



# Agenda

## Greenville City Council

February 25, 2013  
6:00 PM  
City Council Chambers  
200 West Fifth Street

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Assistive listening devices are available upon request for meetings held in the Council Chambers. If an interpreter is needed for deaf or hearing impaired citizens, please call 252-329-4422 (voice) or 252-329-4060 (TDD) no later than two business days prior to the meeting.

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**I. Call Meeting To Order**

**II. Invocation - Council Member Blackburn**

**III. Pledge of Allegiance**

**IV. Roll Call**

**V. Approval of Agenda**

- **Public Comment Period**

The Public Comment Period is a period reserved for comments by the public. Items that were or are scheduled to be the subject of public hearings conducted at the same meeting or another meeting during the same week shall not be discussed. A total of 30 minutes is allocated with each individual being allowed no more than 3 minutes. Individuals who registered with the City Clerk to speak will speak in the order registered until the allocated 30 minutes expires. If time remains after all persons who registered have spoken, individuals who did not register will have an opportunity to speak until the allocated 30 minutes expires.

**VI. Old Business**

1. One-Stop Voting for 2013 Municipal Elections

**VII. New Business**

2. Follow-up from Council Planning Session
  - a. Street Improvements
  - b. Medical Research Park

3. Discussion of Proposed Improvements to South Greenville Recreation Center

4. Proposed City Council Workshop Schedule

**VIII. Comments from Mayor and City Council**

**IX. City Manager's Report**

**X. Closed Session**

- To prevent the disclosure of information that is privileged or confidential pursuant to the law of this State or of the United States, or not considered a public record within the meaning of Chapter 132 of the General Statutes, said law rendering the information as privileged or confidential being the Open Meetings Law
- To consider the qualifications, competence, performance, character, fitness, conditions of appointment, or conditions of initial employment of an individual public officer or employee or prospective public officer or employee; or to hear or investigate a complaint, charge, or grievance by or against an individual public officer or employee

**XI. Adjournment**



# City of Greenville, North Carolina

Meeting Date: 2/25/2013  
Time: 6:00 PM

**Title of Item:** One-Stop Voting for 2013 Municipal Elections

**Explanation:** **Abstract:** The Pitt County Board of Elections has requested a decision on whether the City would like to host One-Stop voting site(s) for the 2013 Municipal Elections in addition to those at the Pitt County Agricultural Center and the Community Schools Building which are already provided by contract.

**Explanation:** The City Clerk's Office received an email from the Pitt County Board of Elections Director Dave Davis inquiring as to whether the City would like to host additional One-Stop site(s) for early voting in the 2013 municipal elections.

In accordance with the 2009 agreement regarding conduct of municipal elections, two One-Stop voting sites will be in operation beginning no earlier than October 17, 2013, and must close by 1:00 p.m. on November 2, 2013. Those One-Stop sites will be located at the Pitt County Agricultural Center and the Community Schools Building, with operational costs being shared proportionally by all Pitt County municipalities based on their number of registered voters. They are open from 8:00 a.m. until 5:00 p.m., except as noted above.

A municipality may request one or more additional One-Stop voting site(s) located within their jurisdiction and, if approved, said municipality shall be responsible for all expenses related to the operation of the additional One-Stop site(s). The ultimate decision for such a request is with the Board of Elections.

The City of Greenville hosted an additional One-Stop voting site at the Municipal Building in 2009 and in the PATS Conference Room behind the County Office Building at 1717 West 5th Street in 2011. The 2011 change in location to the PATS Conference Room was made because the Board of Elections determined that the Municipal Building was too small to serve as a suitable One-Stop site.

If the City wishes to host additional One-Stop voting site(s), Mr. Davis recommends operation from October 28, 2013, through November 2, 2013, with

operating hours from 11:00 a.m. until 7:00 p.m., which mirrors the dates hosted for the two previous elections and extends available voting hours beyond those provided by contract.

The City Council discussed this issue at its February 14, 2013, meeting. Motion was made to host a One-Stop site in the PATS Conference Room behind the County Office Building at 1717 West 5th Street from October 28, 2013, through November 2, 2013, and to host a second One-Stop site somewhere on the campus at East Carolina University for the same period of time. Following discussion, the matter was tabled to February 25, 2013, so that additional data on previous elections could be provided. This additional information will be presented at the City Council meeting.

**Fiscal Note:**

The cost of hosting one additional One-Stop voting site for the 2013 municipal elections for a period of one week is estimated at \$2,919.46, and funding is available in the FY 2014 budget. Cost for more than one site and/or more than one week would increase proportionately (e.g. Two One-Stop sites for a period of one week each would cost approximately \$5,838.92).

**Recommendation:**

Discuss One-Stop voting and determine (1) if the City will request to host one or more One-Stop sites at City expense in addition to the two locations already provided by contract, (2) how many additional sites are desired, (3) preferred location(s) for desired site(s), and (4) desired operating period (one week intervals).

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Attachments / click to download

 [Detail for 2013 Municipal Elections 946473](#)

## One-Stop site for 2013 Municipal Elections

FROM: Davis, David [dpdavis@pittcountync.gov]

### Email Received 01/24/2013:

We are currently working on the budget for the 2013-2014 fiscal year, which includes the Municipal Elections. In previous elections Greenville & Winterville have both hosted a One-Stop site for their election. In order to prepare our budget & also provide you with an estimate of the election expenses, can you please let me know if your municipality will host a site this year. If so, please also let me know how many days you'd like the site open. At this time the earliest One-Stop can open is October 17 & must close by 1pm November 2.

Thanks,

Dave Davis

Director of Elections

Pitt County Board of Elections

[www.pittcountync.gov/depts/elections](http://www.pittcountync.gov/depts/elections)

PO Box 56, Greenville NC 27835

(252) 902-3300

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In a reply to Mr. Davis on 01/24/2013, the City Clerk asked for a cost estimate for hosting an additional site and about flexibility/choice of locations.

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### Email Received 01/24/2013

At this time it would more than likely be the PATS conference room (what was used in 2011). I'll work on those numbers for you.

Dave

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### Email Received 01/25/2013

Here's the rough estimates:

Without County Office site = \$11,123.13

This covers the Ag. Center & Community Schools sites. Per the municipal agreement the cost of these 2 sites are shared proportionately across the municipalities.

With County Office site = \$14,042.59

This covers the "shared" One-Stop sites (Ag. Center & Community Schools) plus the County Office site. The expense of the "Greenville" site per the municipal agreement would be the sole responsibility of Greenville. However, based on NC election law any voter would be allowed to vote there.

County Office site open from Mon., Oct. 28 – Sat., Nov. 2. This mirrors the dates from 2011.

Dave



# City of Greenville, North Carolina

Meeting Date: 2/25/2013  
Time: 6:00 PM

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**Title of Item:** Follow-up from Council Planning Session

- a. Street Improvements
- b. Medical Research Park

**Explanation:** As follow-up to discussion at the City Council Annual Planning Session on January 26, 2013, Council Member Joyner requested discussion of street improvements and medical research park be included on the February 25, 2013 City Council meeting agenda.

**Fiscal Note:** N/A

**Recommendation:** Discuss street improvements and medical research park as requested.

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**Attachments / click to download**

- [City Roadways](#)
- [Immediate Needs](#)
- [Future Needs](#)
- [Sidewalks](#)
- [Medical Research Park Memo](#)
- [1993 Medical District Plan](#)
- [2007 Medical District Plan Update](#)
- [1993 Plan Map](#)



# CITY ROADWAYS

600+ miles of City Maintained Roads

General Condition of Major Thoroughfares – Poor





# IMMEDIATE NEEDS

Approximately 100 miles of road are in poor condition throughout the City.

Cost to Fix - \$100,000 per mile to resurface

Immediate needs = \$10,000,000 to resurface worst 100 miles of roadway





# FUTURE NEEDS

Additional 500 Miles of Road at  
\$100,000/mile = \$50,000,000

On a 20 Year Replacement Cycle = \$2.5 Million Annually

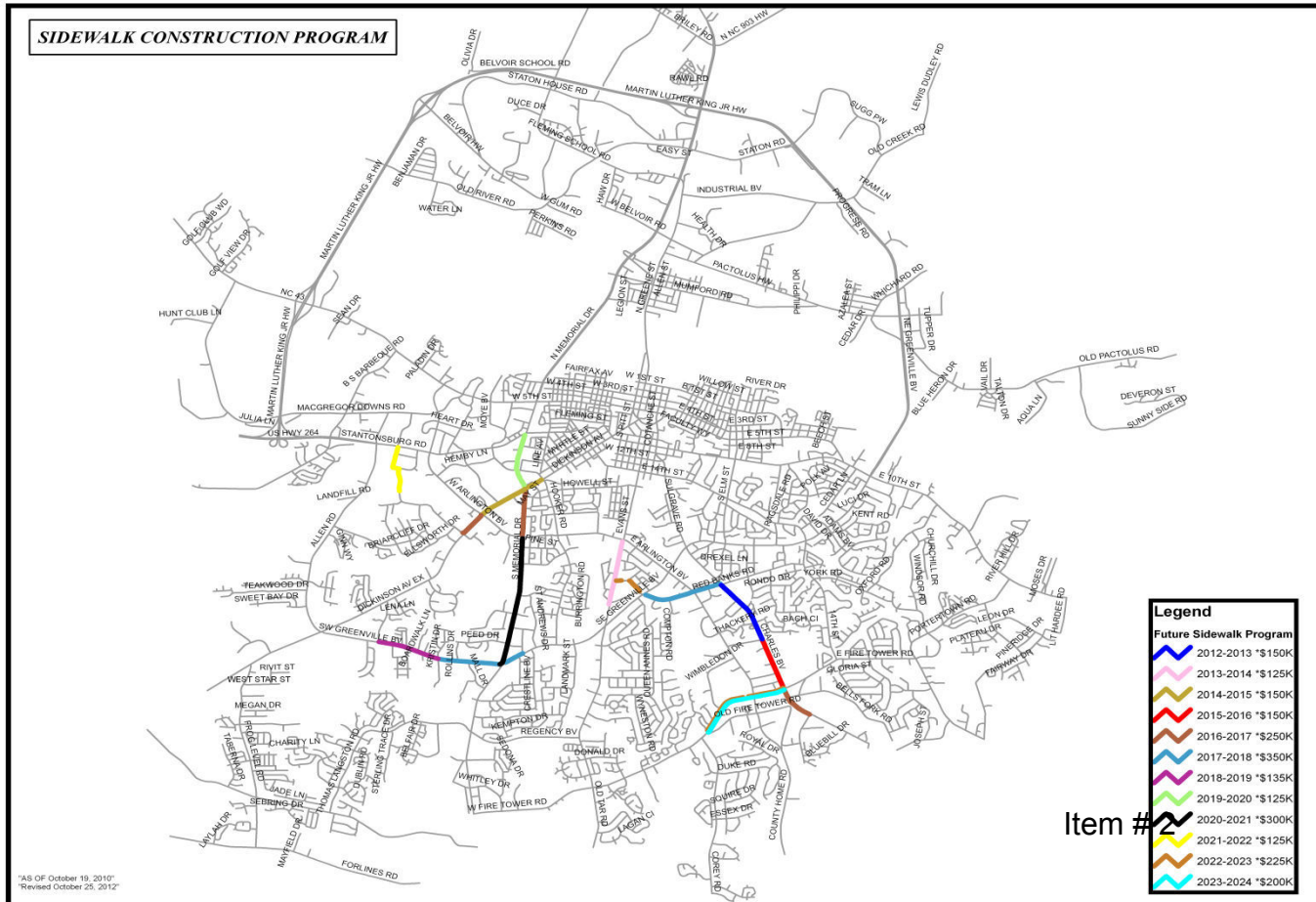


Item # 2



# CITY SIDEWALKS

## Current 10 yr Sidewalk Construction Program



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**COMMUNITY DEVELOPMENT**

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**MEMO**

**DEPARTMENT**

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**TO:** Barbara Lipscomb, City Manager

