TOWN OF KENT

PLANNING AND ZONING COMMISSION

41 Kent Green Boulevard P.O. Box 678 Kent, CT 06757 Phone (860) 927-4625 Fax (860) 927-4541 Received Filed fuly 17, 2017 P [:40 p.m Warren Steer, TR

JULY 13, 2017 REGULAR MEETING MINUTES

The Town of Kent Planning and Zoning Commission held a regular meeting on Thursday, July 13, 2017 at 7:00 p.m. in the Kent Town Hall.

1. CALL TO ORDER

Chairman Johnson called the meeting to order at 7:05 p.m.

2. ROLL CALL AND APPOINTMENT OF ALTERNATES IF REQUIRED

Commissioners Present:

John Johnson, Chairman; Matt Winter, Vice Chairman; Darrell

Cherniske, Alice Hicks, Adam Manes, Anne McAndrew, Marc Weingarten,

Wes Wyrick, Karen Casey

Staff Present:

Donna Hayes, Land Use Administrator

Mr. Manes moved to add to the agenda item 6.B.2 Application #50-17C, Robert Carbone for Cynthia Gustafson and Wayne C. Gustafson, Trustees, 21 Bridge Street, detailing operation, Map 19 Block 13 Lot 10. Mr. Cherniske seconded and the motion carried unanimously.

Mr. Manes moved to move to the top of the agenda under New Business item 6.B.2 Application #50-17C, Robert Carbone for Cynthia Gustafson and Wayne C. Gustafson, Trustees, 21 Bridge Street, detailing operation, Map 19 Block 13 Lot 10. Mr. Cherniske seconded and the motion carried unanimously.

3. READING AND APPROVAL OF MINUTES:

3.A. Regular Meeting Minutes of June 8, 2017.

The first paragraph on Page 3 should be corrected to "as long as exterior lighting meets our Regulations".

Mr. Manes moved to approve the Regular Meeting Minutes of June 8, 2017 as corrected. Mr. Winter seconded and the motion carried unanimously.

3.B. Special Meeting Minutes of June 29, 2017.

Mr. Manes moved to approve the Special Meeting Minutes of June 29, 2017 as written. Mr. Cherniske seconded and the motion carried unanimously.

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4. PUBLIC COMMUNICATIONS (ORAL):

No action taken.

5.A. PUBLIC HEARINGS (Possibility of closure, discussion and decision on the following):

5.A.1. Application #'s 31-17C, 32-17SP and 33-17F, Kent School Corporation, 11 Skiff Mountain Road, construction of six tennis courts and surrounding fencing, Map 3 Block 9 Lot 25.

Chairman Johnson opened the public hearing at 7:08 pm and read aloud the published legal notice of this public hearing.

Joe Wolinski, the Facilities Director for Kent School came forward noting that Kent School currently has clay courts that are difficult to maintain. 13 courts are needed to maintain their tennis program. He reviewed the installation requirements with the Commission and noted that he would like to have the courts asphalted by September as they need to sit one month before adding the poly. The courts must be directionally north to south due to the sun. Also, grouping them as proposed will require less fencing and easier drainage. The courts will not be lit. Mr. Wolinski described the drainage to be piped to gravel. Retention will be in the front; however, he agreed to add additional drainage to the side on the northwest corner as well. There will be windscreens on the fence; however, no landscaping is proposed.

Donna Hayes confirmed for the Commission that this proposal is considered a new site plan application.

Mr. Winter moved to close the public hearing at 7:15pm for Application #'s 31-17C, 32-17SP and 33-17F, Kent School Corporation, 11 Skiff Mountain Road, construction of six tennis courts and surrounding fencing, Map 3 Block 9 Lot 25. Mr. Wyrick seconded and the motion carried unanimously.

Mr. Manes moved to accept waivers for 4.3.3, 4.3.4 and 4.3.12 of the Town of Kent Zoning Regulations for Application #'s 31-17C, 32-17SP and 33-17F, Kent School Corporation, 11 Skiff Mountain Road, construction of six tennis courts and surrounding fencing, Map 3 Block 9 Lot 25. Mr. Winter seconded and the motion carried unanimously.

Mr. Winter moved to approve Application #'s 31-17C, 32-17SP and 33-17F, Kent School Corporation, 11 Skiff Mountain Road, construction of six tennis courts and surrounding fencing, Map 3 Block 9 Lot 25 with the condition that drainage retention be added to the northwest corner. Mr. Manes seconded and the motion carried unanimously.

5.B. DISCUSSION AND POSSIBLE DECISION

5.B.1. Rewrite of Zoning Regulations

No action taken.

6. NEW BUSINESS:

6.B.2. Application #50-17C, Robert Carbone for Cynthia Gustafson and Wayne C. Gustafson, Trustees, 21 Bridge Street, detailing operation, Map 19 Block 13 Lot 10.

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Robert Carbone came forward regarding a proposal for a car detailing business. He advised that this business will not be a car wash. He expects to detail no more than one car per day by appointment only. All cleaners used will be echo friendly. The proposed business hours are 9:00-4:00 with no weekend hours.

Mr. Carbone confirmed that the plan would be to wash the cars inside. He is uncertain whether there is a separator for the floor drain and can follow-up regarding this question. Donna Hayes confirmed that Mr. Carbone met with the Sewer Commission. Adam Manes reiterated that he would like to know whether the indoor drain goes into the sewer or storm drains. Mr. Carbone agreed to provide this information. Mr. Johnson also asked for a list of washes to be used for the record.

Donna Hayes confirmed for Mr. Winter that this will be considered an accessory use.

Elissa Potts of the Sewer Commission came forward and reported that they have not yet signed-off on this proposal as they will be looking into the water separator.

Mr. Manes moved to table Application #50-17C, Robert Carbone for Cynthia Gustafson and Wayne C. Gustafson, Trustees, 21 Bridge Street, detailing operation, Map 19 Block 13 Lot 10. Mr. Winter seconded and the motion carried unanimously.

6.A. PUBLIC HEARINGS (Possibility of closure, discussion and decision on the following):

6.A.1. Application #'s 45-17SP and 46-17C, Birch Hill Recovery Center, LLC for Kent Realty, LLC., 46 Maple Street, operation of drug and alcohol rehabilitation center, Map 4 Block 12 Lot 6. (7-13-17 to 8-10-17)

Chairman Johnson opened this public hearing at 7:27 pm and read the published legal notice for the record.

Applicant's presentation:

Attorney Robert Fisher of Cramer and Anderson came forward on behalf of Birch Hill Recovery. He reviewed the history of the property. It was found that this property would be ideal for Birch Hill as it is close to town center; however, not within a residential neighborhood. The building's exterior including parking, lighting and traffic flow will all remain the same as with the previous business.

The Kent Zoning Regulations allows for such an institution as what is being proposed on 5 acres; however, this property consists of 11 acres. Attorney Fisher reminded the Commission that they approved MCCA Inc. as a facility for treatment of all ages for drug and alcohol treatment. This is a suitable location in town and he is confident that the standards for approval will be met.

