TOWN BOARD TOWN OF CORTLANDT, NEW YORK _____ ----X MEDICALLY ORIENTED DISTRICT (MOD) ----X June 16, 2020 Town of Cortlandt, New York Virtual Town Board Meeting **BEFORE:** LINDA PUGLISI, Supervisor DEBRA CARTER-COSTELLO, Member JAMES CREIGHTON, Member FRANCIS FARRELL, Member RICHARD BECKER, Member PRESENT: THOMAS F. WOOD, ESQ. Town Attorney LAROUE SHATZKIN, Town Clerk FOR THE APPLICANT, EVERGREEN MANOR: DAVID STEINMETZ, ESQ. Zarin & Steinmetz 81 Main Street White Plains, New York 10601 ANUP MISRA, Trammel Crow ANTHONY RUSSO, Hudson Park Group ANTHONY RUSSO, AKRF MARISSA TARALLO, AKRF



MEDICAL ORIENTED DISTRICT 1 2 MS. PUGLISI: Okay. It is 7:00. We like 3 to be prompt. We are going to begin our 4 official town board meeting of June 16th, 2020, 5 via Zoom. The meeting is called to order by our town clerk. And would you all please rise 6 7 for the pledge to the flag. 8 9 (Pledge of allegiance.) 10 11 MS. PUGLISI: Thank you so much. Okay. 12 As I said before -- well, let's do the roll 13 call. Madam Clerk, please. MS. SHATZKIN: Councilman Costello. 14 15 Councilman Costello is connecting. Just one moment. Councilman Costello. 16 17 MS. COSTELLO: Here. MS. SHATZKIN: Councilman Creighton. 18 19 MR. CREIGHTON: Here. MS. SHATZKIN: Councilman Farrell. 20 MR. FARRELL: Here. 21 22 MS. SHATZKIN: Councilman Becker. 23 Councilman Becker. I see him. Councilman 24 Becker is here. He may not have connected to 25 audio yet.

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1 MEDICAL ORIENTED DISTRICT 2 And Supervisor Puglisi. MS. PUGLISI: 3 Here. MS. SHATZKIN: All present. 4 MS. PUGLISI: Okay. Richard's here too. 5 All right. Okay. So just quickly, the 6 approval of the minutes. A motion and a 7 second, please. 8 9 MS. COSTELLO: So moved. UNIDENTIFIED SPEAKER: 10 Second. 11 MS. PUGLISI: For the discussion all in 12 favor, aye. 13 14 (A chorus of "ayes.") 15 MS. PUGLISI: So moved. 16 All right. We 17 are going to go right into our public hearings. 18 There's a lot of people who want to speak at the one in particular, I'm sure. And we are 19 going to explain the public hearing via Zoom by 20 21 our town clerk, Laroue Shatzkin. Then our town 22 attorney, when we get to the second one, will 23 explain and give you more details about MOD. 24 But we are going to do the first public hearing first. So Laroue, if you just want to be 25

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1 MEDICAL ORIENTED DISTRICT 2 generic and just explain how the Zoom will 3 proceed during the public hearings. 4 MS. SHATZKIN: So for the -- my notes are 5 for the MOD meeting. Let me just briefly explain the process there. We will first have 6 7 very short presentations from all the involved There are -- a few of them will 8 parties. 9 As you saw during my little practice speak. 10 session before there, I will play some video 11 and manage some audio for them. They will 12 briefly be promoted to panelists to be able to 13 speak to the attendees. And so that their brief presentations will be recorded and later 14 15 posted on the website. I will then 16 individually grant the right to those residents 17 who have pre-signed up to speak during the 18 public hearing. At that time, especially due 19 to the late influx of individuals who wanted to sign up, we will then grant people the right to 20 21 raise their hand and speak as well. So if you 22 did not have an opportunity to sign up and you 23 do wish to speak during the public hearing, you 24 will be able to do that this evening. MS. PUGLISI: So if you didn't pre 25

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1 MEDICAL ORIENTED DISTRICT register, you still have some time to speak 2 3 later on. MS. SHATZKIN: Yes. I do think that it is 4 5 worth mentioning that any issue that has previously been mentioned, must be addressed by 6 So if a particular issue, for example, 7 law. traffic at a particular intersection has 8 already been mentioned, speaking about it again 9 does not lend additional gravity to the 10 11 response of that particular issue. It will be 12 responded to regardless. And finally, I think 13 it's very important to know that written comments will still be accepted through June 14 15 30th. So up until June 30th, you can submit those written comments either to 16 17 mod@townofcortlandt.com or to 18 townclerk@townofcortlandt.com. And I work 19 closely with the person who manages the MOD 20 emails to make sure that everyone is accounted 21 for. And that's our basic process. In addition, if anyone wants to speak during the 22 23 first public hearing, please raise your hand 24 and I will call on you. 25 MS. PUGLISI: Okay. So why don't we go



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1	MEDICAL ORIENTED DISTRICT
2	right to the first public hearing first.
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4	(First public hearing was held.)
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6	MS. PUGLISI: All right. Number two,
7	Laroue, you want to read it.
8	MS. SHATZKIN: Yes. We have a public
9	hearing this evening regarding the
10	medical-oriented district: SEQRA, DGEIS, DEIS,
11	and proposed local law.
12	MS. PUGLISI: Okay. And as was stated, we
13	are going to hear briefly from our town
14	attorney who will update us all on where we are
15	in the process. And he will once again explain
16	the MOD, what the MOD is, where it emanated
17	from, where we are, where we're going and we
18	held our last public hearing on this January
19	14th, 2020. Prior to that, we had a public
20	hearing on November 19th, 2019. We adjourned
21	it to the January meeting. And then the town
22	board and I subsequently adjourned that
23	meeting, that public hearing to our April town
24	board meeting. But due to the pandemic, we
25	then had to adjourn it once again. And we gave



1 MEDICAL ORIENTED DISTRICT 2 ourselves sufficient time to our June 16th, 2020, meeting and that is what we're doing 3 opportunity. We didn't want to wait until we 4 could get back into the town hall. We thought 5 ample time had passed. So that's why we're 6 going via Zoom, if anybody was wondering, I 7 think it was sufficient time and we've all 8 become adept at Zoom, haven't we? Or if I may 9 say, we think we are. We will see. 10 We will 11 see. And the public has been given sufficient 12 notification. And information has been put up on our website. People could register, 13 obviously, people could -- who didn't register 14 15 are going to be able to be heard later. And we 16 are going to hear from the applicants as well. 17 So Mr. Wood, our town attorney, if you would be 18 so kind to just give us an update. Yes. Good evening, Madam 19 MR. WOOD:

Supervisor, members of the board, ladies and gentlemen. I would like to begin by saying I believe we are in one-third of the process. We still have two-thirds to go beyond this. And I think it might be important to reflect on where we've come, where we're at and what the process

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1	MEDICAL ORIENTED DISTRICT
2	forward is. So the town is required by state
3	law to maintain a master plan. And a master
4	plan, as you will, is a road map as to how a
5	town at a particular time feels, takes an
6	inventory, what amenities, assets and needs
7	that it has and then develops a recommendation
8	as to how to achieve some of the goals and
9	needs of the communities. So in Cortlandt back
10	in 2015 and 2016, the town board had appointed
11	a committee to study, to take the inventory,
12	study all the issues which resulted in a master
13	plan which was entitled "Envision Cortlandt."
14	And that master plan was adopted in March of
15	2016 by a unanimous vote of the town board.
16	And what the master plan then becomes is the
17	guide forward for the town board in considering
18	how zoning should be changed. So it's not
19	the master plan doesn't dictate what it is,
20	it's a recommendation and guide for the town
21	board. So following the adoption of the master
22	plan, the master plan contains several
23	different many different recommendations. I
24	think there's over a hundred. But several of
25	them are what's known as overlay districts or

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1	MEDICAL ORIENTED DISTRICT
2	different districts and one is the
3	transportation-orientated strict which would
4	affect areas around the commuter railroad, et
5	cetera and the one we're dealing with tonight
6	is the medical-orientated district. And this
7	district would is envisioned to have as its
8	hub the Hudson Valley Hospital. And to
9	surround that hospital with various forms of
10	extended medical care facilities for more
11	medical offices, assisted living, other needs
12	that the community had. So what happened is
13	after the adoption of the master plan, some
14	stakeholders worked with the town and came
15	forward and they're primarily the two
16	properties now across from the hospital. The
17	hospital was involved at the beginning but
18	hasn't actively participated. So that when the
19	proposals come forward, the developers, the
20	owners of the property develop plans for the
21	property. The town is looking at what from
22	the master plan, what ordinance change is
23	necessary in order to have a medical-orientated
24	district. So all of that came together in the
25	fall of 2019. Prior to September of 2019, the

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1 MEDICAL ORIENTED DISTRICT 2 town encouraged and sponsored two community 3 outreach forums that were held at town hall and 4 the community center and invited residents to 5 come in to see a preliminary conceptual plan 6 that the developers, that the stakeholders of 7 the two properties has. Following those, a 8 formal submission came before the town board in the fall, in September of 2019. And now, we 9 10 have to talk about the process. So the town 11 board, as the legislative authority in the 12 town, before it can do any enactments must 13 conduct a review under the New York State Environmental Quality Review Act, better known, 14 15 and will be referenced tonight many times as 16 So hopefully everyone remember that. SEQRA. 17 And as part of the process, the first step the town board has to do is to determine who should 18 be the lead agency. Who should guide the 19 20 environmental review? And in this case, the 21 town board elected to become the lead agency. 22 They could have been challenged by other 23 agencies that have to give approval by New York 24 State DOT, the DEC, Westchester County, a whole number of agencies who are involved in the 25

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1 MEDICAL ORIENTED DISTRICT No one objected; so the town board 2 process. 3 became the lead agency. So then, their first role was to have a -- two documents prepared. 4 One is the generic environmental impact 5 statement which is before us. And that studies 6 the amendment to the zoning ordinance and what 7 effects, and impacts that amendment may have. 8 The other documents before the board is the 9 draft environmental impact statement which 10 11 studies the two proposals that are before the 12 board. And all of those documents have to -the purpose of them is to, number one, to 13 identify all the potential impacts that the 14 15 developments or the zoning ordinance could 16 create, not only on the immediate community but 17 on the town as a whole. And once they're 18 identified, they then have to have sufficient discussion so that people can understand what 19 20 the impacts are and then the second phase is 21 how do we address these impacts, how do we 22 mitigate them, how do we lessen them? And 23 that's the document -- these are draft documents that are before the board. 24 And as 25 the supervisor said, we open the public hearing

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2	in November. And the purpose of the public
3	hearing is twofold. One is to receive comments
4	on the proposed amendments of the zoning
5	ordinance, that's referred to as the
6	legislative public hearing. And the second
7	part of the public hearing is to receive
8	comments about whether or not these draft
9	documents sufficiently have identified all of
10	the impacts. The public may come up with other
11	impacts that for some reason weren't perceived
12	to be an impact. They could have comments
13	about their concerns about how the discussion
14	is in the documents. Maybe there's more
15	traffic intersections that need to be studied,
16	a whole multitude of items. So we've been
17	receiving those comments at the two public
18	hearings, both in November and January. The
19	public has been free to provide written
20	comments to the town board this entire time
21	period. And as the town clerk indicated, she's
22	been monitoring that, collecting it into the
23	record. And will continue to receive those
24	comments if the board closes the public hearing
25	tonight through June 30th. But this is just



1	MEDICAL ORIENTED DISTRICT
2	the first step, as they said we're only about
3	one-third into the process. So what would
4	happen is, after this evening, if the public
5	hearing is closed, the all the comments are
6	indexed. They are all put together, all the
7	traffic comments, all the water comments, all
8	the stormwater comments, et cetera. And then
9	they have to be analyzed. And when I say
10	"analyzed," in the draft environmental impact
11	statement, the applicants have to either
12	identify where the issue is already been
13	addressed in the discussion part of the
14	document or if not, they have to provide
15	necessary information to fill in the gap and to
16	analyze it. The same thing as the town will be
17	reviewing the generic environmental impact
18	statement to do the same thing with respect to
19	the zoning ordinance. When all of that process
20	is done, another document is created called a
21	final environmental impact statement. And the
22	town board will receive that anywhere from
23	three months to nine months from today from
24	the close of this public hearing because we
25	don't know how long it will take for all the

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1 MEDICAL ORIENTED DISTRICT 2 comments to be put together. But once the town 3 board feels that there's a draft of a final 4 environmental impact statement, that seems to 5 answer all of the issues that were raised. They will then schedule another public hearing 6 7 to receive comments. I should also note that 8 while the agencies do not participate in the 9 public hearings, we have received comments from 10 various state agencies that this was referred 11 to and that's a continual dialogue that will 12 continue with any change, any modification, the 13 DOT, the DEC, the Department of Health will all be having continual impact. So what would 14 happen then is in the next third is the 15 16 preparation of the response and then the final 17 third of the preceding would be additional 18 public hearing and then the town board, 19 following the public hearing, would have to adopt a statement under SEQRA that identifies 20 21 all of the impacts that have been identified, 22 how they are being mitigated or proposed to be 23 mitigated, and then ultimately the town board 24 has to decide are those mitigations sufficient And then following that, if they do 25 or not.

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1 MEDICAL ORIENTED DISTRICT 2 adopt one that says yes, they are sufficient, they then consider the adoption of the 3 amendment to the zoning ordinance. 4 Many changes sometimes in mitigation. It's not just 5 an extra traffic light, et cetera. Sometimes 6 it's a modification of the project, a reduction 7 in size to minimize or reduce an impact. 8 So there is a whole multitude of ways in which 9 impacts that are identified can be reduced, 10 11 changed, or mitigated. So it's a complicated 12 process, we've tried to keep it very transparent. We are welcoming of all comments 13 and issues. And the staff is always available 14 15 to guide anyone in the process, but really, 16 tonight the comments will be recorded. They 17 will have to be addressed. This is not the 18 type of public hearing where there's answers 19 given tonight because we are looking for the 20 questions and we have to analyze whether they have been addressed or it has to be more 21 22 clearly addressed in future documents. 23 So that in a long-winded nutshell is where 24 we are in the process and where we're heading. 25 MS. PUGLISI: Tom, thank you so much for

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1 MEDICAL ORIENTED DISTRICT 2 the summary. We all appreciate it very much. 3 It's helpful. 4 So important take-aways is that there's many other opportunities in the future for the 5 public to ask questions, make comments and be 6 7 heard as we proceed. Tonight is not any final 8 vote, that is for sure, not at all. That's important to know. Another take away is that 9 10 the master plan, the document is a -- I'll hold 11 it up, it's online but here is the physical 12 document with over 100 policies in it and MOD 13 is only one of them. It's not a local law. It's not a town ordinance. It's suggestions, 14 recommendations for the town boards to 15 16 entertain and consider after holding public 17 hearings. This is the third master plan that I 18 have been involved in as supervisor over these 29 years. So we've had two prior to this with 19

various subject matters that we wanted to go
forward on and consider and entertain including
a town hall, including a Cortlandt train
station, a 911 system, paramedics, and so on.
So all good things, of course.

