

**CITY OF NEW BRUNSWICK  
PLANNING BOARD  
APRIL 29<sup>TH</sup> 2019  
MINUTES**

**MEETING LOCATION:**  
CITY COUNCIL CHAMBERS  
CITY HALL, TOP FLOOR  
78 BAYARD STREET  
**7:30 p.m.**

**I. ROLL CALL**

√	John Cox (Chairperson)
√	Ivan Adorno (VC)
	Peg Chester
√	Sue McElligot
√	John Zimmerman
	Doug Sheehan
	Charlotte McNair
	Evelyn Azcona
	Nancy Coppola

**II. PUBLIC ANNOUNCEMENT (OPEN PUBLIC MEETING ACT)**

**III. SALUTE TO THE FLAG**

**IV. MINUTES OF THE PREVIOUS MONTH MEETING**

Motion to Approve: Zimmerman  
Second: McElligot  
Approved by unanimous roll vote

**V. COMMUNICATIONS AND REPORTS  
Resolutions of Memorialization**

**ENEROLISA RODRIGUEZ, Z-2017-02**, Site plan and variance application for the construction of a mixed-use building to be located at 136 Remsen Avenue, Block 197, Lot 24, Zoning District: C-1

Motion to Approve: McElligot

Second: Zimmerman

	YES	NO
John Cox (Chairperson)	√	
Ivan Adorno (VC)		
Peg Chester		
Sue McElligot	√	
John Zimmerman	√	
Doug Sheehan		
Charlotte McNair (alt)		
Evelyn Azcona (alt)		
Nancy Coppola		

**VI. PUBLIC HEARINGS**

**B. 295 SANDFORD STREET – ESTATE OF BERNARD SCHRUM ZB-2019-01,** Use and bulk variance application for the construction of a new single-family home in the R-5A zone at 295 Sandford Street, Block 226, Lot 8

(To be carried to May Zoning Board of Adjustments Meeting)

**A. 235 GEORGE STREET DIALYSIS CLINIC INC ZB-2019-02,** Site plan, use and bulk variance application for the construction of a new medical dialysis clinic with accessory parking areas in the C-2B and R5-A zones at 235 George Street/52 Tabernacle/64Abeel Streets. Block 126, Lots 3.01, 7, 8.01

Larry Calli, Esq.:

Want to present the operations of the property to setup for the operational testimony to allow our site plan changes to be reviewed by the board professionals.

This project requires use variance relief and the parcels we have are split zoned. We have a parking shortfall, but parking is low needed. The project is an inherently beneficial use. The project should be considered like a hospital or school.

DCI looks to merge the properties for an assemblage to install the Dialysis Clinic.

Robert Motacki, from DCI

I am the area operations director for DCI and working in Dialysis for over 30 years. DCI is the largest non-profit dialysis provider in the US and have been in business since 1971. It serves over 15,000 dialysis patients and has 240 clinic nationwide in 26 states.

DCI has no marketing department. Needs to be invited to where they choose to expand. We currently have 4 dialysis clinics in NJ and two hospital programs, acute patients.

Kidneys are important organs that remove waste products and regulate blood pressure and chemicals. If kidneys begin to fail, patients tend to turn to dialysis. There are 3 types of dialysis. Here we want to do Hemodialysis, under a physician's jurisdiction. In-patient dialysis requires dialysis 3 times a week between 3 to 4 hours at a time.

Registered Nurses in the unit and a technician to monitor the machines. A social worker and a nutritionist. These are professionals trained in chronic renal failure. Peritoneum Dialysis is done with training and through osmosis the patient can do the dialysis 4-5 times a day, 6 days a week. This is what we want to do on at this site.

Patients on Peritoneum Dialysis must come in a couple of times a months to get checked out and see the progress.

Regulated by the state of NJ. Medicare monitors the site via survey to ensure that we are providing an adequate level of care. If the project is approved we want to install 18 hemodialysis units at the site and run at 6 patients at a time. Two shifts a day to start Monday Wednesday Friday. Maximum of 8 staff at the onset. As time goes on and we treat more patients that number will change. It is based on NJ regulation.

We try to discourage patients from driving. Patients can use public transit, ambulette, a friend, cab, etc. This discourages parking on site and makes it minimally burdensome. Loved ones rarely stay on the site during the procedure.

For deliveries, the dialysis unit usually has a tractor trailer drop off the supplies needed to perform the dialysis. These deliveries will start off approximately every 2 weeks. Medical waste contractor comes in to haul away the waste. Starting it will be about once a week and may increase to 3 times a week. That waste is stored within the building confines. The non-medical waste will be similar to what is typically considered to be office waste.

This development is posed to be a long term project and an investment of 3-4 million dollars.

The hours of operation would approximately 5:30am to 1:30pm with a second shift from 1pm to approximately 9pm. With 3 shifts of patients scattered about the day. No overnight or acute dialysis. Three holidays a year would require an opening on a Sunday.

This use is much lower in parking demand than the zoning minimum.

Questions and Comments by the Board with Replies from Larry Calli, Esq. and Robert Motacki from DCI.

McElligot: Where would the offsite parking be?

Calli: Offsite parking would be located at the Morris Parking Deck.

McElligot: Where is the patient drop-off area?

Calli: It will be a different location than the on-site parking.

McElligot: Why are tractor trailers coming to the site?

Motacki: The supplies needed to run the facility are typically delivered on these types of vehicles.

Cox: Did you not say you would be using smaller box trucks?

Motacki: Those trucks would be for the carting off of medical waste.

Calli: More discussion about loading, unloading, and general circulation. will happen at the full presentation.

McElligot: How will garbage be handled?

Calli: *deferred to professionals that will not speak tonight*

Zimmerman: Provision for 9 spaces how many now?

Calli: We have 16 now and we take 15 spaces at the Morris Deck.

Motacki: Approximately 30% of Dialysis patients drive themselves and we discourage patients from driving.

Questions and Comments by the Board Professionals with Replies from Larry Calli, Esq.

Bletcher: Please submit documents with regard to NBPA to be given the spaces.

Calli: Here is a physical copy and I can also provide the document digitally.

Aithal: Did you perform notice for the new lot?

Calli: Yes we did.

Calli: Put us on for 5/20. In case we cannot present that night, we will proceed on 6/24.

Public Comment:

Priya Radhaarishmkn: I am a second generation pharmacist and located near this site. The application did not have a traffic study document included.

Response by Aithal: The question is regarding the Dialysis Clinic application which is not to be open to comment at this moment.

## **V. OTHER MATTERS OF INTEREST TO THE PUBLIC**

**None**

## **VI. ADJOURNMENT**