The Planning Board met at 6:30 PM local time Tuesday, June 21, 2011 in the Town Hall Auditorium to discuss, in a meeting open to the public, tabled matters and other business that was before it.

I. CALL TO ORDER:

PRESENT: Arsen Markarian, Chairperson
John Albright
Jim Burton
Allyn Hetzke, Jr.
Sue Kreiser
Doug McCord
Terry Tydings

ABSENT:

ALSO PRESENT: Katie Evans, Planning Board Clerk
Mark Valentine, Planning Department Head
Peter Weishaar, Legal Counsel

II. APPROVAL OF MINUTES: June 9, 2011

The Board approved the minutes of June 9, 2011.

Vote: Moved by: Hetzke Seconded by: Tydings

Chairperson Markarian - Aye Albright –Aye Burton –Aye Hetzke - Aye

Kreiser –Abstain McCord -Aye Tydings -Aye

Motion was carried.

III. TABLED:

1. Walter Baker/DSB Engineers, 2394 Ridgeway Avenue, Suite 201, Rochester, NY 14626/SDSJ Associates, Inc. requests under Articles XIII-8-2 and IX-9-2 of the Code Preliminary and Final Subdivision and Site Plan approval to allow the construction of a 31 lot residential subdivision on 24.9 +/- acres located at 1617 Creek Street to be known as Caroline Court. The property is now or formerly owned by SDSJ Associates, Inc. and is zoned R-1-20. Appl# 11P-0007. SBL# 108.15-1-31.

Staff reported that no new information was received on this application with exception to an e-mail from an adjacent property owner. The Board elected to discuss the e-mail after the applicant submits information in response to the June 9th tabling resolution.

There was NO ACTION TAKEN regarding this application.
2. Kimberly Seavert/Wegmans Food Markets, Inc. 1500 Brooks Avenue, Rochester, NY 14624 requests under Article IX-9-2 and X-10-2 of the Code Preliminary and Final Site Plan and expansion to an existing Conditional Use Permit approval to allow the construction of a 3,350 square foot partially covered patio on 20.2 +/- acres at 1955 Empire Boulevard, to be known as Eastway Wegmans Patio. The property is now or formerly owned by Wegmans Food Markets, Inc. and is zoned GB. Appl# 11P-0008. SBL# 093.11-1-33.1.

Board members Burton recused himself from the Board regarding this discussion.

Staff explained to the Board that this application was incorrectly advertised for an expansion to a conditional use. As a result staff has re-advertised for July 14th. All other requested information has been received for this application. The Board prepared a draft approval resolution to be considered for the July 14th meeting.

The Board CONTINUED TABLED the application.

<table>
<thead>
<tr>
<th>Vote:</th>
<th>Moved by:</th>
<th>Seconded by:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Albright</td>
<td>Hetzke</td>
</tr>
<tr>
<td></td>
<td>Burton</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kreiser</td>
<td></td>
</tr>
<tr>
<td></td>
<td>McCord</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tydings</td>
<td></td>
</tr>
</tbody>
</table>

Motion was carried.

3. Jared Lusk, Nixon Peabody Attorneys at Law, 1100 Clinton Square, Rochester, NY 14604/DiMarco Brandt Point, LLC requests the Town Board to consider their pending application for the proposed action. The proposed action has been classified as a Type I Action pursuant to applicable SEQRA Regulations, including 6 N.Y.C.R.R. 617.5 et seq, and the Penfield Environmental Quality Review Local Law #3 of 1996. The Planning Board, acting as lead agency, has accepted a Draft Environmental Impact Statement for the proposed action. A public hearing was held October 14, 2010 at 7:00 PM, at which time the Planning Board heard all interested persons on the content of said document.

The Draft Environmental Impact Statement is available on the Planning Department’s web page on the Town website located at www.penfield.org. Comments on the Draft Environmental Impact Statement were requested and accepted until October 25, 2010. Appl# 09P-0003.

There is no new information available on this item.

There was NO ACTION TAKEN regarding this application.

IV. MISCELLANEOUS:

A. Paul E. Kocher/Kocher Surveying, P.C., 116 West Miller Street, Newark, NY, 14513/Donald E. McClellan requests under Articles XIII-8-2 of the Code authorization for the Chairperson to sign a plat map allowing the re-subdivision of lands to convey 2,500 sq ft from 108 Woody Lane to 17 Tree Top Drive.

The Board AUTHORIZED Chairperson Markarian to sign the plat map.

