

## **SUBMISSION RE REDEVELOPMENT OF GREENWICH HOSPITAL (CONCURRENT SSD APPLICATION – SSD 13691238)**

I propose, here, to chiefly deal with this Application as it concerns only the Seniors Living Apartments, and make very little reference to the Main Hospital Building.

I have the following comments and objections to make:

### **A. Section of the 455(1A) Modification Application**

#### **1. Section 6.0, Table 2:**

Although the application states that the Seniors Living buildings remain within the approved limits, I note that this Section of the above Application shows a **DIFFERENCE IN SIZE of the Seniors Living buildings of 11.4%. This arrives from the currently Approved 10,990m x2 to an increased 12,243m x2 now requested.**

#### **2. The report says that it is "substantially the same development", but it is really 2,402m x 2 bigger in total for the Hospital and Seniors Living buildings than previously approved.**

The change for the Seniors Living is to provide several one- and three-bedroom dwellings, thus:

**From 89 x 2-bedroom units originally applied for, to the 75 actually approved, to now:**

10 x 1-bed units,

64 x 2-bed units

15 x 3-bed units

Total: 89 separate units.

i.e. This represents an increase in bedrooms – hence **ADDITIONAL PEOPLE** – from 150 BEDROOMS ACTUALLY APPROVED, TO THE MUCH LARGER FIGURE OF 183 BEDROOMS!

**From 150 to 183 BEDROOMS represents the following:**

- 1. A HUGE PERCENTAGE INCREASE OF 22% that is being asked for, also**
- 2. MUCH GREATER CROWDING OF PEOPLE ON THE SITE and**
- 3. MUCH GREATER CROWDING WITHIN THE ACTUAL SENIORS LIVING APARTMENTS**  
which also will mean, presumably,
- 4. THE GREATER CROWDING OF RESIDENTS INTO SMALLER ROOMS, which would lead to poorer living conditions AND, by no means least,**
- 5. A GREATER DEMAND FOR ON-SITE PARKING, GREATER CONGESTION WITHIN THE CAR PARK AND ON THE ACCESS ROADS and**
- 6. GREATER PRESSURE ON COMMUNITY RESOURCES AND SERVICES, that are currently unlikely to be able to meet the demands of the many changes currently approved and/or under construction in the immediate vicinity.**

I cannot condone or agree to such a change without protesting strongly, as there were very evident reasons for the apartment numbers being reduced from the originally requested 89 to the approved 75. Therefore:

**I OBJECT IN THE STRONGEST POSSIBLE TERMS TO SUCH AN EXHORBITANT INCREASE IN BEDROOMS OF THE SENIORS LIVING APARTMENTS, WHICH AMOUNTS TO A 22% INCREASE FROM THE NUMBERS PREVIOUSLY APPROVED, FOR THE ABOVE-LISTED REASONS.**

3. These units will apparently be built to Class 9C standards to 'permit flexibility for their usage to be changed from "owner/lessee occupancy"' (which is the approved usage for them) to traditional aged care or hospital related uses as required, **which uses ARE NOT CURRENTLY APPROVED. SUCH USAGES SHOULD NOT JUST BE ALLOWED TO SLIP THROUGH WITHOUT DUE AND CONSIDERED ASSESSMENT OF THEIR LIKELY IMPACT ON THE WHOLE MASTER PLAN AND THE NEIGHBOURHOOD. IF THEY ARE REQUIRED IT IS ESSENTIAL THAT A SEPARATE APPLICATION BE MADE REQUESTING A VARIATION OF THE APPROVED USAGES OF THE SENIORS LIVING APARTMENTS, UNDER WHAT CONDITIONS THIS MIGHT BE PERMITTED, FOR HOW LONG, FOR WHAT KIND OF PATIENTS AND SO ON. MY OBJECTIONS run along the following lines:**

1. These Seniors Living Apartments are designed and planning permission was given for them to be occupied by persons over 55 years of age (and their families or dependents). If the Applicant is allowed to simply turn them into hospital-usage rooms, that is an entirely different matter and should be strenuously denied, as such usage would turn their residential nature into an industrial one and other residents would be very disturbed by this treatment (with no recourse, as the Applicant has power over them as the lessee).
2. The apartment blocks border on a quiet local, residential neighbourhood, primarily of single- or double-storey dwellings, occupied by families, many with children. The change of use of these apartments to hospital usage would have affect strongly these existing residents and produce very detrimental effects on their lifestyles (due to the normal noises, heightened activities, odours, possible dangers from chemicals and so on, all of which accompany the environments of hospitals).
3. Operating a hospital with a main street frontage to a road such as River Road is one thing, but extending hospital practices to within an apartment block is quite another and would lead to an extremely degraded environment, physically and in all other ways.
4. If this type of change of usage had been presaged at the time of the original application by the Applicant, I believe there would have been a community uprising, with EVERYONE IN THE AREA OBJECTING TO THE HOPITAL EFFECTIVELY MOVING AWAY FROM THE MAIN ROAD AND CLOSE TO WHAT HAVE ALWAYS BEEN PURELY RESIDENTIAL AREAS. SUCH A SUGGESTION IS OUTRAGEOUS AND NOTHING COULD EXCUSE IT.