Ari Raskas, Developer of Birch Hill LLC Recovery Center Project, reported that he has spent several months with local officials to introduce their project. The plan is to reinvigorate this dormant property and create an income creating property.

This is a proposal for an inpatient facility with the target patients to be adults that require detoxification and 24 hour care. Services will be billed through medical insurance or directly. The facility will employ 50-55 people locally, and is committed to using local vendors. They plan to employ 24/7 security for this facility. Patients will not be allowed to leave the facility until discharged. Family is permitted to visit once per week on a designated day.

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Keith Fowler, CEO of Birch Hill, came forward explaining that we are in the middle of a major opioid epidemic. There are no detox beds in the town of Kent and there is only a total of 200 beds in CT. This facility would provide a total of 90 beds. Patients will receive 7 - 10 days of detox and an inpatient stay of 30 days. The facility will utilize 24 hour per day nursing, psychiatry services, therapists and psychologists as well as family member support. They are thoughtful of security services to assure very small footprint on Kent. Patients will be screened to be sure they are appropriate patients for this facility. The Center will not receive criminal justice patients. The stay will include discharge planning and continuing care. The Center will develop as many clients from the northwest corner as possible.

Mr. Fowler confirmed for the Commission that the total length of stay would be 30-40 days.

Ari Loren, Senior Vice President, came forward and reviewed his background. He explained that there will be no changes to the outside of the building. There will be a renovation of the interior including flooring, hallways, IT equipment, etc. to bringing the building to a 2017 level. They would like this to be the premier facility in the Tri-State Area.

Chairman Johnson opened the hearing to questions from the Commission:

Mr. Weingarten questioned whether patients could discharge to the local area halfway through treatment. Mr. Fowler advised that this would not be appropriate. Patients are discharged to outpatient centers, counseling or addictionologists. Mr. Raskas reported that they have already laid groundwork with outside hospitals and outpatients facilities for the discharge of patients. Birch Hill will be responsible for getting patients back to where they came from and where they belong upon discharge.

Mr. Manes questioned whether patients will only come from CT. Mr. Raskas noted that there is a lack of facilities in CT; however, patients can come from elsewhere.

Mr. Johnson asked what power of authority Birch Hill has to keep patients at the facility. Mr. Raskas explained that at the day of admission the patients agree to stay the 30-40 days. It is an important and relevant part of treatment. Mr. Fowler confirmed for Mr. Johnson that the continuum of care is a standard industry practice.

Mr. Johnson reiterated his question regarding Birch Hill's authority to keep patients until the end of treatment. Mr. Fowler explained that they cannot keep patients locked at the door, but it is their policy that patients stay for the full treatment. Mr. Raskas reported that there will be a full security plan.

Mr. Fowler confirmed for Mr. Wyrick that there will be no court ordered clients accepted at this facility.

Ms. McAndrew questioned the age restriction for patients. Mr. Fowler reported that this would be an 18 and over facility. She asked whether cell phones would be permitted to the patients. Mr. Fowler explained that upon admission cell phones will be confiscated and patients will be permitted to use the staff phone. The staff will work with patients to get a "clean cell phone" by clearing all the problem contacts from their contact list.

Ms. McAndrew asked for a run through of a typical day in the life at the Center. Mr. Fowler explained that it is a highly structured day at inpatient rehab including meditation, goals setting, group psychotherapy and specialty groups. He noted that the list of all of therapies provided was included as part of this application. Patients would utilize the outside space in the afternoon for yoga, gym, and guided meditation. In the evening, there would be quiet time for journaling, 12 step support, book study, or a movie. During detox, patients would get nursing assessments up to 4 times per day and medications to deal with withdrawal symptoms. There will be 32 detox beds.

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Mr. Fowler agreed to provide the information for Mr. Wyrick regarding how many facilities have rehab and detox in CT.

Mr. Fowler advised that up to one third of their patients have visitors on a designated day. Mr. Winter questioned whether there would be enough parking for employees and visitors. Mr. Raskas agreed to get back to the Commission with the details of a parking assessment.

Mr. Cherniske asked how often symptoms go beyond what the Center can control during detox causing them to require outside emergency services. Mr. Raskas advised that they expect to have the highest level of care and would not need emergency services assistance outside of something like cardiac arrest. They may have one or two incidents per calendar year.

Ms. Hicks asked for statistics regarding the number of patients and success rates based upon Mr. Fowler's experience. He agreed to provide this data.

Mr. Weingarten commented that 90 beds is very large. Mr. Fowler explained that within the northeast many facilities have greater than 75 beds.

Chairman Johnson read three written communications from the public for the record: (see attached)

Karen Butler wrote that she is strongly opposed to this proposal. It will adversely affect the peace of Kent and will increase the need for emergency services.

Julie Butler also wrote that she is strongly opposed. It will adversely affect the quality and peace of Kent and increase the need for emergency service.

John and Elizabeth Baker wrote that there is no record regarding Birch Hill in order to make a responsible decision regarding this matter. They would like more information regarding the background and qualifications of those involved. The site is an easy walk to bars and liquor stores in Kent. There is already a successful rehab center in Kent.

Chairman Johnson opened the floor to questions and Comments from the public:

Attorney Joseph Williams of Shipman and Goodwin representing High Watch Recovery came forward. He hand delivered a letter and documents dated 7/13/17 for the public record. (see attached)

Attorney Williams explained that High Watch's interest here is as a citizen of Kent with long experience operating a treatment program. High Watch believes this location is not the right location for this type of treatment program. Attorney Williams reviewed the legal authority showing how the State of CT differentiates between a convalescent facility and a rehab center. Additionally, Kent's Regulations state that a Special Permit ends when the use is no longer in operation. This is a clear change in use in need of a new special permit and site plan. They have not provided all the information required. The clientele is very different than that of a nursing home. Storm water management, sewer, parking, and traffic has not been evaluated since 1989. This Commission must demand a complete set of information.

Attorney Williams referred to the list of 63 questions included in the attachment to his letter. He requested that the Commission require the applicant to answer these questions, require them to submit all the necessary information, and keep the public hearing open or deny this application based upon insufficient information.

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Several schools, homes, and establishments serving alcohol nearby are in the area of this proposal. This is in contrast to High Watch, which is remote. This proposed facility is in the middle of town. He submitted a map of a one mile radius search listing local schools and establishments.

Chairman Johnson reported that he has heard enough questions raised tonight to keep public hearing open. Attorney Fisher agreed and was in favor of keeping the hearing open.

Ian MacLachlan, Vice Chair of High Watch Board and retired from CT Supreme Court, came forward and explained that High Watch is not opposed to rehab facilities. They have had experiences with dealers showing up; however, they are located in the woods and not in the center of town. High Watch is nonprofit and committed to drug and alcohol rehab. He asked the Commission to please consider if this is the appropriate use for this location. They cannot keep people in after detox and patients can walk out into the middle of town.

