrative decisionmaker or Commission (Advisory Agency) or wherein their/its decision is not supported by substantial evidence in the record, or in the case of Rezoning, Landmark Designation, Development Control Map, or Law Change by the Commission, shall state specifically wherein it is claimed the Commission erred in its decision.

You must raise each and every issue you wish to appeal on this Appeal Form (or attached additional sheets). Failure to raise each and every issue you wish to challenge/appeal on this Appeal Form (or attached additional sheets), and provide supporting documentation along with this Appeal Form, may preclude you from raising such issues during your appeal and/or in court. However, the appeal will be limited to issues and/or evidence presented to the decision-maker prior to the close of the public hearing/comment period on the matter.

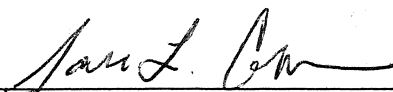
The appeal is based on the following: *(Attach additional sheets as needed.)*

Please see attached.

Supporting Evidence or Documents Attached. *(The appellant must submit all supporting evidence along with this Appeal Form; however, the appeal will be limited evidence presented to the decision-maker prior to the close of the public hearing/comment period on the matter.*

(Continued on reverse)

(Continued)



Signature of Appellant or Representative of
Appealing Organization

Sept. 23, 2013
Date

.....
Date/Time Received Stamp Below:

Below For Staff Use Only

Cashier's Receipt Stamp Below:
.....

Ann Clevenger, Planner III
Scott Miller, Zoning Manager

City of Oakland Appeal
Filed September 23, 2013

Case No.: DR13-177

STATEMENT OF BASES FOR APPEAL

Summary of Argument: By letter of September 12, 2013, the City gave Kaiser its approval for a metal fence to be laid out in a zig-zag fashion ranging from 3 to 7 feet from the edge of the sidewalk along the Piedmont Avenue frontage, thereby fencing off the corner at MacArthur and Piedmont from public access and use. According to the findings in Attachment A of the letter, the fence "is intended for security purposes." Except for bringing the fence down in height from 8 to 7 feet, the City approved Kaiser's proposal despite solid opposition in the form of timely submitted public comments from the residents in the adjoining Richmond Boulevard neighborhood. The consistent message contained in the public comments was that the fencing off of the subject corner is unwelcome, breaches both the letter and spirit of the Oakland Medical Center Master Plan ("Master Plan") and Phase 2 Conditions of Approval, and, as important, violates community trust. This trust was built up slowly over the good part of the last decade by ordinary citizens spending countless hours working with Kaiser to reach consensus on elements of the design plan that were critical to the adjoining neighborhoods. Public comments included alternative ideas to Kaiser's proposal. We suggested that Kaiser employ a more creative design solution than a fence. Alternatively, we suggested that Kaiser set the fence back, develop open space within the fenced area, and permit public access and use only during the daylight hours. Kaiser created this design precedent with the Serenity Garden.

As the City knows, the proposed "interim" or temporary landscaping improvements could remain in place for up to 15 years or more. This is a long enough stretch of time within which to create permanent negative economic and developmental impacts. Lower Piedmont Avenue will one day connect the Broadway Valdez development with the thriving businesses along Piedmont Avenue. Erecting a fence on this crucial connector would be counter-productive. Instead, we should be working toward creating a pedestrian friendly, active, walk-able, inviting and welcoming space, as required by the Master Plan. As city planners, you have an opportunity, and a responsibility, to secure this vision now for the future of our City.

Ask yourself these questions: Does fencing off the subject corner reflect state-of-the-art urban design theory? Are the applicable zoning regulations being used as an instrument to carry out the land use plan of the community? Is the City exercising its planning authority to advocate on behalf of society at large? We need to put the broader goals and economic objectives of the City ahead of special interests in order

SEP 23 2013 AM 10:58

to build a happy and healthy community. This is essential to the long-range vitality of the City.

As more fully described below, Oakland Planning Code section 17.101D.060 (Design Review), subdivision E, states that “[d]esign review approval may be granted **only** if the proposal is in substantial conformance to the *Kaiser Permanent Oakland Medical Center Master Plan including without limitation* its goals, objectives, principles and guidelines,” (Emphasis added.) In approving Kaiser’s proposal, the City failed to analyze the goals, objectives, principles or guidelines of the Master Plan. We were in effect told that the Master Plan was irrelevant so long as Kaiser was in compliance with Condition #25 of the Conditions of Approval. The City’s disregard of the Master Plan was both in error and an abuse of its discretion. Moreover, the City’s findings underlying its approval are not based on substantial evidence. There is no evidence as to how the proposal conforms to the Master Plan. Also to the extent the fence is intended for “security purposes,” there is no evidence as to what Kaiser’s security concerns are, the degree or extent to which those (as yet unstated) concerns are justified or even fact-based, or in what manner the proposed fence is designed to address them.

In the end, we respectfully request that the City grant our appeal and rescind its approval of Kaiser’s application for regular design review. To allow Kaiser to put in place street and pedestrian unfriendly design elements in a neighborhood comprised of residences and thriving small businesses would not serve to advance any of the City’s interests in the development of this area. On the other hand, creating green open space would be a huge asset to patients, employees and neighbors alike.

Specific bases for appeal:

The City’s letter of approval states that Kaiser’s application for regular design review complies with the design review criteria contained in section 17.136.050 of the Oakland Planning Code. That section contains three separate design review criteria. Design review approval may be granted “only if the proposal conforms to **all** of the criteria, as well as to any and all other applicable design review criteria.” (Emphasis added.) Attachment “A” to the letter contains the findings required for approval and the reasons the proposal satisfies them.

Criterion #1: The proposal will help achieve a group of facilities that are well related to one another and which, when taken together, will result in a well-composed design ... with consideration given to the relation of the proposal to the total setting as seen from key points in the surrounding area.

- The City’s analysis of Criterion #1 refers to the Master Plan and the fact that Condition of Approval #25 is attached to the Master Plan (and thereby incorporates by reference into the Conditions of Approval the requirements of the Master Plan). The findings under Criterion #1 are

not based on consideration of the Master Plan and therefore are in error, as more fully described below under Criterion #3.

- The City erred in finding that a fenced-off corner relates well to and complements the overall OMC development. Fences and fenced-off areas closed off to the public are not, and never have been, a part of the design plan. In fact, the Serenity Garden established the opposite precedent of promoting open space with public access and use.
- Condition of Approval #25 regarding the interim improvement plan should be read in conjunction, and harmonized, with Condition of Approval #26 regarding ground floor uses in the medical office building (MOB)/hospital support building (HSB). Condition of Approval #26 requires Kaiser to make “best faith efforts” to incorporate ground floor uses in the MOB and HSB that “activate the public street consistent with Guideline 2.1.4 of the Kaiser OMC Master Plan, particularly at the MacArthur/Piedmont corner.” It is absurd to require public street activation efforts of Kaiser when the MOB and HSB are built but not beforehand during this “interim” plan period of time. The interim plan and the long-range plan should build toward the same goals and objectives. To put in place an interim plan that is inconsistent with the long-range plan is in plain error.
- The City’s findings state that the “fence around the corner landscape area is intended for security purposes.” The findings, however, do not include a description of the security issues or the manner in which the security issues would be addressed by a 7-foot high metal fence. As such the City’s findings regarding the security issue are not based on substantial evidence and therefore are in error.
- The City’s findings that the proposal was revised to locate the fence farther away from the sidewalk “for greater visual relief” and that plantings “inside” and “outside” of the fence would “diminish its visibility” are an implicit acknowledgement that neither a fence nor a fenced-off area is a positive design element for the subject corner. If that were not the case, there would be no need to diminish its visibility or provide visual relief. The next question then is why have it? Given the absence of evidence regarding security issues at that corner or that such issues can only be effectively addressed by a fenced-off area, why does the City feel compelled to approve Kaiser’s proposal rather than create open space for public use?

Criterion #2: The proposed design harmonizes with, and serves to protect the value of, private and public investments in the area.

- With respect to the second criterion, the City's one-sentence finding is conclusory. In analyzing the second criterion, the City wrongly incorporated findings from the first criterion rather than making findings that independently support the second criterion. Therefore, the finding is not based on substantial evidence and the City's conclusion that the proposal satisfies the second criterion is in error.
- Moreover, Kaiser's proposal does not protect the value of neighborhood investment in this area. It diminishes our investment. Where community is valued, fences and fenced-off areas are rare. They send the wrong message, i.e., that there is something dangerous or unsafe on the other side of the fence. Kaiser's proposal does not add value to our community in terms of property values, aesthetics, or opportunities for open space, and therefore the City's conclusion that the proposal complies with Criterion #2 is in plain error.

Criterion #3: Proposed design conforms in all significant respects with the Oakland General Plan and with any applicable design review guidelines or criteria, district plan, or development control map adopted by the Planning Commission or City Council.

- The City's findings specifically state that the proposed interim landscape plan "conforms with ... the Master Plan" The finding supporting the third criterion is one-sentence long, and is, simply, untrue. It is both an error and an abuse of discretion to approve this proposal and summarily declare it in conformity with the Master Plan without giving any thought, consideration or analysis to the Master Plan design goals, objectives principles and guidelines. Relevant excerpts from the Master Plan are set forth below, with comments interspersed in brackets where necessary to illustrate where we believe the City erred in approving Kaiser's proposal.

GOAL #1: TO ENSURE THAT THE OAKLAND MEDICAL CENTER WILL BE ARCHITECTUALLY AND FUNCTIONALLY INTEGRATED, AND THAT THE OAKLAND MEDICAL CENTER WILL BE COMPATIBLE WITH THE EXISTING NEIGHBORHOODS.

[To be compatible means to co-exist in a positive way, in a way that helps each other to grow and succeed. Given the solid opposition to the proposal, it cannot be said that the proposal accomplishes Goal #1 of the Master Plan.]

GOAL #3: TO PROVIDE POSITIVE PHYSICAL CONNECTIONS BETWEEN THE OAKLAND MEDICAL CENTER AND THE NEIGHBORHOODS.

[Fences and fenced-off areas do not provide a physical connection between the Oakland Medical Center and the neighborhoods. In fact, they do just the opposite.

They disconnect us physically from each other, and therefore it cannot be said that the proposal accomplishes Goal #3 of the Master Plan.]

GOAL #5: TO PROMOTE GOOD URBAN DESIGN SO AS TO PROVIDE STREET CHARACTER AND ACTIVITY

[Kaiser's own findings about the need to diminish the visibility of the fence and provide visual relief from it undermine any notion that the proposed plan is "good urban design." Nothing about the fence or the fenced-off corner promotes street character or activity and therefore it cannot be said that the proposed plan accomplishes Goal #5.]

Objective #2: Activate pedestrian activity on Broadway, MacArthur Boulevard and Piedmont Avenue.

As this is an urban campus, there is opportunity to contribute to good urban setting, and to an already pedestrian friendly neighborhood.

Principle 2.1: Create street fronts that promote pedestrian activity.

Guideline 2.1.2: The buildings along MacArthur Boulevard, Howe and Piedmont may utilize setbacks to promote the streetscape activities or to provide public open space.

[Note the specific recommendation for providing public open space. What better place to implement this Guideline than here?]

Guideline 2.1.4: Buildings along Broadway and MacArthur Boulevard and at the MacArthur/Piedmont corner should have ground floor active uses that are visible from the public streets.

Principle 2.2: Create a walkable environment.

[A fence and a fenced-off corner do not create a walkable environment. They create just the opposite. The proposed plan violates this Principle.]

Guideline 2.2.1: Open space and sidewalks should provide safe pedestrian environments.

Objective #4: Landscaping along streets and outdoor public spaces should be provided to create a campus-like setting.

Principle 4.2: Create inviting outdoor spaces.

[A fence and a fenced-off corner do not create inviting outdoor spaces. They do just the opposite. The proposed plan violates this Principle.]

Guideline 4.2.1: Provide gathering spaces that relate to the public street and that are provided with natural light.

Guideline 4.2.2: Incorporate outdoor spaces, plazas and courts into the campus site plan.

Guideline 4.2.6: Provide landscape and street furniture along streets and public spaces to encourage pedestrian activity.

[These Guidelines emphasize the need for gathering spaces, outdoor spaces and public spaces that encourage pedestrian activity. The proposed plan violates each and every Guideline under the Principle of creating inviting outdoor spaces.]

Objective #7: Unique design elements for each district

Each sub-district within the OMC campus should have unique design elements that address specific location issues.

Principle 7.3: The former M/B Center (the KX-2 Zone) should be redeveloped as an attractive, modern, state-of-the-art new hospital facility.

Guideline 7.3.5: Active type uses are encouraged at the ground level of the Hospital building, potentially along Broadway and MacArthur and at the MacArthur/Piedmont corner.

Guideline 7.3.7: Subject to City review and approval, public improvements to be provided as part of Phase 2 should include streetscape improvements along Piedmont Avenue between West MacArthur Boulevard and Broadway. Such improvements may include widened sidewalks, landscaped medians and planter strips, permanent streetscape furniture, improved bus stops/shelters, and improved street lighting.

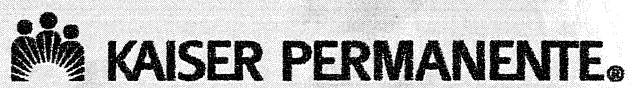
- The above bracketed comments are not exhaustive. They are illustrative of our main point that had the City considered the Master Plan in its evaluation of Kaiser's proposal it would not have given its approval. The proposed plan violates both the spirit and the letter of the Master Plan. The finding under Criterion #3 that the proposed plan conforms with the Master Plan is in plain error. It is not based on any evidence, let alone substantial evidence. And by failing to comply with Oakland Planning Code section 17.101D.060, subdivision D(2)(d), which requires the

Director or the Commission to determine whether the proposal is in substantial conformance with the Master Plan, the City abused its discretion.

Attachments:

- 1) Master Plan, with relevant sections highlighted
- 2) Oakland Planning Code, Chapter 17.101D, D-KP Kaiser Permanente Oakland Medical Center District Zones Regulations, with relevant sections highlighted
- 3) "Notes for July 30, 2013 meeting" provided to the City by Richmond Boulevard neighbors

SEP 23 2013 AM 10:53



OAKLAND MEDICAL CENTER MASTER PLAN

As approved by Oakland City Council, June 27, 2006

KAISER PERMANENTE OAKLAND MEDICAL CENTER

MASTER PLAN

This Master plan is organized into two sections: Master Plan Description and Design Goals, Objectives, Principles and Guidelines.