**FROM:** Merrill Flood, Director of Community Development Department

**DATE:** February 20, 2013

**SUBJECT:** **Consideration of Actions Needed to Develop a Medical Research Park**

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At the February 11, 2013, meeting of City Council, the Council expressed a desire to discuss options for the goal of developing of a Medical Research Park at the February 25, 2013 meeting. Among the action items listed in the City of Greenville’s *Strategic Economic Plan* is to “Diversify the City’s tax base and revenue sources to increase the City’s general revenue.” The Strategic Economic Plan further identifies attraction of high tech and medical support businesses as an opportunity for locations adjacent to the medical district and/or to the campus of East Carolina University.

One potential opportunity for creating tax base in the medical district where large tracts of developed land are owned by non-taxable entities such as East Carolina University and Vidant Health would be to develop a medical office/research park in collaboration with those entities. Such an endeavor might offer future expansion space for those institutions as well as development ready sites for private businesses who might wish to locate in a collaborative environment with a focus on the life sciences.

This is not a new idea for Greenville. The original Medical District Development Plan was adopted and implemented in October 1974. The plan created the supportive environment necessary to facilitate the present hospital and medical complex. The plan has been updated several times and has served the City well. The first major update occurred in 1986 and resulted in the adoption of the plan entitled **East Carolina Medical Park, A Comprehensive Proposal for the Development of a Medical Park.** The 1986 Plan recommended expansion of the medical district boundary to include a total area of 5,300 acres (8.2 square miles) extending from Memorial Drive to beyond the City’s jurisdiction (ETJ) in the vicinity of Frog Level Road and the present day Ironwood Subdivision.

The second major update occurred in 1993 with the adoption of the Medical Districts and Environs Land Use Plan. The 1993 Plan reconfigured the medical district boundary to the areas north of the Norfolk-Southern Railroad and extending west of US 264 (MLK Jr. Highway). The 1993 boundary encompassed approximately 6,200 acres (9.6 square miles)

**Page 2**  
**February 20, 2013**  
**Barbara Lipscomb**

with 40% of the area (3.8 square miles) being within the City's jurisdiction. The most recent ETJ extension, containing approximately 3,798 acres (5.9 square miles), occurred in 2001 and included the intervening areas between Ironwood Subdivision and US 264 (MLK Jr. Highway). Although this additional (jurisdictional) area is no longer considered to be part of the "medical district", the 2001 action has extended the City's ETJ to include the majority of the medical district boundary area originally included in the 1986 Plan, and the entire 1993 Plan boundary.

The 1993 Plan reemphasized that the "medical district" should contain a medical core, consisting of the hospital, medical school campus and a medical clinic transition area, residential neighborhoods, including multi- and single-family housing, and a commercial component adequate to serve the resident population, daily visitors, and district employees.

In addition to several zoning based objectives, the 1993 Plan contained a Land Use Plan 'A' and a Land Use Plan 'B'. Plan 'A' included the recommendation: "identification of a suitable location for a medical research/technology park along [west of] the NW Bypass [MLK Jr. Hwy] corridor", while Plan 'B' recommended residential development. The ultimately adopted, citywide, 1997 Future Land Use Plan Map incorporated the Plan 'B' recommendations, including residential development in the US 264 (MLK Jr. Highway) corridor in lieu of the research/technology park option.

In 2007 the Medical District Plan was amended to make adjustments for changes in the development patterns within the district. Areas recommended for Commercial and Service Delivery were relocated in an effort to insure that there was an adequate distribution of necessary services to promote a vibrant, efficient and sustainable medical district. With the amendment the notion of a Medical Research Park was still a future possibility. As a result, a Medical Transition land use pattern was established for medical land uses requiring close proximity to the Medical Core campus. The recommended locations for these uses were generally in the same locations identified in the 1993 plan for Medical Research and Technology uses.

**Medical District  
and Environs**

**LAND USE PLAN**

City of Greenville/Pitt County,  
North Carolina

*Prepared by:*

Edward D. Stone, Jr. and Associates, Inc.  
Planners and Landscape Architects  
Durham, North Carolina

March 18, 1993

Item # 2

**TRANSMITTAL  
LETTER**

March 18, 1993

Mr. Andrew J. Harris, Director  
Planning and Community Development Department  
City of Greenville, North Carolina

Mr. Jeffrey Ulma, Director  
Pitt County Planning Department  
Pitt County, North Carolina

Dear Andy and Jeff:

On behalf of Edward D. Stone, Jr. and Associates (EDSA), I am pleased to submit to you this *Medical District and Environs Land Use Plan* for the City of Greenville and Pitt County, North Carolina.

In authorizing the development of this plan, the elected boards charged the consultant with the following tasks:

- Provide an analysis of past and present development activity and planning efforts.
- Develop a long-range land use plan to be used as a guide for near-term and future land use decisions.
- Make recommendations as to the viability of a research and development park.
- Recommend a governing structure for the implementation of the plan.

This report documents the process used in developing the plan, which we feel has been comprehensive and thorough. Public input was encouraged through workshops and hands-on planning sessions with land owners, concerned citizens, technical and administrative staff.

We feel the plan has been a collaborative effort and hope that the City and County will adopt and implement it in a collaborative spirit. The plan is not final; rather, it should be seen as a guide on which to base future land use and zoning decisions, and should be reviewed and updated on an ongoing basis.

It has been our pleasure to participate in this planning effort. We look forward to the prospect and the challenge of assisting you in the implementation of the plan in the coming years.

Sincerely,

George E. Stanziale, Jr., ASLA  
Principal

**ACKNOWLEDGEMENTS**

EDSA wishes to acknowledge, with gratitude and appreciation, the assistance and information received from the following:

- Ronald R. Kimble, City Manager  
City of Greenville
- Kramer Jackson, County Manager  
Pitt County
- City of Greenville Planning and Community Development Department  
Andrew J. Harris, Director
- Pitt County Planning Department  
Jeffrey Ulma, Director

Their contributions and cooperation have been most helpful.

CITY OF GREENVILLE  
City Council Members

Nancy M. Jenkins, Mayor

Rufus Huggins, Mayor Pro-Tem

Mildred A. Council

Inez N. Fridley

Robert L. Ramey

Blanche J. Forbes

Stephen G. "Jack" Wall

PITT COUNTY  
Board of Commissioners

Farney M. Moore, Chairman

Ed Bright, Vice Chairman

Eugene James

Kenneth K. Dews

Wilton R. Duke

Jeffrey E. Savage

Tom Johnson, Sr.

Mark Owens, Jr.

Charles P. Gaskins



**TABLE OF CONTENTS**

MISSION STATEMENT .....Page 1

PROCESS AND COMMUNITY INVOLVEMENT ..... Page 2

EXISTING CONDITIONS .....Page 3

- Regional Context .....Page 3
- Jurisdictional Areas.....Page 5
- Site Analysis .....Page 7
- Forest Coverage .....Page 7
- Surface Drainage..... Page 9
- Flood Plain and Watershed Protection Areas ..... Page 11
- Wetlands ..... Page 13
- Soil Limitations.....Page 15
- Composite Site Analysis/Development  
Limitations ..... Page 17
- Existing Land Use .....Page 19
- Existing Land Use Breakdown.....Page 21
- Existing Zoning.....Page 22
- Existing Zoning Tabulations ..... Page 26

TRANSPORTATION ELEMENT ..... Page 27

INFRASTRUCTURE IMPACT EVALUATION .....Page 30

LAND USE PLAN..... Page 32

- Land Use Plan A ..... Page 33
- Land Use Plan B ..... Page 39
- Proposed Land Use Breakdown ..... Page 41

IMPLEMENTATION RECOMMENDATIONS .....Page 42

## **MISSION STATEMENT**

The purpose of this study is the preparation of a land use plan for the Medical District and its Environs within Pitt County, North Carolina, which includes the west-central portion of the City of Greenville. It is the intent of this plan to guide and enhance the continued growth and development of this area which has been spawned by the University Medical Center of East Carolina/Pitt County, which includes Pitt County Memorial Hospital and East Carolina University School of Medicine.

The lands adjacent to these major institutions have been subjected to significant development pressures to provide support uses to the immediate area and its substantial employment base, the regional population which utilizes the medical complex, as well as the community at large. While this development has not occurred without some levels of control, the resulting development has generated a significant amount of strip-type commercial and business development, which increases traffic congestion and detracts from the overall visual image of the area. In order to minimize the continuation of this type of development, while encouraging continued public and private development in support of the University Medical Center of East Carolina, an overall land use plan is proposed.

In establishing the parameters and approach to the land use plan, the following basic goals have been considered:

**GOAL #1** – Enhance and support the continued growth and visibility of the University Medical Center of East Carolina/Pitt County.

**GOAL #2** – Within the framework of a transportation network composed of existing and proposed elements, provide for easy, direct access to the primary medical center and supporting uses, while providing for efficient through-traffic and complete integration into the regional system.

**GOAL #3** – Retain a visual character and a pattern of development which reflects the open, rural qualities of the region and which responds to the needs of the population from the perspective of scale, understanding and complexity.

**GOAL #4** – Preserve and protect those natural environmental systems which influence and affect the quality of life for the community as a whole and, to the extent possible, encourage their enhancement and revitalization where appropriate.

**GOAL #5** – Provide for flexibility of land use for current and future landowners within the context of compatibility with existing development and support of the previously stated goals.

## **PROCESS AND COMMUNITY INVOLVEMENT**

The process used to develop the Land Use Plan for the Medical District and Environs was one which involved as much of the community as possible, including landowners, elected officials, planning staff and many other interested parties.