Jerry Schwab, CEO of High Watch, reviewed the history of High Watch. He reminded the group that MCCA was not opposed by High Watch. That program is not the same as what is being proposed, which has no proven track record. He has concerns with security. On a weekly basis patients leave treatment at High Watch. The advantage is that they are in the middle of nowhere with no options of where to go. There is no statutory authority to hold someone at the facility. Many for profits offer both detox and rehab, but do not require that both is done. Their expectation to use local emergency service 1 to 2 times per year is unrealistic. Canaan emergency services receive calls up to 200 times per year for a similar facility as what is being proposed. High Watch's experience is that 3/4 of patients have visitors on weekends. The Certificate of Need process requires that you serve a certain amount of the indigent/Medicaid patients. It is a false statement that they will only be private pay or insurance. The real need in the State of CT is for Medicaid beds.

Mr. Schwab clarified for Mr. Johnson that during detox release would require discharge and a patient could not just leave.

Mr. Schwab urged the Commission to reach out to Canaan's Ambulance and State Trooper regarding the calls they receive for Mountainside.

Mr. Johnson questioned the difference between private pay and Medicaid with regard to length of stay. He also asked for clarification regarding the Certificate of Use as it applies to Medicaid.

Mr. Cherniske asked whether High Watch does detox. Mr. Schwab explained that they treat the symptoms, but do not necessarily detoxify patients from the drug.

Mr. Johnson questioned whether there are any detox centers in urban centers that are successful. Mr. Schwab advised that the majority are not in urban areas.

Jane Jackson of 25 N. Main Street came forward as a mother who lost a child due to alcoholism and drug addiction. She explained to the public that they are saving your children. She urged to let Kent be the place that opens their arms to these places. These are not all criminals. She encourages the opening of this facility to Medicaid beds.

Alan Priaulx of 82 Carter Road explained that his property is adjacent to High Watch. He reported that they are good neighbors, they have lived next door to them for 21 years and he has never had an incident. People are coming for treatment and not to run to the nearest bar.

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Linda Palmer of 25 Carter Rd noted that she has lived next to High Watch for 40 years and they are not a good neighbor. They are on a septic, Birch Hill is on sewer, and they pay no taxes and emergency services are there every day. Tax records show Birch Hill would pay \$90,000 per year in taxes plus personal property taxes.

Andy Ocif former state trooper in Kent for over 40 years and of 193 Segar Mountain Road reported that he dealt with incidents at High Watch over the years. He asked for complete background investigations of owners of Birch Hill. They should provide financial funds to support the Resident Trooper.

Bill Bachrach of 231 Macedonia Road stated that it is not correct that site is not in residential neighborhood. It borders on 25 apartments. He is not convinced that patients leaving the facility will not make their way to the center of town.

Vance Taylor, Real Estate Agent for 46 Maple Street, explained that this reuse of the former treatment facility is appropriate. The building is surrounded by open space, the transfer facility, Kent Land Trust property and an affordable housing development. It will be a minimal impact on the surrounding area and overall community. As a minister he has experience with addiction and it is at epidemic proportions. (see attached)

Bill Simmons, Addictions Counselor and resident of the NW corner for 40 years, noted that addiction related deaths have tripled in the last four years. What has been done to combat this to this point is not working.

Diann Kite of 27 N. Main Street explained that she is in favor of people getting treatment, just not in the center of the town near the schools. We see the students walking around all the time. The proposed facility area is easily walkable into town and near the seniors. People will do desperate things in the state of addiction. The proposed patients to staff ratio does not seem appropriate. This will be a significant drain on emergency services. (see attached)

Stephanie Gato of 33 Stone Fences Lane noted that for profit facilities are usually in it for themselves. Two rehabs moved in next door to her in Florida and she was robbed twice and beaten badly.

Barbara Egenes of 80 N. Main St. noted that she is a retired psychiatric and rehab nurse. She feels that treatment is good; however, Kent already has the High Watch facility.

Marsi Boon of 120 Cobble Road explained that she appreciated hearing both sides and agrees that these places are needed. However, her concerns are with the location and the size of the proposal. This would be larger than New Milford and Sharon hospitals. She is curious regarding emergency intakes and when they will be done. She has concerns with impact on the infrastructure and whether the Town can handle the influx of people with regard to visitors.

Vincent Roberti, Facility Director of High Watch and homeowner at 1 Bridge Street came forward. He explained that his home is within 3/10 mile of this proposed facility. He has heard a sales pitch this evening. Any well intentioned facility does not start with a sales pitch, they start with mission statement. \$90,000 in tax dollars is not worth deaths at this facility in the town of Kent.

Janet Rivkin of 80 N. Main St has been a resident 30 years and as a realestate developer she is disappointed in the presentation. They did not provide any information and no environmental impact study. She is not against facilities like this, but if this is how they are going to present to our community, she is less than impressed.

Ellen Karp of 11 Richards Road noted that in a town the size of Kent to have 3 facilities raises questions regarding the brand standard. She would like to understand the long term effects of this.

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Jane Zodlin of Kent Hollow Rd. asked about the background of those who presented tonight. She would like to know what facilities with which they have previously had involvement.

Mike Petrone, Ambulance Chief, reported that he is not against this, but has concerns with ambulance services. Mountainside in Canaan averages one call per day. He does not want the call volume to go up that much per day. Currently there is an average of 400 calls per year and if you add another 365 calls it would be a huge tax on volunteers. The Town would have to further support the Department.

Attessa Helm of 16 Elizabeth Street noted that she lives with her husband and two young daughters. She moved here so her kids could have the freedom to walk out door and around the village. She is concerned that with a facility this size they will encounter a patient who left during treatment.

Kendra Litman discussed the preschool and how the kids walk all around town to the shops on their outings. She has concerns with security and who the children might be running into. The Town must protect people who live here now and not just the ones that are passing through for treatment.

With no further discussion at this point, the following motion was made:

Mr. Manes moved to table Application #'s 45-17SP and 46-17C, Birch Hill Recovery Center, LLC for Kent Realty, LLC., 46 Maple Street, operation of drug and alcohol rehabilitation center, Map 4 Block 12 Lot 6 to the next regular meeting. Mr. Winter seconded and the motion carried unanimously.

6.B. DISCUSSION AND POSSIBLE DECISION

6.B.1. Application #47-17Si, Sharon Songal for Kevin Hart, Quarter Mile, LLC, 45 North Main Street, signage, Map 19 Block 15 Lot 14

Sharon Songal came forward of Kent Coffee and Chocolate. Donna Hayes reported that a flag (feather) and balloons were put up near the roadway and Ms. Hayes asked that they be removed. Sharon Songal explained her rationale for the sign and it was suggested that she come before the Commission. The current regulations do not talk about size or design. It needs to be determined whether this type of flag is "attention getting". The section of Regulations pertaining to flags displayed was reviewed.

Mr. Cherniske noted that he is in favor for a certain amount of consistency.