I. MASTER PLAN DESCRIPTION

A. Master Plan

This Master Plan is intended to guide the phased replacement of the existing Oakland Medical Center with an expanded and improved medical center campus of approximately 1.76 million square feet on approximately 19.5 acres.

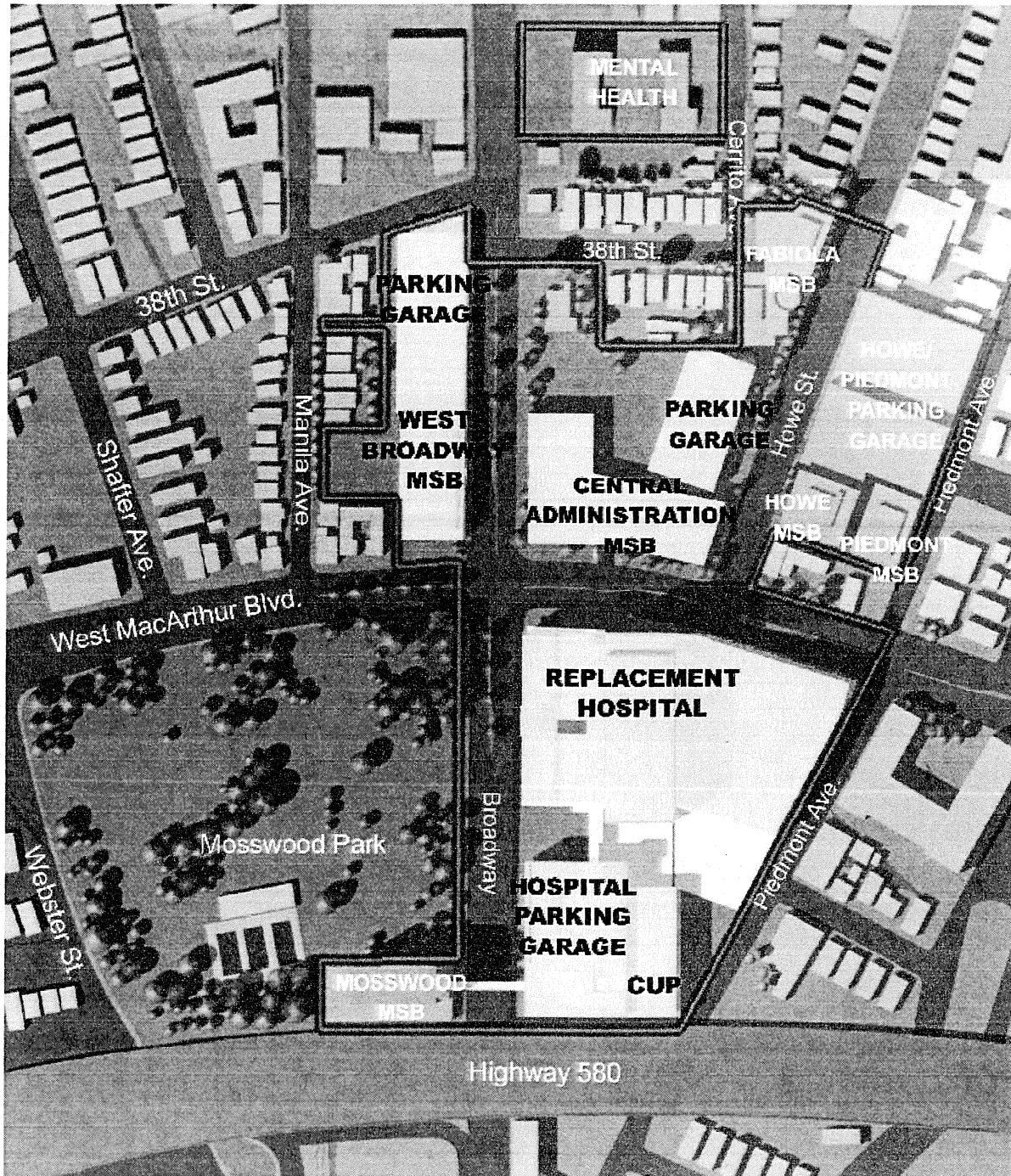
The new Oakland Medical Center would be completed by approximately 2020. The Oakland Medical Center would continue to provide uninterrupted medical service on-site during construction and implementation of the Master Plan, and implementation policies of the Master Plan would ensure that the medical center functions are not obstructed at any time.

The overall vision of this Master Plan is to provide a “development blueprint” for the redevelopment and construction of an urban medical campus that is connected with the community it serves. A conceptual illustration of the Kaiser Permanente Oakland Medical Center Master Plan is attached as **Figure OMC-1**.

1. **KX-1 Zone**

The KX-1 zone includes the existing Mosswood Medical Services Building (MSB) along Broadway at I-580, and the new West Broadway MSB and its associated parking. New construction within this zone will include:

- The West Broadway MSB, approximately 165,000 square feet in size and 5-stories (approximately 86 feet) tall at its highest point,
- Approximately 7,700 square feet of retail space primarily located along the Broadway street frontage. The street level retail use shall be included in the design and construction of Phase 1 and the space shall be actively marketed by Kaiser.
- At a minimum, a parking facility capable of meeting the parking needs associated with the programmed use of the West Broadway Medical Office Building (estimated at approximately 438 spaces), although more parking spaces could be provided depending upon final design.



KAISER PERMANENTE OAKLAND MEDICAL CENTER MASTER PLAN

Final design of the medical office building and parking garage should be determined pursuant to Design Review for Phase 1 of the Master Plan.

2. KX-2 Zone

The KX-2 zone includes the new Replacement Hospital, outpatient services, a new central utility plant and a structured parking garage. Upon completion of the new hospital and out-patient services building, all existing in-patient hospital services and remaining out-patient and administration support services would be relocated from the existing hospital to the new hospital. New construction within this zone will include:

- The new Replacement Hospital Building of up to a maximum of 957,000 square feet in size. An additional 60,000 square feet of space may be added to this building (to a maximum of 1,107,000 square feet) provided that Kaiser submit a schematic development plan that delineates the development program for Phase 3. In order to qualify for this option, the schematic development plan for Phase 3 must be submitted for review by the City Planning Commission prior to occupancy of the Phase 2 parking garage. The Replacement Hospital Building would include approximately 700,000 square feet of new hospital space (346 hospital beds), approximately 60,000 square feet for the new central utility plant, and the remaining space used as new outpatient services. An interstitial floor of strictly mechanical space is excluded from the maximum building size.
- The design for the new hospital will include a 3-4 story podium base, with a nursing tower generally centered on the podium's north-south axis between Broadway and the extension of Howe Street. The nursing tower could measure up to a maximum of 240 feet in height from existing grade, including approximately 30 feet at the top for roof equipment and screening.
- The parking garage associated with the new Replacement Hospital is proposed at ten stories above grade and two below, and designed to accommodate approximately 1,216 parking spaces.

3. KX-3 Zone

- The KX-3 Zone includes replacement of the existing hospital structure (tower and low-rise building) with a new Central Administration / Medical Services Building. The design and program of the KX-3 Zone is conceptual only. However, the total amount of new space that may be constructed within the KX-3 Zone is 223,000 square feet, which may contain medical services, medical offices, central administration space, conference rooms and a conference center and other related uses. However, should Kaiser select to add the additional 60,000 square feet of space to Phase 2 as described in B above, then the maximum floor area of Phase 3 would be correspondingly

reduced by as much as 60,000, to a maximum of 163,000 square feet. The new building(s) and primary facades should front on both MacArthur Boulevard and Broadway. This building could include the potential conversion of the existing Emergency Department to Outpatient Services.

- As many as 587 parking spaces could be provided in a parking structure.
- The other existing buildings within the KX-3 Zone will remain, including the historical landmark building at 3900 Broadway (the King's Daughter Mental Health Building), Fabiola MSB, Howe MSB, Piedmont MSB, Mosswood MSB and the Howe Street parking structure.

4. KX-4 Zone

The KX-4 Zone is primarily comprised of single family residential properties on the east side of Manila Avenue, some of which are owner by Kaiser. Those properties owned by Kaiser will be restricted such that they may only be used for the following activities:

- single family residential uses;
- sleeping rooms for medical center staff; or
- temporary housing for families of members receiving long-term care at the Kaiser Permanente Oakland Medical Center.

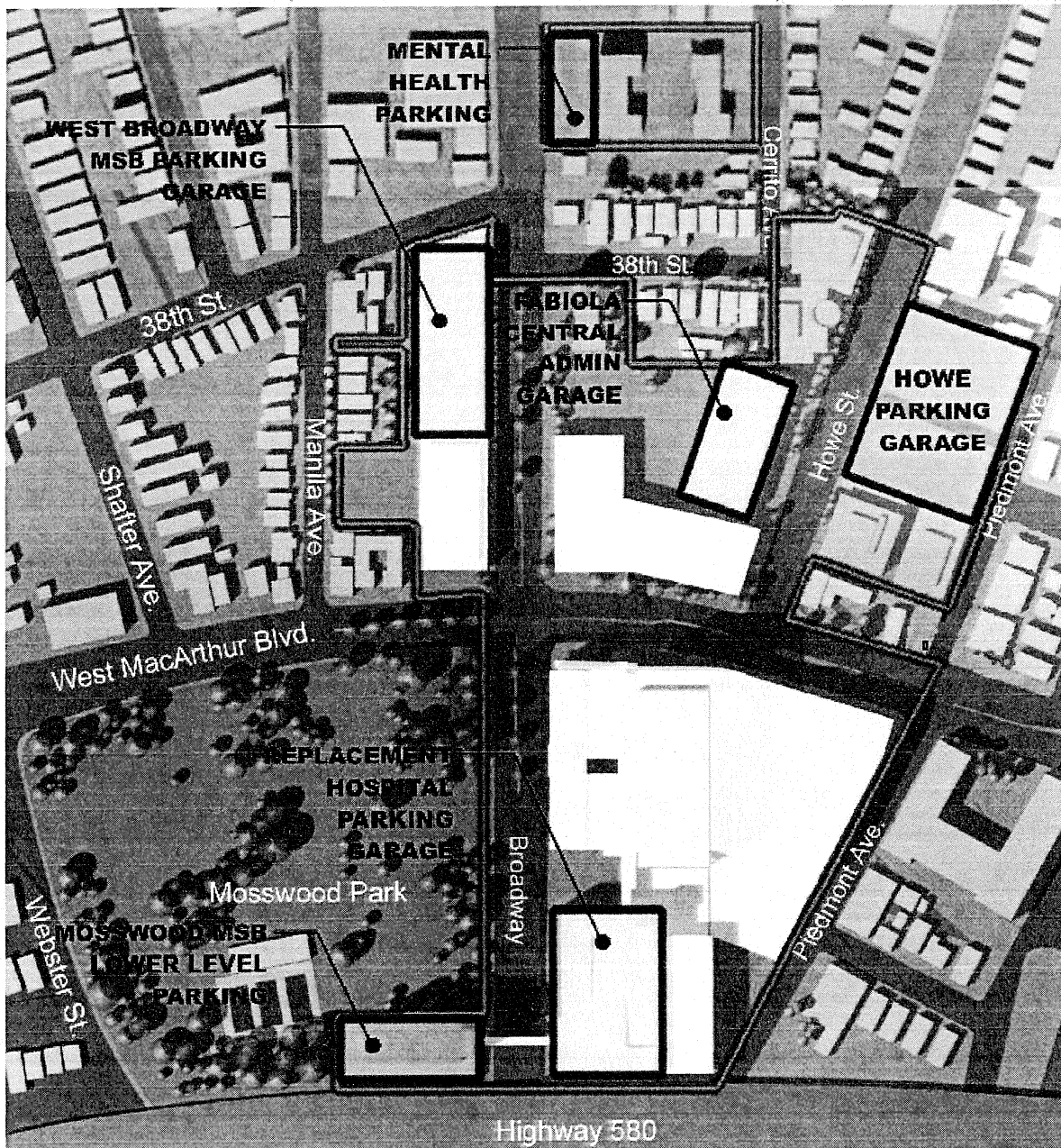
These restrictions are more restrictive than otherwise allowed under the current R-70 zoning regulations.

The existing single family residential buildings on the east side of Manila within the KX-4 Zone shall remain.

5. Parking

Parking shall be determined on a phase-by phase basis, and the amount, location and distribution of parking shall be determined as part of the Design Review Process. The parking demand study prepared for adoption of this Master Plan determined that upon completion of new construction to the full 1.76 million square feet of total space 3,510 parking spaces will be required. The actual amount of required parking shall be imposed as a condition of approval for each phase or new building, based on the current or updated parking study and the adopted Transportation Demand Management program as approved by the City.

As currently anticipated under the Master Plan, the following parking is anticipated within the Oakland Medical Center as detailed in **Table 1**. A parking summary by property under the conceptual build-out is attached as **Figure OMC-2**.