Upon completion of the preliminary inventory and site analysis, a public workshop session was held to introduce the community to the land use planning process and to elicit input regarding all aspects of the plan. During this workshop session, several goals and objectives, as well as priorities, were established by the community. The elements which the community determined most important in the development of the Land Use Plan were prioritized and are listed as follows:

1. Transportation corridors and Overpass at Norfolk and Southern Railroad.
2. Need to know long-term plan to deal with current ownership and land purchase patterns
3. Property owners' rights
4. Preservation of lifestyle and land value
5. Protection of medical school and hospital by land acquisitions

6. Growth versus quality of life
7. Medical District Plan site specific
8. Law enforcement
9. Property owners should have a say in the decision-making
10. Drainage concerns
11. Need to move ahead

Also during this workshop session, the group was broken down into subgroups headed by the planning team and preliminary land use concepts were collectively generated. These plans were then refined by the planning team and presented to the community group later the same day. By the end of the workshop, general consensus was reached on the direction of the Land Use Plan by all participants of the workshop.

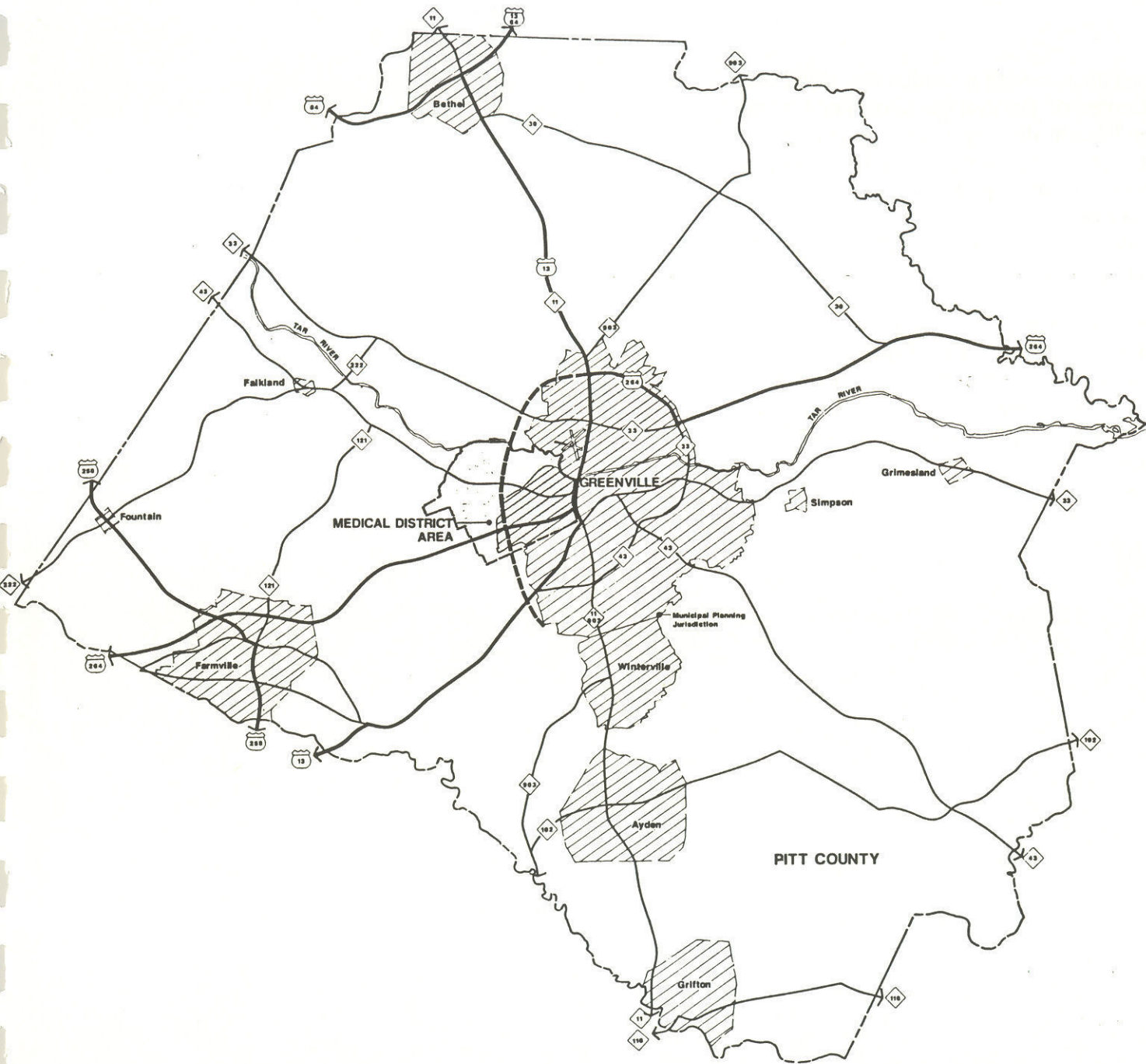
The planning team also met with representatives of the University Medical Center of East Carolina/Pitt County to gather their input and comments prior to formulation of a Draft Land Use Plan. The Draft Land Use Plan was then presented and reviewed with the public during an open forum meeting. The public's comments were incorporated and the draft Land Use Plan was finalized.

**EXISTING  
CONDITIONS**

***Regional  
Context***

The proposed Medical District and Environs includes approximately 6,200 acres on the western side of Greenville. It is bounded on the north by the Tar River, on the south by Norfolk and Southern Railroad, and on the east by Memorial Drive. On the west, it is generally bounded by existing subdivisions and areas of environmental constraints which are approximately 1 - 1-1/2 miles west of the U.S. 264 Bypass.

The area serves as an important gateway into Greenville from the west via U.S. 264 and NC 43, as well as the new U.S. 264 Northwest Bypass loop currently being completed.

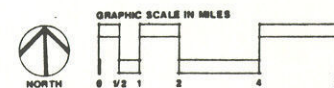


**MEDICAL DISTRICT  
and ENVIRONS**

City of Greenville - Pitt County,  
North Carolina

Edward D. Stone, Jr. & Associates  
Planning and Landscape Architects  
Durham, North Carolina  
The Cox Company  
Planners and Engineers  
Charlottesville, Virginia

**REGIONAL CONTEXT MAP**



Item # 2

## ***Jurisdictional Areas***

The eastern area, which includes the University Medical Center of Eastern Carolina/Pitt County and other higher density uses are within the City limits. The City's Exterritorial Jurisdiction (ETJ) extends west approximately to the U.S. 264 Bypass and Harris Mill Run. The remainder of the study area is within unincorporated areas of Pitt County.

Approximately forty percent of the total area is within Greenville's city limits or ETJ. Approximately sixty percent of the total area is within unincorporated Pitt County; however, a large portion of this is within the Tar River flood plain.



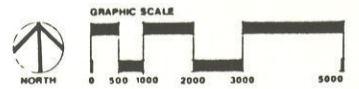
# MEDICAL DISTRICT and ENVIRONS

City of Greenville - Pitt County, North Carolina

Edward D. Stone, Jr. & Associates  
Planners and Landscape Architects  
Design, Team Leaders  
The Cox Company  
Planners and Engineers  
Charlotte, North Carolina



### JURISDICTIONAL LIMITS



## ***Site Analysis***

One of the first steps in preparing a Land Use Plan is to compile information on existing conditions, including an environmental analysis. The environmental analysis involved the mapping of the following:

- Forest Coverage
- Surface Drainage
- Flood Plain and Watershed Protection Areas
- Possible Regulated Wetlands
- Soil Limitations

A composite map of the area was then generated to identify overall environmental constraints and opportunities.

## ***Forest Coverage***

The vegetation patterns in most cases are reflective of agricultural and soil patterns. Most of the remaining forested areas are located within drainage systems, the flood plain or poorly drained areas.





# MEDICAL DISTRICT and ENVIRONS



City of Greenville    Iredell County,  
North Carolina

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Durham, North Carolina

The Cox Company  
Planners and Engineers  
Charlottesville, Virginia

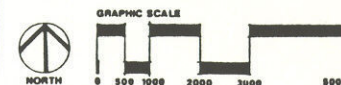


## LEGEND

-  Open Pasture/ Agriculture
-  Deciduous/ Coniferous Woodlands

Source: 1988 Aerial Photography/  
Field Verification

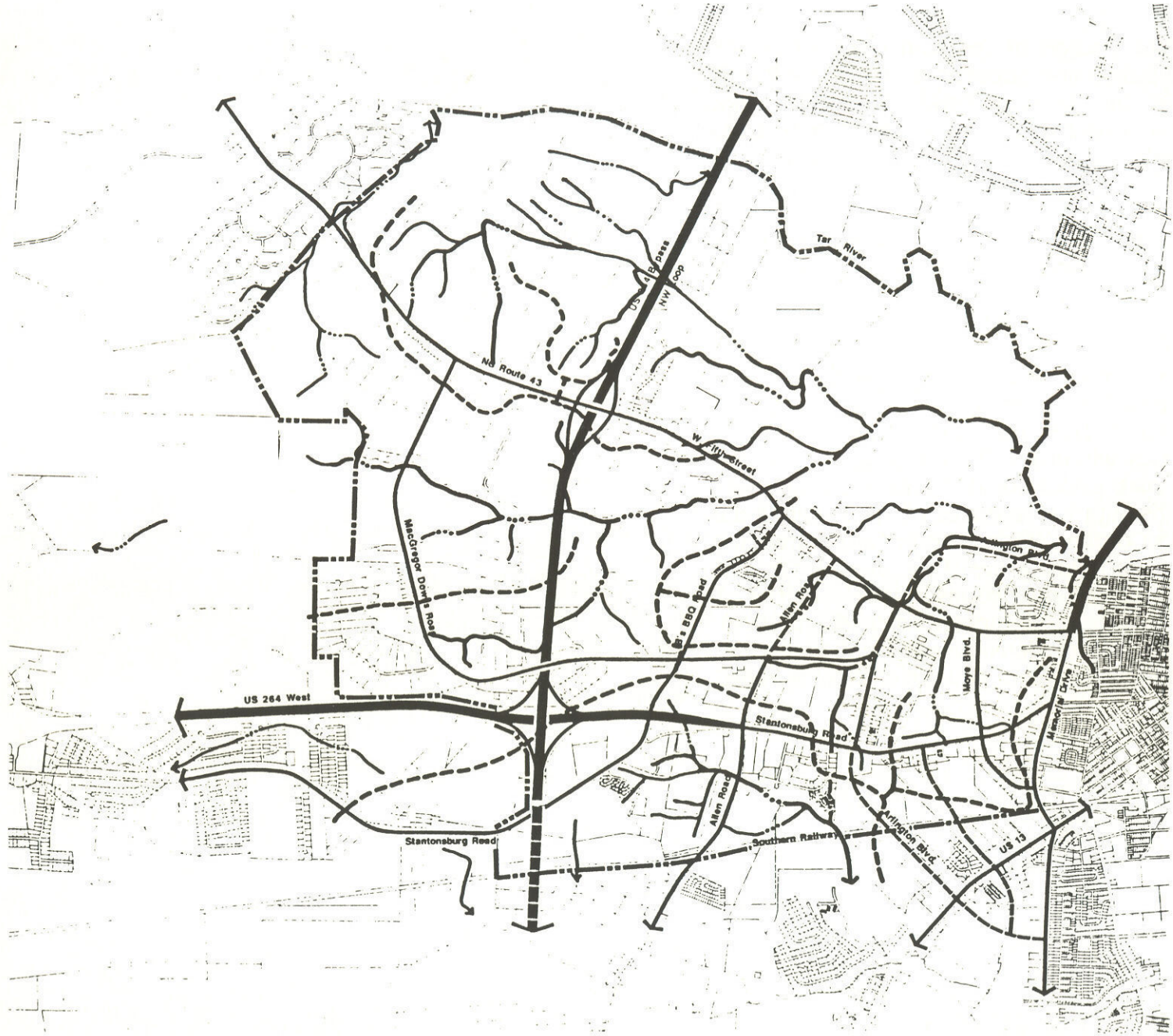
## MEDICAL DISTRICT FOREST COVERAGE



## ***Surface Drainage***

The majority of the area drains northward to the Tar River via the Harris Mill Run and School House Branch, while a small watershed area drains to the south. These two drainageways, along with the Tar River corridor, offer excellent opportunities for preservation as greenway corridors and have been identified as greenways on the Greenville Comprehensive Greenway Map. Currently, there is no comprehensive storm water management plan for the area, with each site typically handling its own runoff on an individual basis.