<table>
<thead>
<tr>
<th>Vote:</th>
<th>Moved by:</th>
<th>Seconded by:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Albright</td>
<td>Hetzke</td>
</tr>
<tr>
<td></td>
<td>Burton</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kreiser</td>
<td></td>
</tr>
<tr>
<td></td>
<td>McCord</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tydings</td>
<td></td>
</tr>
</tbody>
</table>

Motion was carried.
B. The Board watched part of a video available from the NYS Department of State, Division of Local Government Services’ website on Freedom of Information (FOIL) and Open Meetings Law. However, the video did not load properly and staff decided to contact Local Government Services to see if we can obtain a DVD to share with the Board as a later date.

C. The Board watched and discussed a webcast made available from the American Planning Association Utah Chapter entitled Active Design Guidelines: Promoting Physical Activity and Health in Design by Susanne Nienaber, AICP. The Board discussed the slides. The slides are attached as Schedule “A”.

There being no further business to come before the Board, this meeting was adjourned at 8:05 PM, Tuesday, June 21, 2011.

These minutes were adopted by the Planning Board on July 14, 2011.
Active Design 101 - Session Objectives

- Examine today’s obesity and chronic disease epidemics – and see how design is critical.

- Provide an overview of NYC’s Active Design Guidelines – and hopefully inspire their use!

- Answer questions, but also hear your ideas.

Why Active Design?

- Brief History of Health and the Built Environment
- Today’s Epidemics: Obesity and Chronic Disease
- Benefits of Physical Activity

History of health and the built environment

- 100+ years ago, urban conditions in NYC were a breeding ground for disease epidemics

   Over-crowding: By 1910, the average density in lower Manhattan was 114,000 people per sq. mi, two words reached densities > 400,000. (Today’s density: 67,000 sq. mi)

   Inadequate systems for garbage, water, and sewer, leading to pervasive filth and polluted water supplies.

   Major epidemics:
   - Airborne-borne diseases: TB
   - Water-borne diseases: Cholera
   - Vector-borne diseases: Yellow-fever

Today’s Agenda

Presentation: “Active Design 101”
1. Why Active Design?
2. Overview of the NYC Active Design Guidelines
3. Implementation Considerations
4. A Closer Look: Synergies with LEED

Q&A and Comment Period
Send in your ideas:
1. What opportunities do you see for implementing Active Design in your own community? Or integrating it into your work?
2. What challenges do you see for implementing Active Design?
The design response

1842 New York’s water system established – an aqueduct brings fresh water from Westchester.

1857 NYC creates Central Park, hailed as "ventilation for the working man’s lungs", continuing construction through the height of the Civil War

1881 Dept. of Street-sweeping created, which eventually becomes the Department of Sanitation

1901 New York State Tenement House Act banned the construction of dark, airless tenement buildings

1904 First section of Subway opens, allowing population to expand into Northern Manhattan and the Bronx

1916 Zoning Ordinance requires stepped building setbacks to allow light and air into the streets

Can urban design help address today’s health epidemics?

THE 19th CENTURY:
Infectious disease

19th Century codes, planning and infrastructure as weapons in the battle against contagious disease

These strategies were built into the city fabric, and they were effective

THE 21st CENTURY:
Chronic Diseases, many of which are "Diseases of Energy"

The emerging design solutions for health parallel sustainable design solutions

Effective design will have to be an invisible, pervasive, and inevitable part of life

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

Obesity Trends* Among U.S. Adults

BRFSS, 1985
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1986
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)

BRFSS, 1987
(*BMI ≥30, or ~ 30 lbs overweight for 5’4” woman)
Obesity Trends* Among U.S. Adults

**BRFSS, 2000**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2001**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2002**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2003**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2004**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2005**

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman*)

Source: U.S. Centers for Disease Control and Prevention (CDC)
Obesity Trends* Among U.S. Adults

**BRFSS, 2006**
(*BMI ≥30, or ~30 lbs overweight for 5’4” woman)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2007**
(*BMI ≥30, or ~30 lbs overweight for 5’4” woman)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2008**
(*BMI ≥30, or ~30 lbs overweight for 5’4” woman)

Source: U.S. Centers for Disease Control and Prevention (CDC)

**BRFSS, 2009**
(*BMI ≥30, or ~30 lbs overweight for 5’4” woman)

Source: U.S. Centers for Disease Control and Prevention (CDC)

---

**The costs of obesity**

- According to the CDC, the medical costs attributable to obesity in the U.S. are estimated to be $147 billion per year.

- By 2030, if obesity trends continue as shown, 86% of adults will be overweight or obese and total attributable health-care costs will be $860-956 billion per year.

