

**To: Department of Buildings, Village of Bronxville  
Vince Pici**

Date: April 30, 2016  
From: Maureen Hackett, Chair, DRC  
Subject: Minutes, April 13, 2016, DRC

**Minutes of Regular Meeting  
Design Review Committee  
Wednesday, April 13, 2016**

Present: Maggie Marrone, DRC  
Maureen Hackett, DRC  
Stephen Hawkey, DRC  
Larry Vranka, DRC  
James Keogh, New York Presbyterian/ Lawrence Hospital  
Tim Fecker, Lillibridge for NYP/ LH  
Mark Morrison, MKM Landscape Architecture for NYP/ LH  
Timothy Hughes, New York Presbyterian/ Lawrence Hospital

**1. Sight Plan Approval Application 55 Palmer Avenue –Lawrence Hospital – Final Approval of Landscape Design**

The applicant submitted plans for Landscape Restoration of the Pondfield Road West and Palmer Traffic Circle Perimeter, and a Roof Garden.

**DRC reviewed the entire plan and visited the site. Although it is a work in progress and more than fifty percent complete, the application was brought to the committee due to proposed changes due to existing mature trees damaged and removed during recent storms. We have taken the opportunity to comment and make suggestions on the changes needed to the parking lot entrance as well as the existing landscape and restoration still in progress.**

**Pondfield Road West Perimeter and Parking Lot Entrance:**

A pre-existing 14” caliper *Pinus strobus* (white pine) fell recently near the garage entrance. The MKM proposal includes the planting of 3 fastigate (upright) white pine (*Pinus strobus fastigiata*) in this area. We recommend that the hospital and their landscape architect consider planting two larger caliper *Picea abies* (Norway spruce 14-16’) in this area to the left of the entrance which would be more spreading and would serve to screen the wall and equipment area more fully and gracefully long term.

Additionally, the current scheme along this perimeter includes many groups of upright, fastigate deciduous trees of small caliper including fastigate oak (*Quercus palustris*) and hornbeam (*Carpinus betula*). We are assuming that inclusion of multiple groupings of upright trees was an effort to comply with the wishes of residents who were pressuring the hospital to screen the new building and may have forced the overall design to lose its original vision. Long term we recommend that plants which die or end up competing with each other be removed and not replaced, giving room for more spreading replacement trees, and also to allow the Red oaks (*Quercus rubra*) planted on the curb more room to develop. The planting strip containing these oaks red oaks would be better suited to 2-3 larger 4” caliper trees rather than the 5 trees recently planted of 2.5” caliper. Overall, any credits due the hospital through the warranty should be used for fewer and larger specimens as well as a few evergreen accents such as Boxwood (*Buxus americana* 24- 36”) specimens near the pathways and doorways along the façade. Most of the existing understory shrubbery is deciduous and will not read well in winter. Additionally, they are planted right on top of the root balls of the trees. Many of the trees are also in poor condition and leaning at considerable angles.

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**Pondfield Road West Perimeter and Parking Lot Entrance (con't):**

Pinus is not very hospitable to understory plants and Picea may be a better choice. Taxus densiformis is a good choice as a tough evergreen understory plant in the areas where other plants may not do well. There are Rhododendron chinoides planted in various areas along the perimeter as part of the partially implemented plan. These are very nice looking shrubs but tender. If they do not survive, Taxus densiformis (yew) or Buxus green velvet (Boxwood) should be considered as replacements while under warranty and also to fill in areas adjacent to the traffic circle not yet planted.

**Traffic Circle Perimeter and Pathways:**

The plan for the corner of the building where Pondfield meets Parkway includes some deciduous trees and all deciduous shrubbery except for 3 Rhododendron chinoides, which are evergreen. This is an area that could incorporate Boxwood. Some of the deciduous material could be eliminated to accommodate a few groups within the budget.

There are 2 sitting areas along the pathways to be planted with Ilex grabra and Clethra alnifolia. The hospital should consider the fact that Clethra attracts bees in large numbers. This is environmentally sound but may not be the best choice adjacent to benches.

Three additional Locust trees are planned for the corner area closer to Palmer. There are already two existing maple trees and two mature locust in this zone which provide significant shade. I recommend using this money to work on the understory as noted above and to purchase fewer and larger specimens. Or, another group of Amelanchier or Dogwood could be added here for an understory effect.

One last comment- it would be beneficial to consider a possible connection to the adjacent outdoor "patio" area currently populated with some old concrete tables and chairs. Staff and visitors make good use of the spot and it could benefit from connections to the new landscape and some new furniture.

**Roof Garden:**

Generally the roof garden is very nicely designed and planted. The following plants will need to be replaced in some significant numbers due to failure or winter burn:

- 3- Chaemycypris obtusa 4'
- 15 -Cotoneaster salicifolius
- 8 -Astilbe Cattleya
- 4 – Myrica pensylvanica

I'm not sure how the multiple clematis vine and other vine specified will attach to the steel fencing. They need something like lattice or wood for their tendrils to attach and will probably have to be used elsewhere or removed.

There was some concern voiced by the hospital staff regarding the planting of a group of Chaemycypris obtusa shrubbery near the intake vents. This does not pose any problem as any effect on air quality is insignificant compared with the existing pollutants in the air. They should remain where they are.