	EXISTING	END OF PHASE 1	END OF PHASE 2	END OF PHASE 3
3900 BROADWAY MENTAL HEALTH	65	65	65	65
HOWE PARKING GARAGE	1173	1323	1173	1173
MB CENTER PARKING	1176	0	0	0
MOSSWOOD-CALTRANS	242	242	132	132
WEST BROADWAY MSB GARAGE	0	564	541	541
REPLACEMENT HOSPITAL GARAGE	0	0	1216	1216
CENTRAL ADMIN MSB	0	0	0	457
TOTAL	2656	2194	3127	3584

**PARKING SUMMARY FOR EACH
KAISER OWNED PROPERTY AT
THE OAKLAND MEDICAL CENTER**

Table 1: Kaiser OMC Master Plan**Parking Program by Zone**

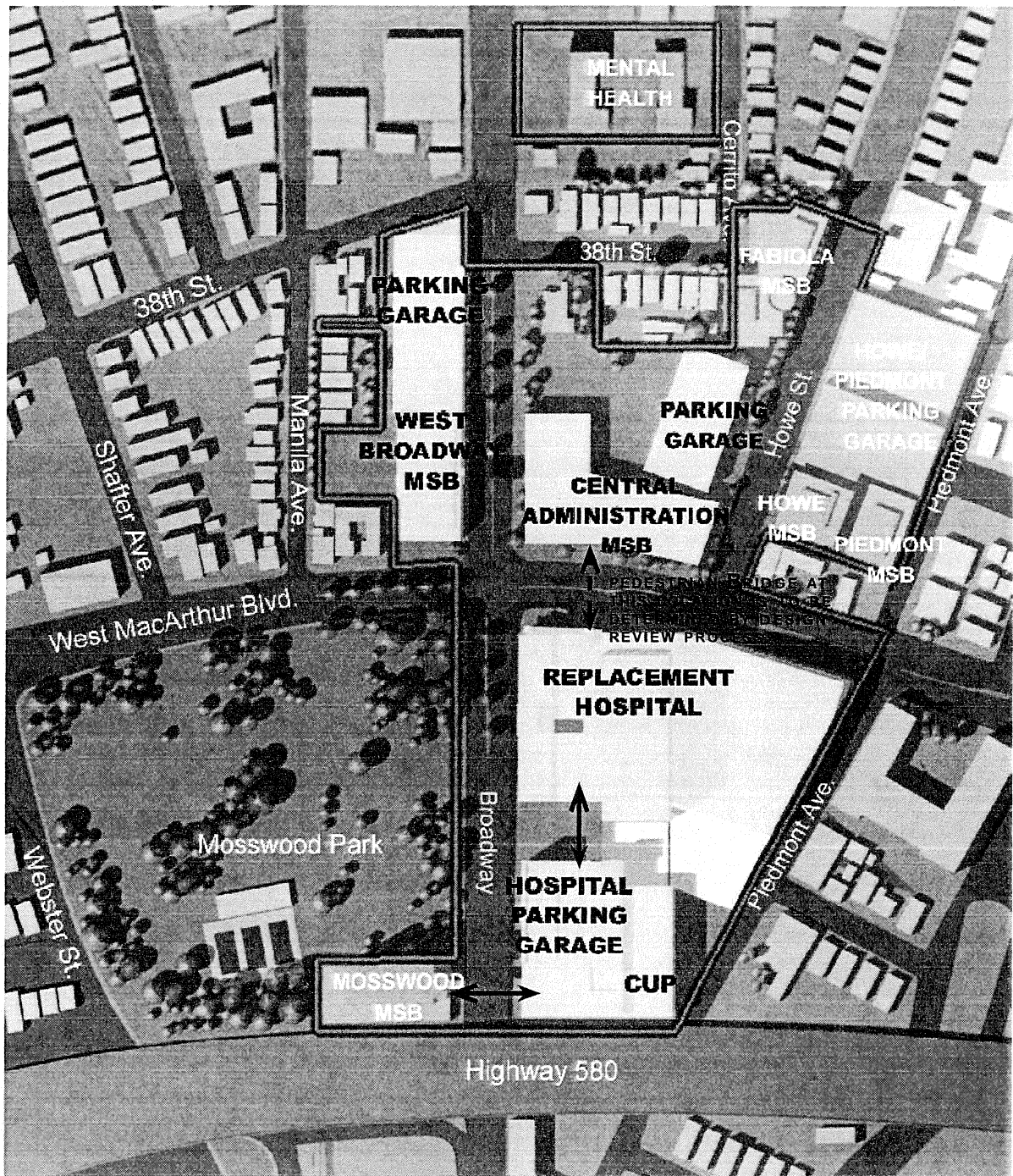
KX-1 Zone (new)	390 to 540
KX-2 Zone (new)	1,216
KX-3 Zone (new)	534
Sub-total	2,140
Other OMC locations (existing)	1,370
Total	3,510

This Master Plan provides for a net increase of 853 parking spaces on the Oakland Medical Center site, for a total of 3,510 parking spaces. The total number of spaces is intended to meet the projected total parking demand. Most of the new parking is intended to be provided in two or three new parking structures, depending upon the ultimate development in Phase 3.

6. Overhead Pedestrian Bridges (Skybridges)

The Master Plan identifies the need for three crossings of public streets to connect with each of the KX zones. The pedestrian crossings are described below and depicted in **Figure OMC-3**.

- One pedestrian skybridge over the public right of way of Broadway, adjacent to Highway 580 (connecting KX-1 and KX-2) is permitted. The design and final location of this skybridge is to be determined during the Design Review process for Phase 2.
- The other proposed pedestrian skybridge over the public right-of-way on MacArthur Boulevard is not needed until the completion of Phase 3 of the project (KX-3 Zone). Design Review for Phase 2 should consider means to ensure that a choice of skybridge versus tunnel versus surface street crossings at this location is preserved. The need for and final design and final location of a potential MacArthur Boulevard skybridge versus tunnels or surface street crossings will be determined during the Design Review process and pursuant to Conditional Use Permits for Phase 3.
- No other skybridge over Broadway shall be permitted. Design Review for Phase 2 should consider other means by which to provide a safe and convenient crossing of Broadway from the Phase 1 Medical Office Building on Broadway to the Phase 3 site, such as a tunnel or safe at-grade street crossings.



LOCATION OF OVERHEAD PEDESTRIAN BRIDGES (SKYBRIDGES)

7. Demolition

Implementation of the Master Plan will be facilitated by establishing a procedure which will allow the removal of several recently acquired vacant campus buildings which are not appropriate for medical use. The properties at 3799, 3793, 3789, 3781, 3757, 3741, 3737, 3735 3701 Broadway, as shown in **Figure OMC-4**, were recently acquired by Kaiser and have never been occupied for Medical Center use. These properties are generally not appropriate for Medical Center use and will likely remain vacant. The design review process for the site is underway, but may not be completed before demolition could begin. Demolition permits may be issued for all buildings located on these parcels with these addresses prior to the issuance of building permits.

8. Signs

In order to achieve the cohesive campus design vision, exceptions may be required from strict application of signage standards. Therefore, the KX zoning District provides that if a comprehensive sign program is adopted as part of the Master Plan, the provisions of the comprehensive sign program shall govern and shall supersede the provisions of Chapter 17.104. A comprehensive sign program will need to be developed by Kaiser Permanente and would be adopted through the Master Plan amendment process set forth in section 17.XX.080.

9. Conditions of Approval and MMRP

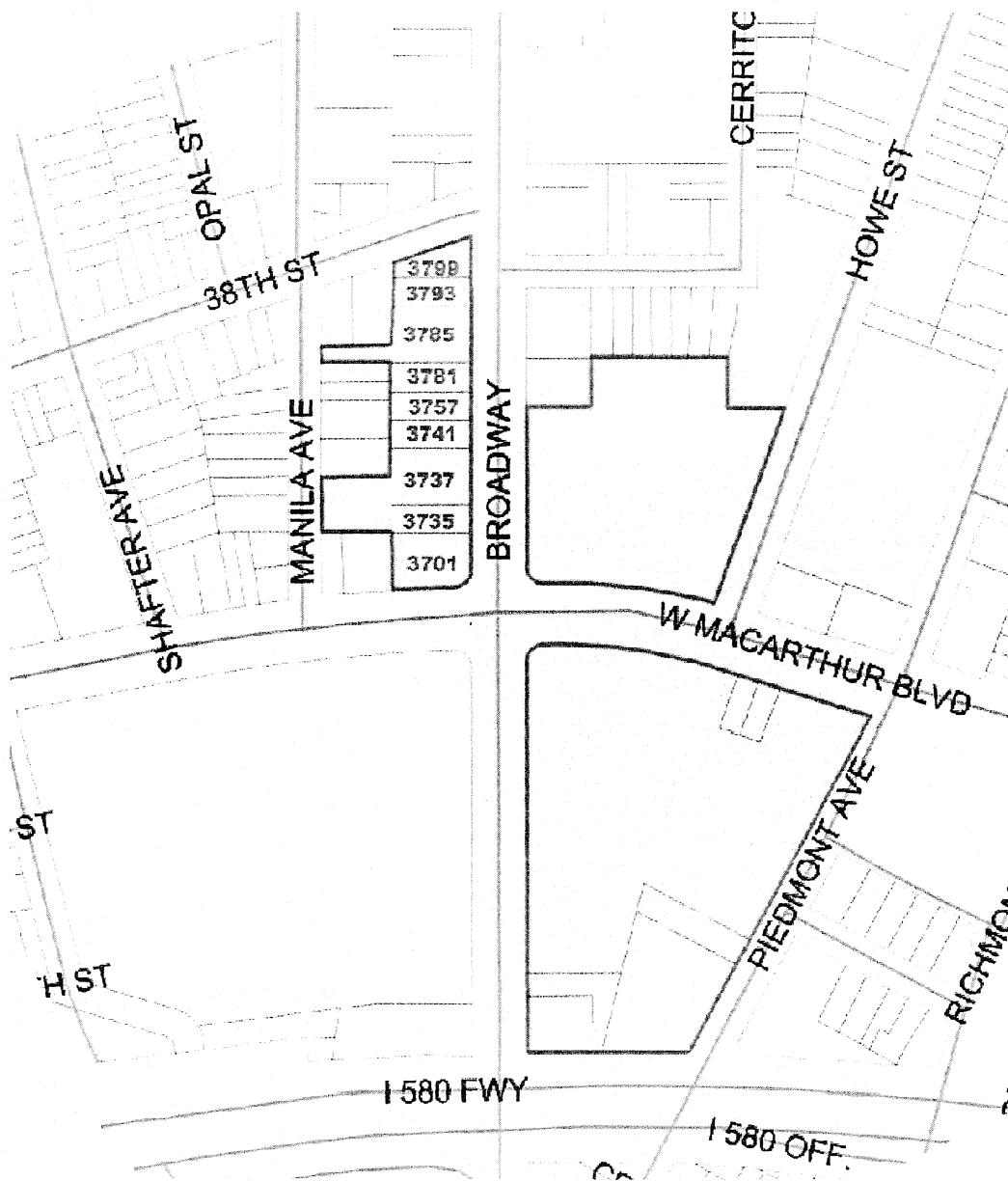
The Conditions of Approval and the Mitigation Monitoring and Reporting Program (MMRP) adopted by the City Council in conjunction with the approval of this Master Plan are attached hereto as Appendix A and are incorporated herein by reference as an integral part of this Master Plan.

10. Zoning and Design Review

Conformance with this Master Plan and the design review criteria contained in Section 17.XX.040 of Planning Code, along with other expressly referenced provisions of the Planning Code, as well as other applicable provisions of the Oakland Municipal Code, is required to receive City of Oakland approval for construction in the KX-1, KX-2, KX-3 and KX-4 zones.

B. Zoning Subareas

This Master Plan provides distinct design guidelines for separate portions of the Kaiser Permanente Oakland Medical Center (Oakland Medical Center). These separate portions of the OMC correspond to the KX-1, KX-2, KX-3 and KX-4 zones of the Kaiser

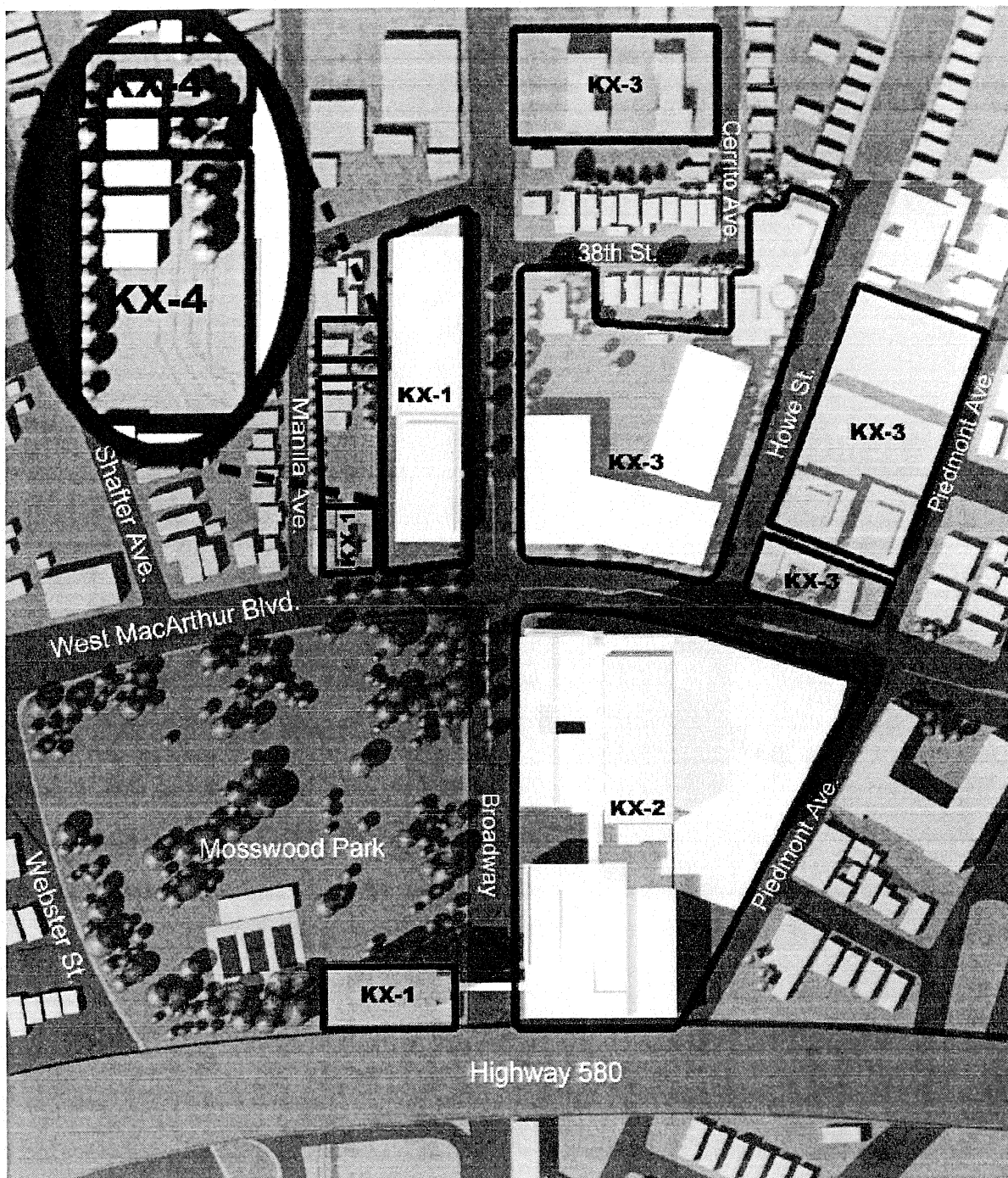


**VACANT BUILDINGS ON KAISER CAMPUS
THAT MAY BE DEMOLISHED PRIOR TO ISSUANCE OF BUILDING PERMITS**

Permanente Oakland Medical Center (KX) Planning Code (Chapter Section 17.XX) that have also been established for the Master Plan area.