Flat areas southwest of MacGregor Downs Road, along with Tar River and south of Stantonsburg Road, are poorly drained. In general, the remainder of the study area is moderately well drained.





**MEDICAL DISTRICT  
and ENVIRONS**

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North Carolina

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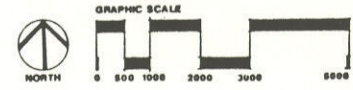
The Cox Company  
Planners and Engineers  
Chapel Hill, North Carolina

**LEGEND**

-  Major Surface Drainage Way
-  Major Surface Watershed Division

Source: USGS 7.5 Minute Topographic Map

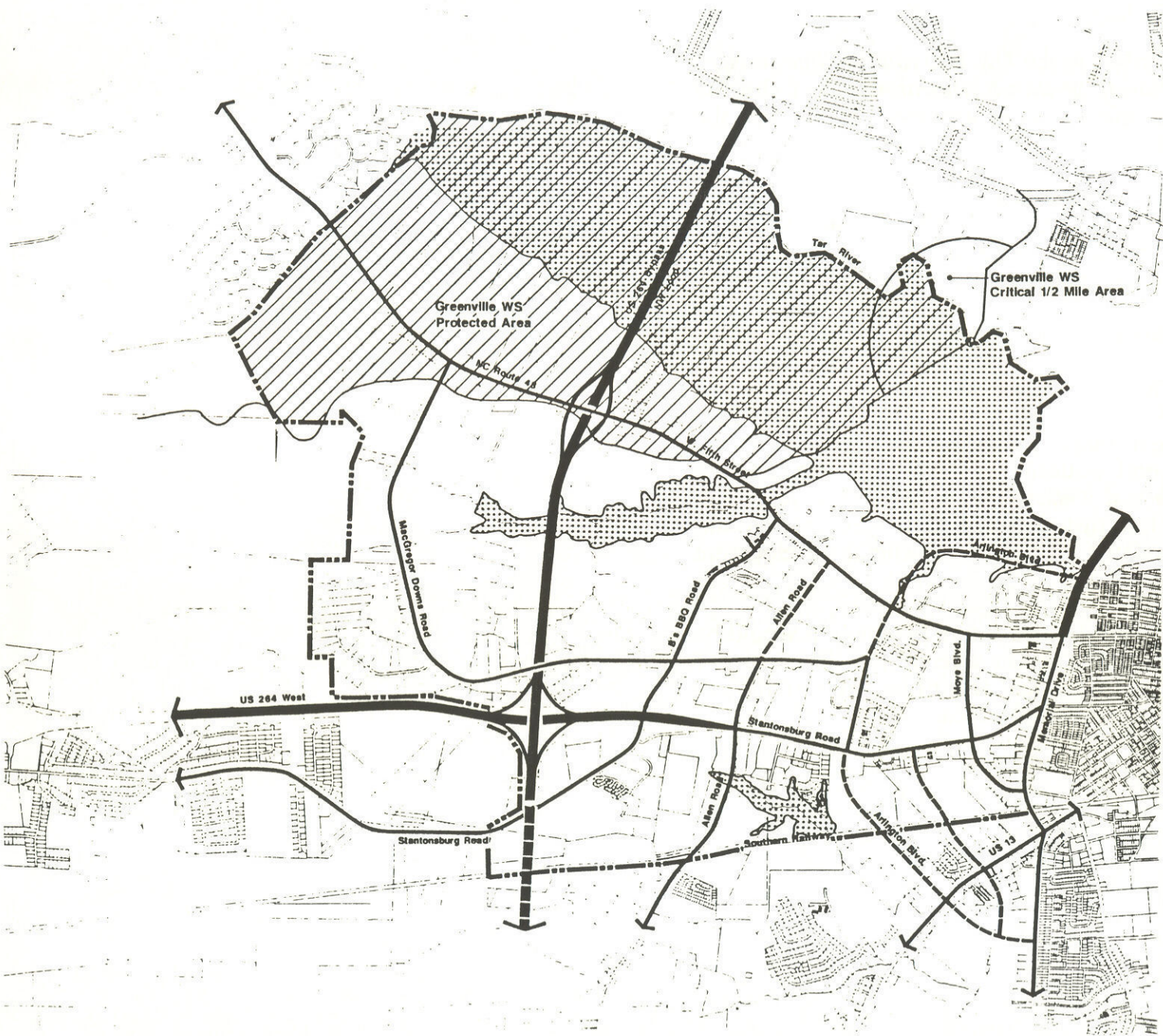
**MEDICAL DISTRICT  
SURFACE DRAINAGE**



***Flood Plain  
and Watershed  
Protection  
Areas***

A major portion of the land north of NC 43 (Fifth Street) and adjacent to Harris Mill Run is within the 100-year flood plain. While not undevelopable due to flood plains, these areas typically also exhibit other constraints, including poor soils and regulatory wetlands.

Under the new North Carolina Water Supply Watershed Protection Rules, areas upstream of Greenville's water supply intake structure are subject to certain restrictions. With a "WS-IV" water supply watershed classification, the Critical Area extends 1/2 mile upstream and the Protected Area extends 10 miles upstream from the intake. The Critical Area within the study area lies within the floodway and is, for the most part, undevelopable. The Protected Area extends out to a large area of upland along the NC 43 Corridor. Within the protected area, the County is utilizing the "Low Density Option" which places restrictions on density (i.e. 1 unit/1/2 acre) and impervious coverage (24%). Slightly higher densities and coverages are allowed without curb and gutter street systems.




**MEDICAL DISTRICT  
and ENVIRONS**

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Charlottesville, Virginia

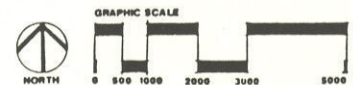
**LEGEND**

 NC Water Supply Watershed  
Protection Regulations -  
Protected Area

 100 Year Flood Plain

Source: FEMA - Flood Insurance  
Rate Maps for Pitt County and  
Greenville, NC.

**MEDICAL DISTRICT  
100 YEAR FLOOD PLAIN**



## **Wetlands**

According to the *U.S. Fish and Wildlife Service's National Wetlands Inventory*, the following three main areas of wetlands occur within the study area:

- Tar River Bottomland
- Creek Corridors of Harris Mill Run and Schoolhouse Branch
- Area Southwest of U.S. 264/264 Bypass

It should be noted that these maps are based primarily on soil types and have not been field verified or reviewed with the U.S. Army Corps of Engineers. Final wetland delineation may reveal more wetland areas; however, the general patterns indicated on the *USFWS National Wetlands Inventory* will be helpful in conjunction with other environmental conditions to determine general development suitability.

For more detailed future planning, it would be beneficial to initiate a request to EPA Region 4 for an advance identification (ADID) of wetlands within the area.



# MEDICAL DISTRICT and ENVIRONS

City of Greenville - Pitt County,  
North Carolina

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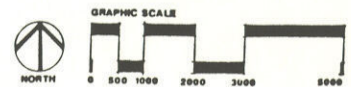


## LEGEND

 Wetland Classified Area

Source: USFWS National Wetlands  
Inventory

## MEDICAL DISTRICT WETLANDS



***Soil  
Limitations***

Soil characteristics were inventoried and summarized based upon development limitations. Development constraints throughout the area are a result of poor drainage characteristics and lack of suitability for septic drainage fields.





## MEDICAL DISTRICT and ENVIRONS




City of Greenville Pitt County,  
North Carolina

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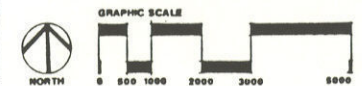


### LEGEND

-  Slight to Moderate Soil Limitations
-  Moderate to Severe Soil Limitations due to Poor Drainage
-  Very Severe Soil Limitations due to Seasonal High Water Table at near the Surface and Flooding

Source: USDA-SCS Soil Survey for Pitt County, NC.

### MEDICAL DISTRICT SOIL LIMITATIONS



***Composite Site  
Analysis/  
Development  
Limitations***

All of the above mentioned environmental elements were put together to form a composite picture of the area to determine the environmental suitability of the land for development or preservation. Generally, the composite analysis illustrated that:

- the areas most suitable for development occur along the NC 43 Corridor and within the loop formed by MacGregor Downs Road.
- heavy constraints occur along the Tar River, the major stream corridors, and on most of the land west of MacGregor Downs Road and southwest of the U.S. 264/264 Bypass interchange.

The areas which are characterized by severe development constraints should be preserved due to the combinations of environmental conditions which would need to be overcome. Areas with moderate development constraints could and have been used in many cases for different levels of development, but with increased development costs for items such as heavy grading for drainage and extensive subdrainage systems.

Because of the lack of constraints and the amount of existing development on the western edge of the NC 43 Corridor, the original study area was expanded slightly to include this corridor.

