

**825 Coxwell Ave – Zoning Amendment Application –
Final Report**

Date:	June 3, 2011
To:	Toronto and East York Community Council
From:	Director, Community Planning, Toronto and East York District
Wards:	Ward 31 – Beaches-East York
Reference Number:	10 194423 STE 31 OZ

SUMMARY

This application was made on or after January 1, 2007 and is subject to the new provisions of the Planning Act and the City of Toronto Act, 2006.

This application proposes the phased redevelopment of the Toronto East General Hospital site located at 825 Coxwell Avenue.

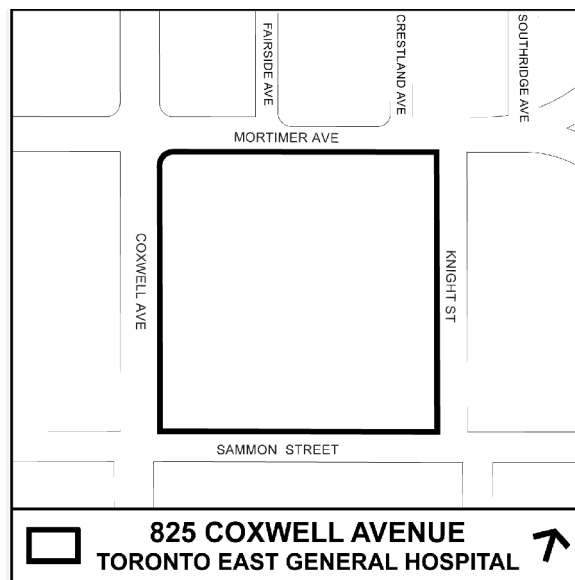
The proposed hospital redevelopment to be guided by a Comprehensive Master Plan represents good planning and will result in a significant improvement in the provision of health care for the East York and surrounding community, as well as Toronto as a whole. Zoning amendments proposed to implement the master plan include building envelopes, development standards and holding provisions.

This report reviews and recommends approval of the application to amend the Zoning By-law.

RECOMMENDATIONS

The City Planning Division recommends that:

1. City Council amend Zoning By-law 6752, for the lands at 825 Coxwell Avenue substantially in accordance



with the draft Zoning By-law Amendment attached as Attachment No. 8 to the report dated June 3, 2011, from the Director, Community Planning, Toronto and East York District.

2. City Council authorize the City Solicitor to make such stylistic and technical changes to the draft Zoning By-law Amendment as may be required.
3. City Council endorse the Toronto East General Hospital Site Master Plan as shown on Attachment 1 to the report dated June 3, 2011, from the Director, Community Planning, Toronto and East York District.
4. Prior to the introduction of the Bills in Council, City Council require the owner to submit a Salvage and Conservation Plan for the review and approval by the Chief Planner and Executive Director of City Planning.
5. Prior to the issuance of Notice of Approval Conditions for Phase 1, City Council require the owner to submit a Heritage Interpretation and Conservation Plan, satisfactory to the Chief Planner and Executive Director of City Planning that includes how the heritage elements applicable to Phase 1 pursuant to the Salvage and Preservation Plan are being integrated, conserved and interpreted, in Phase 1 of the development proposal.
6. Prior to the issuance of Notice of Approval Conditions for Phase 1 of the development, City Council require the owner to submit a Construction Management Plan satisfactory to the Chief Planner and Executive Director of City Planning.

Financial Impact

The recommendations in this report have no financial impact.

DECISION HISTORY

The Toronto East General Hospital has evolved to its current form with many additions to the original building which opened in 1929. This was achieved through a series of zoning amendments as well as minor variances. The most recent addition is the G Wing on Mortimer Avenue which was completed in 2001 and houses, among other hospital functions, the Emergency Department. Only one permission, for a 10-storey building addition on the Sammon Street frontage, was not built and will be superseded by the development proposed by this application.

ISSUE BACKGROUND PROPOSAL

The proposal is for the phased redevelopment of a large proportion of the existing hospital over the long term. The Master Plan submitted with the application outlines the timing and phasing of the redevelopment:

“Timing and Phasing

The Toronto East General Hospital Master Plan is a vision for the long-term, phased redevelopment of the majority of the site. The first Phase is expected to move forward as soon as funding comes available, anticipated in the short term. The second Phase of development is not anticipated for at least 15-20 years. Additional Phases of development beyond the next 15-20 years are included in the master plan to accommodate the future needs of the Hospital. For all Phases of development, Toronto East

General Hospital must maintain full operations. The demolition process is divided into sub-phases to ensure that replacement beds and services are constructed before existing spaces are removed.

Phase 1

The first Phase of the Toronto East General Hospital redevelopment will replace some of the oldest and most dysfunctional clinical spaces, with a new fit-for-purpose in-patient wing and podium. It will consist of 35,556 square metres of new Gross Floor Area and the demolition of the A, B, C, E, & F wings (see Attachment 1 which outlines each wing). The majority of the new Coxwell open space is also constructed in Phase 1, with the exception of the area occupied by the existing D-wing. The D-wing will provide space for some of the Hospital's administration services until Phase 2 is constructed. Phase 1 also includes a new Hospital drop-off and a below-grade parking garage. The below-grade garage will allow enough spaces to meet the on-site parking demand as well as alleviate parking demand on neighbourhood streets, while transportation demand management measures are getting underway. The oxygen tanks located on Sammon Avenue are relocated to Mortimer Avenue to make room for the new inpatient wing.

Phase 2

The second Phase of development completes the Sammon Avenue frontage with the removal of K-wing. The majority of the Coxwell Avenue frontage is also completed at this time with a new in-patient wing and podium extending from the existing J-wing. Phase two also expands the below-grade parking garage under the area vacated by the D-wing and introduces a second garage entrance from Mortimer Avenue.

Phase 3

Phase 3 results in the full build out of the site and the redevelopment of the Knight Street frontage. The existing parking garage and surface parking lot are replaced by new clinical spaces and below-grade parking.”

Site and Surrounding Area

The property is bounded by Coxwell Avenue, Mortimer Avenue, Knight Street and Sammon Avenue. It is occupied by the Toronto East General Hospital, which was constructed in phases between 1927 and 2001.

The property is adjacent to low density residential on the Mortimer Avenue, Knight Street and Sammon Avenue frontages. Immediately west of the Hospital, across Coxwell Avenue, is RH McGregor Elementary School and the former East York Board of Education office, which is currently used for medical offices. Northwest of the site is the Memorial Gardens Park and East York Civic Centre.