- The KX-1 zone is intended for those properties along the west side of Broadway north of MacArthur Boulevard and south of 38th Street, plus the Mosswood Building west of Broadway adjacent to I-580.
- The KX-2 zone is intended for those properties south of MacArthur Boulevard between Broadway and Piedmont Avenue, comprised mostly of the former M/B Center.
- The KX-3 zone is intended for those properties north of MacArthur Boulevard between Broadway and Piedmont Avenue comprising the old hospital site and several existing medical office buildings and a parking garage between Piedmont Avenue and Howe Street.
- The KX-4 zone is for those residential properties on the east side of Manila Avenue.

An illustration of the KX-1, KX-2, KX-3 and KX-4 Zone Districts is attached as **Figure OMC-5**.



AN ILLUSTRATION OF THE KX-1, KX-2, KX-3 AND KX-4 ZONING DISTRICTS

II. DESIGN GOALS, OBJECTIVES, PRINCIPLES AND GUIDELINES

The Design Goals, Objectives, Principles and Guidelines have been developed to provide a framework for the buildout of the Kaiser Permanente Oakland Medical Center.

The Goals of this Master Plan are:

- GOAL #1:** TO ENSURE THAT THE OAKLAND MEDICAL CENTER WILL BE ARCHITECTURALLY AND FUNCTIONALLY INTEGRATED, AND THAT THE OAKLAND MEDICAL CENTER WILL BE COMPATIBLE WITH THE EXISTING NEIGHBORHOOD.
- GOAL #2:** TO ENSURE THAT KAISER PERMANENTE'S MEDICAL PROGRAMS ARE ACCOMMODATED IN STATE-OF-THE-ART FACILITIES WITHOUT INTERRUPTING CURRENT SERVICES WHILE AS THEY ARE INTEGRATED INTO THE LOCAL AND LARGER COMMUNITY.
- GOAL #3:** TO PROVIDE POSITIVE PHYSICAL CONNECTIONS BETWEEN THE OAKLAND MEDICAL CENTER AND THE NEIGHBORHOODS.
- GOAL #4:** TO RECOGNIZE THAT KAISER PERMANENTE PROVIDES AN IMPORTANT INSTITUTIONAL FUNCTION FOR SURROUNDING NEIGHBORHOODS AND THE CITY AS A WHOLE.
- GOAL #5:** TO PROMOTE GOOD URBAN DESIGN SO AS TO PROVIDE STREET CHARACTER AND ACTIVITY.

The following Objectives, Principles and Guidelines support these Goals and should be implemented and applied to each project where feasible as it is processed through the design review process.

Objective #1: Unify the Oakland Medical Center through site design and architecture

The KX-1, KX-2, KX-3 zones are not contiguous. This critical mass of non-contiguous functional space creates a unique opportunity to create a clear and cohesive sense of campus adjacent to and involving Mosswood Park as part of the campus identity.

A conceptual 3-dimensional view of buildout of the Master Plan is shown in **Figure OMC-6**.

Principle 1.1: Create an architecturally integrated campus.

Guideline 1.1.1: Bring the Oakland Medical Center properties into a new sense of unity through the effective use of building design and materials, landscaping, treatment of entrances and signage.

Guideline 1.1.2: Massing of the buildings should relate to each other in scale, and work together to help define a coherent street edge along Broadway, MacArthur Boulevard and Piedmont Avenue.

Guideline 1.1.3: The Oakland Medical Center buildings should work as an ensemble to enhance the area, serving as an attractive campus appropriate to a respected institution in the City.

Guideline 1.1.4: Consistent campus streetscapes should be created by providing street landscaping, street furniture and lighting.

Guideline 1.1.5: Provide unified campus site lighting in public spaces, pedestrian ways and public streets.

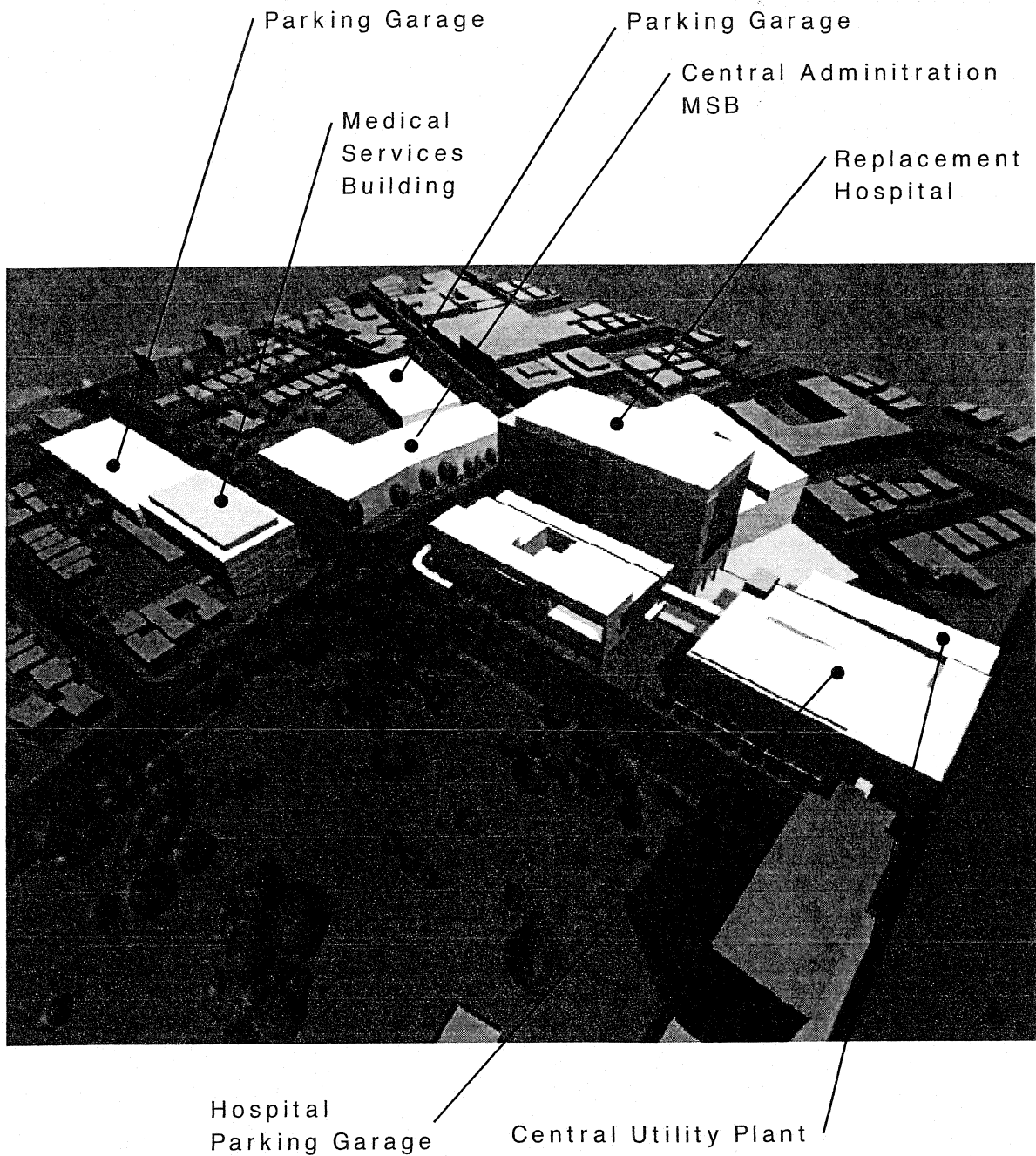
Principle 1.2: Buildings should be attractive and well designed and their form, massing, and height should respect the adjoining neighborhoods in terms of size and scale while some flexibility should generally be employed to accommodate necessary medical functions.

Guideline 1.2.1: The overall campus massing concept is to locate the most intense activities and concentrated building massing in the center of the campus.

Guideline 1.2.2: Building massing should transition to surrounding campus elements and adjacent neighborhoods.

Guideline 1.2.3: The tower elements of the new hospital buildings should be set back from Broadway a minimum of 150 feet so as to minimize shading of Mosswood Park and other public open spaces.

Guideline 1.2.4: Buildings should address the streets and employ architectural design elements such as articulation and step-backs in order to help break down their scale.



**THREE DIMENSIONAL VIEW OF OAKLAND MEDICAL CENTER MASTER PLAN
FROM SOUTH WEST LOOKING NORTH**

Principle 1.3: Some flexibility in the future building massing may be required given evolving and varied healthcare demands, while balancing good urban design principles and seeking to minimize impacts on the adjacent neighborhoods.

Guideline 1.3.1: Replace the facilities at the OMC in accordance with Kaiser Permanente's integrated model of health care delivery. This model requires Hospitality and Specialty Medical Services to share service space and to be co-located to provide the best patient care.

Guideline 1.3.2: Construct new facilities in a manner that allows uninterrupted operation of service, minimizes departmental moves and maintains the continuity of care at the Medical Center during construction.

Guideline 1.3.3: Design new facilities in a manner consistent with Kaiser's accountability as responsible financial stewards of its members' dues.

Objective #2: Activate pedestrian activity on Broadway, MacArthur Boulevard and Piedmont Avenue.

As this is an urban campus, there is the opportunity to contribute to good urban setting, and to an already pedestrian friendly neighborhood.

Conceptual images of the streets surrounding the Oakland Medical Center are shown in Figure OMC-7, Figure OMC-8, Figure OMC-9 and Figure OMC-10.

Principle 2.1: Create street fronts that promote pedestrian activity.

Guideline 2.1.1: Building entrances should face the street or other publicly accessible courts.

Guideline 2.1.2: Buildings along Broadway should promote the commercial character of the street. The buildings along MacArthur Boulevard, Howe and Piedmont may utilize setbacks to promote the streetscape activities or to provide public open space.

Guideline 2.1.3: Maximize the transparency of buildings along major streets (Broadway, MacArthur Boulevard and Piedmont Avenue) with non-mirror reflective glazing, especially at the ground level.

Guideline 2.1.4: Buildings along Broadway and MacArthur Boulevard and at the MacArthur/Piedmont corner should have ground floor active uses that are visible from the public streets.

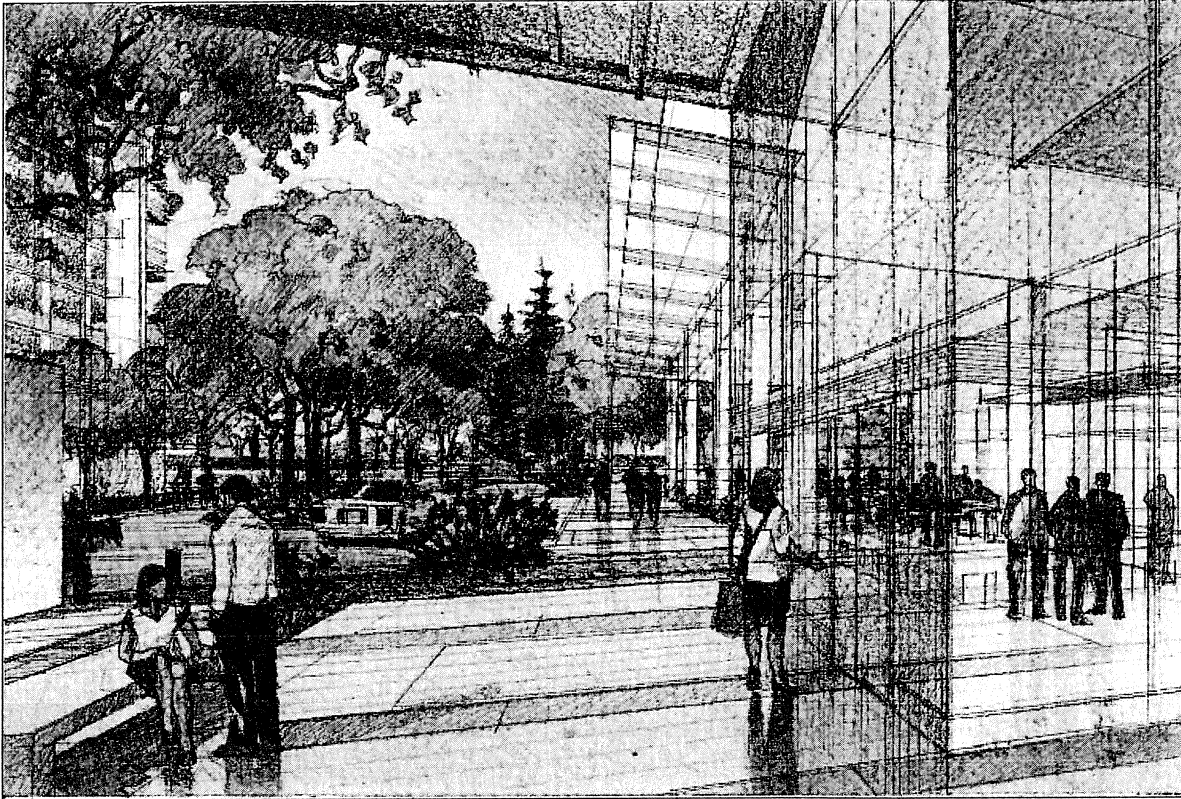
Principle 2.2: Create a walkable environment.

Guideline 2.2.1: Open space and sidewalks should provide safe pedestrian environments.

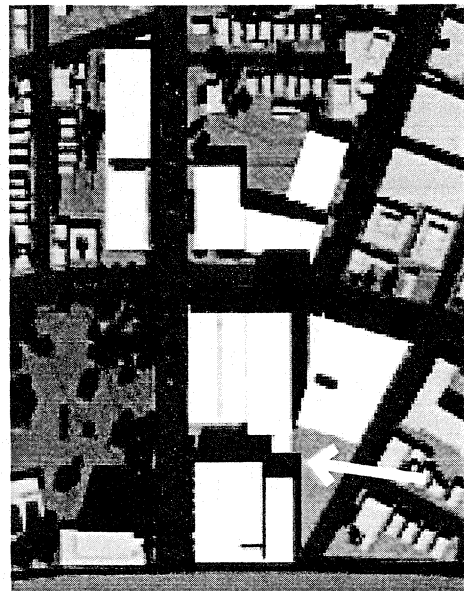
Guideline 2.2.2: Provide enhanced crosswalks, street furniture, pedestrian safety improvements, and other site amenities.