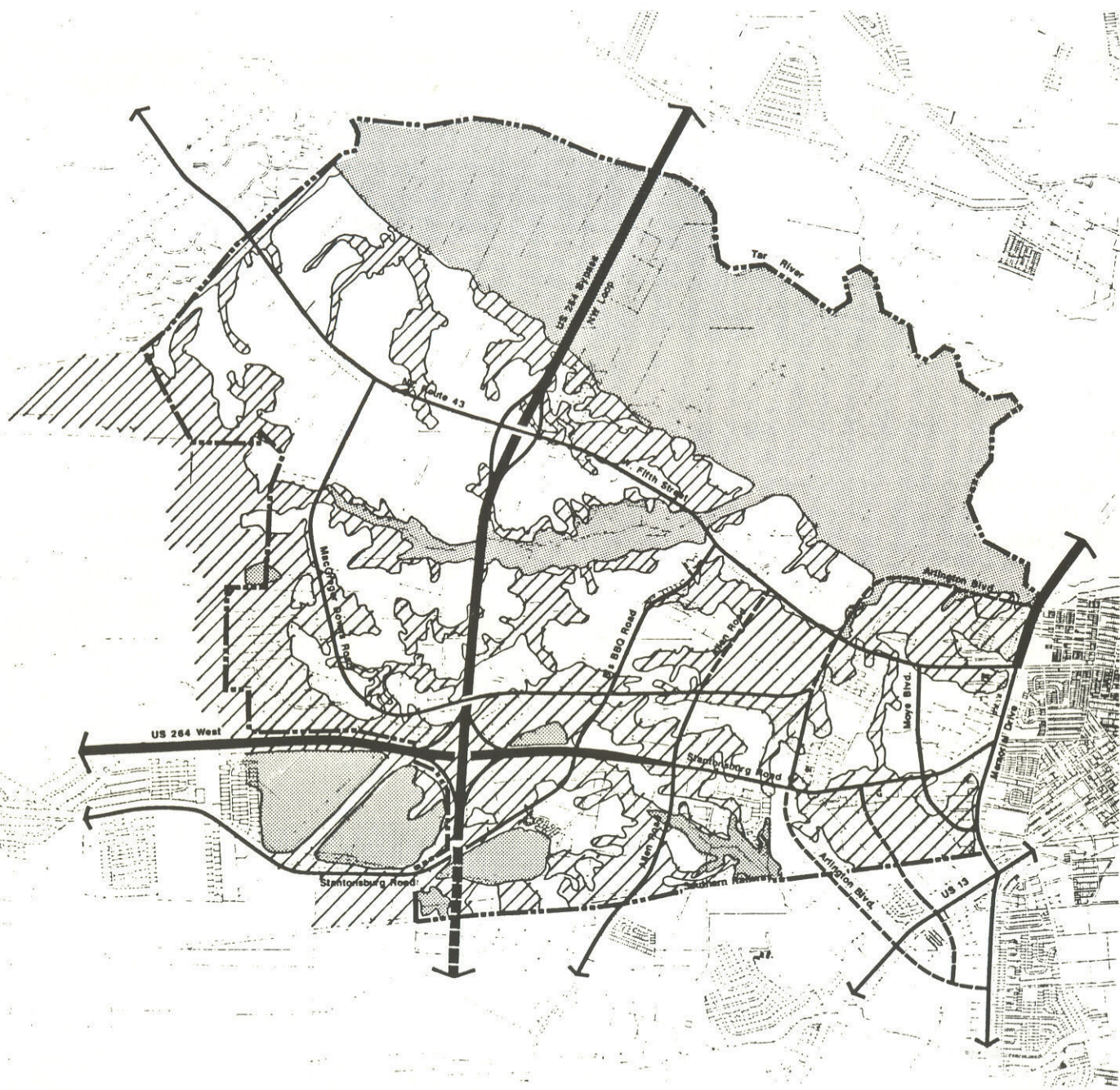


# MEDICAL DISTRICT and ENVIRONS

City of Greenville - Pitt County, North Carolina

Edward D. Stone, Jr. & Associates  
Planners and Landscape Architects  
Durham, North Carolina

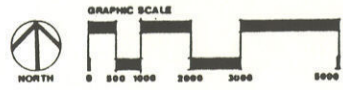
The Cox Company  
Planners and Engineers  
Charlottesville, Virginia



### LEGEND

-  Slight Development Constraints
-  Moderate Development Constraints
-  Severe Development Constraints

### MEDICAL DISTRICT COMPOSITE SITE ANALYSIS/ DEVELOPMENT LIMITATIONS



## ***Existing Land Use***

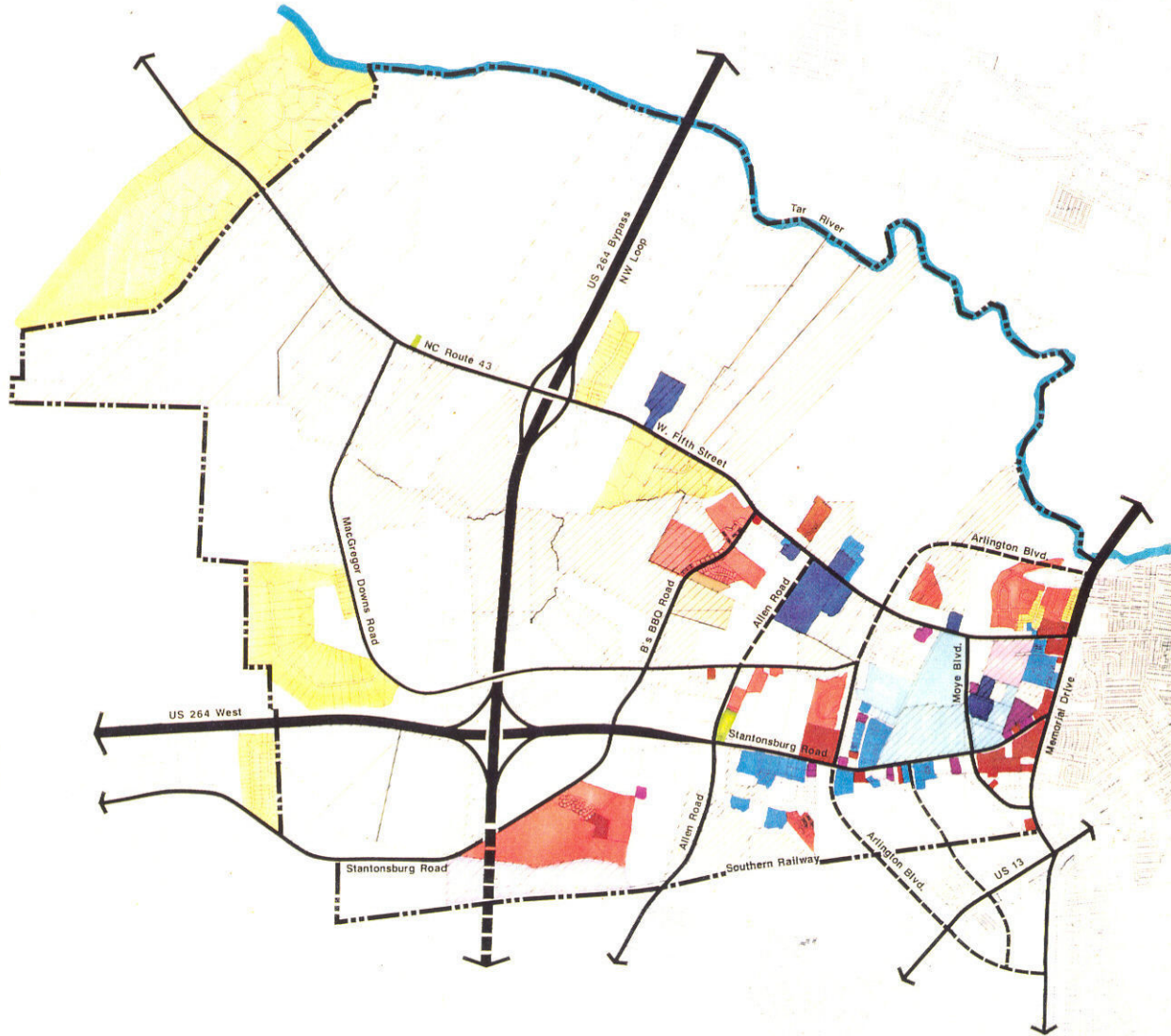
Much of the present land use pattern within the study area was established by the Medical District Development Plan prepared in 1974 and the subsequent establishment of Medical District Zoning Classifications in 1985. The core of the Medical Area, which includes Pitt County Memorial Hospital and East Carolina University School of Medicine, has gradually grown to include other institutional and medical uses such as nursing homes, The Pitt County Mental Health Clinic and the Pitt County Office Building.



The largest growth of any land use category within the area has been medical and professional offices which are interspersed throughout the area adjacent to the Hospital and School of Medicine.

Retail development has been confined to the eastern periphery which is primarily small lot, "strip" type commercial along Memorial Drive and Stantonsburg Road; the shopping center at Stantonsburg Road and Arlington Boulevard; and the Flower/Gift Shop on Stantonsburg Road.

The majority of development within the area is devoted to residential uses. East of B's BBQ Road, there are a significant number of multi-family developments. Single family developments of varying scales are beginning to proliferate in the western areas extending out to the existing subdivisions on NC 43.

Despite the development trends identified above, it is evident that there are still significant tracts of vacant land around the Medical Core Area. In addition, most land uses are low-rise, with the exception of the University Medical Center of East Carolina/Pitt County. The majority of land west of B's BBQ Road is undeveloped and is characterized by larger tracts of land often with contiguous parcels being owned by the same entity. Another notable land use trend that is evident is that most uses are distinctly separated with no integration or mixing of uses.



**MEDICAL DISTRICT and ENVIRONS**

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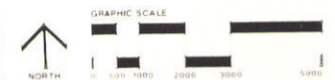
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Charlottesville, Virginia

**LEGEND**

-  Agriculture/Undev./Rural Res.
-  Residential - Subdivision
-  Residential - Mobile Home
-  Residential - Multifamily
-  Residential - Special Treatment
-  Hospital & Medical School
-  Medical Office
-  Nursing Care Institution
-  Commercial
-  Professional Office
-  Government - Office
-  Government - Landfill/Container Site
-  Church/Religious Facility
-  Utilities - Substation
-  Study Area Boundary
-  Proposed Road Extension
-  Multiple Parcels with Single Ownership

Source: Pitt County Planning Department and Greenville Planning Department, June 1992.

**MEDICAL DISTRICT EXISTING LAND USE**



**Existing  
Land Use  
Breakdown\***

<u>TYPE OF DEVELOPMENT</u>	<u>ACRES</u>
• Single Family Residential.....	1,174
• Mobile Home Park.....	2
• Multi-Family Residential .....	209
• Homes for Special Treatment.....	8
• Commercial.....	65
• Medical Office.....	67
• Church or Religious .....	6
• Office Research/Professional Offices.....	16
• Hospital or Clinic .....	131
• Nursing Care Institution.....	68
• Government Offices .....	20
• Sanitary Land Fill .....	133
• Federal Property .....	338
• Utility or Substation .....	5
<b>TOTAL DEVELOPED ACREAGE .....</b>	<b>2,240</b>

**NOTE:** Residual land is agricultural, open space or limited residential.

\*Based upon statistics provided by Pitt County, Fall 1992.