Provincial Policy Statement and Provincial Plans

The Provincial Policy Statement (PPS) provides policy direction on matters of provincial interest related to land use planning and development. The PPS sets the policy foundation for regulating the development and use of land. The key objectives include: building strong communities; wise use and management of resources; and, protecting public health and safety. City Council's planning decisions are required to be consistent with the PPS.

The Growth Plan for the Greater Golden Horseshoe provides a framework for managing growth in the Greater Golden Horseshoe including: directions for where and how to grow; the provision of infrastructure to support growth; and protecting natural systems and cultivating a culture of conservation.

City Council's planning decisions are required by the Planning Act, to conform, or not conflict, with the Growth Plan for the Greater Golden Horseshoe.

Official Plan

The Official Plan designates the site 'Institutional' which permits a hospital. There is no applicable Secondary plan.

Policy 4.8.5.1 of the Official Plan states:

“Universities, colleges and hospitals will be encouraged to create campus plans in consultation with nearby communities that will:

- a. identify heritage buildings and landscapes, accessible open spaces, natural areas and important views to be conserved and integrated;
- b. be compatible with adjacent communities;
- c. create visual and physical connections that integrate campuses with adjacent districts of the City;
- d. identify the network of pedestrian routes to be maintained, extended and improved;
- e. examine existing transportation modes and create policies and programs that emphasize the use of public transit, walking and cycling over automobile travel;
- f. minimize traffic infiltration on adjacent neighbourhood streets;
- g. provide bicycle parking for employees, students and visitors and sufficient off-street automobile parking;
- h. identify development sites to accommodate planned growth and set out building envelopes for each site; and
- i. identify lands surplus to foreseeable campus needs that can be leased for other purposes.”

Zoning

The property is zoned R2A in the former Borough of East York Zoning By-law 6752. The R2A zoning allows for a range of residential and institutional uses, as well as uses such as community centres, libraries, schools and places of worship.

In addition to the general provisions, By-law 6752 contains exceptions related to the subject property which permit the existing hospital as built, as well as unbuilt previously planned additions to the hospital. There have also been minor variances approved by the Committee of Adjustment. The most Staff report for action – Final Report – 825 Coxwell Ave

significant of the unbuilt permissions is for a 10-storey (plus mechanical penthouse) addition along the Sammon street frontage.

Site Plan Control

A Site Plan Approval application for Phase 1 of the development has been submitted. The proposed zoning amendment contains a hold on Phases 2 and 3 of the development which will be lifted once a Site Plan Approval application had been submitted for each phase, along with other studies.

Reasons for Application

The proposed redevelopment envisioned in the master plan differs with respect to building location, density and height from the various planning approvals given previously during the evolution of the hospital. Site specific zoning by-law permissions will be required to accommodate the phased redevelopment.

Community Consultation

A Community Consultation was held on March 2, 2011, and was attended by approximately 80 members of the public, many of whom also identified themselves as staff of the hospital. The questions asked related to existing parking and traffic issues, concerns with noise, parking and other construction related issues, and the aesthetics of the new building.

The hospital has undertaken significant outreach and public consultation for the last few years. They have advised that they incorporated input from residents and other stakeholders into the current proposal.

Agency Circulation

The application was circulated to all appropriate agencies and City divisions. Responses received have been used to assist in evaluating the application and to formulate appropriate by-law standards.

COMMENTS

Provincial Policy Statement and Provincial Plans

The PPS states that healthy, liveable and safe communities are sustained by assuring that necessary infrastructure and public service facilities are or will be available to meet current and projected future needs (amongst a number of other criteria). The redevelopment of the Toronto East General Hospital will ensure that the hospital facilities will be able to accommodate the changing needs of the local community and beyond in the years to come. The proposal is consistent with the PPS.

The proposal conforms and does not conflict with the Growth Plan for the Greater Golden Horseshoe.

Land Use

A public hospital and the accessory uses normally contained within a hospital are permitted uses on the entire site under existing permissions of the Official Plan and zoning by-law. Retail stores and restaurant/take out restaurants are considered appropriate accessory uses within a hospital.

Heritage

The Toronto East General Hospital has played an important role as a significant community institution and has served as a local landmark in the East York community since it opened in 1929. Subsequent to the construction of the original building (now known as D-Wing), additional buildings were built including the School of Nursing in 1930, a nurse's residence in 1932 and a number of other additions including the current F-Wing in the 1940's.

After World War II, the hospital planned major extensions that formed the three part complex that now serving as the main entrance to the hospital on the Coxwell frontage (currently know as A-Wing, B-Wing and C-Wing). They were opened in 1952 (C-Wing) and 1959 (A- wing and B-Wing) and remain the most recognizable portion of the building. Further additions were constructed in 1958, the 1970's and 2001, resulting in the hospital building as it stands today.

The hospital site has not been listed or designated pursuant to the Ontario Heritage Act. However, given its importance in the community, the applicant commissioned a heritage architect who undertook a detailed site inspection of the building, in consultation with City of Toronto Heritage Preservation staff, to identify elements of the existing building that should be preserved, reinstalled and/or interpreted during hospital redevelopment. The items to be preserved include, among others, corner stones, the stain glass windows in the existing lobby and donor plaques. The items identified in a report prepared by the applicant will be part of an interpretation plan detailing how and in which phase of the redevelopment the individual items will be installed as well as how specific elements will be preserved and stored until the point of reinstallation.

The Site Plan Approval process, including registered agreements under Section 114 of the City of Toronto Act, 2006 will be used to secure the identified items. Prior to the introduction of the Bills in Council, the owner will be required to submit a Salvage and Conservation Plan for the review and approval by the Chief Planner and Executive Director of City Planning.

Master Plan

The City of Toronto Official Plan contains policies that encourage the development of master plans for universities, colleges and hospitals. Master plans (also called campus plans) allow for these institutions to develop their lands quickly when donor or government money becomes available. The creation of a master plan also allows for well thought out designs that minimize impacts on the adjacent neighbourhood, while allowing for the future projected needs of the hospital.

The Toronto East General Hospital Master Plan addresses all of the considerations outlined in the Official Plan for the preparation of a master plan. As the Master Plan states, it will "ensure that, as the Hospital continues to grow and evolve over the next 20+ years, new additions will contribute to improving the quality of the surroundings." Other highlights of the master Plan include:

"Redevelopment of the Hospital's outdated patient facilities will bring them in-line with contemporary standards and best practices for health care and infection control, and continue the legacy of community health care on the Coxwell Avenue site.