It was advised that the sign is 15'x1' and it was clarified that one section of the Regulations allow flags, but another states you cannot have an attention getting flag. Ms. Songal noted that the purpose of a flag is to get attention. Mr. Manes noted that an open sign is allowed. Mr. Winter disagreed, noting that this would be attention getting. Mr. Johnson explained that this matter fits under Section 19.6.3 regarding Attention Getting and would not be considered compatible with the town. Mr. Winter added that a sign larger than 12 feet is not permitted.

Ms. Casey questioned why Ms. Songal did not put up the signs that were approved. She explained that these were wall signs and have nothing to do with an open flag.

Ms. Songal reviewed the proposed flag design with a post that conforms to the Regulations. She would like to have a solar light that will be turned off when the flag is taken in at night. She agreed to supply a site plan with size, dimensions and place.

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It was clarified for Mr. Winter that the "additional parking in back" sign is considered for safety and Ms. Songal will be coming to the Commission to modify the parking plan.

Mr. Manes moved to approve Application #47-17Si, Sharon Songal for Kevin Hart, Quarter Mile, LLC, 45 North Main Street, signage, Map 19 Block 15 Lot 14 contingent upon a site plan showing the flag design. Mr. Winter seconded

Discussion:

It was determined that the current flag/feather cannot remain and must be removed immediately. The pillar open sign can remain until the site plan is accepted by Donna Hayes.

The motion carried unanimously.

7. STAFF REPORT:

No action taken.

8. REPORT OF OFFICERS AND COMMITTEES:

No action taken.

9. OTHER COMMUNICATIONS AND CORRESPONDENCE:

- 9.A. Administrative Permits and Certificates of Compliance
- 9.B. Monthly Financials July 2016 through May 2017
- 9.C. SB922: An Act Concerning Temporary Healthcare Structures
- 9.D. Connecticut Council of Municipalities Update, June 2017

10. ADJOURNMENT

Mr. Manes moved to adjourn at 10:08 p.m. Mr. Wyrick seconded and the motion carried unanimously.

Respectfully submitted,

Tai Kern

Tai Kern, Land Use Clerk



Joseph P. Williams Phone: (860) 251-5127 iwilliams@goodwin.com

July 13, 2017

VIA HAND DELIVERY

Mr. John Johnson, Chairman Planning and Zoning Commission Kent Town Hall 41 Kent Green Blvd. Kent, CT 06757

> Re: Special Permit and Site Plan Applications of Birch Hill Recovery Center, LLC

Dear Chairman Johnson and Commission Members:

On behalf of our client, High Watch Recovery Center, Inc. ("High Watch"), I am submitting this letter and attachment to express High Watch's concerns with the special permit and site plan applications filed by Birch Hill Recovery Center, LLC ("Birch Hill") to convert a former skilled nursing facility located at 46 Maple Street into a new for-profit drug and alcohol rehabilitation center with a detoxification component. High Watch believes that this proposed new use at 46 Maple Street does not meet the criteria under Kent's Zoning Regulations ("Regulations") for approval of such applications. In particular, we believe that the proposed new use is not compatible with the neighborhood in many respects and raises significant safety concerns as it would be located in close proximity to downtown Kent and several schools.

Initially, I understand that there has been some discussion and perhaps an assertion by the applicant that the new drug and alcohol detoxification/rehabilitation center is authorized by the special permit granted by your Commission in 1991 for a 90-bed convalescent home. It is important to note, first, that Birch Hill's special permit application does not seek to continue the prior convalescent home use, which I understand was abandoned some time ago; rather, its executive summary states that Birch Hill has leased the property "for the sole purpose to convert the facility into a drug & alcohol rehabilitation center."

As Birch Hill's filing of a new special permit application appears to acknowledge, a drug and alcohol rehabilitation center is a materially different use from the skilled nursing home that previously operated at 46 Maple Street. A skilled nursing home is intended for the chronic

convalescing of individuals, typically the elderly, as a place to live out their years, whereas a substance abuse treatment facility is a short term rehabilitation use that may include intensive detoxification services and outpatient services. Such a change in use requires a new special permit, which Birch Hill has requested, thus requiring that all of the criteria for approving a special permit and site plan application be satisfied. See R. Fuller, 9 Conn. Prac., Land Use Law & Practice § 24.11 (4th ed. 2015) (a significant change in use requires an additional approval); 848, LLC v. Zoning Bd. of Appeals, No. NNH-CV15-6055150S, 2016 WL 3452145, at *8 (Conn. Super. Ct. June 6, 2016) ("addition of adult entertainment to an approved nightclub use is the type of change in use that reasonably should trigger enhanced scrutiny from the commission because it brings unique facts for consideration not presented to the P&Z" when it was permitted as a nightclub).

The distinction in these two uses is evidenced by the different State of Connecticut regulations that govern the operation of each use. Although both uses are considered "health care institutions" pursuant to Connecticut General Statutes § 19a-490, the uses are defined differently, and they have different licensing requirements. The licensing requirements for chronic convalescent nursing homes are set forth in Conn. Agencies Regs. § 19-13-D8t, and the licensing requirements for private freestanding facilities for the care or treatment of substance abusive or dependent persons are set forth in Conn. Agencies Regs. § 19a-495-570. In addition, each type of facility has different licensing fees, see Conn. Gen. Stat. § 19a-491; and requires a Certificate of Need ("CON") from different agencies, with different supporting information. Chronic and convalescent nursing homes apply to the state Department of Social Services for a CON, see Conn. Gen. Stat. § 17b-352; whereas substance abuse disorder treatment facilities apply to the Office of Health Care Access. Conn. Gen. Stat. § 19a-638.

Moreover, the site and physical plant requirements for these two institutions are very specific and unique to each type of facility, and they differ in regard to:

- Square footage of patient rooms (see Conn. Agencies Regs. § 19-13-D8t(v)(7)(B) (convalescent use) and § 19a-495-570(j)(1)(F)(iv)(b) (substance abuse treatment facility));
- Facilities for toileting and bathing (see Regs. § 19-13-D8t(v)(8) (convalescent use) and § 19a-495-570(j)(1)(F)(v) (substance abuse treatment facility));

¹ "Alcohol or drug treatment facility" is defined as "any facility for the care or treatment of persons suffering from alcoholism or other drug addiction," while "nursing home" means "(1) any chronic and convalescent nursing home or any rest home with nursing supervision that provides nursing supervision under a medical director twenty-four hours per day, or (2) any chronic and convalescent nursing home that provides skilled nursing care under medical supervision and direction to carry out nonsurgical treatment and dietary procedures for chronic diseases, convalescent stages, acute diseases or injuries." Conn. Gen. Stat. § 19a-490(h), (o).

- Multi-purpose rooms/miscellaneous facilities and dining facilities (see Regs. §§ 19-13-D8t(v)(12) -19-13-D8t(v)(13) (convalescent use) and § 19a-495-570(j)(1)(F)(vi) (substance abuse treatment facility));
- Laundry (see Regs. § 19-13-D8t(v)(15) (convalescent use) and § 19a-495-570 (substance abuse treatment facility));
- Nursing service areas (see Regs. § 19-13-D8t(v)(9) (convalescent use));
- Medical and therapeutic treatment facilities (see Regs. § 19-13-D8t(v)(10) (convalescent use));
- Common patient areas (see Regs. § 19-13-D8t(v)(11) (convalescent use)); and
- Storage (see Conn. Agencies Regs. § 19-13-D8t(v)(14) (convalescent use)).