## ***Existing Zoning***

Within the Extraterritorial Limit of Greenville, most of the area is governed by Medical District Zoning Classifications. These classifications are as follows:

### **MD-1 Medical District One**

The MD-1 district is primarily designed to provide areas where the institutionalized care of physically and/or mentally ill people can be provided and where governmental or private agencies, offices or institutions can provide services of a medical, para-medical or social service nature. The MD-1 zoning is one contiguous area centered around the University Medical Center.

### **MD-2 Medical District Two**

The MD-2 district is primarily designed to create areas in which hospitals, rehabilitation centers, medical offices and clinics may be compatibly mixed, in order that these related uses can be near each other for doctor and patient convenience. In addition, through its permitted uses, the district encourages a healthful environment in abutting residential areas, as well as within the health care delivery community. The MD-2 areas are primarily adjacent to or near the MD-1 core area.

### **MD-3 Medical District Three**

The MD-3 district is primarily designed to provide for general business, professional offices and institutional uses, as well as to provide additional areas for medical offices and clinics to locate in a professional office environment. In addition, the district prohibits commercial and industrial land uses which can

generate large traffic volumes and encourages the development of areas that will serve as a buffer for residential zoning districts. These areas are typically located as a transition between MD-1/MD-2 districts and residential zoning.

### **MD-4 Medical District Four**

The MD-4 district is primarily designed to provide for the sale of convenience goods, for provision of personal services, and for other frequent needs of the trade area within the medical district community in a planned shopping center environment. In addition, it requires that development sites of less than four acres be developed in conjunction with larger development sites in such a way that sites of less than four acres are served by internal traffic circulation. The only area of MD-4 zoning is the shopping center at Stantonsburg Road and Arlington Boulevard.

### **MD-5 Medical District Five**

The MD-5 district is primarily designed to accommodate a compatible mixture of single family, two-family and multi-family dwellings at higher densities.

### **MD-6 Medical District Six**

The MD-6 district is primarily designed to accommodate commercial developments that best service the motoring public, as well as uses that generate large traffic volumes in a development atmosphere that encourages compact, convenient shopping. All of this zoning occurs along Memorial Drive.

**MD-7 Medical District Seven**

The MD-7 district is primarily designed to accommodate a compatible mixture of single family dwellings and agricultural uses at lower densities. These areas occur at the periphery of the Extraterritorial Limit.

Other non-Medical Zoning Districts which occur within the Extraterritorial Limit include:

**CDF Downtown Commercial Fringe**

The purpose of the CDF district is to provide commercial and service activities designed to enhance the downtown commercial area, stimulate redevelopment and encourage a compatible mix of commercial and high density residential development. This area occurs at the intersection of Memorial Drive and Fifth Street.

**R6 Residential**

The R6 district is primarily designed to accommodate a compatible mixture of single-family, two-family and multi-family dwellings at higher densities. This area is located along Memorial Drive north of Fifth Street.

**PUD Planned Unit Development**

The PUD district is a special use residential zoning district that provides an alternative to traditional development standards.

The accompanying chart illustrates the amount of area within each zoning district, as well as the amount of area developed within each district. The tabulations illustrate the fact that there is still a significant amount of undeveloped land within most zoning classifications.

Pitt County does not currently have zoning in place; however, the County is in the process of adopting a new Zoning Ordinance.





# MEDICAL DISTRICT and ENVIRONS

City of Greenville Pitt County, North Carolina

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Chapel Hill, North Carolina



EXISTING ZONING





***Existing  
Zoning  
Tabulations\****

<u>ZONING CLASSIFICATION</u>	<u>ZONED AREA</u>	<u>AREA DEVELOPED</u>	<u>% OF ZONING CLASSIFICATION DEVELOPED</u>
• Floodway	67 AC		
• MD-1	282 AC	171 AC	61 %
• MD-2	228 AC	66 AC	29 %
• MD-3	532 AC	52 AC	10 %
• MD-4	23 AC	15 AC	65 %
• MD-5	571 AC	73 AC	13 %
• MD-6	82 AC	29 AC	35 %
• MD-7	711 AC	90 AC	13 %
• PUD	100 AC	40 AC	40 %
• CDF	4 AC	4 AC	100%

\*Zoning tabulations provided by City of Greenville, dated October 1991.

## **TRANSPORTATION ELEMENT**

The transportation system within any community is one of the most important, permanent components of the urban system. Every individual, business or institution is both benefited by and affected by that system. As it relates to the Medical District and its Environs, the transportation system provides regional, community and local levels of service. Due to the nature of the primary land use elements (i.e. medical services) all aspects of the traffic/transportation system must function equally well.

### **Regional Highway System**

The regional highway system which services the Medical District and its Environs is composed of US Highway 264 via (Stantonsburg Road), US Highway 13 via (Memorial Drive/Dickinson Avenue), NC Highway 11 via (Memorial Drive), NC Highway 43 (West Fifth Street), and the U.S. Highway 264 Bypass which is now under construction.

This regional highway network provides direct and relatively easy access to the Medical District and its Environs for the regional population for which both Pitt County Memorial Hospital and the East Carolina University School of Medicine provide service. The service will be greatly enhanced with the completion of the U.S. Highway 264 Bypass.

Regional access to the Medical District and its Environs can be expected to continue to focus on US Highway 264, Memorial Drive, and West Fifth Street as these thoroughfares provide the most direct linkage to the arterial and local street system which focuses on the Hospital and School of Medicine Campus.

The Land Use Plan should acknowledge this circulation pattern and provide for continued controlled and limited vehicular access points along these routes with direct access provided to adjacent parcels only by arterial or local streets and not by curb cuts.

### **Thoroughfares/Arterials**

As reflected on the current Thoroughfare Plan for the City of Greenville, the roadway network which services the community-wide needs has been established and is being implemented. The extension of Moye Boulevard, Arlington Boulevard, Allen Road and W.H. Smith Boulevard will provide numerous alternative north/south access routes to the Medical District and its Environs, and will provide opportunities to disperse public loading throughout the system.

Three recommendations have emerged as a result of this study and the related Land Use Plan:

1. An overpass at the Southern Railway Corridor should be constructed on a minimum of one of the north/south thoroughfares to allow for uninterrupted emergency access to the Medical District. Currently, all crossings of the Southern Railway tracks, along the southern boundary of the study area, are at-grade crossings and are subject to blockages by train traffic. As the Arlington Boulevard extension has the potential to provide an "inner loop" service potential, it is the recommendation that this be the point for the overpass.
2. MacGregor Downs Road should be added to this Thoroughfare Plan as a minor thoroughfare to provide increased east/west traffic internal to the Medical District and its Environs. The extension of MacGregor Downs Road/Arlington Boulevard to NC 43, as currently indicated on the Thoroughfare Plan, should remain a high priority. This will be particularly important as the area continues to develop. The use of MacGregor Downs for local trips within the District area can reduce pressure on US 264 and West Fifth Street. The level of service should be upgraded initially from B's BBQ Road to the Arlington Boulevard extension, but ultimately in its entirety west and northwest to NC 43.

### **Local Streets**

The local street system which services the Medical District and its Environs is currently the least serviceable element of the roadway network. Built largely in response to, and in many instances, as a part of various site specific development activities, the system lacks cohesiveness and consistency. While many of the most recent additions to the system meet service and design standards, older ones do not. Additionally, some of the roads associated with the larger institutional uses provide a multitude of functions (parking, service access, emergency access, and institutional only circulation) so that service levels are reduced.

As infill development, new site development and redevelopment occur, efforts should be made to eliminate such problems as offset intersections, on-street parking, direct service area access, uncontrolled parking lot access, and varying cross-sections and design standards. A more comprehensive approach to the interconnection of various individual parcels needs to be established as well.

### **Street Graphics And Signage**

A particular shortcoming of the highway system infrastructure is the lack of a unified and cohesive signage/information system. As development continues, this will become a larger problem as more and different entities seek to gain the motorists' attention to convey messages with additional on-premises signs.

A coordinated signage system which directs traffic flows to the various institutional, professional and commercial areas is required to minimize confusion and enhance traffic flow and overall user efficiency.

### **Public Transportation**

The Medical District and its Environs currently has limited public transportation service provided by the Greenville Area Transit System (GREAT). This service is focused on regional routes which connect the major population centers within the City of Greenville to the area's major employment, shopping, and institutional areas. This system does provide a viable alternative for access to the Medical District for many employees and visitors, and ridership to the Medical District is high. To the extent possible, the GREAT system should be encouraged to upgrade its service and to coordinate schedules with the major medical service facilities to increase the convenience of public transportation as an option. In addition, service should be expanded to higher density land uses to the west as these areas become developed.

Additionally, an internal transportation system (in addition to the Hospital's employee parking lot shuttle) should be considered for use within the immediate core of the Medical District itself. Significant amounts of the current traffic is being generated internally by patients visiting the numerous doctors, clinics, or other services while in the Medical District. This system could also provide an alternative for employees within the District for use during lunchtime and other off-duty periods.

### **Alternative Transportation Systems**

As a continuation of recommendations made by the City of Greenville Comprehensive Plan and other studies, the Medical District and its Environs should provide for alternative transportation systems within its limits and connected to the community as a whole. Pedestrian, bikeway, and greenway linkages should be incorporated into the plan and connections to individual developments made mandatory as part of routine review and approvals.

**INFRA-  
STRUCTURE  
IMPACT  
EVALUATION**

After careful consideration of the existing utility infrastructure system, several observations can be made:

**Storm Water Management**

A regional comprehensive storm water management plan would be beneficial to locate those points where the runoff from contributing areas can be most effectively and efficiently managed. Once these locations are determined, a pre-engineering study would establish rough costs which can be used as a basis for working out a financial arrangement to pay for the impoundments. By establishing a pro-rata share agreement or some other cost-reimbursement mechanism, the inter-jurisdictional water quantity and quality needs of the region can be addressed in a more cost-effective manner than by handling the water in a site-by-site fashion. Upfront funding for this work can be obtained by bonds floated by the City and County, or by direct borrowing by the jurisdictions. These expenditures can then be recaptured by instituting a special tax assessment district.

**Sanitary Sewer**

The impact area of the Medical District extends beyond the current limits of the municipal sanitary sewer system. Greenville has approved \$1 - 1.5 million for sewer earmarked for the Medical District in the November 1992 bond referendum; however, the planning of Town Centers and Focus Zones will place additional burdens on the existing system. In order to

accommodate future growth of anything other than light residential (which is currently being served by septic fields), it will be necessary to expand the system. Due to minimum cover over the pipes in the current limits of the system, it is likely that lift stations will be a part of any expansion activity. The capacity of the existing wastewater treatment plant in Greenville will also have to be analyzed with respect to its ability to accommodate any additional burden. If capacities are limited, the City may wish to reserve some increment of the existing capacity for future use by the District.