The new Hospital building will reflect architectural excellence, with green building features, better access to light, fresh air, green space, and a coordinated design approach that will allow for further expansion when required.

Comprehensive redevelopment of the property will reinstate the publicly-accessible open space that was part of the original Hospital, and improve the site's relationship to the public realm and the surrounding neighbourhood.

Site layout, circulation and parking issues that have had a negative impact on patient care, efficiency of staff resources and relationships to the surrounding neighbourhood will be improved.

Most importantly, comprehensive redevelopment will allow Toronto East General Hospital to continue to serve the health care needs of southeast Toronto residents, in an environment that promotes wellness, minimizes infection risk, retains top quality staff and is a positive influence on the surrounding area."

Density, Height, Massing

Upon completion of all three phases of the hospital development, the density of the site will increase to 3.58 times the area of the lot. The density of the current hospital building is 2.48 times the area of the lot.

The height of the building additions range from a 1-storey addition with a height of 5.81 metres to an 8-storey addition with a height of 35.56 metres. The Phase 1 addition (8-storeys) is located on the south side of the hospital where there is a current permission (un-built) for a 10-storey addition. The building has been designed to mitigate the visual impact of the height on the adjacent residential uses. The effective features include the introduction of a recessed area to break up the building mass and a substantial canopy at the main level.

Phase 2 includes a 6-storey addition that will be a direct continuation of the existing 6-storey building on Mortimer Avenue. Impact of this addition is minimized because there are no residential units on the north side of Mortimer Avenue which directly face the new additions.

Phase 3 is 2-storey and 6-storey additions on Knight Street, which includes the area currently occupied by the 4-storey Knight Street parking garage. The additions will be setback 5.25 metres from the property line for the first 3 stories and 18 metres for the upper 3 stories to minimize the impact on adjacent residential uses.

Sun, Shadow

Phase 1 of the redevelopment, on the north side of Sammon Avenue, comprises of an 8-storey addition to a height of 35.56 metres. Its location to the north and west of the existing residential buildings fronting onto the south side of Sammon Avenue and residences on the east side of Knight Street, ensures that the majority of shadow cast from this addition will be within the hospital property itself.

Phase 2 of the redevelopment is a continuation of the existing 6-storey portion of the hospital building where the emergency ward is located. The shadow from this portion of the building will be limited during the spring and summer months but is significant during the winter. The existing house form buildings also cast a significant shadow on each other during the winter. Unlike the homes on the south side of the hospital, the homes to the north front onto side streets, limiting the shadow impact on the main windows of these houses.

Phase 3 of the redevelopment, along Knight Street is similar to Phase 2 in that the shadows cast are significant in the winter months, during which time the existing hospital and the existing Knight Street garage already cast similar shadows.

The hospital has been designed to maximize sunlight to patient rooms.

Open Space

One of the key elements of the hospital Master Plan is the reintroduction of a significant sized open space in front of the hospital along Coxwell Avenue. The open space will be available for use by patients, staff, hospital visitors and the wider community. The landscaping will include seating areas, a large open lawn and therapeutic areas for patients.

The hospital also plans a number of rooftop gardens that will be directly accessible from within the hospital and for use by patients, staff and visitors. Green roofs will be provided on the taller components of the hospital building and will not be accessible.

Traffic Impact, Access, Parking

Most of the significant problems currently associated with the hospital relate to the lack of properly designed parking for the public, queuing up of taxis, and the lack of an appropriate drop off and pick up area at the main entrance to the hospital.

The proposed main entrance to the hospital will be recessed into the site which will allow for a significantly improved drop off and pick up area. The new entrance driveway will enable the existing taxi stand to be removed from Coxwell Avenue and relocated onto hospital property.

Access to the 2 levels of underground parking to be included in Phase 1 will be located in a similar location to the existing access to the Sammon Avenue surface parking lot. The gate controlling access to the underground parking will be located significantly back from the street, allowing queuing space for a minimum of 7 cars. This should reduce traffic congestion on Sammon Avenue. Upon the completion of Phase 1, there will be 884 parking spaces on the site, a net increase of 199 parking spaces.

Phase 2 will include the introduction of an additional 3 floors of underground parking that will be attached to the Phase 1 underground parking garage. A second access to the underground will be built along with Phase 2 from Mortimer Avenue.

Phase 3 will include a 4 level underground parking garage to replace the existing above grade Knight Street garage. Access will likely remain off of Knight Street.

Pedestrian Movements and Access

The current main entrance to the hospital is mid block between the intersection of Sammon Avenue and Mortimer Avenue with Coxwell Avenue. Both intersections are signalized and allow for sufficient time for pedestrians to cross Coxwell Avenue. As noted in the Urban Transportation Considerations report submitted with the application, a significant amount of J-walking occurs in front of the hospital, due to the location of the Medical Centre as well as the surface and street metered parking across the street on the west side of Coxwell Avenue.

The installation of a cross walk in this location, close to the two signalized intersections, is not desirable given its impact on traffic movement on Coxwell Avenue, the existing hospital driveway and the on-street parking on Coxwell Avenue.

Upon the completion of Phase 1 of the development, the new hospital entrance will be located closer to Sammon Avenue and there will be additional parking provided to meet the parking demand, both which may reduce the amount of J-walking. Should the problem continue to exist, the City and applicant should consider remedies prior to the Phase 2 site plan approval that include, but are not limited to, the installation of a cross walk or signalized intersection timed with the existing intersections and/or the relocation of the TTC bus stop to the north side of Sammon Avenue (where the taxi stand currently exists). These may help to improve pedestrian access to the hospital and limit the potential conflicts with vehicles.

Streetscape

Existing street trees will be maintained to the extent possible and replacement trees for those that need to be removed, as well as additional trees will be secured at the time of Site Plan Approval.

Opportunities for the introduction of street furniture will be investigated as part of the Site Plan Approval process for each Phase.

Holding Provisions

While Phase 1 of the hospital redevelopment is expected to commence within the next couple of years, Phases 2 and 3 are planned to accommodate future hospital needs with an unknown commencement date. The applicant has submitted a site plan approval application for Phase 1, but has not proceeded to develop detailed plans for the other 2 phases. Given the long term nature of the build out of the hospital, the ever changing needs of health care and the need to be ready to move forward in a rapid fashion once funding becomes available, the use of a holding provision is appropriate. This will allow for the approval of an appropriate building envelope without detailed site plan drawings.