Now, the MOD, just briefly because, you



1	MEDICAL ORIENTED DISTRICT
2	know, we want to hear from everybody and I have
3	stated my position publicly over the last
4	course of the year. People know my position,
5	that I think that the proposals are way too big
6	at one time for the one major road, the
7	corridor, for the residential neighborhood.
8	I've stated that. I'm briefly reiterating
9	that. Later on, I may give some more reasons,
10	but I think people know my position on it. So
11	the MOD concept by the members about 20
12	members of the appointed committee thought
13	about a lot of different things,
14	sustainability, envisioning the future for the
15	Town of Cortlandt, a lot of good ideas in it.
16	The MOD was a concept that around the hospital,
17	the hub, being the hub of the ideas so for
18	medical offices, and so on, et cetera. The
19	concept, the idea is lofty; it's good. The
20	proposals that are before us and I have for the
21	last three years expressed myself to the
22	stakeholders, slash, developers. So it's
23	nothing new to them. I told them from the
24	get-go that these are too big. You could, you
25	know, break it down into phases, come back with

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1 MEDICAL ORIENTED DISTRICT 2 something more palatable, reasonable for the 3 community and the town boards to consider. So 4 those are just my opening remarks. I have a right to state them of course. And we will 5 6 proceed. Madam Clerk, who is on the beginning 7 of the list, please? 8 MS. SHATZKIN: I'm going to start with 9 Kevin McAndrew in just a moment. Just for our 10 few people who will present and also for the 11 residents who I will be calling with, please 12 bear with me as I find you and give you 13 permission or remove permission. There's a lot of people to sort through and I appreciate your 14 15 patience. One moment. 16 MS. PUGLISI: You're doing a great job. 17 MS. SHATZKIN: Thank you.

18 MR. WOOD: And if I could just add that 19 we've elected to have a brief presentation by 20 the two stakeholders as well as the town's 21 traffic consultant at the beginning of the 22 public hearing to kind of refresh everyone's 23 memory and to bring into the prospective of how 24 the comments will be tonight.

MS. PUGLISI: And Tom, the town's traffic

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1 MEDICAL ORIENTED DISTRICT 2 consultant was made available to the public as 3 well; correct? We should just point out MR. WOOD: Yes. 4 that when any proposal is delivered to the 5 town, the town -- the town itself chooses a 6 traffic consultant. The traffic consultant is 7 then funded by the stakeholders. So in this 8 case, it's AKRF is the traffic consultant who 9 is chosen by the town, funded by the 10 11 applicants, and they are the ones who did the 12 analysis. Over the last several months on the town's website has been a brief video from both 13 applicants as well as the town's traffic 14 15 consultant giving an overview of what they have 16 proposed and what the traffic experts have 17 found. 18 MS. PUGLISI: Tom, also, one more question that's important for everybody to know, all of 19 20 the emails, letters, comments at the public 21 hearings from the public, they will be answered 22 not only by the applicants, but also by our own 23 town staff. 24 What happens is the MR. WOOD: Yes. 25 applicant -- they will all be indexed,

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1 MEDICAL ORIENTED DISTRICT 2 organized and then whatever -- whoever is 3 working on the various parts, it all comes into We'll review it to make sure we feel 4 staff. 5 it's -- everything is complete. We then give it to the town board in draft form for their 6 7 preliminarily comments before then it goes to 8 the public for their comments. 9 MS. PUGLISI: And then at the end of the 10 day, most likely in the fall, we'll get 11 everybody's reports. The town board will 12 consider the next path. 13 MR. WOOD: Correct. 14 MS. PUGLISI: All right. Great. Okay. 15 Madam Clerk, I will turn it over to you 16 and we will go through the many people that 17 would like to express themselves at this public 18 hearing and we appreciate them being here and for their patience thus far. 19 20 MS. SHATZKIN: Okay. Kevin, can you hear 21 me? 22 MS. PUGLISI: Oh, everybody has to state 23 their name. 24 Thank you. MR. MCANDREW: MS. SHATZKIN: Okay. Kevin, just for the 25



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1	MEDICAL ORIENTED DISTRICT
2	record before I play your video, could you
3	please state your name and your company.
4	MS. PUGLISI: Yeah.
5	MR. McANDREW: Yes. Madam Supervisor,
6	fellow town board members, good evening. Kevin
7	McAndrew, Cameron Engineering, 177 Crossway
8	Park Drive, Woodbury, New York. Speaking on
9	behalf of Gyrodyne, one of the two key
10	stakeholders. I just had a one-minute
11	introductory presentation to make before we ask
12	that the room play the recorded presentation.
13	I firstly want to thank everyone at the town
14	and your resources to enable this hearing to go
15	forward this evening. Last month, Gyrodyne
16	prepared a narrated PowerPoint in anticipation
17	of the continuation of this public hearing on
18	the draft generic environmental impact
19	statement as stated by the town attorney. The
20	purpose of our brief presentation is really
21	both as a refresher and as an update to the
22	residents of Cortlandt, other interested
23	stakeholders, and of course the town board. So
24	with that, I would ask that the our
25	pre-recorded presentation be played and we

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1	MEDICAL ORIENTED DISTRICT
2	we look forward to advancing this important
3	initiative for the town.
4	MS. PUGLISI: Thank you.
5	MS. SHATZKIN: Okay. One moment.
6	VIDEO PRESENTATION: Supervisor, fellow
7	town board members, on behalf of Gyrodyne, this
8	is Kevin McAndrew, partner with Cameron
9	Engineering, providing a narration of the
10	following brief PowerPoint presentation for
11	Gyrodyne's proposed mixed use campus
12	development plan within the town's proposed
13	medical-oriented district referred to as the
14	MOD. The specific purpose of this brief
15	presentation is to serve as a refresher to the
16	board, to the town residents, and to interested
17	stakeholders as part of the continued DGEIS
18	public hearing process which we understand is
19	to occur on June 16th, 2020.
20	The Gyrodyne proposal has been guided by
21	three fundamental considerations. First, a
22	viable market-driven plan. That is a
23	sustainable plan supported by economic and
24	marketing studies which have been prepared by a
25	nationally recognized expert, HRNA advisors.



1	MEDICAL ORIENTED DISTRICT
2	Second, a mixed-use development plan
3	complementary and synergistic with the New
4	York-Presbyterian Hospital, the economic engine
5	in the area and the Evergreen Manor Development
6	Plan, the adjacent key stakeholder. And,
7	lastly, the third key fundamental
8	consideration, a development plan consistent
9	with the town's MOD vision and a plan guided by
10	the MOD goals. Alignment with the town's
11	comprehensive plan: The design approach to the
12	Gyrodyne mixed-use campus plan from the outset
13	of this initiative, has been the formulation of
14	a document plan in complete alignment with the
15	town's award-winning sustainable comprehensive
16	plan. Delivering a plan that meets the
17	overarching goal of economic development while
18	checking all of the boxes specific to the
19	purpose and need of the MOD. Centralizing and
20	improving medical services and access to a
21	broader spectrum of high-quality healthcare
22	services. State-of=the-art medical office will
23	replace the outdated medical office space on
24	the Gyrodyne property. Providing a broader
25	range of housing options, market-rate highly



1	MEDICAL ORIENTED DISTRICT
2	amenitized apartment units will serve the New
3	York-Presbyterian staff employees, the medical
4	office staff, and residents of the greater
5	Cortlandt community. Creating a vibrant sense
6	of place with outdoor green space and civic
7	space for the MOD users and the residents of
8	Cortlandt, providing for a dynamic mix of land
9	uses including complementary and accessory
10	commercial such as a coffee cafe, a healthy
11	eatery. The Gyrodyne plan includes this type
12	of complementary use with an outdoor terrace
13	area. And optimizing shared infrastructure
14	such as parking footprints being reduced to
15	reduce the overall impervious cover to allow
16	for adding additional green space and to
17	encourage connectivity and walkability amongst
18	the hospital, Gyrodyne, and the Evergreen Manor
19	Development. The first of two slides on
20	Gyrodyne's commitment to smart and responsible
21	development. The Gyrodyne plan is projected to
22	generate approximately 450 high-quality jobs,
23	and annual economic output of approximately \$80
24	million and an annual net increase in taxes of
25	approximately \$2.1 million. The project will



1 MEDICAL ORIENTED DISTRICT 2 generate over \$100 million of economic activity during construction with an estimated 600 3 full-time equivalent jobs. The Gyrodyne 4 development program will provide for community 5 engagement with arts and cultural programming, 6 a healthy living and wellness theme and 7 community connectivity. Approximately 5 acres 8 9 or 36 percent of the overall property will be open space preservation. Green infrastructure 10 11 implementation will occur throughout the 12 development with extensive native landscape The Gyrodyne plan is 13 restoration. approximately a \$90-million investment. 14 The 15 important consideration of phasing has been 16 closely studied by Gyrodyne. The proposed 17 construction build out in a single phase 18 implementation provides for an inherent phased deliverable with different building 19 20 construction types and differing occupancy 21 absorption rates resulting in an estimated 22 15-to-18-month duration between full occupancy 23 of the medical office building and the residential apartments. If construction was to 24 25 occur in a sequential or multi-phased manner,



MEDICAL ORIENTED DISTRICT 1 2 it is estimated that the overall construction duration would be extended by approximately 16 3 4 Constructing the medical office months. building and the residential building at the 5 same time avoids the requirement of a 6 7 construction access road directly off of 8 Buttonwood Avenue and shortens the typical impacts of construction noise and truck 9 10 traffic. A single phase construction approach 11 supports full implementation of offsite traffic 12 and related infrastructure improvements. 13 Community outreach: Feedback from a community meeting with the residents of the Buttonwood 14 15 Avenue community will be incorporated into the 16 site plan as the application moves forward. 17 Vehicular access both ingress and egress to and from Buttonwood Avenue will be removed from the 18 site plan. Only an emergency access will be 19 20 maintained. The proposed landscape buffer to the closest residential home will be increased 21 22 approximately a doubling in the buffer size. 23 The proposed walking trail amphitheater and 24 environmental education area on the east and north side of Orchard Lake will be eliminated. 25

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1 MEDICAL ORIENTED DISTRICT 2 The Buttonwood Avenue residents requested to Gyrodyne that the area be entirely passive. 3 A sustainable mixed-use campus plan. 4 The Gyrodyne Development Program is comprised of 5 100,000 square feet of state-of-the-art medical 6 office, a net increase of approximately 67,000 7 square feet with the existing 33,000 square 8 feet of medical office to be removed. 9 4,000 square feet of complementary commercial such as 10 11 a coffee cafe, healthy eatery, and 200 units of 12 market-rate residential apartments. The Gyrodyne plan has been developed as a 13 sustainable campus plan with complementary land 14 uses utilizing shared infrastructure resources. 15 16 The plan is not a traditional subdivision road 17 with individual development lots. It is a 18 cohesive and integrated campus layout with approximately 36 percent or 5 acres set aside 19 20 in open space. MOD place making: Our final 21 slide summarizes the key elements that create 22 the distinctive MOD vibrant sense of place. 23 Exemplary architecture: The MOD gateway 24 streetscape treatments and pedestrian 25 connectivity between the hospital campus,

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1 MEDICAL ORIENTED DISTRICT 2 Gyrodyne, and the adjacent Evergreen Manor 3 property. Landscaping re-vegetation at a 4 two-to-one replacement ratio, approximately 550 new native trees, green infrastructure, and 5 6 open space and civic space serving the entire medical-oriented district and the entire 7 8 Cortlandt community. On behalf of Gyrodyne, 9 thank you for this opportunity and we look 10 forward to moving this important initiative 11 forward. 12 MS. PUGLISI: Okay. Thank you for your 13 presentation. Who's next, Laroue? MS. SHATZKIN: One moment, Linda. 14 Next, 15 I'm going to be -- I'm so sorry, let me just 16 make Kevin an attendee again. Okay. Next up, 17 I'm going to invite David Steinmetz, Anup 18 Misra, I hope I'm saying your name correctly 19 and Glen Vetromile to join us as panelists. And we'll just take a moment for them to load 20 21 here. 22 MS. PUGLISI: He's speaking on behalf of 23 Evergreen; is that correct? 24 That's correct. THE WITNESS: 25 MS. PUGLISI: Okay.



1 MEDICAL ORIENTED DISTRICT 2 MR. STEINMETZ: Laroue, can you hear me? 3 MS. SHATZKIN: I can. Hi. MR. STEINMETZ: Madam Supervisor, may I 4 5 proceed? MS. PUGLISI: Yes. Mr. Steinmetz, 6 Thank you. 7 proceed. MR. STEINMETZ: Thank you so much. 8 Good evening, Madam Supervisor, members of the town 9 board. David Steinmetz from the law firm of 10 11 Zarin & Steinmetz. Pleased to be before the 12 board once again, representing the Evergreen Manor stakeholder, the Evergreen Manor aspect 13 of the MOD. With me this evening at this Zoom 14 15 public hearing, the master developer of the 16 site, Val and Mandy Santucci from VS 17 Construction. I'm also joined this evening, 18 and both of these individuals will be speaking, Anup Misra from Trammel Crow who is the sponsor 19 of the assisted-living and independent-living 20 21 component of our project will be addressing you 22 momentarily, as well as Glen Vetromile from the 23 Hudson Park Group. Glen is the sponsor of the 24 residential-rental aspect of the project. 25 Laroue, if you could go to the first of

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1	MEDICAL ORIENTED DISTRICT
2	the slides that I provided you.
3	MS. SHATZKIN: Absolutely.
4	MR. STEINMETZ: Terrific. So what you
5	have before you is a general site plan that
6	shows the Evergreen Manor site to the left, the
7	Gyrodyne site that Kevin just spoke about on
8	the right. Our client's property, Evergreen
9	Manor is 28 acres. It's located in the town's
10	R40 zoning district and as you can see, it
11	fronts along Route 202 at the at the bottom
12	crossing, crossing this slide. And as well as
13	having frontage along Lafayette which runs
14	north south and essentially separates the
15	Evergreen Manor site from the Gyrodyne site.
16	Our team have been active participants in the
17	town's MOD process really since its inception.
18	You've heard this evening some references to
19	the master plan or the comprehensive plan. We
20	participated and observed the envision
21	Cortlandt master plan process which did result
22	in and introduced the MOD as a development
23	concept that the town wanted explored. The
24	Evergreen team was formed and the Evergreen
25	team decided to present to the town the



1 MEDICAL ORIENTED DISTRICT concepts that were articulated in the 2 3 comprehensive plan. Now, we've already prepared in conjunction with the town a rather 4 extensive draft generic environmental impact 5 statement which is the subject of tonight's 6 public hearing. We also separately prepared a 7 video much like Gyrodyne's. It is available on 8 9 the town's website. We wanted tonight to just do a quick highlight of what we've discussed 10 11 previously.