**Water**

Within the City limits and most of the Extraterritorial Jurisdiction, the City of Greenville owns and maintains the domestic water supply system. The Bell Arthur Water Corporation also owns water lines within the study area. This method of fractured control is ineffective from a regional or sub-regional standpoint since little cooperation and coordination exists among the competing parties. Since the emphasis under this system (B.A.) is on providing domestic water rather than to provide expansion capabilities at a municipality, there is inadequate fire protection at several points within the system. Four inch lines are commonplace and friction losses are so great that there is inadequate residual pressure.

The existing elevated storage tank on NC 43 should be evaluated to determine the level of

service capacity, if any, is available to the Medical District. It is probable that, given the size of lines and distance from the tank to the District, another tank will be required as part of the utility infrastructure of the Technology Park. The demands of the Park, combined with those of Commercial Centers and Focus Zones, will likely drive water requirements higher than early projections may indicate. Therefore, a conservative approach is to enter into a Capital Improvements Plan agreement between the public and private sectors whereby the long-range needs of the region are met and paid for over time. Adequate water pressure and

available flow characteristics will be essential to satisfy the insurance requirements of any tenants within the Medical District. A fire flow analysis is essential to provide the end user with the capacity to obtain adequate insurance coverage.

#### **Capital Improvements Plan**

A coordinated City/County C.I.P. effort should be initiated to develop adequate understanding of what needs to be accomplished at the governmental level to ensure long-term success for the Medical District. Obviously, the C.I.P. will point toward necessary project phasing and funding commitments. These must be shared among City, County and private participants.



## **LAND USE PLAN**

In formulating the Land Use Plan, several public workshops and public input sessions, staff reviews, and a joint meeting was held with the Pitt County Memorial Hospital and East Carolina University School of Medicine. The plan is an outgrowth of the valuable input provided by all of these entities. The plan has evolved through several rough drafts as various comments have been incorporated.

### ***Plan Objectives***

Some specific objectives for the Medical District Land Use Plan include the following:

- Provide an appropriate mix of residential densities and balance of land uses so that residents and employees might live and work within the area.
- Provide for reasonable expansion of the primary medical core to the west.
- Transition the intensity of land uses from the medical core to the outlying portions of the land use plan area.
- Develop an open space network (esp. Tar River, other major watercourses) and accommodate recreational needs.
- Address design and aesthetic considerations, including signage and landscaping.
- Create a community (regional) focal point at the U.S. 264/Northwest Bypass interchange and a local focal point at the NC 43/Northwest Bypass interchange.
- Identify a suitable location for a medical research/technical park along the Northwest Bypass corridor.
- Provide for effective drainage and utilities within an area.
- Encourage the development of commercial uses at identified focal points and discourage "strip commercial" development along transportation corridors.
- Effectively integrate existing land uses and lifestyles into the future land use pattern.
- Identify the most effective means for administering the plan.

## ***Land Use Plan A***

Plan 'A' includes the identification of a Technology/Research Park within the district and incorporates the following elements:

### **Medical Core**

The focus of the Medical District and Environs continues to be the Medical Core Area, Pitt County Memorial Hospital, and the East Carolina University School of Medicine. This area is comparable to the current MD-1 Zoning District and has been expanded to include several parcels which are currently being used for MD-1 type uses.

### **Medical Transitional**

Comparable to the City's current MD-2 Zoning classification, the Medical Transitional use includes institutionalized care and services, medical offices and clinics in a compatible mix. It is envisioned that this classification would not allow non-medically related office, commercial, or residential uses and would serve as the area for future expansion of primary medical uses around the Medical Core. To allow for expansion of these land uses, some additional area toward Allen Road has been included in this category.

### **Office/Institutional/Medical**

Radiating out from the Medical Core and Medical Transitional Areas, this land use would allow for some non-medical related offices. These areas are south of Stantonsburg Road and are comprised mostly of existing developments or projects currently being planned.

### **Office/Institutional/Multifamily**

This land use category would be similar to the Office/Institutional/Medical category but would also allow residential development on a limited basis. This category would serve as a transitional area between the Medical Core and the land uses in the U.S. 264 Bypass area.

### **Community Focus Zones**

The high visibility interchanges of the new U.S. 264 Bypass offer the opportunity to create two areas of high density, mixed use developments which would serve as Community Focus Zones for the area. The Focus Zones would include a mix of office/commercial and possibly residential uses in a planned development. Community Focus Zone 1, at the U.S. 264 Bypass/264 Interchange, would relate more to regional demands and would include such uses as hotels, office space, and some retail in a mixed-use atmosphere. Focus Zone 2, at the intersection of U.S. 264 Bypass and NC 43, would serve more of the local area surrounding it. They would be designed to facilitate stated public policies which encourage design emphasizing lively, people-oriented environments and compatible, visually-interesting development. This district would provide areas where moderate scale, mixed use centers can locate with an emphasis on development of a balance of residential, office and commercial uses.

It is intended that the Focus Zones would encourage development within which mutually

supporting residential, commercial and office uses are scaled, balanced and located to reduce the need for private automobile usage. Mixed Use districts are intended to encourage development that allows multiple destinations to be achieved with a single trip.

Each of these areas would have a mixed use classification that would dictate permitted uses and intensities. Other key criteria that would be established within the mixed use classifications would include:

- Lot Size: Minimum lot size of 20 acres for Focus Zones 1 and 2
- Mix of Uses (% of gross floor area allocated by uses)
- Buffers and Setbacks
- Building Height Limits
- Development Design Standards (i.e. requirement of any application to include a site evaluation analysis including topography, soil characteristics, drainage, vegetation and other existing conditions).
- Regulations pertaining to additions to approved mixed use developments. Large, single-use retail operations which are totally vehicular dependent would not be permitted.

Large, single-use retail operations which are totally vehicular dependent would not be permitted.

### **Mixed Use Village**

This area occupies strategically located undeveloped land in close proximity to the Medical Core and adjacent to Stantonsburg Road, as well as two key north/south roads that are being upgraded. Because of the importance of this location, an excellent opportunity exists to create a well planned mixed use development which would provide shopping, other retail, office, medical and non-medical, and residential uses for the medical area. Criteria would be established to maximize pedestrian activity between land uses in the Village as well as adjacent land uses. Criteria similar to the Focus Zones would establish minimum lot sizes, mix of uses, etc.

### **Technology Park**

A major goal of previous study committees was the establishment of a Research or Technology Park within this area. Originally envisioned as a much larger development, the Land Use Plan identifies approximately 800 acres straddling the U.S. 264 Bypass as the most appropriate for the Technology Park. Because this area is still mostly undeveloped and is characterized by large parcels of land, acquisition is still possible. At the same time, the Technology Park would still be in close proximity to the Medical Core and would have maximum accessibility to the Medical Core via NC 43 and MacGregor Downs Road (upgraded, see Traffic Section), as well as pedestrian access via greenway corridors. The park would be served by a new internal road system with distinct main entrances off of NC 43 and B's BBQ Road. Guidelines for the park would need to be established which would regulate items such as architecture, impervious coverage, floor area ratios, buffers, setbacks, landscaping and signage.

### **Medium/High Density Residential**

Several medium to high density residential areas have been provided adjacent to and near the high density nodes such as the Focus Zones and Medical Core area. This will allow for employees to live near their place of employment as well as to provide a transition to lower density housing further from these nodes.

### **Medium/Low Density Residential**

At the northwest quadrant of the U.S. 264 Bypass and NC 43 interchange, an area of low to medium density residential is proposed. Densities in this area will need to stay relatively low because of watershed protection regulations and to maintain compatible with adjacent, existing low density residential communities.

### **Low Density or Clustered Residential**

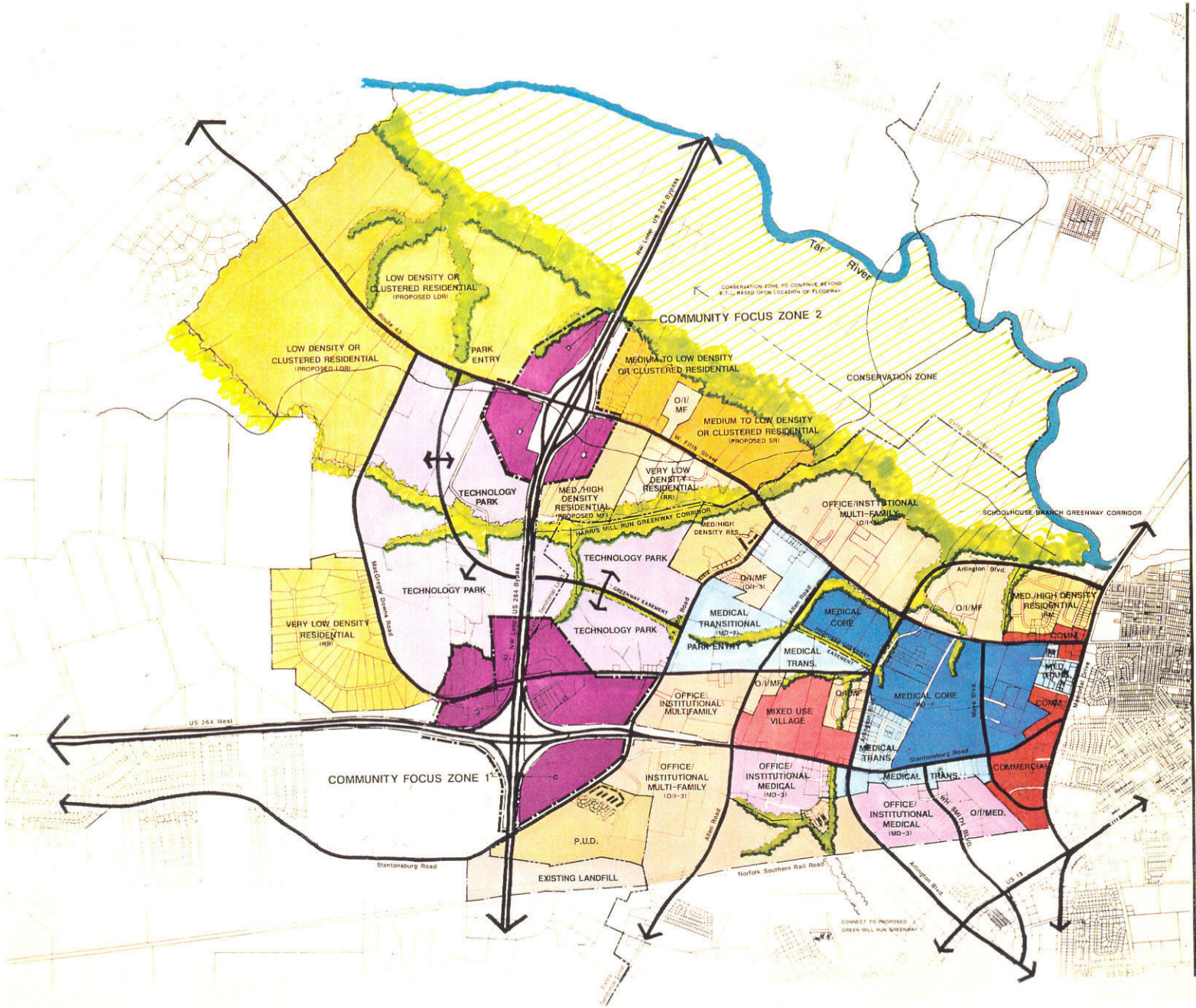
The majority of the land within the County's planning jurisdiction beyond the Technology Park is proposed to be low density housing. Incentives should be built into future regulations governing these parcels to encourage clustering of housing units to preserve natural features and rural character.