While it is desirable to allow the hospital to be ready to move forward with future phases in a rapid fashion, the local community will continue to evolve during this time. Also, Phase 1 of the hospital expansion will be fully operational and future phases may be able to address unforeseen transportation and servicing issues resulting from Phase 1 implementation of the master plan. As such, studies submitted with the Phase 1 Site Plan Approval application will need to be updated for each subsequent phase.

The conditions for removal of the holding provision are as follows:

- (i) the submission of an Site Servicing Plan, satisfactory to the Executive Director of Technical Services, for the respective phase of the development;
- (ii) the submission of a Traffic Operations Assessment, satisfactory to the Executive Director of Technical Services, for the respective phase of the development;
- (iii) the submission of a Heritage Interpretation and Conservation Plan, satisfactory to Chief Planner and Executive Director of City Planning, that includes how the heritage elements applicable to the respective phase of development and pursuant to the approved Salvage and Preservation Plan are being integrated, conserved and interpreted in the development proposal for the phase.

- (iv) the submission of a Construction Management Plan, satisfactory to the Chief Planner and Executive Director of City Planning, for the respective phase of the development; and
- (v) a site plan agreement binding on the owner has been entered into pursuant to Section 114 of the City of Toronto Act, 2006 and Section 41 of the Planning Act, as applicable and as amended, superseded or replaced from time to time, for the respective phase of development that secures appropriate conditions related to the plans and studies referred to in i)-iv) above to the satisfaction of the Chief Planner and Executive Director of City Planning.

Toronto Green Standard

On October 27, 2009 City Council adopted the two-tiered Toronto Green Standard (TGS). The TGS is a set of performance measures for green development. Tier 1 is required for new development. Tier 2 is a voluntary, higher level of performance with financial incentives. Achieving the Toronto Green Standard will improve air and water quality, reduce green house gas emissions and enhance the natural environment.

The applicant is required to meet Tier 1 of the TGS.

The applicant has advised that they will be meeting the Tier 1 requirements and that they are targeting LEED Silver Certification for the project. The applicant has advised that the approach to sustainability includes reducing the environmental impact of the facility through the following measures:

- Maximizing outdoor green space
- Maximizing daylight and views to increase wellness and productivity
- Potable water use reduction through efficient fixtures
- Building automation systems to provide energy use accountability
- Efficient mechanical and electrical systems for energy optimization
- Low VOC materials and a focus on indoor environmental quality
- Minimizing materials use over the building life and diverting construction waste.

The site specific zoning by-law will secure performance measures for the following Tier 1 development features: Automobile Infrastructure and Cycling Infrastructure.

Other applicable TGS performance measures will be secured through the Site Plan Approval process. These include, collection of recycling and organic waste, pedestrian infrastructure, stormwater management, tree protection and new planting, and design features for migratory birds.

Development Charges

Development charges do not apply to hospitals.

CONTACT

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SIGNATURE

Gregg Lintern, Director, MCIP, RPP
Community Planning, Toronto and East York District