- City of Dallas: medical costs of an obese city employee are up to 6 times that of a normal weight employee.
**Adults with self-reported obesity and diabetes, 1994-2007**

- **Obesity**
- **Diabetes**

**Risk factors contributing to obesity and chronic disease**

About 60% of adults and 40% of children are overweight or obese

**Risk Factors** must be addressed:
- Poor diets (food and beverages)
- Physical inactivity
- TV viewing
- Not breastfeeding

**Benefits of physical activity**

- Prevention of weight gain
- Weight loss (when combined with diet)
- Lowers risk of type-2 diabetes
- Lowers cardiovascular disease risk factors (high blood pressure, cholesterol, etc)
- Decreased risk of colon and breast cancers
- Reduced depression
- Better cognitive function (older adults)
- Lowers risk of falls by improving balance
- Strengthens bones

**Physical activity recommendations**

- **Recommendations:**
  - Adults: 150 minutes of moderate activity or 75 minutes of vigorous activity per week
  - Children: 60+ minutes of physical activity daily

- **Less than half** of US adults meet recommendations

**Most New Yorkers do NOT meet these recommendations**

People have not changed – our environment has

If you go with the flow, you get overweight or obese

Design and physical activity

Creating or improving access to places for physical activity
• Can result in 25% increase in number of people who exercise at least 3 times per week.
• Just 15 minutes of cycling (2.5 miles) twice a day burns the equivalent of 10 lbs per year.

Design and physical activity

Creating a more enticing and walkable public realm
• Can result in 35-161% increase in physical activity (e.g. walking)

Unhealthy behaviors have negative environmental impacts

Watching television instead of engaging in active play
Driving instead of walking, biking, and transit
Using elevators and escalators instead of stairs

Overview of the Active Design Guidelines

• Creation of the Guidelines
• Urban Design Strategies
• Building Design Strategies

www.nyc.gov/adg
**Fit-City: Promoting Physical Activity Through Design**

**A Strategy to Open Dialogue with Planning and Design Communities**

**Creation of the Guidelines**

**Content**

1. Environmental Design and Health: Past and Present
2. Urban Design: Creating an Active City
3. Building Design: Creating Opportunities for Daily Physical Activity
4. Synergies with Sustainable and Universal Design

[www.nyc.gov/adg](http://www.nyc.gov/adg)

**Urban Design Strategies**

- Land Use Mix
- Parks / Play Areas / Plazas
- Transit Access
- Pedestrian Environment
- Bicycle Network and Infrastructure

[www.nyc.gov/adg](http://www.nyc.gov/adg)

**Urban Design**

**Land Use Mix**

Take advantage of New York's rich mix of uses

Adjacency of offices and residences to services & amenities promotes local walking

Supermarkets and farmers markets encourage healthy nutrition

**Parks/ Play Areas/ Plazas**

Convenient parks and plazas encourage active utilization

Design parks for local cultures and for range of age groups

Attractive plazas have mix of trees, lighting, water fountains & movable/ fixed seating
Urban Design
Transit Access

- Provide attractive and sheltered seating areas to encourage use of transit routes
- Separate bus lanes from traffic to make transit more convenient

Urban Design
Pedestrian Environment / Streetscape

- Provide places of rest to complement active walking and jogging
- Enliven the sidewalk with street cafes
- Integrate public art into the streetscape

Urban Design
Pedestrian Environment / Traffic Calming

- Calm traffic with landscaped medians and curved roadway segments
- Reduce crossing distances with median refuge islands

Urban Design
Bicycle Network and Infrastructure

- Encourage use through development of interconnected bikeways
- Provide attractive signage, wayfinding, and secure bike parking

Site + Building Design
Bicycle parking + storage

- Secure bike storage with easy access

Building Design Strategies

- Bicycle Parking and Storage
- Recreational Programming
- Stairs: Accessibility, Visibility, Convenience
- Stairs: Aesthetics
- Stairs: Signage and Prompts

www.nyc.gov/adg
A Year-Round Coney Island

Provides fun and affordable recreational opportunities
- Mary Walton Children’s Center
- Public School 64, Queens
- 10 West End Ave, Manhattan

Stairs: accessibility, visibility, convenience

Stair of prominence and visual interest
Skip stop elevators to increase stair use
Enclosed stairs that use fire rated glass to increase visibility

Stairs: aesthetics

Stairs to receive plenty of natural daylight
Art in stairs to increase visual interest
Stairs designed to invite users