12 Laroue, if you would be kind enough to go to the second slide. So what we've got here is 13 basically a focus on Evergreen Manor and our 14 site as an individual integrated site. 15 In the bottom left-hand corner is the first of five 16 17 portions of the development. Bottom left-hand 18 corner, you see two different buildings. That's the 114 units of proposed assisted 19 living and independent livings, living units 20 21 proposed by Trammel Crow and Anup will address 22 the specifics of the program, the concept and 23 the desire to work on the development of that 24 in a moment. The second site immediately above 25 that or technically to the south is the

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1	MEDICAL ORIENTED DISTRICT
2	residential component proposed in conjunction
3	with the Hudson Park Group. It's 166
4	residential-rental units of highly-amenitized
5	living, a variety of housings types that I'm
6	going to let Glen Vetromile describe. He'll
7	explain the layout, the parking, the building,
8	and why he is quite convinced that residential
9	rental is an appropriate use for that second
10	building site on on the Evergreen Manor
11	property. Continuing around clockwise, the
12	third site is a proposed location for a
13	100-room hotel and we have explored the concept
14	in the development of this hotel and it has
15	been studied in the in the DEIS along with
16	the other components. Continuing on the next
17	pad site, number four, is the medical, slash,
18	dental laboratory space as well as retail.
19	This is a smaller 30,000-square foot building,
20	divided, essentially: 15,000 square feet of
21	laboratory space, 15,000 square feet of
22	possibly some retail, a pharmacy, something
23	that would complement the other uses at
24	Evergreen Manor. And the fifth site to the far
25	right closest to Lafayette is proposed to be a



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1 MEDICAL ORIENTED DISTRICT 7,000-foot restaurant. The concept that you're 2 looking at in front of you with all five of 3 these sites is, essentially, an attractive 4 walkable community designed to integrate 5 sidewalks, landscaping, open space, stormwater 6 management, better traffic management, a 7 wonderful entryway at the signalized 8 intersection across from Conklin Avenue. 9 It's also designed to support the hospital. I think 10 11 we all know that the New York-Presbyterian 12 Hudson Valley Hospital is one of the true economic engines for the Town of Cortlandt. 13 And this was designed to complement and work in 14 15 conjunction with the hospital. In terms of 16 benefits for the community, unquestionably, it 17 would be the economic stimulation of the 18 creation of jobs. You've heard somewhat about that this evening already over 700 construction 19 20 jobs. Over 100 permanent jobs. Substantial 21 increase in permanent tax benefits both for 22 real property and sales tax benefits to the 23 Town of Cortlandt. It would provide a new supply of housing and as I said, earlier, we 24 genuinely believe this integrated community 25

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1 MEDICAL ORIENTED DISTRICT 2 would stimulate the local economy. All of that being done in conjunction with a proposal to 3 4 provide over \$3 million of offsite -- over \$3 5 million of offsite improvements. These improvements are essentially traffic 6 7 improvements that AKRF is going to describe 8 itself. These are improvements that AKRF 9 studied, analyzed, proposed, and designed. If 10 you could go to the next slide. One of the 11 comments that the -- please, the supervisor 12 mentioned is phasing. We've taken great pains 13 to make sure that this site would not be developed all at one time. In fact, the five 14 15 different pads are likely to be developed over 16 four to five and possibly even longer in terms 17 of years. It's at least a four-to-five-year 18 project. The road, the central spine road, is 19 proposed to be Phase 1 in conjunction with the stormwater infrastructure. The second -- and 20 21 that phase is probably a six- to-eight-month 22 phase. The second phase is the construction of 23 the assisted living, independent living and the 24 residential. That build out is no less than 18 25 You can go to the next slide, please. months.



1	MEDICAL ORIENTED DISTRICT
2	The third phase would be the hotel site. It
3	too is likely an 18-month build out. And then
4	the fourth and fifth phases would be the
5	laboratory building and the restaurant which
6	are probably no less than 12 months to build
7	each of those structures. So as you can see,
8	this site is designed to be built over a period
9	of time, to be absorbed over a period of time
10	to avoid the entire site being constructed all
11	at once. And all of this has been done after
12	we have had substantial meetings with members
13	of the public. My client has done a number of
14	community outreach meetings with the town as
15	well as separately and we look forward to
16	working in conjunction with the town, its
17	professional staff, and the members of the
18	community as we proceed with the Evergreen
19	Manor project. I'm now going to turn it over
20	to Anup Misra to focus very briefly on the
21	independent and assisted living. Thank you.
22	MS. SHATZKIN: Glen, perhaps you could go
23	first while Anup tries to work out
24	MR. VETROMILE: Sure.
25	MS. SHATZKIN: his audio issues.



MEDICAL ORIENTED DISTRICT

2 MR. VETROMILE: Hi. Glen Vetromile, the 3 sponsor of the residential component of this 4 project. I'm a 34-year resident of Westchester 5 with a number of projects throughout the 6 county, Tuckahoe, Fleetwood, Ossining, Dobbs 7 Ferry, and Port Chester. And happy to be in 8 Cortlandt. I think the location is ideal for multi family. The building we're talking 9 10 about, the -- would be highly amenitized. I'm 11 going to talk a little bit about people that I 12 think will go there. But the building will 13 have a fitness center, a yoga studio with a -a cycling studio is part of it, a -- what we 14 call a club room which will have a coffee area 15 16 and a big central fireplace with surrounding 17 seating, an outdoor pool, a billiards area, and small business center. We are also, again, 18 having an outdoor pool. The units themselves 19 all have walk-in closets in all the bedrooms, 20 21 bright window walls with lots of sunlight, 22 modern kitchens with induction rain tops [ph.] 23 -- range tops, very versatile heating and 24 ventilation and then contemporary bathrooms. The services that the building will provide 25

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1	MEDICAL ORIENTED DISTRICT
2	will have a front concierge with a refrigerated
3	room so that people can get, receive food
4	packages during the day for preparation like
5	Blue Apron or Hello Fresh. And then we are
6	looking at pet services because we think the
7	profile of many of the renters will have dogs
8	and cats and during their business day will
9	want a service where their pet can be have
10	sitting, walking, whatever. The I think
11	most importantly though are a description of
12	the profile of the renters. These kinds of
13	buildings become feeders for other residential
14	types in the town. The generation X,
15	millennials, who are in their 20s and 30s may
16	not have enough equity to buy a home but may
17	want to live in this town and so to attract
18	them so that those young people grow and learn
19	the town and then have have their own
20	families, these rental communities with all of
21	these amenities become big, attractive ways of
22	bringing those people in to Cortlandt versus
23	them going to Yorktown or some other area of
24	Westchester. So it's very important to have
25	new contemporary well-amenitized rental

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1 MEDICAL ORIENTED DISTRICT 2 properties and they will not be attracted to some of your garden style properties that were 3 4 built post war in the 50s or 60s. Don't have 5 the amenities, don't necessarily have covered parking, don't have bright, modern kitchens. 6 7 So it's very important to attract that profile 8 person to have contemporary rental. And then 9 as they -- couples potentially have kids, these 10 become very attractive to those families and 11 eventually they may want to buy a house with a 12 backyard when their kids become more mobile. 13 And also people in transition, people who may be renovating their home, moving from home to 14 home within the town or divorcees, these are 15 16 very important, highly-amenitized residential 17 projects to give these people something they 18 want. They don't want to move into an old garden apartment. Empty nesters, they also are 19 20 very attractive to empty nesters. People whose 21 kids have gone off to college. They may want 22 more time to travel. They're not tied to the 23 town to just take care of their home but they 24 have -- absolutely want to have a place in town 25 and may take the equity out of their house,



MEDICAL ORIENTED DISTRICT

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2	sell their house and buy a place in Florida and
3	spend some time in Florida during the course of
4	the year. Older singles also are very
5	attracted to this profile for similar reasons
6	as empty nesters but they also like the
7	congregate style of living where your neighbors
8	are in the building and then lastly, women tend
9	to like this form of housing because our
10	building will offer, you know, well-lighted
11	parking areas, well-lighted common areas, and
12	monitoring, security monitoring, and they find
13	this style of living very appealing to them.
14	And lastly, we we hold onto our properties,
15	we manage our properties, we hold onto our
16	properties for long term. We are not people
17	that build and sell. So, you know, maintaining
18	the properties well is something that we, you
19	know, do throughout our all of our projects.
20	MR. STEINMETZ: Thank you, Glen. Anup, do
21	you have audio now? No. I'm going to take one
22	minute and pinch hit for him very briefly
23	because I know we are going long. I'm going to
24	pinch hit for Anup. So just briefly Trammel
25	Crow for those of you that don't know, a

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1 MEDICAL ORIENTED DISTRICT 2 multi-billion dollar real estate development 3 They have extremely capable methods, company. 4 procedures, and concepts. They are very 5 excited to bring assisted and independent living to the Town of Cortlandt. 6 They are 7 proposing 89 assisted-living units, 31 8 independent-living units, the IL and the AL 9 units would be located each in its own 10 building. They have their own effective eating 11 Each building would be separately areas. 12 programmed with staff, activities, and the 13 For those of you that may have an aging like. family member or may in fact be aging in place 14 in the town, having a state-of-the-art, modern, 15 16 assisted or independent-living unit nearby is a 17 wonderful attribute and a great thing. As somebody who had my own father go from 18 19 independent living for a number of years and graduate into assisted living and be near 20 21 myself and my family, it's a wonderful thing to 22 have. We're excited about introducing it into 23 the Town of Cortlandt. And we're all pleased 24 to have Trammel Crow as a sponsor of this 25 aspect of the project. Sorry Anup could not

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1	MEDICAL ORIENTED DISTRICT
2	speak, but I know he wanted to share with you
3	the fact that Trammel Crow is ready, willing,
4	and excited to be an active employer and
5	provider here in the Town of Cortlandt and look
6	forward to going through the process together.
7	MS. PUGLISI: Okay. Thank you, David.
8	MR. STEINMETZ: Thank you.
9	MS. SHATZKIN: Okay. Thank you so much,
10	everyone. Please give me a moment while I
11	promote our next attendees who will be Anthony
12	Russo and Marissa Turallo from AKRF.
13	MS. PUGLISI: The town's traffic
14	consultant. (Pause) okay. What's happening?
15	MS. SHATZKIN: Okay. They're just
16	connecting, Linda. One more moment. Marisa,
17	can you hear me?
18	MS. TURALLO: Yes, I can.
19	MS. SHATZKIN: Great. And we're just
20	waiting for Anthony's audio to connect.
21	MS. PUGLISI: Okay. Great.
22	MS. SHATZKIN: Anthony, can you hear us?
23	MR. RUSSO: I can hear you.
24	MS. SHATZKIN: Okay. Fantastic. And
25	would you like me to put up the PowerPoint

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1	MEDICAL ORIENTED DISTRICT
2	slide?
3	MS. TURALLO: Yeah, that would be great.
4	MS. SHATZKIN: Great. Okay. Please go
5	ahead.
6	MS. TURALLO: Great. Thank you. So good
7	evening everyone. I'm Marisa Turallo, also
8	with me is Anthony Russo with AKRF. We are the
9	town's traffic consultant. We want to just
10	very briefly to summarize the scope of the
11	traffic study which AKRF conducted for the MOD
12	development DEIS. As shown on this
13	presentation slide at the moment, AKRF
14	evaluated the existing conditions of 23
15	intersections extending from the City of
16	Peekskill to the New York town border along
17	Route 2235 and in the surrounding area most
18	likely to be affected by the development near
19	New York Presbyterian hospital. As Route 2235
20	is controlled by New York State DOT within the
21	Town of Cortlandt, both the town and developers
22	are not able to make any improvements to these
23	roadways without approval from New York State
24	DOT. AKRF projected what the future traffic
25	volumes would be assuming no MOD development



1 MEDICAL ORIENTED DISTRICT 2 was constructed for the year 2021 which at this point is probably very close to what the 3 existing conditions were pre-Covid. This 4 included analyzing existing and proposed 5 developments in adjacent communities 6 specifically in the city of Peekskill and the 7 town of Yorktown and how those impact this 8 section of Route 202 in Cortlandt. 9 AKRF then projected what the future traffic volumes would 10 11 be with the proposed MOD development and based 12 on state quidelines. It carefully identified where significant impacts to the roadway would 13 be anticipated to occur with MOD development. 14 AKRF also developed potential improvement 15 16 measures to mitigate the identified traffic 17 They're feasible -- sorry. impacts. My screen 18 just shifted. They're feasible to address the These improvement measures 19 traffic impacts. also had to meet New York State DOT 20 21 requirements for implementation and they would 22 be required to be constructed at the onset of 23 the proposed development. We want to encourage 24 everyone to view the detailed traffic 25 presentation for the MOD development which is

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1 MEDICAL ORIENTED DISTRICT 2 located on the town's website which outlines 3 the full process and the key findings of the 4 traffic report in detail. In addition, we've 5 tried to touch upon some of the initial common questions we've heard over the last few months, 6 7 however, as the town board and staff have 8 stated, all comments received, including those 9 discussed in the presentation will be responded 10 to fully in the FEIS. Thank you. 11 MR. STEINMETZ: Thank you, Marisa. 12 MS. SHATZKIN: Okay. Does that conclude 13 your comments? MS. TURALLO: That concludes our 14 15 presentation, yeah. 16 MS. SHATZKIN: Okay. Thank you so much. 17 I'm going to put you back as attendees, and we will continue with our residents who have 18 19 signed up to speak. 20 MR. STEINMETZ: Thank you. 21 MS. SHATZKIN: Thank you for waiting so 22 patiently and thank you for your presentations 23 everyone. 24 MS. PUGLISI: Okay. So we are onto our

citizens, our public now.

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1	MEDICAL ORIENTED DISTRICT
2	MS. SHATZKIN: That is correct.
3	MS. PUGLISI: Okay. Good. Who's up
4	first?
5	MS. SHATZKIN: Our first resident is
6	Richard DeLorenzo. I'm sorry. Just one more
7	moment here. Richard, if you're here, could
8	you please raise your hand. If you're in by
9	phone, you can press star nine. Great. Thank
10	you. Richard, can you hear me? Given a raised
11	hand permission to talk, (914)4104410231. Is
12	that you, Richard?
13	MR. MISRA: No. That was Anup Misra.
14	MS. SHATZKIN: Oh, okay. Sorry. One
15	moment, Anup. Okay. Richard seems to not be
16	here at the moment. We will try to come back
17	to him at the end in case he rejoins.
18	Next up is Louis A. Picani, president of
19	the Teamsters 456 in Elmsford. Louis, can you
20	hear me? You are muted at the moment. Hold
21	on. Let me unmute you. I sent you an
22	invitation to unmute, Louis. Can you hear me,
23	Louis? I can see that you've joined us.
24	MS. PUGLISI: Is Mr. Picani there?
25	MS. SHATZKIN: He is. I can see him.

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1	MEDICAL ORIENTED DISTRICT
2	MR. CREIGHTON: Are you able to unmute
3	him?
4	MS. SHATZKIN: Yeah. I can click unmute
5	but it sends a request to unmute. He's got to
6	accept it. Louis, while you're working that
7	out, I will move to Salvatore Farina.
8	Salvatore, if you called in by phone, can you
9	please raise your hand. Oh, I see you're here.
10	One moment. Hi Sal, can you hear us?
11	MR. FARINA: Yes. Can you hear me?
12	MS. SHATZKIN: Yes, we can.
13	MS. PUGLISI: Yes, we can.
14	MR. FARINA: Okay. First, I want to thank
15	everybody for allowing me to speak again. I
16	did speak at the other meeting. And
17	MS. SHATZKIN: Sal, just for the record,
18	if you could please state your full name and
19	address.
20	MR. FARINA: Sure, Sal Farina,
21	F-A-R-I-N-A. 3 Northridge Road, Cortlandt
22	Manor, New York.
23	MS. SHATZKIN: Thank you.
24	MR. FARINA: Okay. Like I said, I wanted
25	to thank everyone for letting me speak again.