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ATTACHMENTS

Attachment 1: Site Plan

Attachment 2: West Elevation

Attachment 3: South Elevation

Attachment 4: North Elevation

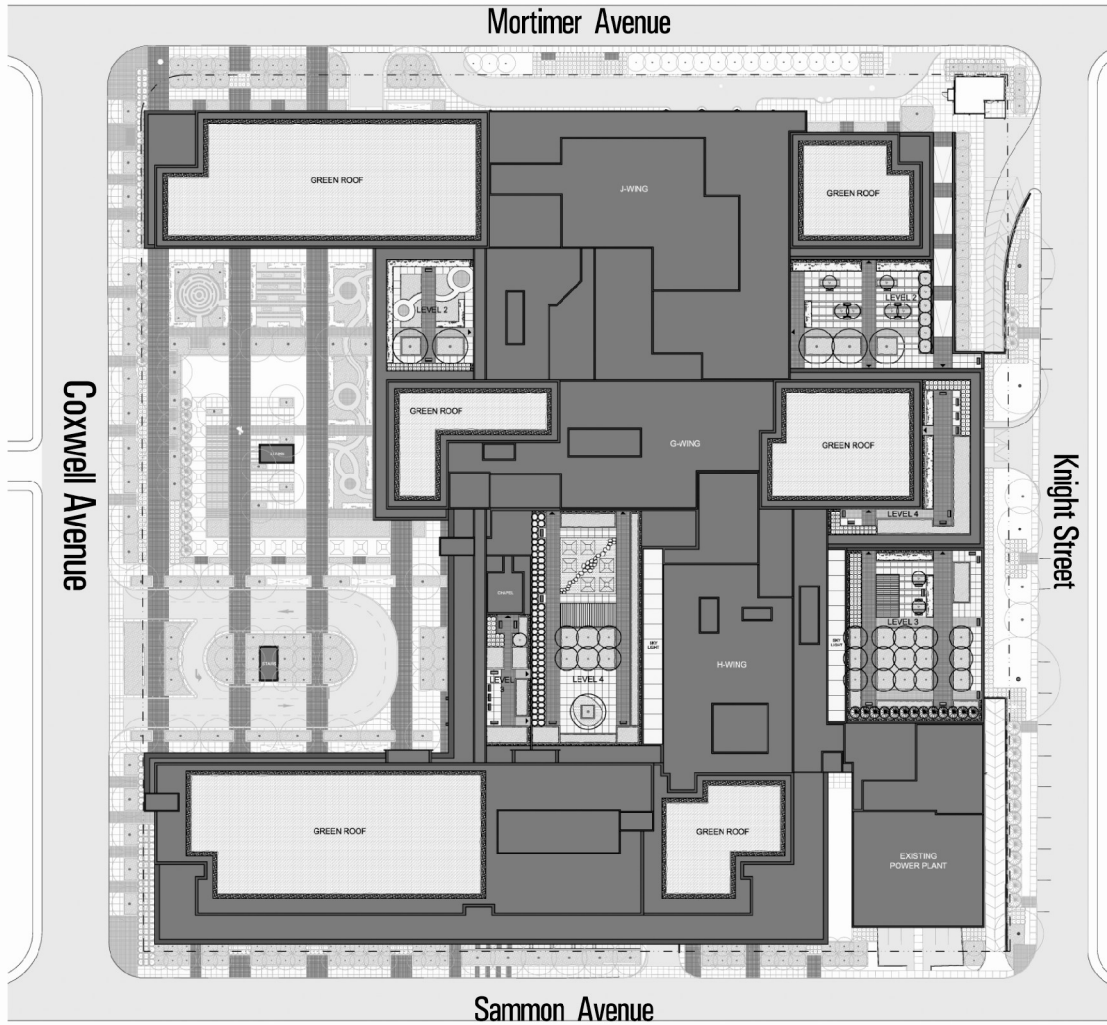
Attachment 5: East Elevation

Attachment 6: Zoning

Attachment 7: Application Data Sheet

Attachment 8: Draft Zoning By-law Amendment

Attachment 1: Site Plan



Final Build Out of Master Plan

Applicant's Submitted Drawing

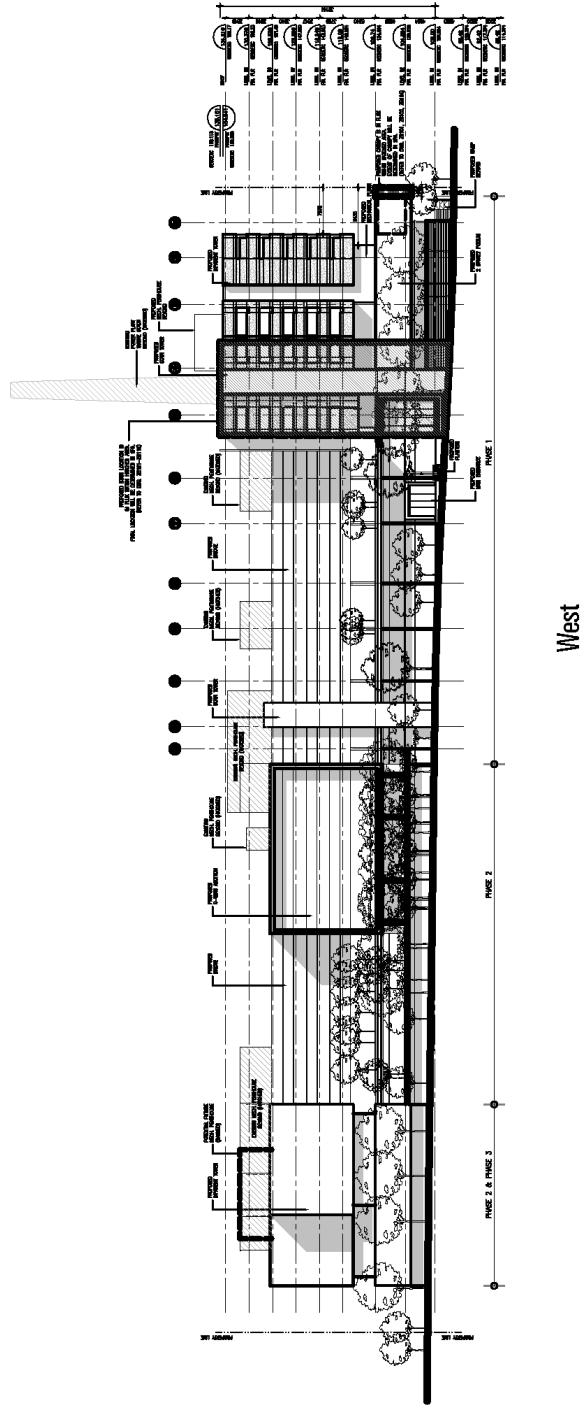
Not to Scale
07/07/10



**825 Coxwell Avenue
Toronto East General Hospital**

File # 10_194423

Attachment 2: West Elevation



825 Coxwell Avenue

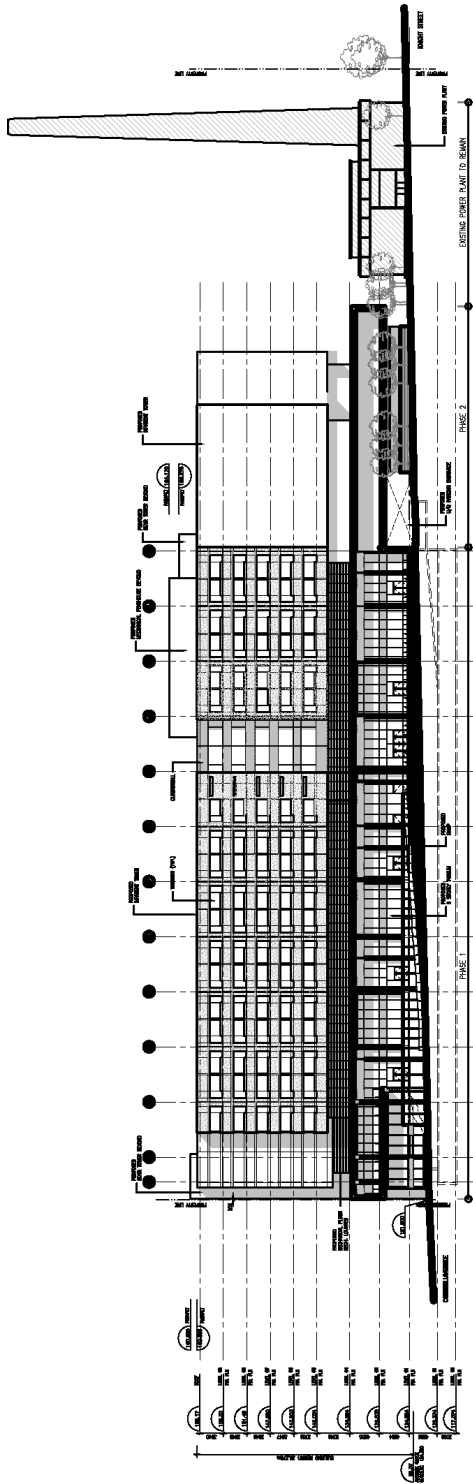
File # 10 194423 0Z

Elevations

Applicant's Submitted Drawing

Not to Scale
05/27/2011

Attachment 3: South Elevation



South

Elevations

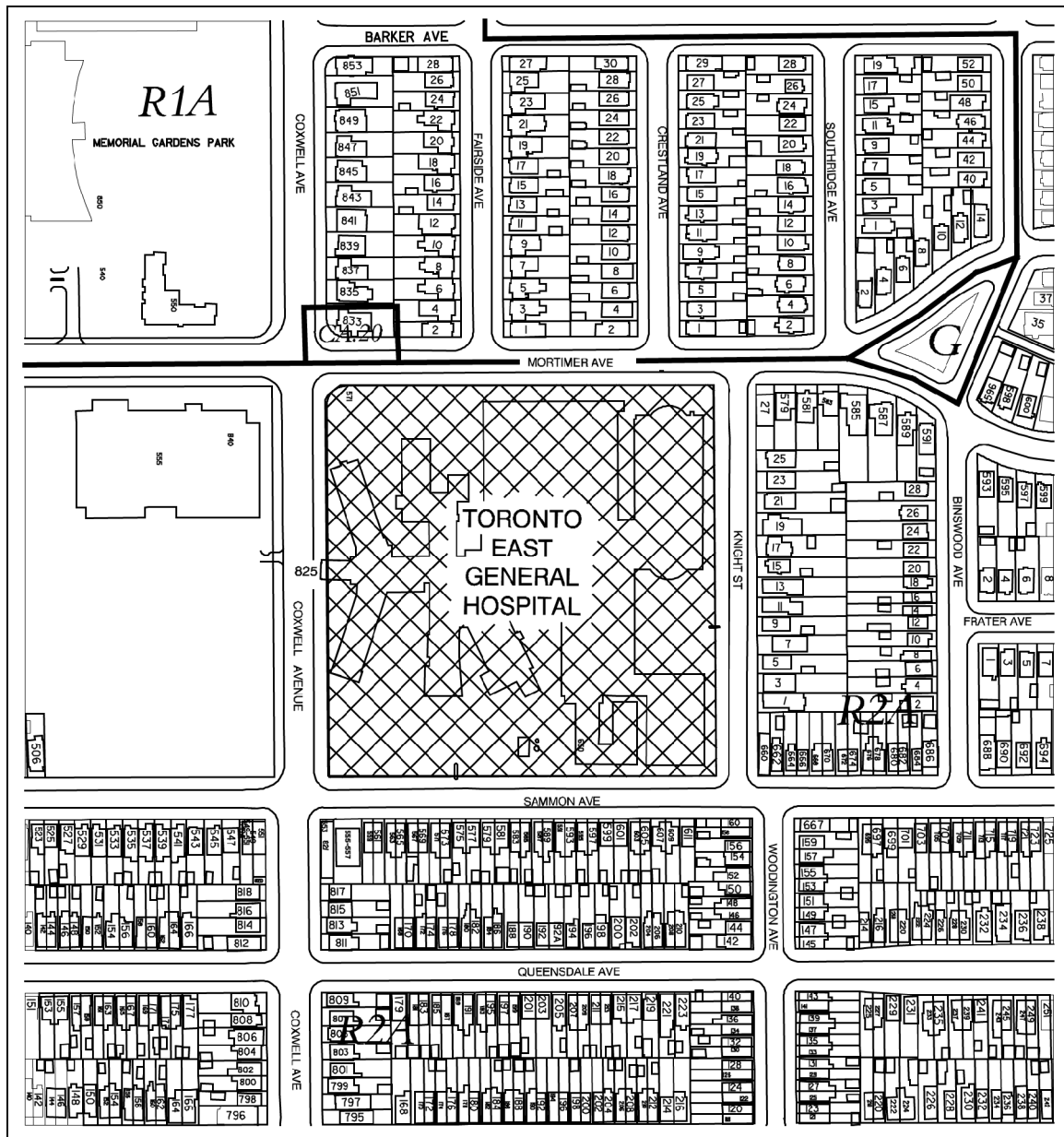
Applicant's Submitted Drawing

Not to Scale
06/27/2011

825 Coxwell Avenue

File # 10 194423 0Z

Attachment 6: Zoning



825 Coxwell Avenue
File #10_194423_02

- G Conservation
- R1A Low Density Residential
- R2A Medium Density Residential
- CA Commercial Site Specific



Not to Scale
East York Zoning By-Law 6752
Extracted 05/26/11

Attachment 7: Application Data Sheet

Application Type	Official Plan Amendment & Rezoning	Application Number:	10 194423 STE 31 OZ
Details	OPA & Rezoning, Standard	Application Date:	June 11, 2010

Municipal Address: 825 COXWELL AVE
 Location Description: PL 2250 BLK C **GRID S3107
 Project Description: Master plan for the redevelopment of Toronto East General Hospital

Applicant:	Agent:	Architect:	Owner:
BORDEN LADNER GERVAIS LLP			BOARD OF GOVERNORS

PLANNING CONTROLS

Official Plan Designation:	Institutional Areas	Site Specific Provision:	
Zoning:		Historical Status:	
Height Limit (m):		Site Plan Control Area:	

PROJECT INFORMATION

Site Area (sq. m):	34514	Height:	Storeys:	8	
Frontage (m):	177.79		Metres:	35.2	
Depth (m):	187.02				
Total Ground Floor Area (sq. m):	19715.81				Total
Total Residential GFA (sq. m):	0		Parking Spaces:	946	
Total Non-Residential GFA (sq. m):	123491		Loading Docks	9	