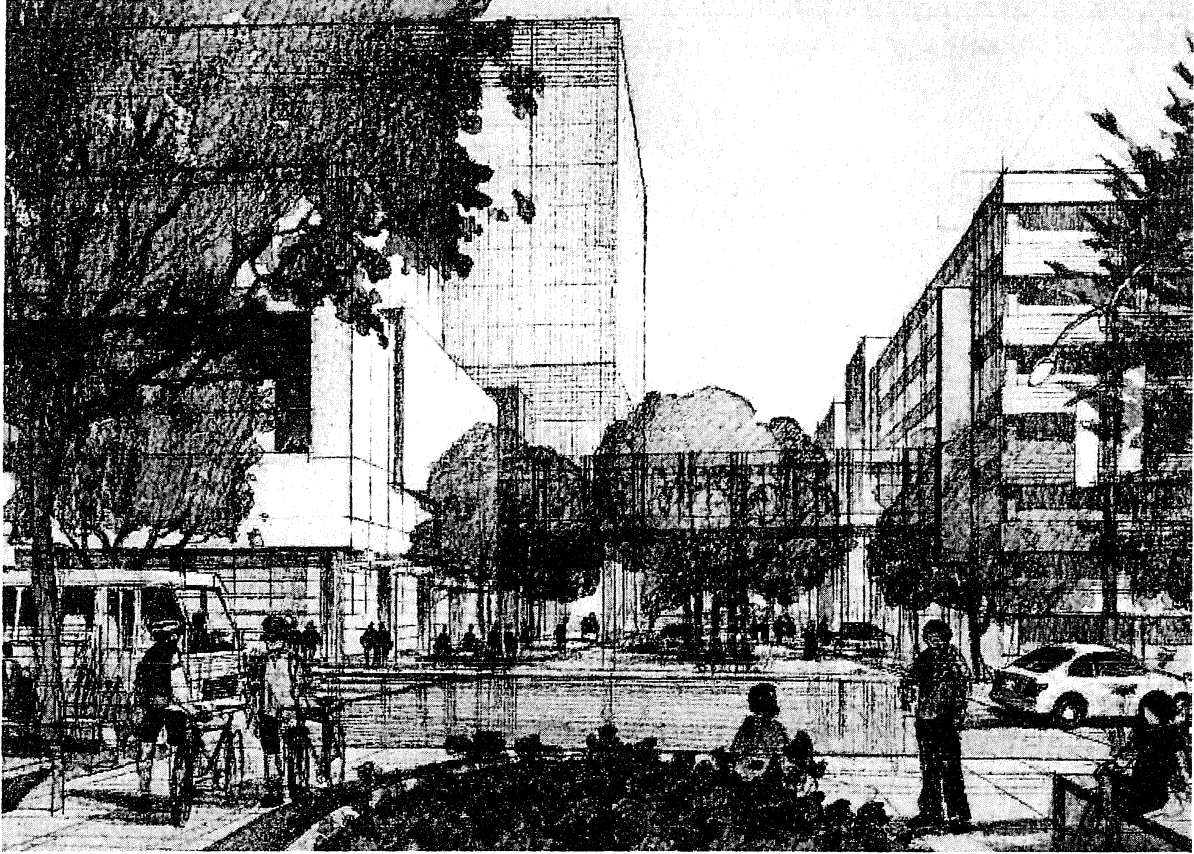
Guideline 2.2.3: Curb cuts should be minimized.

Guideline 2.2.4: Strengthen the campus connection with Mosswood Park by adding crosswalks and other pedestrian safety improvements.

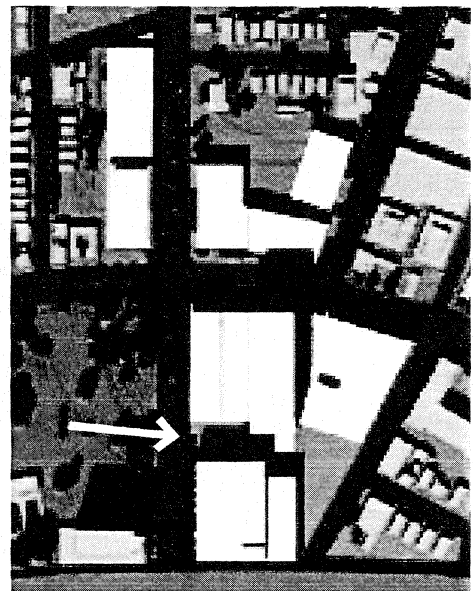


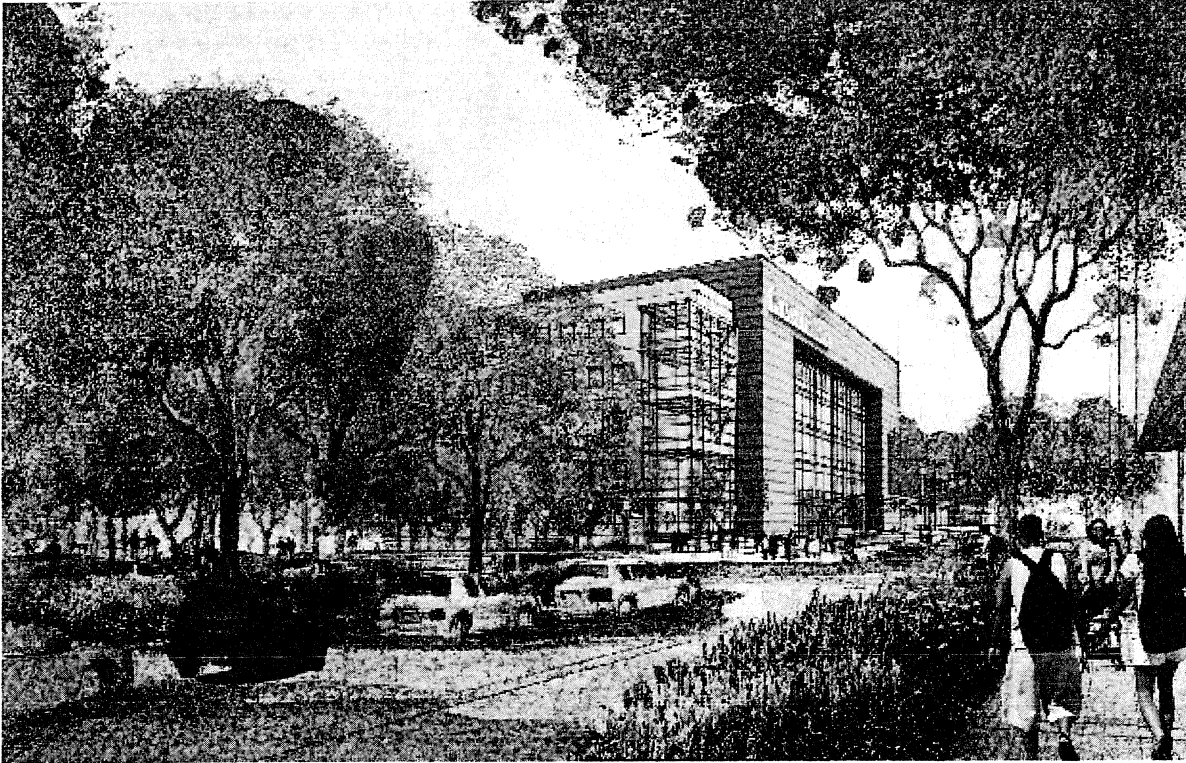
CONCEPTUAL IMAGE OF HOSPITAL ENTRANCE - LOOKING TOWARD MOSSWOOD PARK



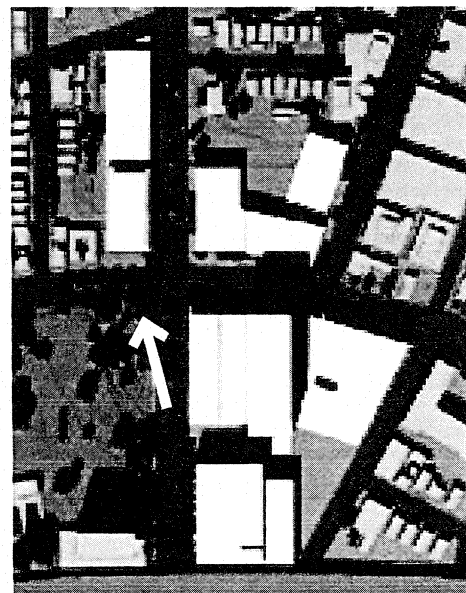


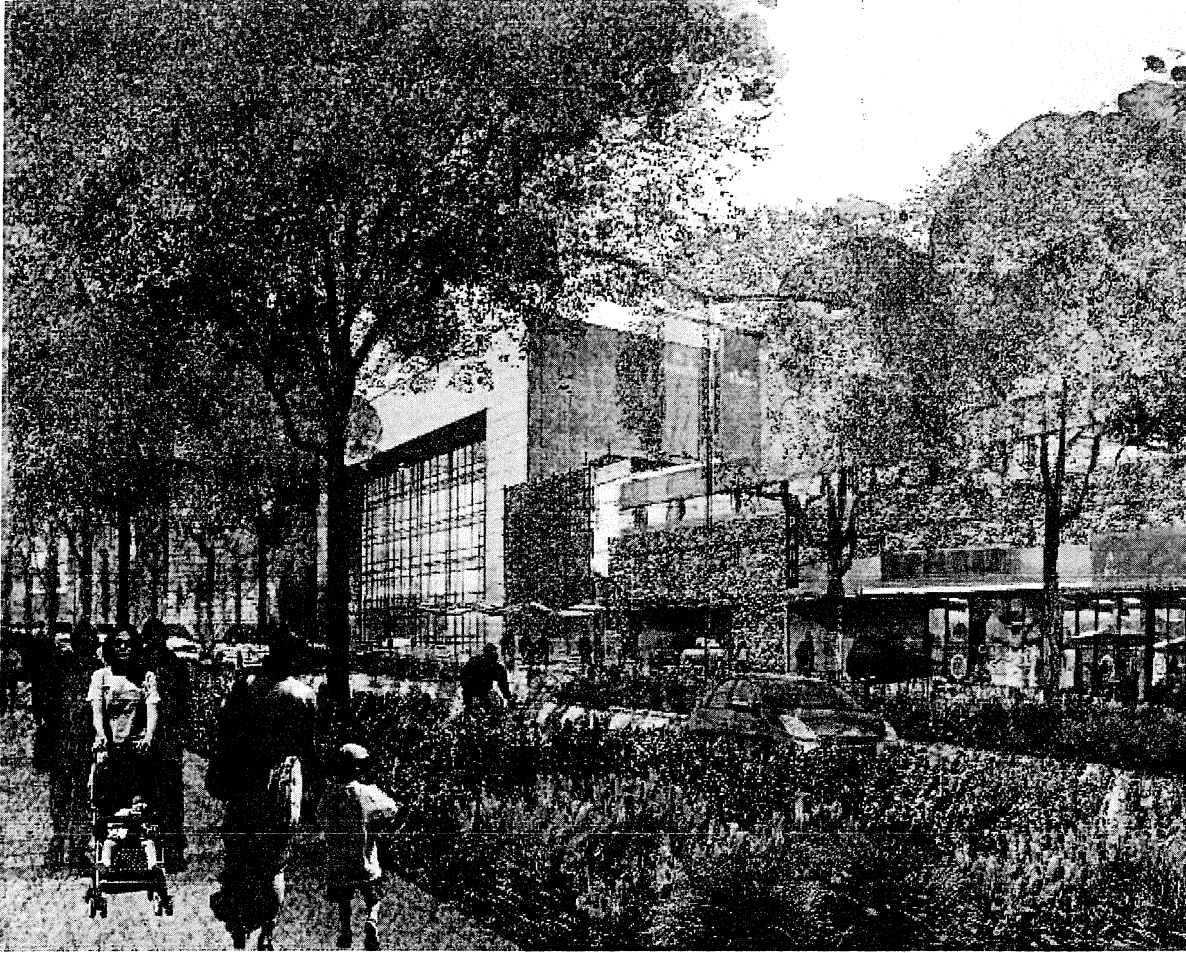
STREET LEVEL IMAGE LOOKING FROM MOSSWOOD PARK TO HOSPITAL ENTRANCE



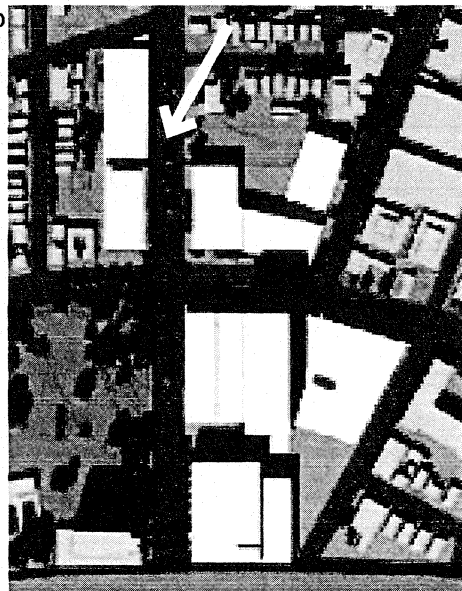


LOOKING NORTH ON BROADWAY TOWARD NEW MEDICAL SERVICES BUILDING





ALONG BROADWAY, LOOKING AT NEW RETAIL AND



Objective #3: Implement a clear campus circulation plan

One of the most critical measures of success for a large, complex, medical center is its clarity of movement. There will be six distinct circulation categories: 1) Kaiser members using inpatient and outpatient facilities, 2) Kaiser members and non-members using the emergency department, 3) pedestrians from mass transit, 4) emergency vehicles, 5) service/ deliveries, and 6) staff. Planning for each of these categories should be done with neighborhood sensitivity, knowledge of street capacities and with peak hour trip studies, and the goal of an increasingly pedestrian friendly campus environment.

A campus circulation diagram is shown in **Figure OMC-11**.

Principle 3.1: The pedestrian and vehicular circulation plan should address the Oakland Medical Center as a single unit.

Guideline 3.1.1: Develop a clear and comprehensive campus sign and wayfinding program to assist patients and visitors

Principle 3.2: Minimize vehicular conflicts with pedestrians.

Guideline 3.2.1: Provide well defined vehicular entrances for the public and staff.

Guideline 3.2.2: Separate public circulation from hospital service and ambulance circulation to promote safety.

Guideline 3.2.3: The campus should have an interior pedestrian circulation system that connects to the adjoining neighborhoods and should create a walkable and safe pedestrian environment along the building and campus edges.

Guideline 3.2.4: Provide enhanced crosswalks at major intersections for pedestrian safety.

Principle 3.3: When permitted, provide pedestrian bridges that support Kaiser's integrated model of care by linking buildings where medical care is delivered.