1 MEDICAL ORIENTED DISTRICT 2 Before I go into a couple of notes that I made, 3 I wanted to say that in the last meeting, I mentioned that we didn't receive any notices on 4 North Ridge Road or my neighbors in the 5 surrounding blocks. And again, we didn't 6 receive any notice of the meeting or the time 7 or what was going on. But I did send the email 8 9 to Linda who responded immediately and told me the when, the how, and the time that the 10 11 meeting was going to go on which I passed onto 12 my neighbors here and that I sent out emails and that I also posted on next door. 13 In the last meeting, also, I pointed out that 14 15 Northridge Road, Locust Avenue, and the roads 16 in between Northridge and Route 9 were not in 17 the traffic survey. I hope that they are in 18 the survey now or that they have been looked 19 As far as Gyrodyne who presented first, into. not to be redundant but I think that on the 20 21 13.8 acres of lands, the hundred thousand 22 square foot medical and the 200-unit buildings 23 is far, far too big as has been mentioned before. And I haven't seen them reach out or 24 25 try to make any changes in their plans for the

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1 MEDICAL ORIENTED DISTRICT 2 town or reach out to any of the citizens to 3 make changes in those plans. I also want to 4 point out that if you go onto like the Patch or 5 you just go on the Internet and you put Smithtown, New York, you'll see that the same 6 7 exact cookie cutter plan that they said was 8 presented to Cortlandt called the hospital Presbyterian for the Cortlandt residents to fit 9 10 with our town is the same exact plan that they 11 are trying to put in Smithtown, New York and at 12 this very moment that town is also fighting 13 against putting in that type of project. From the last meeting to this meeting, I did have a 14 phone call and an email from Val Santucci and 15 16 Mandy Santucci. I expressed my concerns. They 17 said they read things that I was quoted in 18 newspapers saying about the project. And they 19 wanted to reach out and I had a video conference with them and I expressed a lot of 20 21 my concerns. One, like no hotel. One like no 22 covered garages or garage buildings. Less 23 rental spaces, and more townhouses, more green 24 spaces for those townhouses. I really don't believe that there's a cradle-to-the-grave 25

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1	MEDICAL ORIENTED DISTRICT
2	scenario that works. I don't believe that
3	somebody rents an apartment and then they live
4	there and they move into the 55-plus and then
5	from the 55-plus go to the assisted living. I
6	find it hard to believe that somebody 25 years
7	old wants to live next to somebody 55-plus and
8	vice versa. I think it would be much better if
9	we had more townhouses for 55-plus, more
10	assisted living and less rentals. I expressed
11	these concerns, I also spoke with Tom Walsh
12	who's been very involved with the town and
13	trying to move this more this plan more
14	towards a marriage between town and progress,
15	let's say. They did come back to us again and
16	then this time they came back and spoke to both
17	of us. And I feel like they're making an
18	effort to address those concerns. I seen
19	tonight that the same plan was put up but I
20	feel that through our conversations, now, I'm
21	speaking for myself, through our conversations
22	that I believe that they did hear us and I do
23	believe that they're going to make a serious
24	effort to try to modify those plans and try to
25	bring something that's better suited for the

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1	MEDICAL ORIENTED DISTRICT
2	surrounding community. Like I said, I don't
3	believe in all this retail space also. You
4	have 4,000 in one project, 7,000 in the other.
5	So you have 11,000 square feet of retail space.
6	If you just go to the beach shopping center,
7	you can see there's seven empty stores. If you
8	go down 202 from the hospital, say all the way
9	down to the Old Grandma's Restaurant, there's
10	another nine empty spaces. And then if you go
11	to Route 6 there's a number of spaces that are
12	empty there. So I think a lot of retail space
13	in a place where most people are ordering
14	online now that we are sheltered in place, I
15	don't know about you guys, but, I have Peapod
16	delivering, I have Amazon boxes that the town
17	probably upset, probably have so many of them
18	that I put out. And a lot of a lot of
19	retail does go on online. So I think before we
20	move ahead with all these great retail spaces
21	and expanding, we have to modify that also.
22	As far as the medical buildings, I think
23	the medical buildings make sense. It works
24	along with the hospital. I think town houses
25	make sense because people have skin in the

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1	MEDICAL ORIENTED DISTRICT
2	game. It is a community. It is a town. And I
3	think it puts less of a burden when you have a
4	senior senior living on the the schools.
5	I think it puts more tax revenue into the town
6	because you have people that are older that
7	either are retired or maybe still have a
8	business, but you have more older money coming
9	in. I understand that this big push for like
10	young people for rentals and it's so important,
11	but I don't think at the scale that they are
12	trying to put in. Again, I like to thank
13	everybody for letting me speak again. I don't
14	want to take anyone else's time, but I do feel
15	that some people are trying to make some
16	changes, and I think in the spirit of
17	compromise and goodwill, I think maybe some of
18	those changes will come through. If they
19	don't, you know, then I'm wrong. Which I don't
20	mind if I'm wrong, but I think maybe some of
21	those things will come through and I think
22	maybe it will be better for the town. Thank
23	you.
24	MS. SHATZKIN: Thank you so much Mr.
25	Farina. Thank you.

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1	MEDICAL ORIENTED DISTRICT
2	Mr. Picani, can you hear us? And then Mr.
3	DeLorenzo, I did find you and I will bring you
4	up next. Mr. Picani, can you hear us? (Pause)
5	Okay. Mr. Picani, I still have you with
6	permission to talk. If you get it worked out,
7	please do let me know. For the moment, I'm
8	going to move onto Mr. DeLorenzo. One moment.
9	Okay. Mr. DeLorenzo, I've given you permission
10	to speak.
11	MR. DeLORENZO: Yes. Can you hear me?
12	MS. SHATZKIN: Yes, we can.
13	MR. DeLORENZO: Oh, okay. My name is
14	Richard DeLorenzo. I'm at 2 Ogden Avenue,
15	which is directly across Route 202 from the
16	Evergreen Manor proposed MOD development. And
17	my request is a simple one, and that is the
18	be considered as part of the MOD and to so
19	that I have a medical zone for my property.
20	Under this town code Section 307-60 which
21	provides currently for medical offices, it says
22	the purpose of this section is to allow for
23	medical office buildings to serve the needs for
24	medical care residences of the town. And
25	there's three requirements to do that. And I

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MEDICAL ORIENTED DISTRICT

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had a contract with a doctor with a surgeon
to to buy my property, and we went for the
planning, both the planning and zoning boards,
and we met the three requirements which are
frontage state highway, which I have Route 202,
located within a thousand feet of the hospital,
which I have. I'm 500 feet from the hospital,
and minimum area of 20,000 square feet which I
did not have, but we got a variances from the
zoning board. So we met all the requirements.
However, the process took over a year to get
the planning and zoning board. We had to get
topographical maps; we had to have our
architectural review many conferences with the
town. We had to have a arborist come in to
look at the all the trees. Close to
\$20,000, and we finally got the approval from
the town for a medical use. However, at that
point, the doctor had waited too long and we
he backed out of the of the deal. So I'm
left with this property. Now, they do have
this permit for medical use. However, it
expires I believe after a year. So it's not a
permanent thing. What I'm requesting is to be



1 MEDICAL ORIENTED DISTRICT 2 part of the -- there's only like a couple of 3 properties that are in this category, 307-60. 4 And to be part of the MOD and to -- to have a residential zone since I'm so close to the 5 hospital and -- and I would like to -- I would 6 7 like to be part of the MOD zone. So that's my 8 only request for you. So thank you. 9 MS. PUGLISI: Okay. Thank you, Dick. Go 10 ahead. 11 MS. SHATZKIN: Thank you so much, Mr. 12 DeLorenzo. Mr. Picani has -- can you turn off 13 your mute? I'll send you an invite for it. Then when 14 it's been sent -- okay. I will move to the 15 16 next individual, John Quartucio -- oh, I'm 17 sorry. Can you please raise your hand, John. 18 I'm not seeing you in the attendees. 19 MS. PUGLISI: Are you there, John? 20 MS. SHATZKIN: Great. Yes, he's 21 connecting now. John, I've given you 22 permission to speak. 23 MR. QUARTUCCIO: Thank you very much. Good 24 evening, my name is John Quartucio. I live at 9 Blake Lane. Good evening, Madam Supervisor, 25



MEDICAL ORIENTED DISTRICT

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2 members of the town board, town officials and Thank you for the hard work to bring us 3 staff. to this point. I've lived in Cortlandt for 4 more than 30 years and with my wife, we've 5 raised our two children here and I appreciate 6 very much the opportunity to share in the 7 discussion regarding the medical-oriented 8 9 district. When the proposal came to the forefront and the information flow and 10 11 discussion flourished, we are very excited to 12 see that the plans as envisioned in the master plan adopted in March of 2016 had finally come 13 to fruition and we arrived at a point in time 14 15 when the draft environmental impact statement, 16 after years of preparation and review by many 17 government agencies and our own traffic study 18 consultant -- commission in 2015, is now before the board and ready to call for a vote and 19 20 approval at least at this initial phase. Ι 21 think that the -- we think that the move --22 this will move us forward and --23 MS. SHATZKIN: John, you've -- we can't 24 hear you. 25 MS. PUGLISI: Is everybody stating their



1	MEDICAL ORIENTED DISTRICT
2	name for you, Laroue? Everybody states their
3	name and address. That's important for the
4	record. Can we get this gentleman, John, back
5	on? Is he
6	MS. SHATZKIN: Yeah, I know he's still
7	connected.
8	MS. PUGLISI: Did he mute himself by
9	mistake perhaps?
10	MS. SHATZKIN: No, he's unmuted. Okay.
11	John, I'm going to mute you for a moment oh,
12	and he got this there he is. Let's allow
13	him to talk. Okay. John seems to have been
14	disconnected. We are going to move onto the
15	next person. John, I will try to come back to
16	you.
17	Mr. Tom Walsh. Tom, I have given you
18	permission to speak. Oh, Mr. Picani, I see
19	that you've unmuted. Is your audio working?
20	UNIDENTIFIED SPEAKER: No, you're giving
21	permissions to the wrong person. This is not
22	Tom Walsh.
23	MS. SHATZKIN: Oh, okay. No problem.
24	MS. PUGLISI: Okay. Who are we hearing
25	from, Laroue, please?



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1	MEDICAL ORIENTED DISTRICT
2	MS. SHATZKIN: Okay. Tom, can you please
3	raise your hand. Tom Walsh, if you're
4	connected.
5	MS. PUGLISI: Okay.
6	MS. SHATZKIN: Oh, I see. Okay. Can you
7	hear us?
8	MR. WALSH: Yeah. Can you hear me?
9	MS. SHATZKIN: Great.
10	MR. WALSH: Perfect.
11	I just want to start off with thanking
12	Supervisor Puglisi and the town board members
13	for all your hard work in these most
14	challenging times we are all facing. I do
15	appreciate all the updates that we have been
16	receiving from the town and phone calls and
17	emails. It is greatly appreciated. Most of my
18	questions and concerns, the MOD zoning
19	ordinance and both developments have already
20	been put in the record in the previous public
21	hearings and via email. I do look forward to
22	seeing all of our comments addressed in the
23	final design impact statement. Before the
24	lockdown began, I did meet with representatives
25	of Gyrodyne to discuss the designs but have



1	MEDICAL ORIENTED DISTRICT
2	heard but I've not heard from them since
3	that last meeting. As Sal said most recently,
4	I have met we have met with Val and Mandy
5	Santucci to discuss the Evergreen development
6	site. I do appreciate the time they took to
7	reach out to me and several other members of
8	the community to explain their designs, the
9	reason behind the designs and how they proceed
10	with the construction of their project. I do
11	still feel their hotel, office, retail and
12	restaurant buildings are not needed and out of
13	character of the existing neighborhood and the
14	current zoning of the Evergreen site. I feel
15	these uses can be obtained in other commercial
16	areas of the town, maybe within the Heindrick
17	Hudson school district which is in desperate
18	need of additional tax revenue since they are
19	looking at a 24 million-dollar budget deficit
20	going forward. I hope the Santuccis will be
21	good neighbors and address our concerns with a
22	more realistic development for our residential
23	neighborhood. As I was (indiscernible) with
24	the Gyrodyne site as designed is too dense of a
25	parcel and it's news to me now they're having a

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1 MEDICAL ORIENTED DISTRICT construction entrance on Buttonwood, that's 2 3 first time I've been hearing of that proposal other than the entrance that they had and not a 4 construction entrance during the whole process. 5 You know, with the installation of a crossgate 6 to appease us, but a number of parking spaces 7 proposed are still not in compliance with the 8 9 draft MOD ordinance. The overflow of parking is going to be pushed over to Buttonwood Avenue 10 11 since it's only a short 25-foot buffer. Also, 12 the zoning MOD ordinance does not allow for 13 shared parking. So they must provide the required number of parking spaces as defined 14 15 under the proposed zoning ordinance or reduce 16 their scope for compliance. I still strongly 17 support the re-drawing of the MOD zoning map to exclude all lots that abut Buttonwood Avenue. 18 Lastly, I want to remind the town board that 19 20 under the MOD zoning ordinance Section 6A 21 strict compliance, Paragraph 2 states any of 22 the developments do not create an undue adverse 23 effect in abutting properties. Currently designed, both developments do not need this 24 25 proposed zoning ordinance. That's all I have.



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1	MEDICAL ORIENTED DISTRICT
2	Thank you guys for your hard work and I look
3	forward to the next phase of this process.
4	MS. SHATZKIN: Thank you so much. And
5	just for the record, can you please state your
6	address.
7	MR. WALSH: 260 Buttonwood Avenue.
8	MS. SHATZKIN: Great.
9	MS. PUGLISI: And for the record, I love
10	the picture of the kids. They're beautiful.
11	MR. WALSH: Thank you.
12	MS. SHATZKIN: Okay. We're going to try
13	again, Mr. Picani. I do see that you are
14	unmuted. Can you hear us? No. Okay. I'm
15	going to give the Weinbergers permission to
16	speak okay. David Weinberger, I'm giving
17	you permission to talk. If you unmute
18	yourself. I sent you an invitation to unmute.
19	It is your turn. Hi, David. Can you hear me?
20	David? Okay. Well, David is getting that
21	worked out. We will go to our next, John
22	Vesce. John, I will give you permission to
23	talk.
24	MS. PUGLISI: Who are we on now, Laroue,
25	please?



1 MEDICAL ORIENTED DISTRICT 2 MS. SHATZKIN: David Weinberger. So far, his audio is not working. 3 MS. PUGLISI: Okay. 4 MS. SHATZKIN: And I just allowed John 5 Vesce to join. John. 6 Thank you. Thank you. MS. PUGLISI: 7 MS. SHATZKIN: Can you hear us? 8 9 MR. VESCE: Yes, I can hear you. Can you hear me? 10 11 MS. SHATZKIN: Yes, we can. Please. Go 12 ahead, John. MS. PUGLISI: 13 Yes. MR. VESCE: Good evening board members and 14 15 Madam Supervisor. My name is John Vesce Junior. I live at 1460 Elm Street Peekskill 16 17 New York. And one would ask the question what 18 is a resident of Peekskill getting involved in testifying to the -- to the pros of this 19 20 project that I've been watching on -- actually, 21 I was quite aware of it before that. And I can 22 only say that I've been a resident of Peekskill 23 for all 67 years of my life. My family is -dates back to the '40s in Peekskill. And I can 24 only say that I have for the -- since 1995 25



1 MEDICAL ORIENTED DISTRICT 2 through 2015 commuted to Larchmont, New York 3 where my company at the time was centered. And 4 now the last five years, I'm in the wine 5 business, I'm an importer. My company is at 7 World Trade Center in Manhattan and I've 6 7 commuted fairly most of the time and with Route 8 9 being a disaster more or less over the years, 9 I've tried to come out Crompond Road and I've 10 met some additional problems. Obviously, 11 trying to get to the Taconic. And I see this 12 particular project as opening up from the 13 hospital or from the beach shopping center all the way to the Bear Mountain Extension, a 14 15 pretty needed changes and improvements. 16 Interesting, I grew up in the area and for all 17 my life, I saw the improvements on Route 6 through the Town of Cortlandt and of course up 18 19 towards Mohegan which is still a bottleneck, but I've never seen anything done with Route 20 21 202 or as I grew up Crompond Road. My aunt 22 lived at the corner of Taylor Avenue in 23 Crompond Road just up the hill from where right 24 in the middle of this a block up from Ogden,

and I remember sleeping over my aunt's house

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1 MEDICAL ORIENTED DISTRICT 2 and it's interesting 65 or 64 years later, the 3 road is still the same. My -- my home -- from my garage door to the entrance of the hospital 4 is 1.2 miles. So for some of those that live 5 in Cortlandt that don't even live in the area, 6 I'm just about as close as Buttonwood and so on 7 and so forth up the Crompond Road towards the 8 9 Cortlandt Lanes. So I can only say from reading and seeing what I've seen that this 10 11 development plan, if it increases the -- fixes 12 the traffic and the lights, it would be fantastic for (indiscernible) Peekskill go up 13 east towards the Taconic. Plus, it would also 14 15 open up a pretty good access for the hospital 16 to go up Crompond Road and catch the -- the 17 Bear Mountain Extension which they could go 18 then west and then south rather than go through Peekskill to get to Route 9 and Route 9A to go 19 20 south. So I see that it's got some interesting 21 things for motorists and I see all the other 22 things that -- some pedestrians and so on and 23 so -- I'm not sure about the buildings, that's for you guys to work out. But as far as 24 25 somebody that drives the road every day and