Total GFA (sq. m):	123491				
Lot Coverage Ratio (%):	57.1				
Floor Space Index:	3.58				

DWELLING UNITS

FLOOR AREA BREAKDOWN (upon project completion)

			Above Grade	Below Grade
Tenure Type:				
Rooms:	0	Residential GFA (sq. m):	0	0
Bachelor:	0	Retail GFA (sq. m):	0	0
1 Bedroom:	0	Office GFA (sq. m):	0	0
2 Bedroom:	0	Industrial GFA (sq. m):	0	0
3 + Bedroom:	0	Institutional/Other GFA (sq. m):	123491	0
Total Units:	0			

CONTACT: **PLANNER NAME:** **Leontine Major, Senior Planner**
TELEPHONE: **(416) 397-4079**

Attachment 8: Draft Zoning By-law Amendment

Authority: Toronto and East York Community Council Item ~ as adopted by City of
Toronto Council on ~, 20~
Enacted by Council: ~, 20~

CITY OF TORONTO

Bill No. ~

BY-LAW No. ~-20~

**To amend East York Zoning By-law No. 6752, as amended,
With respect to the lands municipally known in the year 2011 as,
825 Coxwell Ave**

WHEREAS authority is given to Council by Section 34 of the *Planning Act*, R.S.O. 1990, c.P. 13, as amended, to pass this By-law; and

WHEREAS Council of the City of Toronto has provided adequate information to the public and has held at least one public meeting in accordance with the *Planning Act*;

The Council of the City of Toronto HEREBY ENACTS as follows:

1. The lands subject to this by-law are those lands outlined by a heavy black line and identified as "Area Subject to Amendment" as shown on Map 1 attached hereto.
2. Schedule "A" to By-law 6752, as amended is hereby further amended by changing the zoning category for the Area Subject to Amendment from R2A to R2A.43 and R2A.43(H) as shown on Map 1 attached hereto.
3. Former East York Zoning By-law No. 6752, as amended, is hereby further amended by adding a new Section 7.5.4.43 immediately after Section 7.5.4.42 as follows:

"7.5.4.43 825 Coxwell Avenue – Toronto East General Hospital

7.5.4.43.1 Area Restricted

The provisions of this section shall only apply to those lands municipally known in the year 2011 as 825 Coxwell Avenue which are zoned R2A.43 and R2A.43(H) as shown on Schedule "A".