Significantly, convalescent homes are limited to residential services, while substance abuse treatment centers may also include the following services:

- Ambulatory Chemical Detoxification Treatment, see Conn. Agencies Regs. § 19a-495-570(a)(2).
- Chemical Maintenance Treatment, § 19a-495-570(a)(8).
- Day or Evening Treatment, § 19a-495-570(a)(13).
- Intensive Treatment, § 19a-495-570(a)(19).
- Intermediate and Long Term Treatment and Rehabilitation, § 19a-495-570(a)(20).
- Medical Triage, § 19a-495-57(a)(25).
- Outpatient Treatment, § 19a-495-570(a)(27).
- Residential Detoxification and Evaluation, § 19a-495-570(a)(34).

There are also differences in the required governing authority and management of the two types of institutions. Chronic and convalescent nursing homes are required to have, among other things: a governing body, a licensed facility administrator, medical director (who must be a physician licensed to practice medicine in Connecticut and who serves on the facility's active medical staff), and an active organized medical staff. See Conn. Agencies Regs. §§ 19-13-D8t(e)-(f) and (h). Private freestanding facilities for the care or the treatment of substance abusive or dependent persons are required to have a governing authority and an individual responsible for fiscal affairs. See Regs. §§ 19a-495-570(f)-(h). Also, depending on the types of services provided at the facility, certain licensed medical staff is required. See Regs. § 19a-495-570(m)(7).

The above summary demonstrates that the State of Connecticut considers a convalescent nursing home and a drug and alcohol treatment facility to be two different types of institutions. The proposed for-profit drug and alcohol rehabilitation center is clearly a new use requiring new permits and a comprehensive evaluation of the special permit and site plan criteria set forth in your Regulations. To that end, we have attached to this letter a list of questions regarding the proposed new use that we believe need to be answered by Birch Hill. These open questions raise significant safety issues given that the proposed facility would be located in close proximity to

Mr. John Johnson, Chairman July 13, 2017 Page 4

downtown Kent and several schools. We urge the Commission to require Birch Hill to answer each of these questions, so that the Commission can determine whether Birch Hill's applications meet all of the relevant special permit and site plan criteria.

Also, under Sections 4 and 17 of your Regulations, a significant amount of information must be provided by an applicant before you can find that the special permit and site plan regulations have been satisfied. To our knowledge, Birch Hill has provided none of the required information, nor has it submitted a formal request that the Commission waive these requirements. Important issues of operator qualifications, physical security, emergency response capacity, traffic safety, stormwater quality management, sanitary sewer capacity, exterior lighting and landscaping have not been evaluated for the new use. Many of these issues have not been investigated at this site since 1989. Not only have conditions in downtown Kent inevitably changed in that amount of time, but government standards for things like traffic, drainage and outdoor lighting have evolved quite a bit since then, as well. Even though Birch Hill states that it will not be changing the exterior of the property, it will be changing the use, therefore the impacts on and off-site are likely to be different. As one example, the nature and frequency of traffic at the facility is in all probability going to be quite different. For these reasons, new permits are required, and all of the information required by your Regulations must be provided.

With this application having been filed on June 23, 2017 and received this evening, there has been insufficient time for High Watch and the rest of the public to evaluate it. Nor has Birch Hill provided the necessary information to enable the Commission to fully examine whether the applications comply with all applicable Zoning Regulations and state standards. Therefore, on behalf of High Watch, we respectfully request that you hold the public hearing open to allow adequate time for Birch Hill to address the attached questions and for Birch Hill to submit all required information in time for it to be considered by the public prior to the next hearing. In the alternative, the Commission may deny the applications as incomplete, without prejudice.

Thank you for your consideration.

Very truly yours,

Joseph P. Williams

Joseph P. Williami

Attachment

5770033v2

Questions Posed to Birch Hill Recovery Center, LLC 7/13/17

- 1. Which persons or entities will be the licensed operators of the proposed new drug and alcohol rehabilitation center?
- 2. What are the credentials and experience of such persons or entities in operating similar facilities? Where?
- 3. Who are the owners of Birch Hill Recovery Center, LLC? Does Birch Hill Recovery Center, LLC operate any other drug and alcohol rehabilitation centers in CT, the rest of New England or in NY state?
- 4. Who will be the investors and/or lenders in the proposed drug and alcohol rehabilitation center?
- 5. Will the new drug and alcohol rehabilitation center be affiliated with Convalo Health International, Inc., BLVD Centers, Inc. or Convalo Health, Inc., of British Columbia, Canada? Will it be a "franchise" or "pod" of Convalo/BLVD?
- 6. Have any of the operators or investors of the proposed rehabilitation center been the subject of a complaint, civil lawsuit, or investigation or prosecution before any government agency, in connection with operation of a similar facility?
- 7. What will be the role of Brian Foley, the property owner, in the new drug and alcohol rehabilitation center?
- 8. What will be the role of Ari Raskas of New York, who is the Manager of Birch Hill Recovery Center, LLC, in the new rehabilitation center?
- 9. Does the proposed conversion of the former nursing home into a new drug and alcohol rehabilitation center require a new Certificate of Need from CT OHCA? If so, why?
- 10. Does the new drug and alcohol rehabilitation center require any other new or different licenses? If so, why?
- 11. For what level of care will the proposed drug and alcohol rehabilitation center bill insurance? Will this include outpatient services?
- 12. The application states a target market of persons with medical insurance and "individuals who wish to pay privately for their care" -- does the proposed rehabilitation center intend to accept Medicaid patients?
- 13. Will federally-controlled substances be used for the detox services? If so, what are the safety protocols for handling these drugs and having them on site?
- 14. Will the new drug and alcohol rehabilitation center offer general psychiatric services?