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1	MEDICAL ORIENTED DISTRICT
2	more and more and more, if I'm not working I
3	travel out to Yorktown. It would be welcomed,
4	the improvements that I see that are on the
5	board, on the development board's plan. That's
6	all I have to say. I appreciate everybody
7	everybody's comments and thank you for the time
8	or I could speak in the positive for this
9	particular hopefully the particular
10	improvements on the traffic. Okay.
11	MS. PUGLISI: Okay. Thank you so much for
12	joining us. Thank you.
13	MR. VESCE: Yes.
14	MS. SHATZKIN: Thank you so much, Mr.
15	Vesce.
16	Mr. Weinberger, I have connected you via
17	the phone. You're muted right now. Can you
18	hear us?
19	MR. WEINBERGER: I can hear. Can you hear
20	me?
21	MS. SHATZKIN: We can hear you. Go right
22	ahead. Please state your address for the
23	record.
24	MR. WEINBERGER: Thank you. My name is
25	David Weinberger. We live at 3 Birchwood Lane



1 MEDICAL ORIENTED DISTRICT 2 which is off Tamarack in close proximity to the 3 proposed MOD. After spending considerable time reading the planning documents including many 4 appendices and the entire envisioned Cortlandt 5 sustainable comprehensive plan, it is clear 6 that the proposed plans are too big, too dense, 7 too insensitive to the character of the 8 adjacent residential neighbors, will generate 9 too much traffic, will cause more environmental 10 11 harm than good. There is nothing in the plan 12 to support older residents who wish to age in place in their own homes. 13 The plans are designed for the benefit of the developers, not 14 15 for the town, and not for the residents. Even 16 worse, the plans will not succeed for two 17 important reasons. First, as proposed, there 18 is no connection to MOD medical goals, and no basis to expect that MOD goals will be 19 20 achieved. As it stands, we know absolutely 21 nothing about better integration of care, 22 better spectrum of services, high quality of 23 healthcare, reduction of healthcare costs and 24 improvements in patient outcomes. In my submitted comments, I raised numerous questions 25

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1 MEDICAL ORIENTED DISTRICT 2 about the connection of the MOD goals to the 3 I look forward to the responses by the plans. 4 developers or others for how the proposals will 5 accomplish each of these plans. I expect many of my neighbors as well as you and the town 6 board will share that interest. 7 Second, let's 8 not forget that the M in MOD stands for 9 Medical is hospital. Without the medical. 10 hospital, there can be no MOD. The MOD in the 11 envisioned Cortlandt plan defines MOD as using 12 partnerships between the hospital and private 13 practices and other complementary uses in one central area. At the January 14th meeting, 14 15 Supervisor Puglisi stated that New 16 York-Presbyterian is not participating at this 17 time. Without the hospital, there are no 18 partnerships, no expectation of success and 19 therefore no reason for a MOD and no need for zoning changes. It goes beyond NYP being 20 21 missing in action. The real issue is we can 22 only make sense of the MOD with public 23 transparent information about New 24 York-Presbyterian plans for the existing campus on the north side of 202. Their intentions and 25



1 MEDICAL ORIENTED DISTRICT actions affect density, traffic, the 2 3 environment, the economy and the social well-being of our community. Without knowing 4 intentions for the north side of 202 and what 5 would be in the MOD zoning, we are trying to 6 make decisions about the south side of 202 in a 7 We might as well just cover our eyes 8 vacuum. 9 and ears and walk into traffic. Without public 10 transparent participation by New 11 York-Presbyterian, there should be no MOD and no zoning changes. 12 Last point, without a complete plan, well 13 defined outcomes, and final approvals, the talk 14 15 about phased implementation to ease our 16 concerns about the MOD has the opposite effect. 17 Without a complete plan, phased implementation 18 could easily result in start and stop work. That's just a foot in the door for developers 19 20 to leverage undesirable or unapproved outcomes. 21 Alternatively, we could end up with an 22 incomplete project that is a community eyesore. 23 Phased implementation is a solution that is premature and not a replacement for good 24 25 planning. Thank you.



1	MEDICAL ORIENTED DISTRICT
2	MS. PUGLISI: All right. Thank you so
3	much. Good points.
4	MS. SHATZKIN: Thank you very much. Our
5	next resident is Thomas LaPerch. Thomas, I'm
6	giving you permission to talk.
7	MR. LaPERCH: Hi, good evening, can you
8	hear me?
9	MS. SHATZKIN: We can.
10	MR. LaPERCH: Oh, good evening. Well,
11	thank you. It's a long meeting. My name is
12	Tom LaPerch. I live at 18 Baltic Place,
13	Brewster, New York. I am a director of the
14	Houlihan Lawrence commercial group and I've
15	been working with the Santuccis for the last 30
16	years and I'm calling in support of their
17	application for the MOD. I know you have a
18	long agenda and I'll be real brief. I think
19	that there the MOD makes sense for a
20	planning view and an economic standpoint. It
21	addresses smart growth. It brings important
22	tax revenues and employment generators to the
23	town. My part-time job is also a planning
24	board member in a local community and so I know
25	the challenges that you are faced, but I think



1 MEDICAL ORIENTED DISTRICT 2 you would be going about it the smart way. And I think that this makes a lot of sense as a 3 live-work community. And so I appreciate the 4 opportunity to speak to the board members and 5 thank you for the time. 6 MS. PUGLISI: Thank you very much. 7 MS. SHATZKIN: Thank you Mr. LaPerch. 8 Our next resident is John DeBenedictis. 9 John, I've given you permission to talk. 10 11 Can you hear us John? 12 MR. DeBENEDICTIS: I can hear you. Ι don't know if --13 MS. SHATZKIN: Excellent. 14 15 MR. DeBENEDICTIS: I don't know if you're 16 hearing me. Are you --17 MS. SHATZKIN: We are. Please continue. 18 MR. DeBENEDICTIS: Okay. Thank you. Good evening. Nice to see everybody again. 19 It's 20 been a while. You know, I guess we ought to 21 call these things the continuing flight of the 22 Phoenix, you know. Just when these old birds 23 have been cooked and burned, they come out of 24 the ashes again. You know, this is just a big 25 huge project. And it does have a couple things



2 that are worthwhile. I think starting right 3 with the assisted living. Anybody who knows if 4 you've had to find one for someone in your family, they're not easy to find. 5 6 Unfortunately, they're usually priced that only 7 the idle rich could live there. Hopefully, 8 this could be a facility that is a little bit more reasonable for people. I think that one 9 10 of the things that has to be done or should be 11 done with anything that goes on however this 12 thing ends up, is that we need to take care of 13 some veterans. It's really nice today everybody says thanks guys, you know, you guys 14 15 have been all right, you got your brains blown 16 away and everything else but let's say thank 17 you by providing them with some housing. And 18 believe me, Vietnam era veterans are really in need of housing of all kinds. You know, and 19 20 usually what happens is we end up saying, well, 21 here we are going to give -- 160 units we want 22 to build, we'll give two of them, let veterans 23 go. That's not going to work. We need to give 24 a substantial number to veterans. Okay. **All** these housing units themselves, there's a lot 25

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1	MEDICAL ORIENTED DISTRICT
2	of them. And each one of them is going to
3	bring two cars, they got a kid or something,
4	you know, probably bring three but that there
5	will be at least two cars there. I don't know.
6	I don't know what you plan on doing to improve
7	the roads but, you know, you are going to have
8	to do a huge amount of improvement to put 500
9	cars or whatever happens a day on that thing.
10	That's not going to help much. You know. And
11	as far as the medical arts building goes, I
12	haven't got a clue. I'm going to leave that to
13	a professional like Doctor Becker, his
14	associates. They could tell us whether you
15	need 100,000 square feet of medical arts
16	buildings, you know. I don't know what the
17	size of those buildings are down on Westchester
18	Avenue, but, you know, you see there's quite a
19	few of those medical arts buildings along
20	Westchester Avenue in White Plains. I don't
21	know what the size of those babies are, but
22	whatever. But like I said that's for the
23	professionals to tell us whether we need it.
24	It's certainly not the developers. Okay. I
25	know the town would like some sort of



1 MEDICAL ORIENTED DISTRICT 2 development in that, but let's let the 3 professionals tell us the size. Okay. And 4 like I said, much -- way too many units. Τ mean that -- that just has to -- you don't have 5 to be a, you know, have a PhD in traffic 6 7 studies and everything else. If you throw that 8 many cars out there, it's going to be 9 congested, you know. A hotel, I don't know. Ι 10 quess there's a lot of new dollar stores in 11 Peekskill. I guess, you know, maybe they will 12 be doing tours of the empty storefronts in 13 Peekskill. I don't see they'll need a place to stay. It doesn't seem like it's necessary. 14 It 15 really doesn't. And as far as all that open 16 space and amphitheaters and stuff like that, 17 you are just going to take away good land, probably clear-cut the thing and make it look 18 19 like a bombing. You went through there and you'll kill everything that's alive in that 20 21 whole piece of property. You know, it needs to 22 be scaled down some. It really does. But like 23 I said, it's not all bad. You know, if we --24 could use the medical arts buildings, certainly

could use the assisted living. If you need to

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MEDICAL ORIENTED DISTRICT

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put in a few rental apartments or townhouses whatever you'd like, that's not too bad. But certainly not on the scale that this is going for, way too many.

And, you know, I think -- I think the town 6 needs to apply the old common sense rule. 7 Does any of this stuff make any common sense? 8 You 9 know, do we need this many of that, you know? And there's something for everybody in this 10 11 thing. I mean, you know, you want to -- you 12 want to live in an apartment, we got it. You want to go see a doctor, we got it. 13 You want some traffic congestion, we got it, you know. 14 15 And finally, of course, we're looking to rezone 16 residential property again I guess. And I've 17 been asking you guys to rezone my residential 18 property in my backyard for years. So I put that jet engine repair shop back there. 19 And nobody wants to do that. Again, residential 20 21 property is residential property. So I think I 22 do wish the town would take a real good long 23 common sense look at this. And, you know, use the couple of things that are good on it and 24 25 then really re-evaluate the rest of it. Ι

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1 MEDICAL ORIENTED DISTRICT 2 quick wanted to state if anybody was in the rooms at those meetings -- meetings, saw how 3 many of our town residents were there and were 4 -- it was obvious to me -- were against this 5 development as it's being proposed. 6 I'm kind of curious as to how many people have called in 7 including Peekskill residents that are for this 8 9 development? It's rather interesting to me. With that said, I sent an email to the clerk 10 11 today with seven questions. I'll read six of 12 them into the record tonight because one of them was about the traffic study a couple other 13 people brought up. So let me just go through 14 15 this quickly so we can get through. 16 First of all, the hospital and medical offices that are on the Gyrodyne property now

17 18 were allowed via special permit back in the 1970s and '80s. What I want to know is why is 19 20 the board considering rezoning and changing the 21 law for the MOD rather than just issuing a 22 special permit again? Second: It's my 23 understanding that one of the other town boards did ask for a traffic study that was updated. 24 I was wondering if there's an idea when this 25

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1	MEDICAL ORIENTED DISTRICT
2	would be done or if it was done during the
3	Covid shutdown, which would be of no use.
4	Third question: Since nursing homes and senior
5	living facilities were a hot bed of
6	transmission of Covid, has the board considered
7	the overall health and safety of the town
8	citizens that live and work near the proposed
9	MOD area? Four, I'm highly skeptical that
10	there will be a net benefit to the town with
11	regards to tax revenues. Considering the size
12	and scope of the proposal, I'm sure that
13	additional town employees and services will be
14	needed and those salaries and subsequent
15	pensions will completely erode any increase in
16	tax revenue that the MOD will bring in. I
17	really think that an independent study should
18	be done on this. Next, in Section 179-1A Parts
19	1 and 2 of 1 and 2 of the town code, I
20	paraphrases and states the preservation of
21	wetlands, water bodies and other natural
22	resources are necessary to protect the health,
23	safety, and general welfare of present and
24	future residents. The MOD proposal flies in
25	the face of this existing legislative intent

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1	MEDICAL ORIENTED DISTRICT
2	and should never had even been considered.
3	Six, Mr. James Creighton was instrumental in
4	the development of the MOD proposal as it is
5	written in the envisioned Cortlandt document.
6	I believe his judgment with regards to this
7	matter is compromised and he should recuse
8	himself for any from any final vote.
9	MR. CREIGHTON: Are you asking
10	MR. RUSSO: Lastly
11	MR. CREIGHTON: the town supervisor as
12	well?
13	MR. RUSSO: Lastly
14	MR. CREIGHTON: Thank you.
15	MR. RUSSO: Myself and my neighbors are
16	intending to request either a permissive
17	referendum and/or a super vote on the MOD
18	proposal. We're in the process of obtaining
19	signatures and we request that the town
20	attorney advise us as to the rules regarding
21	the acceptability and the total number of
22	signatures needed.
23	MS. SHATZKIN: Okay. Does that conclude
24	your comments, Mr. Russo?
25	MR. RUSSO: If I could just ten more



1 MEDICAL ORIENTED DISTRICT 2 To paraphrase Henry David Thoreau, I seconds. was reading this the other day and I'm just 3 4 going to paraphrase it real quick. If myself or my neighbors spend an hour or two each day 5 enjoying the woods and wildlife around us, we'd 6 7 be in danger of being considered loafers, but 8 if Mr. Santucci, Mr. Steinmetz, and the 9 Gyrodyne people spend the whole of their entire 10 days as speculators shearing the woods and 11 making the earth fall before its time, they are 12 considered enterprising and industrious 13 citizens. I hope that the town board sees this for what it is and really considers the -- the 14 15 health and well-being of the people on 16 Buttonwood Avenue and the rest of the people 17 that are already residents of this town. That 18 concludes my comments for tonight. Thank you. 19 Thank you so much, Mr. MS. SHATZKIN: Russo. Our next resident is Terin Fitzgerald. 20 21 Terin, you had originally said you had 22 joined via video. I saw you earlier, I'm not 23 seeing you right now. Oh, there you are. Hold 24 on one moment. Okay. Terin, I have given you 25 permission to speak. Can you hear me?

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1 MEDICAL ORIENTED DISTRICT 2 MS. FITZGERALD: I can. Can you hear me? 3 MS. SHATZKIN: Yes, we can. Please qo ahead and state your address for the record. 4 5 MS. FITZGERALD: Sure. Terin Fitzgerald 232 Buttonwood Avenue. And thank you, Madam 6 Supervisor, members of the board, thank you 7 very much for letting me speak this evening. 8 9 We've all been living in a fog for the last 135 days or more. Our feet are not planted, our 10 11 emotions are high. Our focus is going in so 12 many different directions. We're thinking about lost loved ones, the possibility of 13 contracting the virus, our future, voting, 14 15 schooling, vocations, safety, our neighbors, 16 the rallies, wearing masks, and mental health. 17 Similar to -- it has been an emotional 18 rollercoaster and we are all very distracted. MS. SHATZKIN: Terin, you are breaking up 19 20 a little bit. 21 MS. FITZGERALD: So I don't know what you 22 heard last. I'm saying it's been an emotional 23 rollercoaster and many of us have been very distracted. Many of us are on our computers 24 25 daily, and our devices more often than we'd

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1	MEDICAL ORIENTED DISTRICT
2	like to be. Am I coming through okay? Yes or
3	no?
4	MR. FARRELL: Yes.
5	MS. FITZGERALD: Uh-hum. So while others
6	don't have devices and aren't able to be here
7	tonight, they are not able to go onto Zoom, I'm
8	thinking about the MOD at this point. With all
9	the challenges that we are experiencing, many
10	of us are not able to think about the MOD. I'm
11	just suggesting that the board delay any
12	further meetings until we have our come to
13	some normalcy in our lives. Our schools
14	reopen, until our teachers are back in their
15	classrooms, until our children are attending
16	school. We all want to be rational and make
17	good decisions about the MOD. But this is not
18	the right time to focus on it. And that's my
19	comment.
20	MS. PUGLISI: Thank you. Good comments.
21	Thank you, Mr. Fitzgerald.