Guideline 3.3.1: Overhead pedestrian bridges should maximize the use of transparent glass.

Guideline 3.3.2: The width of the pedestrian bridges should be the minimum required to accommodate functional and structural needs.

Guideline 3.3.3: Pedestrian bridges should be located at least 100 feet from street intersections and shall be constructed at no lower than the third floor (or equivalent) building level.

CAMPUS CIRCULATION PLAN



Major East West Streets

I-580

MACARTHUR

NEW PEDESTRIAN LINKS

BROADWAY

PIEDMONT

New Pedestrian Links

SOUTH COURT AT PHASE 2 SITE

NORTH COURT AT PHASE 3 SITE

Objective #4: Landscaping along streets and outdoor public spaces should be provided to create a campus-like setting

A landscaping plan shall be submitted for every project that requires approval pursuant to the design review process. Street trees shall be consistent with the neighborhood. All landscaping shall be maintained in perpetuity in a healthful state.

Figure OMC-12 shows the Campus Landscape Master Plan.

Principle 4.1: Improve Glen Echo Creek by smoothing the slope and planting native vegetation.

Guideline 4.1.1: Restore the daylighted portion of Glen Echo Creek in a more natural state, consistent with the long term Oakland efforts to restore an attractive network of creeks throughout the City.

Principle 4.2: Create inviting outdoor spaces.

Guideline 4.2.1: Provide gathering spaces that relate to the public street and that are provided with natural light.

Guideline 4.2.2: Incorporate outdoor spaces, plazas and courts into the campus site plan.

Guideline 4.2.3: Improve the environment through substantial new landscape plantings on the campus and on City streets.

Guideline 4.2.4: New street trees should be of consistent or compatible species as the existing trees within the neighborhood.

Guideline 4.2.5: Building and site design should incorporate the use of natural daylighting.

Guideline 4.2.6: Provide landscape and street furniture along streets and public spaces to encourage pedestrian activity.

Objective #5: Provide adequate, appropriately located and signed parking, loading and service areas

Parking locations and site access points are shown in **Figure OMC-2**.

Principle 5.1: Adequate, appropriately located and signed parking, loading and service areas should be provided.

Guideline 5.1.1: The amount, location and distribution of parking shall be determined as part of the Design Review Process for each building or phase. The actual amount of required parking shall be imposed as a condition of approval for each phase or new building based on the current or updated parking study and the goals and objectives of the adopted Transportation Demand Management program.

Guideline 5.1.2: Parking garages should have designated parking for car pools, staff and visitors.

Guideline 5.1.3: Separate vehicular drop off zones, service parking and trucks from pedestrian activity.

Guideline 5.1.4: New drop-off and pick-up areas should be designed to minimize traffic conflicts.

Guideline 5.1.5: Design parking garages so that direct light from cars and lighting fixtures is shielded, especially near residences.

Guideline 5.1.6: Loading docks, service area and free standing equipment should be concealed from public view.

Guidelines 5.1.7: Appropriate parking garage signs should be included as part of the circulation and signage plans.

Principle 5.2: Parking garages should respect the adjoining neighborhoods in terms of size and scale, while some flexibility should generally be acknowledged in order to accommodate necessary parking demands.

Guideline 5.2.1: Minimize the height of parking garages adjoining neighborhoods to reduce impact to neighbors.

Guideline 5.2.2: Parking garages should have architecturally interesting elements (such as modulated horizontal and vertical openings and vertical pilasters) to help breakdown their scale.

Guideline 5.2.3: Retail uses shall be included at the street level of new parking garages in the KX-1 Zone.

Objective #6: Incorporate sustainable design elements and features

Sustainable design practices can benefit both the property owner and the community.

Principle 6.1: Sustainable design elements and features should be incorporated.

Guideline 6.1.1: Building design and site planning should incorporate “Green Guidelines for Healthcare”.

Guideline 6.1.2: Site design should support alternative modes of transportation use by staff and visitors.

Guideline 6.1.3: Restore to a more natural condition the daylighted portion of Glen Echo Creek that is located within the Oakland Medical Center.

Guideline 6.1.4: Use native plants for landscaping.

Guideline 6.1.5: Efficiently use water in site design, utility uses, cooling systems and landscape irrigation.

Guideline 6.1.6: Use permeable site surfaces to reduce surface runoff.

Guideline 6.1.7: Design energy efficient buildings.

Guideline 6.1.8: Recycle waste generated by demolition, construction and operations.

Guideline 6.1.9: Use sustainable materials and resources.

Objective #7: Unique design elements for each district

Each sub-district within the OMC campus should have unique design elements that address specific location issues.

An illustration of the KX-1, KX-2, KX-3 and KX-4 Zone Districts is attached as **Figure OMC-5**.

Principle 7.1: The KX-1 District along the west side of Broadway should be an integral component of the campus.

Guideline 7.1.1: The KX-1 District should be anchored by a medical office building located at the corner of Broadway and MacArthur, with associated parking.

Guideline 7.1.2: Ground floor retail uses shall be included in any new building or parking structure.

Guideline 7.1.3: The eastern bank of Echo Creek should be re-contoured for greater slope stability.

Guideline 7.1.4: The daylighted portion of Glen Echo Creek should be restored with native vegetation.

Principle 7.2: Final design of the medical office building and parking garage should be determined pursuant to Design Review for Phase 1 of the Master Plan, in consideration of the following design guidelines:

Guideline 7.2.1: At a minimum, any parking facility shall be capable of meeting the parking needs associated with the programmed use of the 165,000 square foot West Broadway Medical Office Building (estimated at approximately 438 spaces).

Guideline 7.2.2: Consideration shall be given to combining the design of the medical office building and the parking garage into one integrated building. Whether an integrated building or freestanding parking garage, street-level retail use shall be included along as much of the Broadway frontage as possible. The street level retail use shall be included in the design and construction of Phase 1 and the space shall be actively marketed by Kaiser.

Guideline 7.2.3: If a free-standing parking garage is determined acceptable during Design Review, the parking structure should be designed to incorporate the following:

- a) The parking structure shall be set back from the face of the Medical Office Building by at least 3 feet.

- b) There may be 2 stories of parking above the retail ground floor (3 decks of parking above retail with rooftop parking). Rooftop parking shall include a wall or solid barricade of 4 feet in height (or no higher than the headlights of a Sports Utility Vehicle)

Guideline 7.2.4: The design of any parking facility at this location should seek to maximize underground parking, providing no less than 2 decks below ground.

Guideline 7.2.5: The design for the parking facility associated with the new Broadway medical office building shall provide for safe and efficient vehicular and pedestrian movements at the Broadway entrance. Design options may include:

- a) The driveway onto Broadway could be un-signalized and left-turns out of the driveway would then be prohibited, or
- b) The driveway on Broadway could be signalized so all vehicle movements would be allowed at the intersection, or
- c) Broadway could have a continuous median adjacent to the West Broadway Garage, so that vehicle movement at the driveway would be limited to right-in/right-out only.

Principle 7.3: The former M/B Center (the KX-2 Zone) should be redeveloped as an attractive, modern, state-of-the-art new hospital facility.

Guideline 7.3.1: The new Central Utility Plant (CUP) should be located near the freeway to minimize impacts on the surrounding neighborhood.

Guideline 7.3.2: The large parking structure should be located near the freeway, with a pedestrian bridge from the parking structure to the hospital. Entry to the parking structure should generally be limited to the main hospital entrance off of Broadway.

Guideline 7.3.3: The hospital design should include a podium with a tower element.

Guideline 7.3.4: The tower element should be set back from Broadway to reduce shadows on Mosswood Park.

Guideline 7.3.5: Active type uses are encouraged at the ground level of the Hospital building, potentially along Broadway and MacArthur and at the MacArthur/Piedmont corner.

Guideline 7.3.6: A pedestrian path should connect Piedmont Avenue to Mosswood Park through the KX-2 Zone.

Guideline 7.3.7: Subject to City review and approval, public improvements to be provided as part of Phase 2 should include streetscape improvements along lower Piedmont Avenue between West MacArthur Boulevard and Broadway. Such improvements may include widened sidewalks, landscaped medians and planter

strips, permanent streetscape furniture, improved bus stops/shelters, and improved street lighting.

Principle 7.4: The site of the current Kaiser Hospital (the KX-3 Zone) should be redeveloped as an attractive medical support center for the new hospital

Guideline 7.4.1: Locate new buildings along the street edge of Broadway and MacArthur.

Guideline 7.4.2: New structured parking shall only be included if it is needed to meet parking demand.

Guideline 7.4.3: The City shall, upon approval of the Master Plan and in consultation with local residents, and in accordance with all legal requirements, initiate all steps necessary to close Howe Street as a through street between MacArthur Boulevard and 38th Street. If approved by the City, Kaiser shall fund the improvements.

Guideline 7.4.3: A pedestrian path should connect Howe Street to Broadway through the KX-3 Zone.

Guideline 7.4.4: The existing Central Utility Plant (CUP) shall remain to serve the existing uses and may serve any new uses within the KX-3 Zone.

Guideline 7.4.5: The historic building at 3900 Broadway shall be retained.

Guideline 7.4.6: Improvement should be made to the existing Piedmont Avenue/Howe Street parking garage. Such improvements may include, but are not limited to landscaping and streetscape enhancements, façade beautification improvements and adding retail space into the ground floor subject to a physical feasibility analysis for such a use.

Principle 7.5: Within the KX-4 District, existing buildings shall remain and continue as residential type uses as set forth in the KX-4 Zone regulations.

Chapter 17.101D - D-KP KAISER PERMANENTE OAKLAND MEDICAL CENTER DISTRICT ZONES REGULATIONS

Sections:

17.101D.010 - Title, purpose and applicability.

17.101D.020 - Special regulations governing use and development in the D-KP-4 zone.

17.101D.030 - Permitted and conditionally permitted activities.

17.101D.040 - Permitted and conditionally permitted facilities in the D-KP-1, D-KP-2, and D-KP-3 zones.

17.101D.050 - Required Master Plan conformance and design review.

17.101D.060 - Design review.

17.101D.070 - Design review application.

17.101D.080 - Master Plan amendment.

17.101D.090 - Minimum lot area width and frontage.

17.101D.100 - Maximum floor area.

17.101D.110 - Maximum height for new construction.

17.101D.120 - Parking and loading areas.

17.101D.130 - Signs.

17.101D.140 - Landscaping, buffering and screening.

17.101D.150 - Demolition.

17.101D.160 - Skybridges.

17.101D.010 - Title, purpose and applicability.

- A. The provisions of this chapter shall be known as the D-KP Kaiser Permanente Oakland Medical Center District Zones Regulations. This chapter establishes land use regulations for the D-KP-1, D-KP-2 D-KP-3 and D-KP-4 zones, which are depicted in Figure OMC 1. The purposes of the Kaiser Permanente Oakland Medical Center zones are to:
- Replace the Oakland Medical Center with a new, state of the art facility to serve Kaiser Permanente's Oakland and Alameda membership;
 - Comply with state requirements under SB 1953 mandating the seismic upgrade or replacement of the Oakland Medical Center hospital by January 1, 2013;
 - Update and modernize the Oakland Medical Center's patient care and administrative service space to meet Kaiser Permanente's current standards;
 - Ensure that the Oakland Medical Center will be architecturally and functionally integrated, and that the Oakland Medical Center will be compatible with the existing neighborhood;
 - Provide a framework of development standards that takes into account the scale, massing and content of the surrounding community;

Title 17 - PLANNING

- Provide a set of procedures and practices to review and consider future design of new building construction.

D-KP-1 Kaiser Permanente Oakland Medical Center District Commercial 1 Zone: The D-KP-1 zone is intended for those properties north of MacArthur Boulevard and west of Broadway.

D-KP-2 Kaiser Permanente Oakland Medical Center Commercial District 2 Zone: The D-KP-2 zone is intended for those properties south of MacArthur Boulevard.

D-KP-3 Kaiser Permanente Oakland Medical Center Commercial District 3 Zone: The D-KP-3 zone is intended for those properties north of MacArthur Boulevard and east of Broadway.

D-KP-4 Kaiser Permanente Oakland Medical Center 4 Residential District Zone: The D-KP-4 zone is intended for those single family residential properties on the east side of Manila Avenue and will have the permitted uses further restricted during time the properties remain a part of the Kaiser Permanente Oakland Medical Center.

- B. The Kaiser Permanente Oakland Medical Center Zoning District is applied as an overlay district for those properties which are not owned by Kaiser Permanente. The existing zoning designation shall remain as the applicable zoning district, and the zoning regulations associated with that zoning district shall govern all development and use of the property until Design Review for the parcel/lot is approved by the City in accordance with the provisions of the D-KP District, with the consent of the property owner. Upon approval of Design Review, the zoning standards, guidelines, regulations and other requirements for the development and use of property within the applicable D-KP District and the adopted conditions of approval or mitigation monitoring program shall govern the use and development of that property.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.020 - Special regulations governing use and development in the D-KP-4 zone.

- A. The properties in the D-KP-4 zone that are zoned RU-3 shall be subject to the regulations of the RU-3 residential zone, except that while the properties are included as a part of the Kaiser Permanente Oakland Medical Center, the properties may only be used for the following activities: (i) single family residential uses; (ii) sleeping rooms for medical center staff; or (iii) temporary housing for families of members receiving long-term care at the Kaiser Permanente Oakland Medical Center.
- B. The existing single family residential buildings on the east side of Manila within the D-KP-4 Zone shall remain.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.030 - Permitted and conditionally permitted activities.

Table 17.101D.01 lists the permitted, conditionally permitted, and prohibited activities in the D-KP-1, D-KP-2, and D-KP-3 zones. The descriptions of these activities are contained in Chapter 17.10.

"P" designates permitted activities in the corresponding zone.

"C" designates activities that are permitted only upon the granting of a conditional use permit (see Chapter 17.134) in the corresponding zone.

"—" designates uses that are prohibited in the corresponding zone.