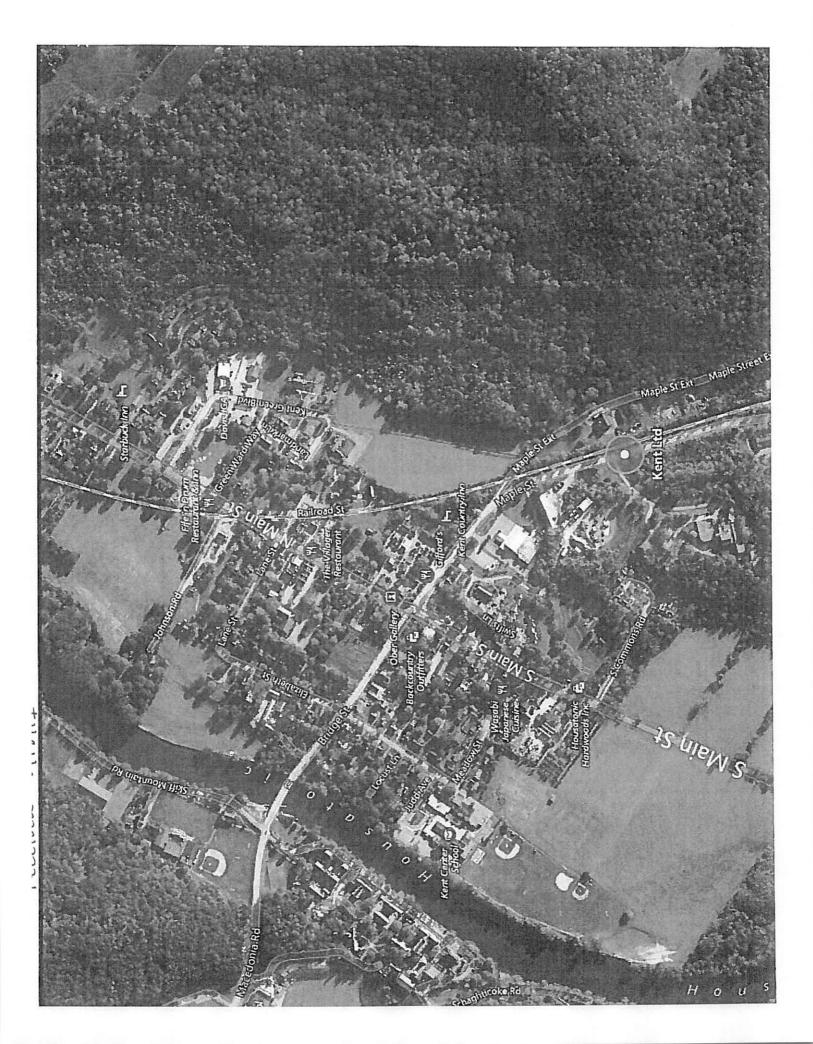
- 15. Will a physician be located at the facility 24/7?
- 16. What will be the residential program length?
- 17. What will be the intake procedure for questioning prospective residents of the proposed rehabilitation center and examining their backgrounds to determine whether the person is a good fit?
- 18. Given the for-profit model of the proposed rehabilitation center, will the new center admit everyone who can pay, regardless of whether they are a good fit?
- 19. Will any potential patients be turned away based on the results of a background check?
- 20. How many visitors are expected at the proposed rehabilitation center on a daily basis?
- 21. What will be the protocol for security to check visitors when they arrive to make sure they are not bringing controlled substances into the building?
- 22. Are patients at Birch Hill to be allowed outside?
- 23. Where will patients engage in outdoor recreation?
- 24. What improvements need to be made to accommodate outdoor recreation?
- 25. Will hiring security prevent a patient from leaving the proposed drug and alcohol rehabilitation center against medical advice?
- 26. Will any patient be physically barred from walking out the door and into downtown Kent, whatever their condition?
- 27. If there is a patient who is deemed to pose a potential danger to the community based on their background or current condition, what will be the response plan if such a patient walks out of the facility into town?
- 28. If that happens, will all of the nearby schools be notified? Will they be evacuated or locked down? Will parents be notified?
- 29. In that event should the Kids' Fishing Pond, located on Town of Kent property immediately adjacent to the subject site, also be secured? And the apartments next door?
- 30. If the proposed conversion is permitted, how often will the new drug and alcohol rehabilitation center call upon the Kent volunteer ambulance service?
- 31. What assurances can the applicant give as to how it will avoid creating a strain on the local ambulance service? Is it permitted by the State of CT to use its own drivers?

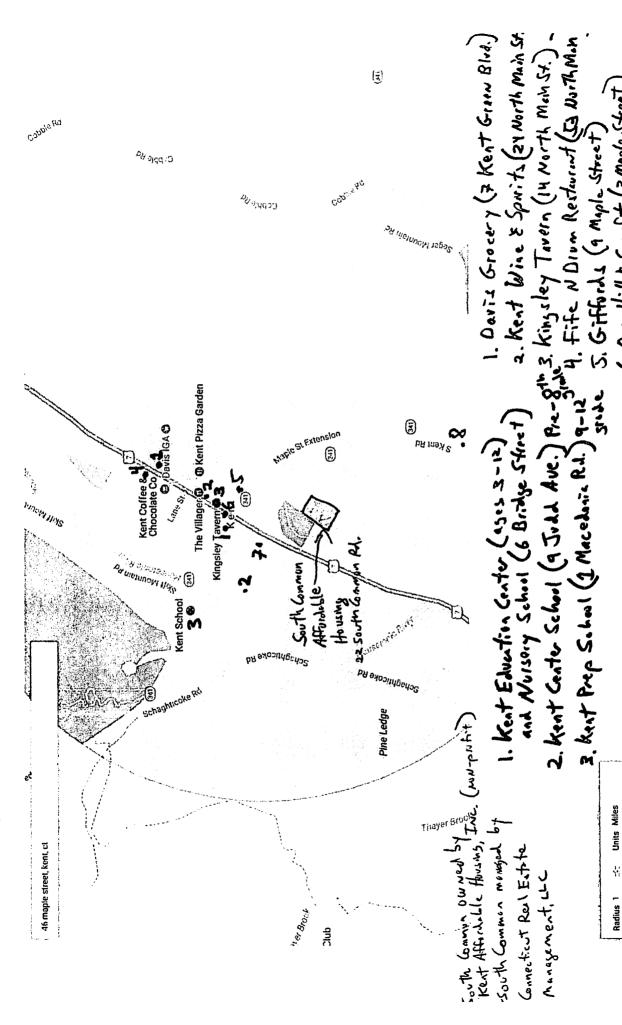
- 32. How will the applicant avoid creating a strain on the single Resident State Trooper?
- Will the proposed rehabilitation center refer its patients to sober living facilities located in the Town of Kent?
- 34. If it is permitted to convert the existing vacant building from a nursing home into a drug and alcohol rehabilitation center, is Birch Hill Recovery Center, LLC planning to change the floor plan of the building in any way?
- 35. If the proposed drug and alcohol rehabilitation center is approved, will there be any changes, relative to the prior nursing home use, to things like the existing entrance or drop-off points, kitchen/dining areas, offices, meeting rooms, or travelways/parking areas?
- 36. What will be the average age of guests if the proposed drug and alcohol rehabilitation center is approved? How does the expected average age compare with the average age of guests in a nursing home?
- What will be the average length of stay for guests in the proposed rehabilitation center? How does it compare with the average length of stay in a nursing home?
- 38. How many vehicle trips into and out of the facility will there be, both in the a.m. and p.m. peak hours, and per day?
- 39. Is traffic generation calculated differently for a nursing home than for a drug and alcohol rehabilitation center?
- 40. How exactly will the anticipated number of daily vehicle trips for the new rehabilitation center differ from those experienced at the former nursing home on the site while it was in operation?
- What is the Level of Service today, with the site vacant, at the site driveway and at the intersection of Routes 7 and 341, in both the a.m. and p.m. peak hours?
- 42. Is 1989 the last time that existing traffic conditions in this area were evaluated? Has the applicant prepared an updated traffic study?
- What will the Level of Service be at the peak hours in those locations if the facility is converted into the proposed rehabilitation center?
- 44. Are there any current traffic safety issues at the site driveway or at the intersection of Routes 7 and 341? What are they?
- 45. Will operation of the proposed rehabilitation center impact the current traffic safety issues in any way?