7.5.4.43.2 General Provisions

On those lands referred to in Section 7.5.4.43.1 of this By-law, no person shall use, occupy, Erect, alter or cause to be used occupied,

erected or altered any Building, Structure or land or part thereof except in accordance with the following provisions:

1) Definitions:

For the purposes of Section 7.5.4.43:

- (a) "BAY WINDOW" means a projecting window which is glazed on at least one side, is located on any one Storey above Grade of a building, but is not an atrium or projection covering or annexed to more than one Storey.
- (b) "BICYCLE PARKING SPACE" means an area used for the purpose of parking and storing a bicycle with a minimum dimension of:
 - (i) if located in a horizontal position (on the ground):
Minimum length - 1.8 metres,
Minimum width - 0.6 metres;
Minimum horizontal clearance from the ground - 1.9 metres; and
 - (ii) if located in a vertical position (on the wall):
Minimum length or vertical clearance – 1.9 metres,
Minimum width - 0.6 metres;
Minimum horizontal clearance from the wall - 1.2 metres.
- (c) "GRADE" means the elevation above the geodetic elevation of 124.03 metres above sea level.
- (d) "GROSS FLOOR AREA" means the aggregate of the areas of each storey above Grade measured between the exterior faces of the exterior walls of a Building at the level of each storey and including the floors below Grade unless they are used only for storage, washrooms, heating equipment, parking, loading and/or other Accessory uses and excluding the above grade parking that existed at the time of enactment of Section 7.5.4.43.
- (e) "LOADING SPACE – TYPE A" means a Loading Space

having a:

Minimum length - 17.0 metres;

Minimum width - 3.5 metres; and
Minimum vertical clearance - 4.3 metres.

having a: (f) "LOADING SPACE – TYPE B" means a Loading Space

Minimum length - 11.0 metres;
Minimum width - 3.5 metres; and
Minimum vertical clearance - 4.0 metres.

having a: (g) "LOADING SPACE- TYPE C" means a Loading Space

Minimum length - 6.0 metres;
Minimum width - 3.5 metres; and
Minimum vertical clearance - 3.3 metres.

(h) "LOT" means the lands outlined by a heavy black line and identified as "Area Subject to Amendment" on Map 1 of By-law No. xxx-2011.

(i) "PARKING SPACE" means an area for the parking and storing of a vehicle with a minimum dimension of:

Length – 5.6 metres
Width – 2.5 metres
Vertical clearance – 2.0 metres

Except that the minimum required width of a Parking Space must be increased by 0.3 metres for each side of the Parking Space that is obstructed by a fixed object such as a wall, column, bollard fence or pipe, if it is situated within 0.3 metres of the side of the Parking Space, measured at right angles and more than 1.0 metres from the front or rear of the Parking Space.

(j) "PHASE 1" "PHASE 2" and "PHASE 3" means Phase 1, Phase 2 and Phase 3 of the proposed phased development of the Public Hospital as illustrated on Map 2 of By-law No. xxx-2011;

(k) "PUBLIC HOSPITAL" means a premises established and approved as a public hospital under the Province of Ontario legislation for the care and treatment of patients, including persons afflicted with or suffering from sickness, disease or injury; convalescent or chronically ill persons; persons

suffering from substance addictions; persons suffering from emotional, psychological or mental disorders; pre-and post natal maternity and newborn care; as well as related diagnostic and preventative care, research and education.

- (l) "MAP 1", "MAP 2" and "MAP 3" means Map 1, Map 2 and Map 3 attached to and forming part of By-law No. xxx-2011;
- (m) "RETAIL STORE" means a premise in which goods or commodities are sold, rented or leased; and
- (n) words or expressions which are capitalized and not defined in this Section 7.5.4.43.2(1) have the same meaning as each word or expression contained in Section 4 of this By-law.

2) Permitted Uses:

Public Hospital

Accessory uses, including Clinic, Drug Store, Restaurant, Restaurant Take-out, Retail Store and Personal Service Shop

3) Development Requirements:

Building Envelope

- (a) no part of any Building or Structure erected or used above finished ground level within the area shall be located otherwise than wholly within the areas delineated by the heavy lines on Map 3;
- (b) notwithstanding Section 7.5.3 of this By-law and except where a heavy line on Map 3 is contiguous with a boundary of the Lot, nothing in Section 7.5.4.43.2(3)(a) shall prevent the following Building elements or Structures from projecting beyond the heavy lines on Map 3:
 - (i) a parking garage; and
 - (ii) eaves, cornices, fences and safety railings, vents, wheelchair ramps, retaining walls, stairs, covered stairs and or stair enclosures associated with an entrance or exit from an underground parking garage, stair landing, decks, planters, entry vestibules, Bay Windows, canopies and oxygen tanks;
- (c) Access to Accessory uses shall be internal to the Public Hospital Building with no direct exterior access, excepting service or emergency access.

Height

- (d) the Height of any Building or Structure, as measured from Grade, shall not exceed the numbers following the symbol "(H)" on Map 3;
- (e) subject to the Height set out in Section 7.5.4.43.2 (3)(d), the number of storeys above Grade for any Building shall not exceed the number of storeys indicated on Map 3;
- (f) nothing in Section 7.5.4.43.2(3)(d) and (e) shall prevent:

- (i) the erection or use of the Building elements or Structures identified in Section 7.5.4.43.2(3)(b);
- (ii) Building elements or Structures on the roof of the Building, used for outside or open air recreation, safety or wind protection purposes, provided:
 - (A) the maximum height of the top of the Building element or Structure is no higher than the sum of three metres and the Height following the symbol "(H)" on Map 3; and
 - (B) the Building element or Structure does not enclose space so as to constitute a form of penthouse or other room or rooms;
- (iii) Building elements, equipment or Structures that are used for the functional operation of the Building, such as stair towers, elevator overruns, mechanical penthouses, roof access, vents, towers, antennas, maintenance equipment, storage and water supply facilities provided that the maximum height of the top of the Building element or Structure is no higher than the sum of five metres and the Height following the symbol "(H)" on Map 3, provided that the Building element, equipment or Structures does not exceed 30 percent of the roof area and, with the exception of the stair towers in Phase 1, is located a minimum of five metres from the building envelope as shown on Map 3; and
- (iv) Parapet walls to a maximum vertical projection of 1.5 metres.