Table 17.101D.01 Permitted and Conditionally Permitted Activities

Activities	Regulations	Additional
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Title 17 - PLANNING

	D-KP-1	D-KP-2	D-KP-3	Regulations
Residential Activities				
Permanent	P	P	P	
Residential Care	C	C	C	17.103.010
Service-Enriched Permanent Housing	C	C	C	17.103.010
Transitional Housing	C	C	C	17.103.010
Emergency Shelter	C	C	C	17.103.010
Semi-Transient	C	C	C	17.103.010
Bed and Breakfast	C	C	C	17.10.125
Civic Activities				
Essential Service	P	P	P	
Limited Child-Care	P	P	P	
Community Assembly	P	P	P	
Recreational Assembly	P	P	P	
Community Education	P	P	P	
Nonassembly Cultural	P	P	P	
Administrative	C	C	C	
Health Care	P	P	P	
Special Health Care	C(L1)	C(L1)	C(L1)	17.103.020
Utility and Vehicular	C	C	C	

Title 17 - PLANNING

Extensive Impact	C	C	C	
Commercial Activities				
General Food Sales	P	P	P	
Full Service Restaurants	P	P	P	
Limited Service Restaurants and Cafe	P	P	P	
Fast-Food Restaurant	C	C	C	17.103.030 and 8.09
Convenience Market	P	C	C	17.103.030
Alcoholic Beverage Sales	C	C	C	17.103.030 and 17.114.030
Mechanical or Electronic Games	C	C	C	
Medical Service	P	P	P	
General Retail Sales	P	P	P	
Large-Scale Combined Retail and Grocery Sales	—	—	—	
Consumer Service	P(L2)	P(L2)	P(L2)	
Consultative and Financial Service	C	C	C	
Check Cashier and Check Cashing	—	—	—	
Consumer Cleaning and Repair	P	P	P	
Consumer Dry Cleaning Plant	C	C	C	
Group Assembly	C(L3)	C(L3)	C(L3)	
Personal Instruction and Improvement	P	P	P	

Title 17 - PLANNING

Administrative	C	C	C	
Business, Communication, and Media Service	C	C	C	
Broadcasting and Recording Services	C	C	C	
Research Service	C	C	C	
General Wholesale Sales	—	—	—	
Transient Habitation	—	—	—	
Building Material Sales	—	—	—	
Automobile and Other Light Vehicle Sales and Rental	—	—	—	
Automobile and Other Light Vehicle Gas Station and Servicing	—	—	—	
Automobile and Other Light Vehicle Repair and Cleaning	—	—	—	
Taxi and Light Fleet-Based Services	—	—	—	
Automotive Fee Parking	C	C	C	
Animal Boarding	C	C	C	
Animal Care	C	C	C	
Industrial Activities	All Industrial Activities prohibited in these zones			
Agricultural and Extractive Activities	All Agricultural and Extractive Activities prohibited in these zones			
Off-street parking serving activities other than those listed above or in Section 17.74.030, subject to the	C	C	C	17.74.030 17.116.075

Title 17 - PLANNING

conditions set forth in Section 17.116.075				
Activities that are listed as prohibited, but are permitted or conditionally permitted on nearby lots in an adjacent zone	C	C	C	17.102.110

Limitations:

L1. No new or expanded Special Health Care Civic Activity shall be located closer than two thousand five hundred (2,500) feet from any other such activity or five hundred (500) feet from any K-12 school or Transitional Housing, Enriched Housing, or Licensed Emergency Shelters Civic Activity. See Section 17.103.020 for further regulations regarding Special Health Care Civic Activities.

L2. See Section 17.102.170 for special regulations relating to massage services. Also, no new or expanded laundromat shall be located closer than five hundred (500) feet from any existing laundromat. See Section 17.102.450 for further regulations regarding laundromats.

L3. No new or expanded adult entertainment activity shall be located closer than one thousand (1,000) feet to the boundary of any residential zone or three hundred (300) feet from any other adult entertainment activity. See Section 17.102.160 for further regulations regarding adult entertainment activities.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.040 - Permitted and conditionally permitted facilities in the D-KP-1, D-KP-2, and D-KP-3 zones.

Table 17.101D.02 lists the permitted, conditionally permitted, and prohibited facilities in the D-KP-1, D-KP-2, and D-KP-3 zones. The descriptions of these activities are contained in Chapter 17.10.

"P" designates permitted activities in the corresponding zone.

"C" designates activities that are permitted only upon the granting of a conditional use permit (see Chapter 17.134) in the corresponding zone

"—" designates uses that are prohibited in the corresponding zone

Table 17.101D.02 Permitted and Conditionally Permitted Facilities

Facility Types	Zone			Additional Regulations
	D-KP-1	D-KP-2	D-KP-3	
Residential Facilities				
One-Family Dwelling	P	P	P	
One-Family Dwelling with Secondary Unit	P	P	P	17.103.080
Two-Family Dwelling	P	P	P	
Multifamily Dwelling	P	P	P	

Title 17 - PLANNING

Rooming House	P	P	P	
Mobile Home	—	—	—	
Nonresidential Facilities				
Enclosed nonresidential facilities	P	P	P	
Open nonresidential facilities	C	C	C	
Sidewalk Cafe	P	P	P	17.103.090
Drive-In	C	C	C	
Drive-Through	C(L1)	(L1)	C(L1)	17.103.100
Telecommunications Facilities				
Micro Telecommunications	P	P	P	
Mini Telecommunications	C	C	C	
Macro Telecommunications	C	C	C	
Monopole Telecommunications	C	C	C	
Tower Telecommunications	—	—	—	
Sign Facilities				
Residential Signs	P	P	P	<u>17.104</u>
Special Signs	P	P	P	<u>17.104</u>
Development Signs	P	P	P	<u>17.104</u>
Realty Signs	P	P	P	<u>17.104</u>
Civic Signs	P	P	P	<u>17.104</u>

Title 17 - PLANNING

Business Signs	P	P	P	<u>17.104</u>
Advertising Signs	—	—	—	<u>17.104</u>

Limitation:

L1. No new or expanded Fast-Food Restaurants with Drive-Through Nonresidential Facilities shall be located closer than five hundred (500) feet of an elementary school, park, or playground. See Sections 17.103.030 and 17.103.100 for further regulations regarding Drive-Through Nonresidential Facilities.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.050 - Required Master Plan conformance and design review.

- A. Substantial Conformance to the Kaiser Permanente Oakland Medical Center Master Plan is required for all projects in the D-KP-1, D-KP-2, and D-KP-3 zones.
- B. Except for projects that are exempt from design review as set forth in Section 17.136.025. No Building Facility, Telecommunications Facility, Sign, or other associated structure shall be constructed, established, or altered in exterior appearance unless plans for the proposal have been approved pursuant to the design review procedure in section 17.101D.060

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.060 - Design review.

- A. Design Review Application.
 - 1. Pre-Application Conference: Prior to application for design review, the applicant or his or her representative shall have a conference with a representative of the City Planning Department before or at an early stage in the design process to review the proposed project for consistency with the adopted Kaiser Permanente Oakland Medical Center Master Plan. At the conference the City representative shall provide information about applicable design review criteria and pertinent procedures, including the opportunity for advice from outside design professionals. Where appropriate the City representative may also informally discuss possible design solutions, point out potential neighborhood concerns, and mention local organizations which the applicant is encouraged to contact before finalizing the proposal.
 - 2. Application for Design Review: Application for design review shall be made by the owner of the affected property, or his or her authorized agent, on a form prescribed by the City Planning Department and shall be filed with such Department. The application shall be accompanied by such information as may be required to allow applicable criteria to be applied to the proposal, and by the fee prescribed in the City's Master Fee Schedule. Such information may include, but is not limited to, site and building plans, elevations, and relationships to adjacent properties.
- B. Exemptions from Design Review. The following changes to existing nonresidential buildings are exempt from design review:
 - 1. Any alteration or addition of existing floor area or footprint area determined by the Director of City Planning to be not visible from the street or from other public areas. An alteration or addition will normally be considered "not visible from the street or from other public areas" if it does not affect any street face or public face of a building or is located more than forty (40) feet from any street line, public path, park or other public area;

Title 17 - PLANNING

2. Alterations or additions of floor area or footprint that are determined by the Director of City Planning to be visible from the street or from other public areas, but which comprises less than ten percent (10%) of the total floor area, or anything under twenty-five thousand (25,000) square feet, whichever is smaller;
 3. A change of sign face copy or new sign face so long as the structure and framework of the sign remain unchanged and the new sign face duplicates the colors of the original or, in the case of an internally illuminated sign, the letter copy is light in color and the background is dark;
 4. Any alteration or addition not normally exempt which is used as a loading dock, recycling area, utility area, porch, deck or similar open structure addition that is no higher than six (6) feet above finished grade, less than five hundred (500) square feet in floor or footprint area, and has no significant visual or noise impact to neighboring properties or from a public street. Exemptions only permitted where the proposal conforms with all buffering requirements in Chapter 17.110 and all performance standards in Chapter 17.120.
 5. The alteration or addition is on a roof and does not project above the parapet walls.
- C. Small Project Design Review. "Small project design review" means design review for minor alterations or additions to existing facilities that do not require a Subsequent or Supplemental EIR nor any other permit, variance or other approval pursuant to the zoning regulations of Title 17 of the Oakland Planning Code.
1. Definition of Small Projects. Small Projects are limited to one or more of the following types of work:
 - a. New or modified signs, excluding advertising signs; signs extending above the roofline; and multi-tenant freestanding signs;
 - b. New or modified awnings;
 - c. Color changes to buildings, signs, awnings or other facilities;
 - d. Changes to storefronts or ground floor facades limited to replacement or construction of doors, windows; bulkheads and nonstructural wall infill; or installation or replacement of security grilles or gates; provided, however, they do not involve properties considered to be Historic Resources as defined by CEQA Guidelines section 15064.5 (14 CFR section 15064.5) and the City's Historic Preservation Element Policy 3.8;
 - e. Installation of flags or banners having any permanent structure within the public right of way;
 - f. Fences.
 2. Procedure for Consideration of Small Project Design Review: An application for small project design review shall be considered by the Director of City Planning.
 - a. The Director shall determine whether the proposal conforms to the applicable design review criteria and also is in substantial conformance to the Kaiser Permanente Oakland Medical Center Master Plan.
 - b. The Director may approve or disapprove the proposal and may require such changes therein or impose such reasonable conditions of approval as are in his or her judgment necessary to ensure conformity to said criteria.
 - c. The Director's decision shall be in writing, shall be final immediately and is not appealable.
 - d. Whenever an application for small project design review has been denied by the Director of City Planning, no small project design review application for essentially the same proposal affecting the same property, or any portion thereof, shall be filed within one year after the date of denial; provided, however, that such proposal may be resubmitted as an application for regular design review within one year of denial in accordance with Section 17.136.120

Title 17 - PLANNING

- D. Regular Project Design Review. Unless determined exempt or subject to small project design review pursuant to Section 17.101D.040 B or C above, no building, sign or other facility shall be constructed or established or altered in such a manner as to substantially affect its exterior appearance unless plans for such proposal have been approved pursuant to the following Regular Design Review procedures:
1. Reviewing Body:
 - a. If the project requires preparation of a Subsequent or Supplemental Environmental Impact Report, or involves twenty-five thousand (25,000) square feet or more of floor area, or includes a proposed skybridge, the Director of City Planning shall refer the application to the City Planning Commission for an initial decision.
 - b. All other applications for regular design review shall be considered by the Director of City Planning. However, the Director may, at his or her discretion, refer the application to the City Planning Commission for an initial decision rather than acting on it himself or herself.
 2. Procedure for Consideration of Design Review: Applications for design review shall be considered by the Director of City Planning or the Planning Commission according to the following procedures:
 - a. Decisions by the Planning Commission shall be made at a public hearing. At his or her discretion, the Director of City Planning may hold an administrative hearing for projects under his or her review.
 - b. Notice of public and/or administrative hearings shall be given by posting notices thereof within three hundred (300) feet of the property involved in the application; notice shall also be given by mail or delivery to all persons shown on the last available equalized assessment roll as owning real property in the City within three hundred (300) feet of the property involved. Notice shall also be given by e-mail, mail or delivery to all persons previously requesting to be notified of actions related to the Kaiser OMC Campus through public workshops, community meetings or other direct requests to the Planning Department. All such notices shall be given not less than seventeen (17) days prior to the date set for the hearing, if such is to be held, or, if not, for decision on the application by the Director or the Commission, as the case may be.
 - c. The Director or the Commission may seek the advice of outside design professionals and/or refer the matter to the City's Landmark's Preservation Advisory Board if Historic Resources may potentially be affected.
 - d. The Director or the Commission, as the case may be, shall determine whether the proposal conforms to the applicable design review criteria and also is in substantial conformance to the Kaiser Permanente Oakland Medical Center Master Plan, and may approve or disapprove the proposal or require such changes therein or impose such reasonable conditions of approval as are in his or her or its judgment necessary to ensure conformity to said criteria.
 - e. A determination by the Director shall become final ten (10) days after the date of decision unless appealed to the City Planning Commission in accordance with the procedures in Section 17.136.080. The decision of the Planning Commission on appeal is final and is itself not appealable.
 - f. An initial decision of the Commission shall become final ten (10) days after the date of decision unless appealed to the City Council in accordance with the procedures in Section 17.136.090.
- E. Design Review Criteria. Design review approval may be granted only if the proposal is in substantial conformance to the Kaiser Permanente Oakland Medical Center Master Plan including without limitation its goals, objectives, principles and guidelines, and also conforms to all of the following criteria:

Title 17 - PLANNING

- a. That the proposal will help achieve or maintain a group of facilities which are well related to one another and which, when taken together, will result in a well-composed design, with consideration given to site, landscape, bulk, height, arrangement, texture, materials, colors, and appurtenances; the relation of these factors to other facilities in the vicinity; and the relation of the proposal to the total setting as seen from key points in the surrounding area. Only elements of design which have some significant relationship to outside appearance shall be considered; and
 - b. That the proposed design will be of a quality and character which harmonizes with, and serves to protect the value of, private and public investments in the area; and
 - c. That the proposed design conforms in all significant respects with the Oakland General Plan and with any applicable district plan or development control map which has been adopted by the City Council; and
 - d. That any proposed retaining wall is consistent with the overall building and site design and respects the natural landscape and topography of the site and surrounding areas, and that the retaining wall is responsive to human scale, avoiding large, blank, uninterrupted or un-designed vertical surfaces.
- F. Adherence to Approved Plans. A design review approval shall be subject to the plans and other conditions upon the basis of which it was granted and shall terminate in accordance with Section 17.136.100.
- G. Revocation/Enforcement. In the event of a violation of any of the provisions of the zoning regulations, or in the event of a failure to comply with any prescribed condition of approval, or if the activity causes a public nuisance, the City may, after holding a public hearing, revoke any design review approval or other approval or take other enforcement actions in accordance with the procedures in Chapter 17.152.
- H. Review by Landmarks Board. A design review application may be subject to review by the Landmarks Preservation Advisory Board in accordance with Section 17.136.040.
- I. Design Review and Other Approvals. Whenever design review approval is required for a proposal also requiring a conditional use permit, or planned unit development permit or variance, the application for design review shall be included in the application to said permit and shall be processed and considered as part of same, in accordance with Section 17.136.120.
- (Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.070 - Design review application.