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MS. SHATZKIN: Thank you so much, Mrs.
Fitzgerald.

24Our next speaker is Stacy Rivera. Stacy,25I've given you permission to speak.



1 MEDICAL ORIENTED DISTRICT 2 MS. RIVERA: Hi, can you hear me? 3 MS. SHATZKIN: Yes, we can. Please qo ahead. Stacy, please state your address for 4 the record. 5 MS. RIVERA: Good evening, Stacy Rivera, 6 246 Buttonwood Avenue. Good evening, Madam 7 Supervisor and Cortlandt board members and 8 9 Cortlandt residents. Thank you so much for giving me the opportunity to speak this 10 11 evening. I'll be addressing new issues versus 12 the ones I have expressed at all the other public hearings we've had. I appreciate all 13 that you have done to keep our community 14 15 connected during these trying times. But this 16 is not the time to make any major changes for 17 our community. These past few months have 18 created struggles that many of us were not prepared for. Our lives changed overnight from 19 20 losing jobs, working from home, caring for our 21 children 2/47, fearing COVID-19, getting 22 COVID-19, losing people we love to COVID-19 and 23 In one way or another, we have so much more. all become more vulnerable because we are 24 25 breathing experiences, money, companionship



1 MEDICAL ORIENTED DISTRICT 2 and/or loss of people we loved. Many 3 professionals would recommend to avoid major 4 changes when vulnerable due to grief and loss 5 which is why tonight I beg of you to consider 6 Cortlandt Manor as people as the community that 7 I am sure each of you love. We are not at a 8 place to make such major decisions and changes 9 to our homes and our town. I would also like 10 to continue with the same idea of how the 11 pandemic has affected not only our community 12 but the world. We have learned that COVID-19 13 affected more dense areas. This proposal to add apartment buildings, assisted living, 14 15 hotels, would only create a more dense area within Cortlandt. It will only impact -- it 16 17 will not only impact traffic, residential 18 zoning, and the environment, but it will make 19 us more vulnerable if there is a second, a third, or who knows how many waves of this 20 21 deadly virus. So please, put Cortlandt's 22 health and safety into consideration during 23 this vote. I beg you to reconsider, to slow 24 down, and not make any major decisions until we are past this health crisis. Thank you so much 25

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1	MEDICAL ORIENTED DISTRICT
2	for letting me speak this evening, I hope you
3	are all safe and well and as with your loved
4	ones.
5	MS. PUGLISI: Okay. Thank you.
6	MS. SHATZKIN: Thank you very much, Stacy.
7	I do appreciate it. The next person on my list
8	is Mr. Carson Jacobs. Carson, can you raise
9	your hand please.
10	MS. PUGLISI: Who's next?
11	MS. SHATZKIN: Mr. Carson Jacobs, if you
12	could raise your hand. Okay. Carson does not
13	appear to be with us.
14	Up next is Mr. Edward Soyka. Mr. Soyka,
15	I'm giving you permission to speak.
16	MR. SOYKA: Hello, can you hear me?
17	MS. SHATZKIN: Yes, we can. Please go
18	ahead.
19	MS. PUGLISI: Yeah.
20	MR. SOYKA: Okay. Hi everybody. This is
21	the third time that I've spoken on my
22	environmental issue. I own a property, 231
23	Lafayette Avenue. And I have a beautiful pond
24	on my property that provides not only wonderful
25	place to be but a considerable value to my

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1 MEDICAL ORIENTED DISTRICT 2 And my pond is south of Orchid Lake home. 3 which is a considerably large size body of 4 water for this -- these parts. Connected by Dickey Brook and Dickey Brook continues to the 5 My concern is the fact that Orchid 6 Hudson. 7 Lake is supplied its water source from the 8 surrounding wetlands. And what we're talking about here is a complete upheaval of all the 9 10 land connected with the development near the 11 lake and that is Orchid Lake. And my -- my 12 real major concern, during times in the summer 13 and even now, very little water is coming from Orchid Lake down Dickey Brook through my pond. 14 So little, in fact, it's nothing more than a 15 16 bathtub faucet running water, that little 17 So my concern is if you -- if what we water. 18 have is a complete disruption of the wetlands around Orchid Lake -- by the way, that has to 19 happen when you have these massive five -- four 20 21 and five-story buildings, and you have all of 22 this blacktop for the parking which covers the 23 majority of that area. And all of that weight 24 pushing down on the wetlands which is somewhat 25 like a sponge and if you put pressure on a



1 MEDICAL ORIENTED DISTRICT 2 sponge, the water isn't held. And if the water isn't held when there is rain, like in the 3 spring, what happens is the wetlands doesn't 4 function to give off the water during the 5 summer when you need it. So anyway, I can't 6 see how this development can happen as it is 7 and not throw off the water source. 8 I have been informed by town officials that there is 9 strong environmental laws in place and I'm 10 11 looking forward for them to be enforced 12 strictly. I'm also concerned that I've brought up this issue of -- now, this is the third 13 I just want to make sure that someone 14 time. 15 from the town or whoever, comes to my property 16 to see what I'm talking about. Okay. I'm the 17 only one who would really know about the water flow issue in the wetlands. And I think it 18 would be a good idea for someone to come soon 19 20 so we can see exactly what we're dealing with 21 Anyway, I appreciate what everybody's here. 22 trying to do, which is trying to be reasonable. 23 My overall feeling about the development is the development, it was not developed, the 24

universal design principle of form follows

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1 MEDICAL ORIENTED DISTRICT 2 function. That's -- that's pretty much how 3 design is supposed to be useful. This 4 development is an entity to itself without a 5 correlation between what it is, how big it is, what it does, and the corresponding environment 6 7 and the impact on the people which is simply 8 not there. There's no connection. And 9 therefore, it should not be developed, this 10 development should not be permitted to be 11 without considerable improvement. So I think 12 that's about all I need to say. I would like 13 to know when I could expect somebody to come by and look at my pond issue. 14 15 MS. SHATZKIN: Okay. Mr. Soyka, does that 16 conclude your comments? MR. SOYKA: Yeah. I just want to make 17 sure that someone will be coming to inspect my 18 19 pond relative to my concern. Because right 20 now, see, my concern is that. 21 MR. WOOD: Well, what -- Mr. Soyka, this 22 is Tom Wood. As, you know, we're collecting 23 comments and -- about the project. We hear all of these. What happens now, while the comments 24 are being addressed, there may very well be a 25



1 MEDICAL ORIENTED DISTRICT 2 site visit and, obviously, you be would 3 contacted so you could be there to take, you know, to have your input when they're there. 4 So --5 MR. SOYKA: Well, thank you for explaining 6 that because again I'm in the dark about what 7 it is. And when I first heard about this 8 meeting, I'm thinking is it going to be a panel 9 vote, you know. 10 11 MR. WOOD: No. No. No. What this is a 12 continuation of the prior meetings. And -- all the comments from the prior meetings are still 13 going to be considered as well as any 14 additional comments. So it doesn't matter how 15 16 many times you mention the wetlands issue, one 17 time is sufficient to get it studied between the completion of the draft comments and the 18 final impact statement. 19 MR. SOYKA: Well, that's good. 20 I don't 21 have to come back and say anything else 22 anymore. That's very good. I appreciate --23 MR. WOOD: Not at this stage, right. 24 MR. SOYKA: And I don't have to bug you 25 either.

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1 MEDICAL ORIENTED DISTRICT 2 MR. WOOD: No. Any time. Any time. 3 Thank you. 4 MR. SOYKA: Anyway, I think -- I think 5 that's what it -- that's my comments. 6 MS. SHATZKIN: Okay. Thank you so much, 7 Mr. Soyka. 8 The last resident who has signed up is Mr. 9 Dan Bizzoco. Dan, if you called in, can you 10 please raise your hand. Hi Dan, I've just 11 given you permission to talk. Can you hear us? 12 You're muted right now. I've sent you an 13 invitation to unmute. Okay. Carson has come back on. One, two, three, four. Carson, can 14 15 you raise your hand, please. 16 MR. WOOD: If I may just advise, the 17 supervisor is missing from Zoom. There's a power failure at her location right now. 18 So I 19 just received a cell call to advise me to -- so the deputy supervisor will have to coordinate 20 21 things until she's able to get an alternate 22 source of power to get back on. 23 MS. SHATZKIN: Okay. Mr. Bizzoco, you do 24 have permission to speak at this time. And I 25 have sent you a request to unmute.

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1 MEDICAL ORIENTED DISTRICT 2 Okay. And last but not least, Mr. Picani, are you still with us? Okay. Mr. Picani seems 3 to have left. Okay. Tom, do you want to 4 advise -- this person. So far, Mr. Dan Bizzoco 5 does not seem to be able to do audio. He is my 6 last resident. 7 MR. WOOD: Well, he can always submit his 8 9 comments in writing too because the record will be kept open. 10 11 UNIDENTIFIED SPEAKER: Yeah. I was just 12 going to say that, Laroue, are there any other 13 speakers tonight? MS. SHATZKIN: Not on my list. We were 14 15 then potentially going to open the floor. 16 UNIDENTIFIED SPEAKER: Why don't you go 17 ahead and do that then. 18 MS. SHATZKIN: Okay. For those residents who were unable to sign up but would like to 19 make a comment at this public hearing, I'm 20 21 going to take a deep breath because there are 143 of you currently on here. 22 If you could 23 please raise your hand for those of you who are 24 on with a telephone, you do that by pressing 25 star nine. If anyone wants to speak. Okay.

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1	MEDICAL ORIENTED DISTRICT
2	Here is my first one, (914)815-8447.
3	MR. QUARTUCCIO: Hi. This is John
4	Quartucio.
5	MS. SHATZKIN: Hi. Mr. Quartucio, could
6	you please state your address for the record.
7	UNIDENTIFIED SPEAKER: He got cut off.
8	MR. QUARTUCCIO: I apologize for the
9	confusion. For some reason, I was bumped off
10	earlier.
11	It's John Quartucio. I live at 9 Blake
12	Lane.
13	UNIDENTIFIED SPEAKER: Go ahead, sir.
14	MR. QUARTUCCIO: Thank you very much. Good
15	evening, Madam Supervisor, members of the town
16	board, town officials and staff and then I
17	would really appreciate and thank you for the
18	hard work to bring us to this point. I've
19	lived in Cortlandt for more than 30 years with
20	my wife. We raised our two sons here and I
21	thank you very much for the opportunity to
22	share in the discussion regarding the
23	medical-oriented district. When the proposal
24	came to the forefront and the information flow
25	and discussion flourished, we were excited to



1 MEDICAL ORIENTED DISTRICT see the plan as envisioned in the master plan 2 adopted in March of '16, had finally come to 3 fruition. And we arrived at a point in time 4 when the board can act on the draft 5 environmental impact statement after years of 6 hard work and preparation and review by many 7 governmental agencies and outside agencies as 8 well as the traffic study commissioned by a --9 by a firm chosen by the town as far back as I 10 11 can see in 2015. And now, we are before the 12 board and ready to call for a vote and approval of this long-awaited step which will move us 13 forward and stimulate growth, progress, and 14 15 further the economic stability of our town. Ι 16 have had the opportunity to review the plans 17 and the proposal which to me is consistent with 18 the master plan. I have listened to the questions and concerns of my neighbors 19 20 expressed throughout the process and understand 21 that those questions and concerns out of 22 necessity have been addressed. The traffic 23 study by the town's consultant and prepared by the town, summarized at length findings related 24 25 to the primary corridors, the intersections,

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1	MEDICAL ORIENTED DISTRICT
2	side streets, considered pending projects in
3	neighboring communities, Peekskill and Yorktown
4	as well as other ongoing projects within the
5	town and recorded assuming no changes or
6	mitigation that conditions only worsen with
7	time. However, with the mitigation proposed,
8	and at the expense of the stakeholders, it was
9	the opinion of the consultant that traffic flow
10	would improve and the delays along the
11	corridors would lessen. These changes and
12	modifications can only be accomplished by the
13	stakeholders who will both pay for the changes
14	and also donate the needed land and it was my
15	opinion having listened to the presentation
16	this evening and also the presentation online
17	that our consultant made it very clear that
18	without these changes, and without the approval
19	of the MOD that the that the that the
20	traffic will as I indicated continue to
21	worsen. But putting aside the traffic impact
22	and more importantly the enhancements to the
23	healthcare resources, which will now become
24	available locally at a centralized location,
25	this will greatly benefit our entire community

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1	MEDICAL ORIENTED DISTRICT
2	both young and old. The need for readily
3	available, high-level healthcare has been
4	pressed into our consciousness by the current
5	Covid pandemic that has shaken our nation, has
6	touched all of our lives in one way or the
7	other and continues to present a very clear and
8	obvious threat to our community health. We are
9	fortunate to have the New York-Presbyterian
10	health system join our well-established
11	healthcare establishment and the MOD can only
12	serve to enhance medical availability locally
13	and provide access to the highest level of
14	healthcare. The addition of the medical office
15	space and laboratory facilities will bring
16	these services to a centrally located and
17	accessible location. Unfortunately, we've all
18	known friends and family and others who are in
19	need of or have needed essential care sometimes
20	outside our community, and many with severe
21	conditions have unfortunately been caused to
22	endure the rigors of travel which is at times
23	very difficult for those stricken by illnesses.
24	These long journeys outside the community make
25	are untenable rendering treatment needed

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1 MEDICAL ORIENTED DISTRICT treatment even more draining. Additional 2 3 resources available will no doubt help those 4 among us fight the fight that needs to be 5 During the time that I have lived in fought. Cortlandt, I've witnessed dramatic changes in 6 7 trends and medicine, improvements to our 8 hospital, updated equipment and 20430 private investment in the hospital by those in our 9 10 community. And with the addition of New 11 York-Presbyterian where perfectly poised to 12 take this next step forward as envisioned by 13 our master plan. The availability of state of the art healthcare is at our doorstep and I 14 believe that approval of the MOD will greatly 15 16 enhance existing resources. The need for 17 emergency care followed by a continuum of care is obviously essential to a successful medical 18 The addition of the assisted-living 19 outcome. units will be available to our seniors, will 20 21 allow them to comfortably -- comfortably age in 22 place with medical resources readily accessible 23 if needed while remaining close to family and 24 friends. The hospital itself is a major economic anchor in town and one of our largest 25

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1	MEDICAL ORIENTED DISTRICT
2	employers. The project will immediately create
3	many construction jobs as well as permanent
4	employment opportunities within the MOD and
5	surrounding businesses and will more than
6	likely attract new businesses and residents to
7	our area. I believe that many of the questions
8	and concerns expressed during this process have
9	been addressed. I'm aware that we are here
10	tonight at one of the initial stages of the
11	approval process, and that there remain or,
12	at least, two remaining stages in public
13	hearings will follow. I believe that this
14	board, the planning board, will carefully
15	monitor the progress of the project.
16	And in closing, I would like to say that I
17	had known the Santucci family for many, many
18	years. And I'm aware as are most of us here
19	tonight listening in, that they had been for
20	many years a valued asset and part of our
21	community. They are very invested in our town,
22	and I am confident that they will proceed both
23	professionally and responsibility with
24	continued cooperation in the best interest of
25	the town at heart. Thank you for allowing me

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1	MEDICAL ORIENTED DISTRICT
2	to speak tonight and I trust that you will give
3	careful consideration in moving this proposal
4	forward. Thank you.
5	UNIDENTIFIED SPEAKER: Laroue, let me just
6	jump in and make a comment here.
7	MS. SHATZKIN: Of course.
8	UNIDENTIFIED SPEAKER: For those who
9	aren't aware, the supervisor had some power
10	issues. So she's not able to participate at
11	this moment, but please rest assured that she
12	will hear and read all of your comments. So
13	she will very much continue to be a part of
14	this meeting. Secondly, we will continue to
15	listen to all of your comments. We want to
16	hear from all of you tonight. And finally, for
17	those who joined a little late, Mr. Wood
18	started out by saying that there will be a vote
19	today. And I just want to reiterate that we
20	are going to vote not to approve or disapprove
21	or modify this proposal these proposals in
22	any way. We are simply voting to close the
23	public hearing. And so you'll still have the
24	opportunity to submit your comments in writing
25	to the town by the town clerk, you can send

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1	MEDICAL ORIENTED DISTRICT
2	your comments to town hall in writing, the
3	old-fashioned way and every one of these will
4	be included. If we do vote in the affirmative
5	to close the public hearing tonight, all this
6	does is it takes all these comments, all the
7	issues you'd raised tonight and everything
8	that's been raised since January and it sends
9	it to the developers and says, this is what you
10	need to respond to if you have any plans to
11	continue moving forward. So with that, Laroue,
12	please we would love to hear from the rest of
13	our residents. Thank you.
14	MS. SHATZKIN: Okay. All right. Thank
15	you so much, Mr. Quartucio. I'm going to
16	disable talking.
17	If anyone else would like to speak, please
18	raise your hand. Okay. This is (914)441-0231.
19	Can you hear us?
20	UNIDENTIFIED SPEAKER: Laroue,
21	(indiscernible). I didn't mean to press that
22	button. Sorry.
23	MS. SHATZKIN: No problem. Okay. This is
24	(914)815-8447. You've been given permission to
25	speak. Can you hear us? (914)815-8447.