Gross Floor Area

- (g) the total Gross Floor Area on the Lot shall not exceed the following at the completion of the Phase indicated:
 - Phase 1: not exceeding 98,950 square metres;
 - Phase 2: not exceeding 110,700 square metres;
 - Phase 3: not exceeding 123,600 square metres.

Parking Requirements

- (h) Parking Spaces shall be provided on the Lot in accordance

with the following requirements at the completion of the Phase indicated:

Phase 1: a minimum of 884 Parking Spaces or 0.854 Parking Spaces per 100 square metres of total Gross Floor Area on the Lot, inclusive of the 422 parking spaces that are within the above Grade parking structure as they existed at the time of enactment of Section 7.5.4.43, whichever is greater;

Phase 2: a minimum of 0.890 Parking Spaces per 100 square metres of total Gross Floor Area on the Lot, inclusive of the 422 parking spaces that are within the above Grade parking structure as they existed at the time of enactment of Section 7.5.4.43; and

Phase 3: a minimum of 0.854 Parking Spaces per 100 square metres of total Gross Floor Area on the Lot.

- (i) Notwithstanding the requirements of Section 7.5.4.43.2(h), a maximum of seven Parking Spaces in Phase 1 may be obstructed by a fixed object such as a wall, column, bollard fence or pipe situated within 0.3 metres of the side of the Parking Space more than 1.0 metres from the front or rear of the Parking Space without increasing the width of the Parking Space beyond 2.6 metres.

Bicycle Parking Requirements

- (j) Bicycle Parking Spaces shall be provided on the Lot in accordance with the following requirements at the completion of the Phase indicated:

Phase 1: a minimum of 276 Bicycle Parking Spaces; and

Phase 3: a minimum of 346 Bicycle Parking Spaces.

Loading Requirements

- (k) Loading Spaces shall be provided on the Lot in accordance with the following requirements at the completion of the Phase indicated:

Phase 1: a minimum of 9 Loading Spaces, consisting of one Loading Space - Type A, two Loading Space - Type B and six Loading Space - Type C spaces; and

Phase 3: a minimum of 10 Loading Spaces, consisting of one Loading space - Type A, five Loading Space - Type B and four Loading Space - Type C spaces.

7.5.4.43.3 Other By-law Provisions

- 1) Except as amended by this Section 7.5.4.43, all other provisions of this By-law with the exception of Sections 5.4 and 7.5.3 shall apply to the lands referred to Section 7.5.4.43.1.
- 2) Notwithstanding anything in this Section 7.5.4.43, the Public Hospital, having a total Gross Floor Area of 85,710 square meters, as it existed on the date of enactment of this Section 7.5.4.43 and shown as "Existing Building to be Demolished" and "Existing Building to be Maintained" on Map 3, is permitted, in whole or in part, whether contiguous or not, pending completion of the Phase to which it relates as shown on Map 2.

7.5.4.43.4 Holding Provisions

- 1) While the "(H)" symbol is in place, no person shall, within any part of the Lot zoned "R2A (H)" on Schedule A to this By-law, use any portion of the Lot or Erect, alter or use any Building or Structure erected prior to enactment of this Section 7.5.4.43 for any purpose except uses existing on the date of such enactment. Upon the removal of the "(H)" holding symbol, pursuant to Section 36 of the *Planning Act*, permitted uses shall be as set out in this Section 7.5.4.43.
- 2) Those portions of the Lot zoned with the "H" symbol shall not be used for any purpose permitted by this By-law, other than those provided for in Section 7.5.4.43.4(1), until the "(H)" symbol has been removed from the subject lands. The "(H)" holding symbol may be removed incrementally or in phases by amendment to this By-law upon application by the owner to the City when the following conditions have been fulfilled to the satisfaction of Council:

- (i) the submission of a Site Servicing Plan, satisfactory to the Executive Director of Technical Services, or a successor, for the respective phase of the development;
- (ii) the submission of a Traffic Operations Assessment, satisfactory to the Executive Director of Technical Services, or a successor, for the respective phase of the development;
- (iii) the submission of a Heritage Interpretation and Conservation Plan satisfactory to the Chief Planner and Executive Director of City Planning, or a successor, that includes how the heritage elements in the respective phase of development and pursuant to the Salvage and Preservation Plan, prepared by [to be inserted] and dated [to be inserted] are being integrated, conserved and interpreted in the development proposal for the phase.
- (iv) the submission of a Construction Management Plan, satisfactory to the Chief Planner and Executive Director of City Planning, or a successor, for the respective phase of the development; and
- (v) a site plan agreement binding on the owner has been entered into pursuant to Section 114 of the City of Toronto Act, 2006 and Section 41 of the Planning Act, as applicable and as amended, superseded or replaced from time to time, for the respective phase of development that secures appropriate conditions related to the plans and studies referred to in i)-iv) above to the satisfaction of the Chief Planner and Executive Director of City Planning, or a successor.

7.5.4.43.5 Land Division

Despite any existing or future severance, partition, or division of part of the Lot, the provisions of this By-law shall apply to the whole of the Lot as if no severance, partition or division occurred.

- 4. By-law 359, of the former Borough of East York is hereby repealed.
- 5. Zoning By-law No. 6752, as amended, is hereby further amended by repealing Section 12.1.33 in its entirety.

6. Within the lands shown on Schedule "1" attached to this By-law, no person shall use any land or erect or use any Building or Structure unless the following municipal services are provided to the Lot and the following provisions are complied with:
- (a) all new public roads have been constructed to a minimum of base curb and base asphalt and are connected to an existing public highway, and
 - (b) all water mains and sanitary sewers, and appropriate appurtenances, have been installed and are operational.

ENACTED AND PASSED this ~ day of ~, A.D. 20~.

ROB FORD,
Mayor

ULLI S. WATKISS,
City Clerk

(Corporate Seal)