The application for design review for one or more Campus Zones shall include the following:

1. Streets, driveways, sidewalks, pedestrian and bike ways, and off-street parking and loading areas, including integration with surrounding uses.
2. Location and dimensions of structures.
3. Major landscaping features, including trees protected by Oakland Municipal Code Chapter 12.36, as it may be amended.
4. Creeks Protected by Oakland Municipal Code Chapter 13.16, as it may be amended.
5. The presence of any historic resources pursuant to the City's Historic Preservation Element Policy 3.8 or as defined in Section 15064.5 of Title 14 of the California Code of Regulations.
6. Plan and elevation drawings establishing the scale, character, and relationship of buildings, streets, and open spaces, and a description of all exterior building materials.
7. A tabulation of the land use area and gross floor area to be devoted to health care and retail uses, if any.

Title 17 - PLANNING

8. A public services and facilities plan including proposed location, extent and intensity of essential public services and facilities such as public streets and transit facilities, pedestrian access, bikeways, sanitary sewer service, water service, storm drainage structures, solid waste disposal and other utilities and a table comparing the descriptions to the existing location, extent and intensity of such essential public facilities and services.
9. If required, a Phasing Plan generally depicting projected development time frames sufficient to illustrate the relationship between the phasing of development and the provision of public facilities and services and parking.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.080 - Master Plan amendment.

- A. The City Council shall not amend the Kaiser Permanente Oakland Medical Center Master Plan until after it has received, pursuant to this procedure, a recommendation from the Planning Commission. The purpose of these provisions is to set forth the procedure by which amendments may be made to the Kaiser Permanente Oakland Medical Center Master Plan.
 1. Private Party Initiation. The owner of any property with a D-KP zone, or his or her authorized agent, may make application to the City Planning Commission to amend the Kaiser Permanente Oakland Medical Center Master Plan.
 2. Commission Initiation. The City Planning Commission may, and upon request of the City Council, initiate a Kaiser Permanente Oakland Medical Center Master Plan amendment. Such initiation shall be for the purpose of reviewing the merits of the proposal and shall not imply advocacy by the Commission for amendment.
- B. A private party application shall be made by the owner of the affected property, or his or her authorized agent, on a form prescribed by the City Planning Department and shall be filed with such Department. The application shall be accompanied by the fee prescribed in the City's Master Fee Schedule. Upon receipt of a completed application, the Director shall, within a reasonable period of time, schedule a public hearing before the Planning Commission. The Director or the Commission may seek the advice of outside design professionals and/or refer the matter to the City's Landmark's Preservation Advisory Board if Historic Resources may be affected.
- C. In the case of initiation by the City Planning Commission or initiation by a private party, the Commission shall, within 90 days from the date the submittal is deemed complete, hold a public hearing on the proposal. The Director or the Commission may seek the advice of outside design professionals and/or refer the matter to the City's Landmark's Preservation Advisory Board if Historic Resources may be affected. The Commission shall, in every case, make a recommendation to the City Council for appropriate action.
- D. Upon receipt of a recommendation from the City Planning Commission, the City Council shall set the date for consideration of the matter. The Council may approve, modify, or disapprove the Commission's recommendations, as the case may be. The decision of the City Council shall be made by resolution and shall be final.
- E. Notice of public hearings required herein shall be given by (1) newspaper; (2) posting notices thereof within three hundred (300) feet of the property involved in the application; and (3) by mail or delivery to all persons shown on the last available equalized assessment roll as owning real property in the City within three hundred (300) feet of the property involved. Notice shall also be given by e-mail, mail or delivery to all persons previously requesting to be notified of actions related to the Kaiser OMC Campus through public workshops, community meetings or other direct requests to the Planning Department. All such notices shall be given not less than seventeen (17) days prior to the date set for the hearing on the application before the Commission or City Council, as the case may be.

Title 17 - PLANNING

- F. Whenever a private party application has been denied by the City Council, no such application for the same proposal shall be filed within one year after the date of denial.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.090 - Minimum lot area width and frontage.

The following table contains the minimum lot area, width and frontage requirements for the zones in this chapter.

Standard	Zone		
	D-KP-1	D-KP-2	D-KP-3
Minimum lot area	4,000	4,000	4,000
Minimum lot width	25 ft	25 ft	25 ft
Minimum lot frontage	25 ft	25 ft	25 ft

Lot width and frontage for D-KP-4 based on the RU-3 zone.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.100 - Maximum floor area.

The maximum floor area for the aggregate of all the D-KP zoned properties shall not exceed 1.76 million square feet excluding parking structures. This includes approximately 432,300 square feet of existing buildings not to be redeveloped (the Piedmont, Howe, Fabiola, Mosswood and Kings Daughter Mental Health buildings) and a maximum of 1,353,000 square feet of new construction. The following floor area requirements will ensure that density of new construction is appropriately distributed throughout the D-KP zones.

- The maximum floor area of new construction in the D-KP-1 Zone shall be 172,700 square feet (165,000 square feet of medical office space and a maximum of 7,700 square feet retail)
- The maximum floor area of new construction in the D-KP-2 Zone shall be 957,000 square feet. An additional 60,000 square feet of space may be added to this building (to a maximum of 1,107,000 square feet) provided that Kaiser submit a schematic development plan that delineates the development program for Phase 3. In order to qualify for this option, the schematic development plan for Phase 3 must be submitted for review by the City Planning Commission prior to occupancy of the Phase 2 parking garage.
- The maximum floor area of new construction in the D-KP-3 Zone shall be 223,000 square feet. However, should Kaiser select to add the additional 60,000 square feet of space to Phase 2 as described in B above, then the maximum floor area of Phase 3 would be correspondingly reduced by as much as 60,000, to a maximum of 163,000 square feet.

(Ord. No. 12999, § 4(Exh. A), 3-16-2010)

Title 17 - PLANNING

17.101D.110 - Maximum height for new construction.

The maximum heights for new construction in the D-KP zones shall be as follows:

- A. In the D-KP-1 Zone, the maximum building height for the Medical Office Building shall be 85 feet. The maximum height of any freestanding parking structure shall be 41 feet (2 stories of parking above ground floor retail, with rooftop parking allowed).
- B. In the D-KP-2 Zone, the maximum height for the new hospital tower shall be 210 feet.
- C. In the D-KP-3 Zone, the maximum height of new buildings (not including parking structures) shall be 70 feet (5 stories at 14 feet per story). Parking structures shall be limited to a maximum of 53 feet. In the D-KP-3 Zone all structures shall be set back from the adjacent RM-3 zone on Cerrito Avenue, Howe Street, and 38th Street by a minimum of 12 feet. No structure may exceed 30 feet in height unless additional setbacks are provided equivalent to an additional horizontal distance of one foot beyond the 12-foot setback for each foot that the structure extends above 30 feet, up to the maximum allowable height.
- D. Maximum height for D-KP-4 is equivalent to RU-3 requirements.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.120 - Parking and loading areas.

- A. Parking shall be determined on a D-KP District-wide basis and the amount, location and distribution of parking shall be determined as part of the Design Review Process. The parking demand study prepared for adoption of the D-KP district determined that upon completion of new construction to the full 1.78 million square foot total, approximately 3,584 parking spaces will be required. The actual amount of required parking shall be imposed as a condition of approval based on the current or updated parking study and the adopted Transportation Demand Management program, as approved by the City. The requirements set forth herein may be modified during the design review process, upon a finding that the modification is supported by an updated parking analysis prepared by a professional traffic engineer, as approved by the City.
- B. Unless otherwise permitted pursuant to a conditional use permit, deliveries that rely on the use of loading areas or driveways within 200 feet of a residentially zoned property shall be limited to the hours of 5:00 a.m. to 7:00 p.m.

(Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.130 - Signs.

- A. If a comprehensive sign program is adopted as part of the Kaiser Permanente Oakland Medical Center Master Plan, the provisions of the comprehensive sign program shall govern and shall supersede the provisions of Chapter 17.104.
- B. Design Review approval is not required for temporary or development signs; and periodic changes of copy.

(Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.140 - Landscaping, buffering and screening.

A landscaping, buffering and screening plan shall be submitted for every project that requires approval pursuant to the design review process. The landscaping, buffering and screening plan shall contain the following:

Title 17 - PLANNING

1. Landscaping that is consistent with the Kaiser Permanente Oakland Medical Center Master Plan with an automatic system of irrigation for all private landscaping shown in the plan.
2. Landscape treatment of any interface with a residentially zoned property including a buffering and screening plan.
3. The location of parking, loading and storage areas, and exterior lighting including a buffering and screening plan.

(Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.150 - Demolition.

Consistent with Oakland Municipal Code Section 15.36.070, during the Kaiser Permanente Oakland Medical Center Master Plan approval process, the City Council may identify specific buildings for which a demolition permit may be issued without first obtaining a building permit because the issue of demolition was expressly considered as part of the Kaiser Permanente Oakland Medical Center Master Plan approval process. These buildings shall be listed in the Kaiser Permanente Oakland Medical Center Master Plan as eligible for demolition prior to the issuance of building permits.

(Ord. No. 13064, § 2(Exh. A), 3-15-2011; Ord. No. 12999, § 4(Exh. A), 3-16-2010)

17.101D.160 - Skybridges.

- A. One pedestrian skybridge over the public right-of-way of Broadway, adjacent to Highway 580, (connecting D-KP-1 and D-KP-2) is permitted in the D-KP zone and no conditional use permit shall be required pursuant to Section 17.102.200. Authority pursuant to Chapter 12.08 is also granted for this pedestrian skybridge. While the exact location has not yet been determined, the general location of the skybridge is shown in the Kaiser Permanente Oakland Medical Center Master Plan. The design and final location will be determined during the Design Review Process.
- B. No other skybridge over Broadway shall be permitted.
- C. The other proposed pedestrian skybridges over the public right-of-way on MacArthur Boulevard is not needed until the completion of Phase 3 of the project (D-KP-3 Zone). Design Review for Phase 2 should consider means to ensure that a choice of skybridge versus tunnel versus surface street crossings at this location is preserved. The need for and final design and final location of a potential MacArthur Boulevard skybridge versus tunnels or surface street crossings will be determined during the Design Review Process and pursuant to Conditional Use permits for Phase 3.
- D. The Director of City Planning shall refer all Design Review processes regarding skybridges to the City Planning Commission for initial decision. An initial decision of the Commission shall become final ten days after the date of decision unless appealed to the City Council in accordance with the procedures in Section 17.136.090.

(Ord. No. 12999, § 4(Exh. A), 3-16-2010)

Notes for July 30, 2013 meeting

Lower Piedmont Avenue, as well as the section of Piedmont Avenue immediately north of Macarthur Boulevard, has been dead to pedestrian traffic since the 1960s largely because of two structures: the M/B Center and Kaiser's Howe Street parking garage, whose backside borders Piedmont Avenue. These structures prevented opportunities for street-level activities and pedestrian engagement. The City, neighborhoods, and Kaiser now have a narrow window of opportunity to revitalize a portion of this area of Piedmont Avenue. This will be, for decades to come, our sole shot at reclaiming Lower Piedmont Avenue as a critical pedestrian corridor linking the Piedmont Avenue neighborhood to the fledgling development along Broadway (starting all the way from Downtown and Uptown, and to include Sprouts market at 30th).

Revitalizing Lower Piedmont Avenue and the Piedmont/West Macarthur corner are stated goals of the development's Master Plan (please see highlighted portions of Master Plan). There is explicit language in the Master Plan supporting these goals, language which the neighborhood organized and worked hard to make certain was included in the Master Plan. It is critical that this language form the basis for decisions regarding the enhancement of this area of our neighborhood.

The neighborhood understands that Kaiser wants to create a "placeholder" for future construction of a medical office building. It appears that Kaiser is concerned about a potential public outcry and the resulting negative publicity which they foresee surrounding the loss of that open space when Kaiser finally moves forward with construction of the MOB. These concerns should not be allowed to block exploration of all viable options.

Neighborhood residents fully expect, given past experience and comments by Kaiser's own personnel, that current decisions regarding this piece of land could remain in effect for up to 15 years, or more. These improvements should not be viewed as merely "temporary," but as prominent elements of the built environment with which the neighborhood will live indefinitely. The neighborhood understood this years ago, which is why, when Kaiser announced it was postponing construction of the MOB, we insisted that Kaiser be required to obtain approval from the City for the design of this space.

Given the above circumstances, the neighborhood feels strongly that Kaiser should be required to do the following:

--First, consider design alternatives that serve this "placeholder" function but do not require fencing off this area. How thoroughly did Kaiser research potential solutions?

--If the area is to be fenced, the neighborhood feels strongly that the fence itself

SEP 23 2013 AM 10:59

as well as the fenced area, in order to be palatable to the neighborhood, must meet the following requirements:

- 1) The fence shall not exceed 6 feet in total height. An 8-foot fence is totally unacceptable and inconsistent with the city's general policies regarding fences bordering sidewalks in pedestrian-friendly areas.
- 2) The fence at all points shall be located a minimum of 8 feet from the edge of the nearest paved walking surface, including but not limited to sidewalks, the diagonal pedestrian shortcut between Macarthur Boulevard and Piedmont Avenue, etc.
- 3) The fence shall be placed behind the perimeter trees planned for these areas, so that trees are closest to pedestrians and serve to buffer the fence.
- 4) The fence shall not be obstructed by vining plants, thus providing an unobstructed view of the area inside.
- 5) The fenced area shall be made accessible to the public between dawn and dusk, 7 days a week.

There are numerous precedents within existing Kaiser facilities and other commercial properties for providing public access. Kaiser already maintains and opens to the public a rooftop garden at 20th and Webster streets that is as large as a city block. This is a popular and well used garden which even hosts public music concerts and which Kaiser appears to have little problems securing. At the Oakland Medical Center itself, Kaiser allows public access to its Serenity Garden. At the 12th Street Oakland City Center plaza, Shorenstein allows public access on its private property and simply posts signs at entrances and at the property line that users are entering private property and public access is granted on certain terms and conditions. There is no reason that Kaiser could not do the same for the area under discussion at the corner of Macarthur Boulevard and Piedmont Avenue.