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1	MEDICAL ORIENTED DISTRICT
2	UNIDENTIFIED SPEAKER: That's a second
3	number that I have. This is John Quartucio.
4	MS. SHATZKIN: Oh, okay. No problem,
5	John. One moment. Okay. Again, to members of
6	the public, if you would like to speak, please
7	raise your hand. If you are on the phone, you
8	can do so by pressing star nine. Tracy
9	O'Brien, I'm giving you permission to speak.
10	Please state your name and address for the
11	record.
12	MS. O'BRIEN: Tracy O'Brien, 18 Forest
13	Avenue. I just have to question, if the
14	meeting is publicly closed, say there are
15	changes and you end up modifying it and making
16	it smaller, does that information come out to
17	the public if there's no more public hearing,
18	is that what that means?
19	MR. WOOD: It doesn't mean this is a
20	public hearing on the first draft of these
21	documents. Questions will be responded to then
22	there will be another public hearing and at
23	that time, you'll be able to comment on the
24	responses and some of the responses may be in
25	the form of modifications to the projects.



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1	MEDICAL ORIENTED DISTRICT
2	MS. O'BRIEN: Okay. Great. I appreciate
3	it. Thank you.
4	MR. WOOD: Thanks.
5	MS. SHATZKIN: Okay. Thank you so much,
6	Ms. O'Brien. Okay. Would any other residents
7	like to speak? Please raise your hand at this
8	time. Okay. Mr. O'Connor, I'm giving you
9	permission to speak. Please state your name
10	and address for the record. Mr. O'Connor, can
11	you hear us? Mr. O'Connor, you've been given
12	permission to speak.
13	Okay. Is there anyone else in the public?
14	Mr. Weaver or Ms. Weaver. I've given you
15	permission to speak. Mr. And Mrs. Weaver.
16	MS. WEAVER: Hi, yes. This is Sarah
17	Weaver at 254 Lafayette. Thank you everyone
18	for your commitment to hearing the public's
19	feedback about the proposed plan. Earlier in
20	the presentation, there was information about
21	who would be potential targets for the
22	residential buildings in the apartments there.
23	My questions are about who actually how much
24	would the rent be, who is actually able to
25	afford that? I was compared to people in their

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1 MEDICAL ORIENTED DISTRICT 2 20s or 30s might not be able to afford a 3 mortgage in the area for a home but could 4 afford these apartments. I'd like to understand the difference between an average 5 mortgage rate in this area versus what the 6 7 apartments are going to be going for. I assume 8 that these are -- as they are described -- more 9 luxury apartments and from my personal 10 research, I know that those rents per month are 11 actually fairly high. So I'm curious the 12 difference between what a rent in this area 13 would be for those apartments versus an average mortgage. And if they're also targeting 14 15 employees of the hospital, would the employees' 16 salary actually be able to afford these places. 17 Kind of the same question about the assisted 18 living. Of course, I understand the need for assisted living in our, you know, communities 19 20 and as people are aging being able to find 21 places for them but will these assisted-living 22 facilities be able to be affordable for the 23 people in the area? Those are really important 24 information that we should be able to have access to. Additionally, the -- there was just 25

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1	MEDICAL ORIENTED DISTRICT
2	a recent comment about building up the medical
3	industry in our area and that being something
4	that can really bring additional value to this
5	community which I don't disagree with.
6	However, the hotel, the cafe, the apartment and
7	the gyms really have nothing to do with the
8	medical aspect there. So if that's an
9	important part of the plan of building our
10	medical community, you guys, should really
11	re-evaluate it. Thank you.
12	MS. SHATZKIN: Thank you so much Ms.
13	Weaver for your comments.
14	Mr. Greg Connor, can you hear us?
15	MR. CONNOR: Yes, I can.
16	MS. SHATZKIN: Okay. Please state your
17	name and address for the record.
18	MR. CONNOR: Gregory Connor, 275 Lafayette
19	Avenue.
20	MS. SHATZKIN: Okay. Go ahead.
21	MR. CONNOR: My concern is the distance
22	from route from the hospital, the street
23	I can't say the name of the street. If you
24	think about the the I'm having a problem
25	here. The distance the elevation from 20

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1 MEDICAL ORIENTED DISTRICT 2 202 to the top of Lafayette Avenue, you're 3 probably looking at between 60 and 100 feet. 4 And when you look at the drawing that the --5 there is no -- everything shown is very low. And that would not be the case. You would have 6 7 buildings that would basically -- on the -- on 8 -- on the other side of 202, that would be 9 twice as high as the hospital. If they're 10 built up on the top of the ridge. Up at the 11 top of Cortlandt Manor -- Cortlandt Avenue. So 12 I just want you to be aware of that. That 13 those drawings are not accurate in the sense they are not showing any elevation. If you 14 15 look -- if you drive up 202 heading -- heading 16 south towards Yorktown, you're basically --17 right where we are now, my house is 400 feet above the river, the Hudson River. 18 So you 19 figure from the bottom of 202 to the top of Lafayette, it's at least 60 to 100 feet in 20 21 elevation. And those drawings that were shown 22 to us shows everything at a level down 202. 23 And, obviously, you got buildings that go all 24 the way to the back of the property. And those

buildings would be up on the top of the ridge.

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1	MEDICAL ORIENTED DISTRICT
2	So being up on top of the ridge, you would have
3	buildings that are, what, four to five stories
4	high. Those buildings would be sitting at the
5	same level or higher than the hospital. And I
6	think that would really affect the look of
7	our neighborhood. You know, it's just
8	something I've never heard talked about and all
9	these people come and tell us what they're
10	doing, nobody is taking that in consideration
11	how, you know, from the bottom of 202 to the
12	top of Lafayette, I imagine that it's 60 to 100
13	feet in elevation. And when you put a building
14	up at the top of that ridge, you have the
15	you're going to be looking at least at the top
16	of the hospital or even a building that's even
17	higher than the hospital. So I just wanted you
18	folks to be aware of that. You know, if you
19	drive up 202 to the top of Lafayette, you know,
20	you don't really realize it until you get to
21	the top how far it is in elevation. So I know
22	that's something that's at the bottom of your
23	thoughts, but keep that in mind. Because
24	there's a number of houses up here that have
25	nice fields and property with trees and they

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1	MEDICAL ORIENTED DISTRICT
2	don't want to be all of a sudden looking down
3	at a building that's going to be twice as high
4	as the the hospital. So thanks for your
5	time.
6	MS. SHATZKIN: Thank you so much, Mr.
7	Connor.
8	Are there any other residents who would
9	like to speak, please raise your hands.
10	Margaret Mahoney, I'm giving you permission to
11	talk.
12	MS. MAHONEY: Yes. My concern first I
13	live at 6 Clinton Avenue, Cortlandt Manor, New
14	York. My concern is I thought I was going to
15	come tonight and be presented with a smaller,
16	downscale plan. I was rather disappointed not
17	to see that. I thought that was part of
18	tonight. I am also concerned if we reached out
19	to the fire department and our local police
20	departments to have their input in terms of
21	emergency services to assist in these new
22	addition to our community. And I think that's
23	another area in addition to everything else
24	that people have spoken about that we really
25	need to look at. Thank you.



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1	MEDICAL ORIENTED DISTRICT
2	MS. SHATZKIN: Thank you so much, Ms.
3	Mahoney. I'm so sorry, what was your address
4	again?
5	MS. MAHONEY: 6 Clinton Avenue.
6	MS. SHATZKIN: Thank you.
7	Okay. If there are any other residents
8	who would like to speak, please raise your
9	hand. Okay. At this time, I do not have any
10	additional hands going up.
11	MR. BECKER: Okay. I want to thank
12	everyone for participating tonight. That's
13	what this is all about. It's a public hearing
14	and we want to hear from everyone. And again,
15	I want to reiterate that tonight is not an
16	ending of anything. It's the beginning of the
17	beginning. This process, even if everything
18	when speeding forward which is a year or two
19	away from putting a shovel in the ground for
20	anything. So we have a long way to go. The
21	purpose of tonight was to gather those comments
22	and the last speaker, and also some of the
23	comments I've read on the Q and A in the chat
24	referenced is anyone and I presume that's
25	the developers here in the community that the

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1	MEDICAL ORIENTED DISTRICT
2	community feels that this is a very large
3	project and too large for the area. The whole
4	point of that is to get these comments and
5	refer these comments forward to the developers.
6	This is the draft period where we're drafting
7	the environmental impact statement saying this
8	is what you need to address. And the
9	developers both of them need to come back and
10	respond to each and every comment that has been
11	made and we will make sure that they do so.
12	Do any of the other town board members
13	want to make a comment tonight?
14	MR. FARRELL: Not I.
15	MR. BECKER: Jim or Debby?
16	MR. CREIGHTON: I have just one comment.
17	Somebody along the way, I guess made a comment
18	about my involvement as part of the master plan
19	committee. And I guess there's probably a need
20	just to explain: I mean, it's been said I
21	don't know how many times now, but, you know,
22	the town board that's that's the current
23	town board that you're that's hearing this
24	right now, is the board that adopted the award
25	winning envision Cortlandt sustainable master



1 MEDICAL ORIENTED DISTRICT -- comprehensive plan back in March of 2016. 2 3 At that time, I was on the planning board. Τ was an appointee by the town board to be on 4 that master plan with more than a dozen 5 residents and town members and consultants and 6 members of the public to look at these plans. 7 And there was a tremendous amount of outreach 8 9 to the communities. There were public 10 hearings. There were town surveys that people 11 responded to. And all of these things were --12 were taken and the MOD, the medical-oriented 13 district was developed in response to the comments from the public. As a member of the 14 15 planning board, I had a number of items that I 16 was very concerned about with something like 17 this. The MOD, the first thing and the only 18 thing that we said would have to happen if this were ever to get off the ground is to fix the 19 20 traffic. Right now, the traffic on Route 202 21 is unacceptable. It has been for a long time. 22 What people seem not to have focused on is that 23 this MOD concept resolves that. If there were 24 no MOD, if there were no proposal that came to 25 the town, the traffic is worse than if they



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1	MEDICAL ORIENTED DISTRICT
2	built everything that they said they wanted to
3	build. Now, I have not made up my mind about
4	this project. I am a town board member. I'm
5	listening. I am open. I have made no comments
6	up until this time as to whether I prejudged
7	this project, whether I think it's too big, too
8	small, perfect or not perfect. I do have
9	issues and so many of the residents have raised
10	those issues and I'm so proud of this town for
11	understanding planning and understanding that
12	what really matters and what kind of answers we
13	need before we can go forward with something
14	like this. But make no mistake, this was
15	something that was, you know, a huge town wide
16	project to look at what our future looks like
17	in this town. And, you know, the the the
18	sustainable master plan was something that we
19	had the town was very proud of it. Our
20	supervisor, Supervisor Puglisi was very proud
21	of this plan and has spoken on it many, many
22	times and was very happy to receive the
23	prestigious New York State Planning Federation
24	award in 2016 at their annual meeting. And we
25	were also chosen for a planning achievement



1 MEDICAL ORIENTED DISTRICT award by the Westchester Municipal Planning 2 Federation at their competition. This is a 3 hugely -- this was -- this was not just --4 something somebody scratched out on the back of 5 a napkin. This was very well thought out. 6 But everything requires details. 7 The devil is always in the details. And now as a member of 8 9 the town board, I get to sit on this side of the fence and see what is coming before us and 10 11 we together get to decide whether this is right 12 for our community, whether this is too big, too small, whether -- whether all of the things 13 that need to be looked at and addressed can be 14 15 answered and mitigated. So today, I'm very 16 happy that we're able to get to this point 17 because we started in November of 2019, taking 18 comments from the public, hearing from you, hearing what you think is good about this, and 19 what you think is not good. And I think the 20 21 public has done a really good job of explaining 22 to the developers, explaining to the town, the 23 issues that they see. So right now, I mean, if we -- if we stretch this out, another month, 24 25 another five months, another ten months, which

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1 MEDICAL ORIENTED DISTRICT 2 we can't, we'd get sued, but if we did, you 3 wouldn't have those answers. Right now, when 4 -- when we vote, we vote only to close the 5 public hearing so that we can start getting 6 answers to the public. Once we have the 7 answers and we know what we're looking at and 8 whether any of the issues that have been 9 brought up can be mitigated, the town board 10 then will later be able to talk with your 11 feedback about whether this is right for our 12 community. So I kind of jumped in to speak not 13 on that, really but because somebody felt it was necessary to -- and ask me to recuse myself 14 from consideration of this project. 15 I'm not 16 really sure what that request was. I didn't 17 hear him say that he wanted the supervisor, 18 Linda Puglisi, to recuse herself. She was the 19 chairperson of that committee. She was the one 20 what accepted all the awards and she was a 21 partner with all of us. All of the town board, 22 all of our town joined in this effort. So I 23 suspect the person thinks that I have a view of 24 whether this is right or wrong or whether I'm

going to, you know, vote yes or no for this to

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1 MEDICAL ORIENTED DISTRICT happen. But I haven't decided. Right now, 2 we're in the middle of a -- a fact-finding 3 mission of hearing from the public, taking the 4 comment and allowing the developers and the 5 town to take those questions and come up with 6 So, you know, just -- just to issue 7 answers. that thought, to the extent that somebody 8 thinks I have a conflict of interest, I have no 9 interest in this. No financial or otherwise, 10 11 direct or indirect or any business or 12 transactional or professional activity that has anything to do with this project except that I 13 want what is best for the Town of Cortlandt. 14 That's what I was asked to do as a member of 15 16 the planning board. That's what your town 17 board is asked to do and that's exactly what 18 I'm doing. So at this point, I appreciate the 19 comment and his request to recuse myself and I 20 respectfully decline. Thank you --21 MS. SHATZKIN: Deputy supervisor Becker, 22 we have had a resident since raise their hand. 23 Are we still --24 MR. BECKER: Sure. Hang on one second.