- 46. How many parking spaces are available on site? Does the number of spaces trigger CT OSTA review here?
- 47. Exactly how many employees will the proposed rehabilitation center have on site at any one time? Has the applicant allocated one off-street parking space for each employee?
- 48. As required by Section 18.1.2 of the Kent Zoning Regulations, can the applicant demonstrate that there is sufficient off-street parking to accommodate the motor vehicles of all employees, patients, vendors, visitors, and all other persons normally visiting or expected to use the proposed rehabilitation center at any one time?
- 49. Has the applicant demonstrated that all driveways and parking areas on the site otherwise comply with the standards set forth in Section 18 of the Kent Zoning Regulations?
- 50. Do the sight lines available when exiting the site driveway achieve the minimum distances required by CT DOT for the 85th percentile speeds on State Route 341? Has this been shown to and confirmed by DOT?
- 51. Has the applicant submitted all information required for special permit approval per Section 4.15 of the Kent Zoning Regulations?
- 52. Has the applicant addressed all off-site and on-site impacts as required for special permit approval per Section 4.15.1.b of the Kent Zoning Regulations?
- Has the applicant submitted all information required for site plan approval per Sections 4.3 4.14 of the Kent Zoning Regulations?
- 54. Where does stormwater on the subject site go now? Is any treatment provided?
- 55. Does the current stormwater management system approved in 1989 comply with contemporary town and CT DEEP standards, including the 2004 DEEP Stormwater Quality Manual?
- 56. Has the applicant evaluated current and potential future impacts from stormwater runoff to the pond located downhill and adjacent to the end of its driveway?
- 57. Will the proposed rehabilitation center discharge into the town sanitary sewer system?
- 58. If so, what is the peak number of total staff, patients, vendors and visitors expected to be present in the proposed rehabilitation center at any one time?
- 59. How does that number compare with the peak number experienced at the former nursing home while it was in operation on the site?
- 60. What are the anticipated peak volume and daily volume of sewerage discharge for the proposed rehabilitation center?

- 61. Is that anticipated discharge any different than the sewerage discharge from the former nursing home while it was in operation? If greater, has the requisite sanitary sewer capacity been requested and authorized?
- 62. How does the applicant propose to comply with the landscaping requirements of Section 17.6 of the Zoning Regulations?
- 63. Does the outdoor lighting currently existing on the site comply with all of the standards of Section 17.7 of the Zoning Regulations? If not, how will the applicant bring it into compliance?

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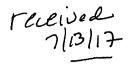
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OBJECTION TO PROPOSED DRUG REHAB CENTER IN KENT



July 13, 2017

TOURISM - Kent is a quintessential New England town with an image to maintain. It has consistently been voted over the years by various magazines, newspapers, and other organizations as one of the top places to visit in New England. This is due to the local people and businesses not only maintaining that image but ensuring that it stays that way, as well as constantly striving to improve it. Currently, Kent is a tourism destination, but that will be destroyed if there is a drug rehab facility in town.

SAFETY - Kent is currently a clean, safe town for people to live in, and attracts many visitors. Many families come to spend the day in Kent, and it is safe place for people to walk around, shop, dine, and enjoy all Kent has to offer. All of that will be destroyed with a drug addict facility within walking distance of the schools and the town. People will not want to live here or visit if there are drug addicts here. Drug addicts attract drug dealers, which will be near our schools. A drug addict facility will endanger the children, making them vulnerable targets, and giving them easy access to drugs. The proposed facility is also near Templeton Farms, and will place our senior citizens at risk to be easy targets for crimes. Additionally, with low income housing nearby, this will attract drug dealers, drug addicts, and other unsavory characters, and turn Kent into an inner city with all of an inner city's problems. This will literally ruin the town.

Kent should not be turned into an inner city. If Kent is turned into an inner city. It cannot be undone. Kent will be destroyed.

CRIME – Drugs bring crime. Currently, the Kent crime rate is low and substantially <u>BELOW</u> the national average. Drug addicts do desperate things to support their drug habits, and as a result they will commit crimes, not limited to burglaries, prostitution, and violent crimes. Areas with drug problems become crime zones. Kent should not be turned into a crime zone.

EVENTS – Organizations such as Kent Presents and The Gilmore Girls Fan Festival hold their events in Kent <u>BECAUSE</u> of Kent's image and that Kent is a quintessential New England town. No one will want to hold an event in Kent if Kent is destroyed by drugs and crime. These organizations will hold their events elsewhere, and Kent will no longer be able to attract anyone else to hold their events here.

The Kent Chamber of Commerce hosts many events throughout the year, such as the Shop Hop, Sidewalk Festival, Champagne Stroll, and the Gingerbread Festival. The Chamber works very hard to continually develop Kent as a destination and attract visitors. No one will want to come to Kent if it is destroyed by drugs and crime.

There are also various community events throughout the year, which are enjoyed by the locals as well as visitors. No one will want to attend these events if Kent is destroyed by drugs and crime.

PROPERTY VALUES - Drug infested areas destroy property values. Drug infested areas become dilapidated and run down. The local people live in Kent because they like it as it is now, but if it is drug infested they will move and never return.

ACTIVITIES - Kent is an attraction as it offers something for everyone with many activities such as hiking, biking, fishing, camping, boating, skiing, cultural activities, etc. All of the people that currently enjoy all the activities in Kent will go elsewhere if Kent is destroyed by drugs and crime.

TRANQUILITY - Currently, Kent is a peaceful town with a tranquility of country living that is enjoyed by the residents, as well as the weekenders and visitors. It is part of the character of Kent and one of it's many charms. All of that will be destroyed if there is a drug rehab facility in Kent.

FINANCIAL - If the town government is looking for money from the state or federal government because they allow this to happen, this is dirty money and we can do without it. Money from the state or federal government is not "good for the town" if it involves destroying everything we have built and are continuing to build. No matter what the "state" says, if the people of Kent do not want this here, it isn't coming here, period.

A drug rehab facility will be financially damaging to the town. It will have a significant impact on many facets of the town including but not limited to businesses, tourism, cleanliness, property values, security, and emergency services, and put a strain on the town's ratio of employees to patients is insufficient limited resources.