Motivational Signage placed at points of decision

Implementation Considerations:
Synergies and Policy Initiatives

- Universal Design
- Sustainable Design
- City Policy Initiatives
- Case Study: NYC Plaza Program

Pratt Institute School of Architecture:
Ample ramps in buildings to encourage walking and provide active access for all

www.nyc.gov/adg
Site + Building Design

Synergies with sustainable design

Programmed outdoor spaces including community roof gardens

18-story tower will harvest rainwater for growing food

Will include prominent stairs, fitness center + bike storage

City Policy + Implementation

NYC FRESH Program

Zoning and tax incentives for providing fresh food options in the city’s underserved areas with high health needs

City Policy + Implementation

NYC World Class Streets

Remaking NYC’s public realm:
- Plaza Program
- World Class Boulevards
- Complete Streets Projects and Design Standards
- Public Art Program
- New Streetscape Materials
- Coordinated Street Furniture Program
- Weekend Pedestrian and Cycling Streets

City Policy + Implementation

Zoning for Bicycle Parking

Increasing active transport by providing safe and secure parking for bike commuters

City Policy + Implementation

NYC Green Codes

How do we encourage good stair design and promote better stair access?

City Policy + Implementation

Case Study: NYC Plaza Program

Objective: Create or enhance a public plaza in every community
Penfield Planning Board
June 21, 2011

Case Study: NYC Plaza Program

**Definition and character**

A plaza is:

- Located fully within the **public right of way** (streets and sidewalks)
- Of **variable size and shape**
- Designed for **pedestrian use**
- Typically incorporating seating, decorative paving, trees, lighting, and public art

---

Case Study: NYC Plaza Program

**Where to make plazas**

1. Where there is **excessive road space** or where streets are not heavily used by cars
2. Where there are **willing partners to maintain and manage them**

---

Case Study: NYC Plaza Program

**Where to make plazas**

1. Where there is **excessive road space** or where streets are not heavily used by cars
2. Where there are **willing partners to maintain and manage them**
3. Along active **pedestrian corridors and transit hubs**
4. Where appropriate, **nearby uses** would help to **activate the plaza**

---

Case Study: NYC Plaza Program

**Plaza Programming**

- **Temporary art**
- **Public events**
- **Concessions and temporary markets**

---

More information: [www.nyc.gov/plazas](http://www.nyc.gov/plazas)
A Closer Look: Synergies with LEED

- Health benefits in existing LEED credits
- Physical Activity Innovation Credit

www.nyc.gov/adg

Schedule A

Sustainable Sites
Health Benefits in Existing LEED Credits (NC/CI)

- Development density and community connectivity
- Public transportation access
- Bicycle storage and changing rooms

LEED Physical Activity Innovation Credit

- Developed through a public-private partnership and used for the new Riverside Health Center
- Detailed information is available at:
  - www.1100architect.com under Sustainability

Case Study: Via Verde

Case Study: Via Verde – green, healthy, and affordable

- 1.5 acre site in the South Bronx, with access to transit
- LEED Gold Rating, incorporating Physical Activity Innovation Credit
- Rooftop gardens are a central design feature
- Mix of low-income rental apartment, middle-income co-ops, and live-work units
**Case Study: Via Verde**

**Via Verde: Physical Activity Elements**

- Prominent and accessible stairs, with ample daylight
- Signage to encourage stair use (English and Spanish)
- Community garden
- Outdoor playground
- Interior exercise facilities
- Bicycle storage

More information: www.brightpower.com under Green Buildings

---

**LEED Physical Activity Innovation Credit**

**Next Steps**

- Move toward a pilot credit (30-40 projects needed), and eventually a standard LEED credit
- Work on developing an Innovation Credit for Commercial Interiors
- Continue to document the benefits of Active Design

---

**What can you do today?**

- Download and read the complete Active Design Guidelines
  www.nyc.gov/adg

- **Spread the word!** Discuss with colleagues, clients, professional associations. Consider ways to incorporate health and physical activity into your projects.

- Participate in upcoming half-day **conferences**:
  - Fit Nation DC (February 2nd)
  - Fit Nation New Orleans (mid-May)
  - More details will be available at www.alany.org

---

**Q&A and comment period**

Send in your ideas:

1. What **opportunities** do you see for implementing Active Design in your own community? Or integrating it into your work?
2. What **challenges** do you see for implementing Active Design?

---

**Contact**

Suzanne Nienaber  
NYC Active Design Program  
cfNienabeSu@ddc.nyc.gov

---

www.nyc.gov/adg