Councilwoman Costello, do you want to make a

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1 MEDICAL ORIENTED DISTRICT 2 comment? 3 MS. COSTELLO: Yeah. I just wanted to 4 just kind of reiterate a little bit of what 5 Doctor Becker said but just sort of put it in a 6 different way. There's been quite a few 7 comments that said how can there -- you're not 8 seeing a downsized version of this? Why is it 9 the same thing? The reason you're seeing the 10 same thing is because we haven't closed the 11 public hearing yet. We are still in the 12 process of gathering comments. If we don't 13 close the public hearing, and we put it off until next month and we have another meeting 14 15 like this next month, you'll see the same 16 thing. So we're not going to see a change, 17 we're not going to see anything different until 18 after we close the hearing and give all the comments to the developers to then incorporate 19 20 and make those changes and then bring back to 21 And when they bring it back to us, we'll us. 22 have another public hearing. Tom, please 23 correct me if I'm wrong. But --24 MR. WOOD: Absolutely. 25 MS. COSTELLO: But that is the reason why,

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1	MEDICAL ORIENTED DISTRICT
2	you know, many of you have expressed a little
3	bit of angst that you're hearing the same thing
4	and that's because we left the comments open.
5	In January, when we had our meeting, there was
6	a lot of people who said don't close it, don't
7	close it, don't close it. We still have a lot
8	of concerns. We still have a lot of questions.
9	So we left it open. We didn't have it in March
10	and April due to Covid and not knowing what was
11	going on. But the longer we put this off, the
12	longer it's going to take to give we want to
13	close it so that we can we can say to the
14	developers, here's all the comments, now, come
15	up with a solution. So that is I hope that
16	sort of answers your questions for those of you
17	who are aggravated that you're seeing the same
18	thing. You'll see something different once we
19	close the public hearing and have and take
20	give it back to the developers, put it in
21	their hands and say, now, answer all of these
22	questions. So I hope that kind of clears
23	things up a little bit.
24	MR. BECKER: Thank you for the
25	clarification. Laroue, any other citizen?

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1 MEDICAL ORIENTED DISTRICT 2 MS. SHATZKIN: There's Ryan Russo. I'm 3 going to give you permission to speak. Mr. 4 Ryan Russo, you have permission to speak. 5 Yeah. I think -- it's Tom MR. RUSSO: 6 Russo. I had posed the question that Mr. 7 Creighton just responded to. Okay. Just two 8 things, Mr. Creighton: I was at the meeting in 9 November which a couple weeks before that 10 meeting, I can assure you that there was a very 11 big grassroots effort on Buttonwood Avenue and 12 Lafayette to give people in this town an idea 13 of what was going on because very few people You referred to that survey and it was 14 knew. discussed at the meetings in November and then 15 16 again in February that nobody, nobody on 17 Buttonwood Avenue or Lafayette, that we know 18 of, were part of that survey, got anything in 19 the mail about that. 20 MR. CREIGHTON: It was the entire town. 21 MR. RUSSO: Okay. We didn't get it. Can

you prove that we got it? Because I assure you we didn't, sir.

And then the last thing I want to ask you is, you keep bringing up, should Linda recuse



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1	MEDICAL ORIENTED DISTRICT
2	herself? Are you is it your assertion that
3	she was as involved in the idea and the writing
4	of that document?
5	MR. CREIGHTON: Yes. She was the
6	chairperson at every meeting. So she has every
7	bit to be proud of what this plan says, and she
8	has nothing to do with what these developers
9	are bringing forward. That's a completely
10	separate issue. But if you think because I was
11	on the master plan committee that I should
12	recuse myself, then you need to ask Linda to
13	recuse herself too and that's unacceptable. I
14	think that's really rude.
15	UNIDENTIFIED SPEAKER: Fair enough.
16	UNIDENTIFIED SPEAKER: Thank you.
17	MR. RUSSO: Thank you.
18	MS. SHATZKIN: Okay. Thank you, Mr.
19	Russo.
20	We do have one other resident who has
21	raised their hand, Gina Thomasset. Gina, I'm
22	giving you permission to speak. Can you please
23	state your name and address for the record.
24	MR. THOMASSET: Can everyone hear me?
25	MS. SHATZKIN: Yes, we can. Please go

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1 MEDICAL ORIENTED DISTRICT 2 ahead. 3 MR. THOMASSET: Thank you for this 4 opportunity. I live at 5 Clinton Avenue in 5 Cortlandt Manor. I'm up the road from Conklin. A couple of things, whenever you mail something 6 7 I know for a fact that the postal service 8 doesn't even give us the recreational booklets 9 anymore. So if the town is basing that they 10 are mailing stuff through the Peekskill office, 11 post office, the residents are not getting any 12 of these. I never got a survey either. So I 13 agree with the last gentleman. So I just wanted to really express that. I understand 14 15 the town is doing its very best to communicate 16 with the community. I got it. Our post office 17 is awful. We don't get 95 percent of the stuff 18 that you are sending out any way. So just 19 point of information for you. Secondly, I guess I went to the both the November and 20 21 January meeting, and one of the things that I 22 see that the community or at least the people 23 that are represented in the caucuses that are 24 meeting with you -- with the board and of 25 course the supervisor is that it's not wanted

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1 MEDICAL ORIENTED DISTRICT 2 and I think it's pretty clear that everybody is saying like we don't want this. So I guess the 3 fear of the community what I'm hearing from a 4 lot of my Cortlandtites is that we feel 5 helpless because once you close the door, we 6 have to -- we are basically putting it in your 7 hands. We're saying we don't want it and it's 8 like nobody is listening. It keeps going on 9 and on well, they'll modify it. We don't want 10 11 it where it's located. Put it in Buchanan, 12 Montrose, put it in an area where there's a major thoroughfare. 202, I don't want you 13 widening 202. I live off of 202. What are you 14 15 going to make it into? A Route 6, four-lane 16 highway? Are you buying now -- New York State 17 buying land? So that's -- I think is the angst 18 that you're hearing. Everybody is saying -and -- going on, people with the proposal 19 downsizing it, whatever. I don't know if the 20 school district will be able to facilitate all 21 22 these families or 20-year olds (indiscernible) 23 are living in these apartments. It's just very 24 concerning and I think that's where the angst 25 So I just wanted to comment on that, is comes.

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1	MEDICAL ORIENTED DISTRICT
2	that I really appreciate the whole process and
3	this opportunity has been wonderful. You guys
4	have been phenomenal with hearing us out but
5	that's what my concern is. We're saying no,
6	and I feel like the board is saying, oh well,
7	we'll talk about it. And that's really I
8	feel like I'm powerless moving forward. So
9	thank you so much for this opportunity.
10	MR. BECKER: So let me address that. I
11	believe first of all, you're not powerless.
12	And second of all, we hear you. I think that
13	there needs to be a little bit of reality check
14	in the sense that this is America, people own
15	property and as a right, they have the ability
16	to develop those properties. You could buy
17	land and build a home and the whole
18	neighborhood may object, but if you own it and
19	you comply with zoning, you could build that
20	home. That doesn't mean that the developer
21	comes in and gets to do anything that they
22	want. I wanted to resist speaking on behalf of
23	the board, but you could believe that the five
24	of us have been discussing this in depth month
25	after month. And the reason the process takes

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1 MEDICAL ORIENTED DISTRICT so long is because we want to give the 2 3 community the opportunity to send their comments and the process that we're following 4 is a legal process that's spelled out and there 5 are certain deadlines that we must comply with 6 in which how long to keep the public hearing 7 open, how -- and then there are restrictions 8 that we must close it in fairness to the 9 developer. I think the gestalt of this board 10 11 is that we believe in MOD and we believe in the 12 TOD, which is as you were saying earlier Ms. Thomasset that -- you said put it in another 13 part of town. Well, there's a TOD in vicinity 14 15 of the train station which is the 16 transit-oriented district, and issues will come 17 up there as to what's developed. Now, so when 18 the medical-oriented district, the concept was 19 simply to have businesses that relate to the 20 medical community and we've heard comments that 21 some of the proposals today thus far, are not 22 medical and maybe not belong there and I think 23 some of us may agree with that. The second is that we're hearing from all 24 25 of the majority I'll say, is that the project



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1	MEDICAL ORIENTED DISTRICT
2	may be too large and I think many of the board
3	members feel that way too. They're in total, I
4	believe, and someone could correct me if I
5	misread the data but there are seven separate
6	proposals for these two parcels included
7	assisted living, hotels, retail on both,
8	medical building on one, and residential
9	structures. And I think all of us, from the
10	supervisor down, feel that seven developments
11	going on in these two lots is way too much.
12	And I think most of us feel that something on a
13	smaller scale that fits the area is appropriate
14	and I believe that we all feel that nothing
15	should be built unless the traffic is improved
16	because what exists now is not acceptable. It
17	must be improved. So this is just, as I said
18	earlier, the beginning. We wanted to get all
19	your comments. The idea tonight is to close
20	the public hearing, giving you the rest of the
21	month of June to comment in writing so that we
22	can collect all this information, give it to
23	the developers and say, come back when you're
24	ready. And I think they'll be hearing from all
25	of us that seven is way too much. Something in

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1 MEDICAL ORIENTED DISTRICT 2 the range of one or two on each lot is more Figure out what's economically 3 appropriate. feasible and work with the consultants and to 4 improve the traffic and then we will consider 5 And that does not mean the final answer that. 6 So this is a whole process that's 7 even then. set up by the SEORA law that states what must 8 9 happen in what sequence, what must be addressed and we are going to address it all. 10 No one 11 here is ready to approve this project as it is 12 I believe all of us would like to see now. something done. Certainly developers have the 13 right to develop something, but we want it to 14 15 be scaled appropriately. We do not want to 16 change the character of the neighborhood. We 17 do not want to burden the neighbors there. We 18 want to improve things and we certainly want 19 traffic to improve. And just as an aside, if you look at Route 6, the traffic there was 20 21 abysmal, and this board went through the same 22 SEORA process with the Acadia, the new ShopRite 23 that's open there to ensure that the traffic 24 would be improved and sewer lines were put in 25 and I think everyone would agree in town that

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1	MEDICAL ORIENTED DISTRICT
2	that road is much improved even pre-Covid. So
3	again, tonight, I'm going to ask the clerk to
4	read the the public hearing again so that
5	this board can take a vote. The vote is to
6	close the public hearing or not. If we close
7	it, that we will collate all the comments,
8	every single comment, no matter how it came in,
9	email, snail mail, telephone calls, comments
10	will be sent to the developers and they
11	nothing will happen until they respond. And
12	one other comment you make, Ms. Thomasset, is
13	that people and the prior speaker, that
14	notices were not received. I believe, and
15	again, the two attorneys can correct me,
16	planning can correct me, but I believe we were
17	in the vicinity of 200 neighbors that we had to
18	notify and we did about 600 because we wanted
19	to make sure that the community knew. It is on
20	our website. It is on our social media
21	platforms. We are doing the best but it is
22	hard to get the word out. It's also carried in
23	some of the local newspapers. So we are going
24	to continue to do what we can. We will
25	continue to keep everyone in the loop. Nothing

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1	MEDICAL ORIENTED DISTRICT
2	will be done behind closed doors. This is
3	going to be the most transparent process that
4	that can be done legally. We hear you. We
5	hear the opposition. We hear the concerns.
6	We're here to make this community better. We
7	want traffic improved. We want development
8	that's appropriate for this community. We do
9	not want over development. We understand the
10	concerns. I'd also like to see sewers on
11	Tamarack. You know, I have a wish list for all
12	the communities. I want to make sure this
13	doesn't interfere with Buttonwood and I think
14	I'm speaking for all the members of the board
15	tonight. Linda will not be able to participate
16	in this vote, but nothing will be passed
17	without her comment yay or nay. It would have
18	to be three positive votes to carry the day.
19	So I'm hoping that answers questions. If
20	anyone has any questions before I vote.
21	Laroue, is there anyone there?
22	MS. SHATZKIN: We do have one more person
23	who has raised their hand to speak. Betty, I'm
24	giving you permission to talk. Can you please
25	state your name and address for the record.

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1	MEDICAL ORIENTED DISTRICT
2	Betty, you've been given permission to talk.
3	Can you hear us?
4	MS. MANGIONE: Can you hear me?
5	MS. SHATZKIN: Yes, we can. Please state
6	your name and address for the record.
7	MS. MANGIONE: My name is Betty Mangione.
8	240 Buttonwood Avenue, Cortlandt Manor.
9	MS. SHATZKIN: Okay. Go ahead, Betty.
10	MS. MANGIONE: Very briefly. Everybody
11	keeps on calling this a medical project, MOD.
12	Some of these features some of these plans
13	have absolutely nothing to do with the medical.
14	Like retail stores and the restaurants and the
15	hotel. So that's the comment I have. Why you
16	keep on calling MOD? It's too big. You
17	changing everything that we being appreciating
18	for many, many years in our area. You want to
19	change everything. You want to change from
20	residential, nice, quiet area to a nightmare:
21	Traffic, lot of stores, a lot of people. It's
22	a nightmare. If we wanted that kind of traffic
23	exposure, we would have stayed in the city
24	where we came from. I'm opposed to this a
25	hundred percent.

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1 MEDICAL ORIENTED DISTRICT 2 MR. BECKER: Thank you for your comments. With that, Laroue, I think due to the hour, 3 unless there's anyone out there else that wants 4 to speak, I don't want to debate any comments 5 about individual members of the board. I think 6 we clarified that. So Laroue, would you read 7 the public hearing statement. 8 9 MS. SHATZKIN: Sure. Public hearing regarding MOD SEQRA DGEIS DEIS and proposal 10 11 (indiscernible) A, close public hearing and B 12 receive and file all additional comments, emails, letters, et cetera and again to clarify 13 that has (indiscernible) June 30th. 14 15 Thank you. MR. BECKER: So may I have a 16 motion to close the public hearing and a motion 17 to file additional comments. 18 UNIDENTIFIED SPEAKER: (Indiscernible).

MR. BECKER: Okay. So I have a first and a second. And just before I call the vote, I just want to state again, all we're doing is closing the hearing stating that we've got your comments. You can still submit comments to us until the end of June and then all this will go out to the developers. They will respond back

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MEDICAL ORIENTED DISTRICT						
to us in a period of time and we will again						
notify the community when this is ready to go						
to the next step. Again, there will be also						
planning board involvement, consultant						
involvements. This is just the beginning of						
the beginning. And we're not approving any						
projects tonight. We are just closing the						
hearing. With that, may I have a vote.						
Laroue, would you call the board, please.						
MS. SHATZKIN: All in favor?						
(A chorus of "ayes.")						
MR. BECKER: Any opposed?						
MS. SHATZKIN: The public hearing is						
closed.						
MR. BECKER: The public hearing is closed						
now. I want to thank everyone for						
participating. We still have a full agenda						
ahead of us tonight which we are going to						
continue, and everyone is welcome as always to						
listen in and we will as I said, the						
supervisor and her staff as well as the council						
members will endeavor to keep everyone as						

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1	MEDICAL ORIENTED DISTRICT
2	informed as we can and we will certainly
3	carefully consider all your comments. Thanks
4	everybody for your participation. It's
5	wonderful.
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CERTIFICATE I, Douglas F. Colavito, a Certified Court Reporter and Notary Public of the State of New York, do hereby certify that the transcript of the proceedings, was prepared using the required transcription equipment and is a true and correct transcription of the recording. Douglas F. Colamter DOUGLAS F. COLAVITO



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