Signed,

D. Kite, KENT resident

| received 7/13/17

187 Church Street Torrington, CT 06790 July 13, 2017

Hon. John Johnson, Chairman Town of Kent – Planning & Zoning Commission 41 Kent Green Boulevard Kent, CT 06757

Dear Chairman Johnson & Members of the Commission:

I am Vance Taylor, with Commercial Real Estate Group in Torrington, agent for Kent Realty, the owner of the property at 46 Maple Street, and I appear before you this evening to express my support for the special permit now under your consideration. While we may hear complaints from competitors and cries of "not in my backyard", it seems to me, from comprehensive and compatible land use perspectives, that reuse of this former skilled nursing property for a treatment facility is totally appropriate. Section 6.6.2 of your regulations allows for such a use as a clinic or similar institution, and that standards for granting a special permit, cited in Section 4.15.3 appear to be met. As you know, the property, Parcel 6, is approximately 11.52 acres, and the "back yard" in this case is primarily hundreds of acres of vacant land never to be developed, specifically: Parcel 12 - which essentially surrounds it - is +/-118 acres, held in trust, and is in the State's "Public Act 490 - farm, forest and open space land" program, a significant incentive for it to remain in its natural condition; Parcel 20 is +/-4.59 acres owned by the Town of Kent, and serves as the Town's transfer facility; Parcel 5 is +/- 62 acres of undeveloped acreage owned & preserved by the Kent Land Trust; and, Parcel 21, through the back woods and only accessible from Route 7, is the Kent affordable housing development. Further, no new exterior construction is contemplated, and the footprint and height of the existing structure will therefore not be altered or increased, leaving the ratio between building area and land area the same as when the nursing facility was in operation, and preserving the present characteristics of the site. The compatible nature and intensity of the use, including the similar number of employee work trips and other traffic generated as before, the minimal impact, if any, on both the immediate surroundings as well as the community at large, and the historic acceptability of similar operations elsewhere in the Town, are still further compelling reasons, in my opinion, to approve the special permit. Given the use of the buildings for roughly 25 years as a skilled nursing facility, and given its floorplans and related infrastructure, the property is clearly adaptable and well-suited for the desired reuse.

I realize your decision is made solely based on land use merits such as those I've been describing, but I'd also like to share with you my support of this permit and use from an entirely different point of view. In addition to being a commercial real estate agent, I'm an ordained minister in the United Church of Christ, and serve as pastor to a small congregation in a rural/suburban setting here in Connecticut. In the past year while I've

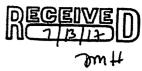
been serving, one family experienced the loss of a nephew to a drug overdose, and the mother and newborn child of another family are now in a methadone clinic as the baby enters the world already facing serious health challenges. From what I've observed, issues of drug dependency and drug-related deaths have reached statewide epidemic proportions, and not localized to any one particular demographic group, which certainly explains why just this past Monday, Senators Murphy and Blumenthal convened a summit to address the growing crisis. The statistics are frightening: according to the State's chief medical officer, 917 Connecticut residents died last year of accidental drug overdoses, a 26 percent increase over 2015. Clearly, additional treatment facilities are needed, as are expanded efforts and funding in drug prevention programs.

In approving treatment facilities in the past, the Town of Kent has demonstrated its understanding and compassion, which I hope and request that you again do, believing that your approval is also in keeping with prescribed sound land use principles and practices.

Thank you very much for this opportunity to comment.

Sincerely.

Jance Taylor



MEMO July 13, 2017

From: John and Elizabeth Baker, 76 Spooner Hill Road, South Kent CT 06785

To: John Johnson, Chair, Town of Kent Planning & Zoning Commission

Re: Public Hearing re Special Use Permit for

Birch Hill Recovery Center (The site of the former Kent Nursing Facility)

The Birch Hill Recovery Center was established in the State of Connecticut in January 2017. Consequently there is no track record available to make a responsible judgment as to the appropriate use of the former Kent facility.

Birch Hill Recovery seems to be a subsidiary of RK Equity Group. We would like to know much more about them. What do they do? What other such facilities have they invested in?

This one apparently would be run by Ari Raskas who is a partner of RK Equity Group. What is his background and qualifications for running a drug and alcohol rehab center? The other participant is Hillel Goldman, a Danbury lawyer. What role would be play in the operation of the recovery center?

Until we were persuaded otherwise, we believe that the location of such a facility within an easy walk to the bars and liquor stores in Kent would be a temptation to those in recovery and could well prove detrimental to the residents of Kent.

We hope that before any special permit is issued that these and many other questions must be addressed to the satisfaction of those of us who live Kent.

There is already a successful "recovery center" in the Town of Kent. When High Watch has operated successfully for many years and proven its values why would we need another such facility?

We look forward to this evening's meeting.

John Milnes Baker

Elizabeth (Liddy) Baker

Chyateth M. Baker





Donna Hayes <landuseadmin@townofkentct.org>

Julie Butler - P&Z Meeting 07.13.17 -- For the record, I strongly 'oppose' Application #'s 45-17SP and 46-17C, Birch Hill Recovery Center, LLC for Kent Realty, LLC...

1 message

Julie Butler <julie@kentcountryinn.com>
To: landuseadmin@townofkentct.org
Cc: XCT KCI LLC <julie@kentcountryinn.com>

Wed, Jul 12, 2017 at 1:03 PM

To Whom It May Concern,

My name is Julie Butler, property owner of 23 Maple Street, Kent, CT. Please add my view to the meeting minutes for Thursday, July 13, 2017.

I strongly 'OPPOSE' Application #'s 45-17SP and 46-17C, Birch Hill Recovery Center, LLC for Kent Realty, LLC., 46 Maple Street, operation of drug and alcohol rehabilitation center, Map 4 Block 12 Lot 6.

This proposal, if passed, will adversely affect the quality and peace of our business, residential and educational communities. Plus, it raises significant concern for the need of more police available 24/7, especially given the mixed clientele it will attract.

As a neighboring property owner, please take my view under advisement. For my records, please confirm you have received this email.

Thank you,

Julie Butler, Innkeeper Kent Country Inn 23 Maple Street, P.O. Box 633 Kent, CT 06757

Website: KentCountryInn.com Email: Julie@KentCountryInn.com

Phone/Text: 860-671-0002



Donna Hayes landuseadmin@townofkentct.org

OPPOSING APPLICATION FOR DRUG REHAB FACILITY

1 message

Karen Butler <kbutler159@aol.com> To: landuse@townofkentct.org Cc: kbutler159@aol.com

Wed, Jul 12, 2017 at 7:19 PM

TO DONNA HAYES and TO WHOM IT MAY CONCERN

My name is Karen Butler, property owner of various properties in Kent , Connecticut. Please add my point of view to the meeting minutes of Thursday, July 13, 2017.

I strongLY OPPOSE application #'s 45-17SP and 46-17C, Birch Hill Recovery Center, LLC for Kent Realty, LLC, 46 Maple Street, operation of drug and alcohol rehab center, Map 4 Block 12 Lot 6.

This proposal, if passed will adversely affect the quality and peace of Kent, Connecticut. It also raises concern for the need for more police especially given the mixed clientele the facility will attract.

Please take my view into strong consideration. Please confirm that you have received this email.

Thank you, Karen T. Butler Kent property owner

Received+ Filed July 17, 2017 @ 1:40 p.m. Warwe Brady, TZ