**THEREFORE I OBJECT MOST STRONGLY TO APPROVAL BEING GIVEN TO THE APPLICANT TO CHANGE THE USAGE OF DWELLINGS (viz. Seniors Living Apartments) TO THAT OF HOSPITAL CARE AT ANY TIME THEY WISH TO ENACT SUCH CHANGES AND BELIEVE THAT SUCH PERMISSION SHOULD BE DENIED.**

#### **B. Appendix B, Development Area Comparison Plans**

1. The plans of the Seniors Living In the Section 4.55 (1A) Modification Application Figures 4 and 5 show that the envelopes of the Southern Building are extended to the Eastern side and

2. The Seniors Building North to both the Eastern and Northern sides.

Total increase in size applied for, as shown in Table 1, is for the Main Health Building the GFA by 1,150m<sup>2</sup> and the Seniors Living Apartments by 1.253m<sup>2</sup>, resulting in a total increase to GFA of 9.8% (2,403m<sup>2</sup>). Although it is averred that the **scale** of the buildings will not increase, this seems to slide over the fact that there are increases to the building envelopes.

CONSEQUENT ON MY FIRST OBJECTION TO THE NUMBER OF BEDROOMS BEING INCREASED IS NOW MY FURTHER OBJECTION TO THE INCREASE IN SIZE OF THE ENVELOPE OF THE SENIORS LIVING APARTMENTS, THIS BEING UNNECESSARY BY THE RETENTION OF THE EXISTING APPROVED APARTMENT NUMBERS OF 75.

**C. Visitors Parking**, South of the Southern Seniors Living Building.

The encircling Access Road that provides ingress from River Road to the major car park has a Ground-level "Visitors Parking" section, which seems egregious to me that this be allowed to go ahead, when the **"Underground Car Parking"** was touted as being the most suitable as it would keep private vehicles away from where people might walk and from producing noises late at night through to very early morning at which times they would give great annoyance and reduce amenity of the Greenwich residents in the surrounding private dwellings. This would most certainly affect the level of amenity for me and my neighbours ALL AROUND THE VICINITY OF THE DEVELOPMENT on a permanent basis and also to those living in the NORTH AND PARTLY EAST-FACING AREAS OF NORTHWOOD IF ALLOWED TO PROCEED.

ACCORDINGLY, I OBJECT TO THIS ABOVE-GROUND CAR PARK AND ASK THAT IT BE PLACED UNDERGROUND, OR AT LEAST MINIMISED AND PLACED NEARER THE ENTRY POINT TO THE SITE ON THE ACCESS ROAD.

**D. Light Spill**

It is of great concern to residents of neighbouring properties on both the Western and Southern borders of the hospital grounds and to those in Northwood's Northern section that 24-hour lighting will materially affect their quality of living, as will the coming and going of people and cars at all hours of the day and night, both due to the sound and light disturbance from both. Once the Hospital and Seniors Living Apartments are completed, I understand that the lighting is likely to be on for a 24-hour time-frame, so it is imperative that the time periods it is on be set down during the approvals process and carefully monitored from then. This also applies during the building process periods.

**I ASK THAT THESE MATTERS OF LIGHT AND NOISE POLLUTION BE GIVEN GREAT IMPORTANCE AND TIME FRAMES BE SET DOWN DURING THE APPROVALS PROCESS FOR THEIR USE AND LIMITATION AND, AT THIS TIME, DUE CONSIDERATION GIVEN TO THE AMENITY OF NEIGHBOURS.**

her concern that the bushland to the South of the property has never been properly surveyed, though the surveyors still manage happily, it seems, to put forward their opinions on it without concern for that fact. Clearly, it needs proper, professional assessment and a plan for its management. It is a very steep site.

**E. Drainage**

There are 5 or 6 neighbours on the Southern boundary of the Greenwich Hospital site that receive most of the run-off of the hospital's storm water. My own property is particularly in danger of flooding from this (in fact I had to replace brand-new carpets six weeks after they had been installed and not walked upon by a foot other than that of the local real estate agent) due to my ground floor being flooded by water from the hospital grounds in 2016. It

simply sheets off the cleared areas and paved car parks and runs down the hill and the rock face, being directed into just one (inadequate) drain and then onto my back walkway. I have spoken to the Lane Cove Council's Drainage Engineer about this and he averred that it is each property's owners' obligation under law to manage their own storm water and not that of the "receiving" or down-hill property. I have both spoken and written to the APPLICANT about this over several years and either been fobbed off with excuses or completely ignored.

**Therefore, it is imperative that the drainage of the whole site be carefully managed during these approval processes and water falling on it not simply allowed to roll downhill into these neighbours' properties. This matter may not be the subject of the current Concept Plan, but I signal it in advance due to its IMPORTANCE TO THE AMENITY OF NEIGHBOURS ON THE HOSPITAL'S SOUTHERN BOUNDARY.**