### **Other Existing Land Uses**

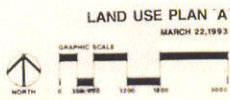
Several other existing land uses within the area are well established and would remain on the plan as they currently exist. This would include the commercial activity along Memorial Drive, the PUD development on Stantonsburg Road, existing subdivisions of very low density, and the existing landfill.

### **Conservation Zone/Greenways**

The 100 year flood plain and major drainage systems have been identified for preservation as Conservation Zones. Within these conservation zones, greenway trails could be routed to provide pedestrian access throughout the area. Preservation of these areas will reduce sedimentation and improve water quality by filtering runoff. There are many opportunities to provide park facilities adjacent to these greenway corridors. As this area continues to grow, consideration should be given toward locating a public community park in the area between the Technology Park and the Medical Core.



- LEGEND**
- MEDICAL CORE (MD-1)
  - MEDICAL TRANSITIONAL (MD-2)
  - OFFICE/INSTITUTIONAL/MEDICAL (MD-3)
  - OFFICE/INSTITUTIONAL/MULTI-FAMILY (OI-1)
  - MIXED USE VILLAGE
  - COMMERCIAL
  - PLANNED UNIT DEVELOPMENT
  - MEDIUM TO HIGH DENSITY RESIDENTIAL (RE) (PROPOSED MF)
  - MEDIUM TO LOW DENSITY RESIDENTIAL (PROPOSED SR)
  - LOW DENSITY OR CLUSTERED RESIDENTIAL (PROPOSED LDR)
  - VERY LOW DENSITY RESIDENTIAL (RR)
  - CONSERVATION ZONE
  - COMMUNITY FOCUS ZONE 1
  - COMMUNITY FOCUS ZONE 2
  - TECHNOLOGY PARK
- ZONING CLASSIFICATIONS LISTED ARE THOSE WHICH ARE CURRENTLY MOST COMPATIBLE WITH THE LAND USE RECOMMENDED AND ZONING MODIFICATIONS MAY BE REQUIRED.



***Land Use Plan B***

If the Technology Park cannot be implemented, the Park area would be classified Low Density residential west of U.S. 264 Bypass and office/institutional/multi-family east of the By-pass. The remainder of the land uses would remain the same as Plan 'A'.

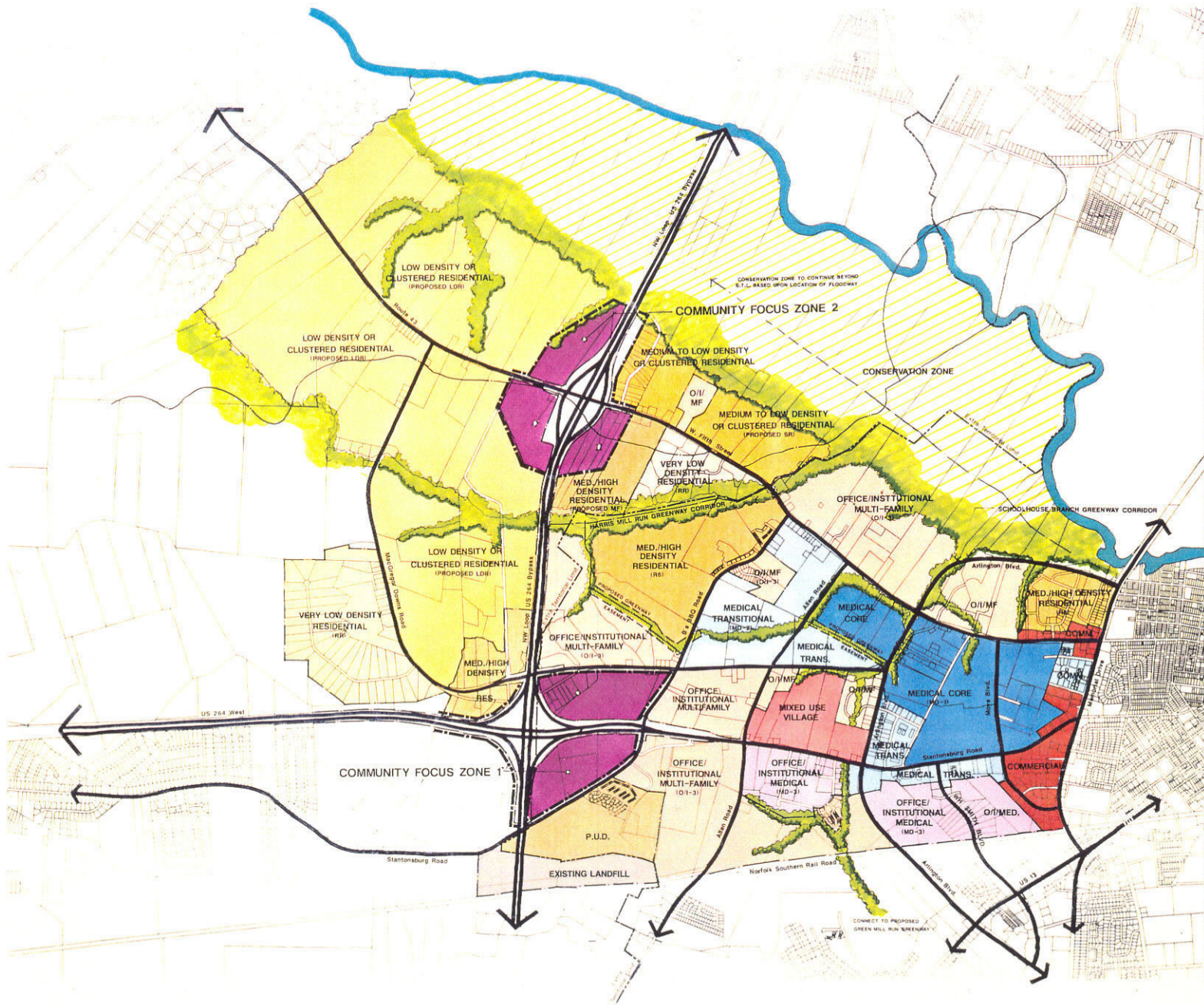




# MEDICAL DISTRICT and ENVIRONS

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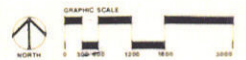


## LEGEND

- MEDICAL CORE (MD-1)
- MEDICAL TRANSITIONAL (MD-2)
- OFFICE/INSTITUTIONAL/MEDICAL (IMD-3)
- OFFICE/INSTITUTIONAL/MULTI-FAMILY (OI-MF)
- MIXED USE VILLAGE
- COMMERCIAL
- PLANNED UNIT DEVELOPMENT
- MEDIUM TO HIGH DENSITY RESIDENTIAL (RH) (PROPOSED MF)
- MEDIUM TO LOW DENSITY RESIDENTIAL (PROPOSED RL)
- LOW DENSITY OR CLUSTERED RESIDENTIAL (PROPOSED LDR)
- VERY LOW DENSITY RESIDENTIAL (VLD)
- CONSERVATION ZONE
- COMMUNITY FOCUS ZONE 1
- COMMUNITY FOCUS ZONE 2

NOTE:  
ZONING CLASSIFICATIONS LISTED ARE THOSE WHICH ARE CURRENTLY MOST COMPATIBLE WITH THE LAND USE RECOMMENDED AND ZONING MODIFICATIONS MAY BE REQUIRED.

LAND USE PLAN 'B'  
MARCH 22, 1993



***Proposed  
Land Use  
Breakdown***

<u>LAND USE</u>	<u>PLAN A</u>	<u>PLAN B</u>
1. Medical Core	286 AC	286 AC
2. Medical Transitional	262 AC	262 AC
3. Office/Institutional/Medical	276 AC	276 AC
4. Office/Institutional/Multi Family	1,047 AC	1,183 AC
5. Mixed Use Village	85 AC	85 AC
6. Commercial	82 AC	82 AC
7. PUD	100 AC	100 AC
8. Medium/High Density Residential	209 AC	425 AC
9. Medium/Low Density Residential	757 AC	757 AC
10. Low Density Residential	1,387 AC	1,854 AC
11. Very Low Density Residential	277 AC	277 AC
12. Landfill	75 AC	75 AC
13. Community Focus Zone 1	162 AC	136 AC
14. Community Focus Zone 2	131 AC	131 AC
15. Right-of-Way	300 AC	300 AC
16. Technology Park	<u>793 AC</u>	<u>0 AC</u>
<b>TOTAL AREA</b>	<b>6,234 AC</b>	<b>6,234 AC</b>

*NOTE: Conservation areas and open space are within these land uses.*

Item # 2

## **IMPLEMENTATION RECOMMENDATIONS**

For the Land Use Plan to become reality, no one regulatory tool alone will allow the plan to be implemented. A set of existing and new tools will need to be used in a coordinated strategy. The following is a priority list of the key steps which need to be taken:

1. Establish a Medical District Development Commission to serve in an advisory capacity.
2. Establish a management entity for the Technology Park and begin land acquisition.
3. Address Extraterritorial Jurisdiction extensions as they relate to high density nodes and future utility requirements.
4. Establish Overlay Zoning or new Zoning District to address mixed use projects.
5. Establish a Master Land Use Plan review process for large scale/mixed use projects.
6. Establish Highway Corridor Overlay Districts.
7. Continue to preserve greenway corridors and add recommended new greenway sections to the City's comprehensive Greenway Map.

8. Initiate greenway protection/implementation mechanisms for the County's jurisdictional area.
9. Strengthen current ordinances regarding Conservation Areas.
10. Establish strong incentives for cluster development in Zoning Ordinances.

The following is a more detailed discussion of the above listed implementation steps:

### ***Review Process***

Perhaps the most important aspect involved in the implementation of the plan will be the determination of the governing process the City and County will use that will provide consistency. The following process is the recommended method of dealing with this inter-jurisdictional situation.

A Medical District Development Commission should be established to serve as a coordinated City/County review entity. This commission would be made up of appointees from both jurisdictions and would serve in a review/advisory capacity to both the City and County Review Process. The role of this review entity is illustrated in the accompanying chart.

1. Medical District Development Commission

2. Industrial Development Commission

3. Greenville Utilities

4. Public Works

5. Environmental Health Services

6. Division of Environmental Management

7. NC Department of Transportation

8. Corps of Engineers

## REVIEW PROCESS

### Using Medical District Development Commission

1. Medical District Development Commission

2. Industrial Development Commission

3. County Engineering

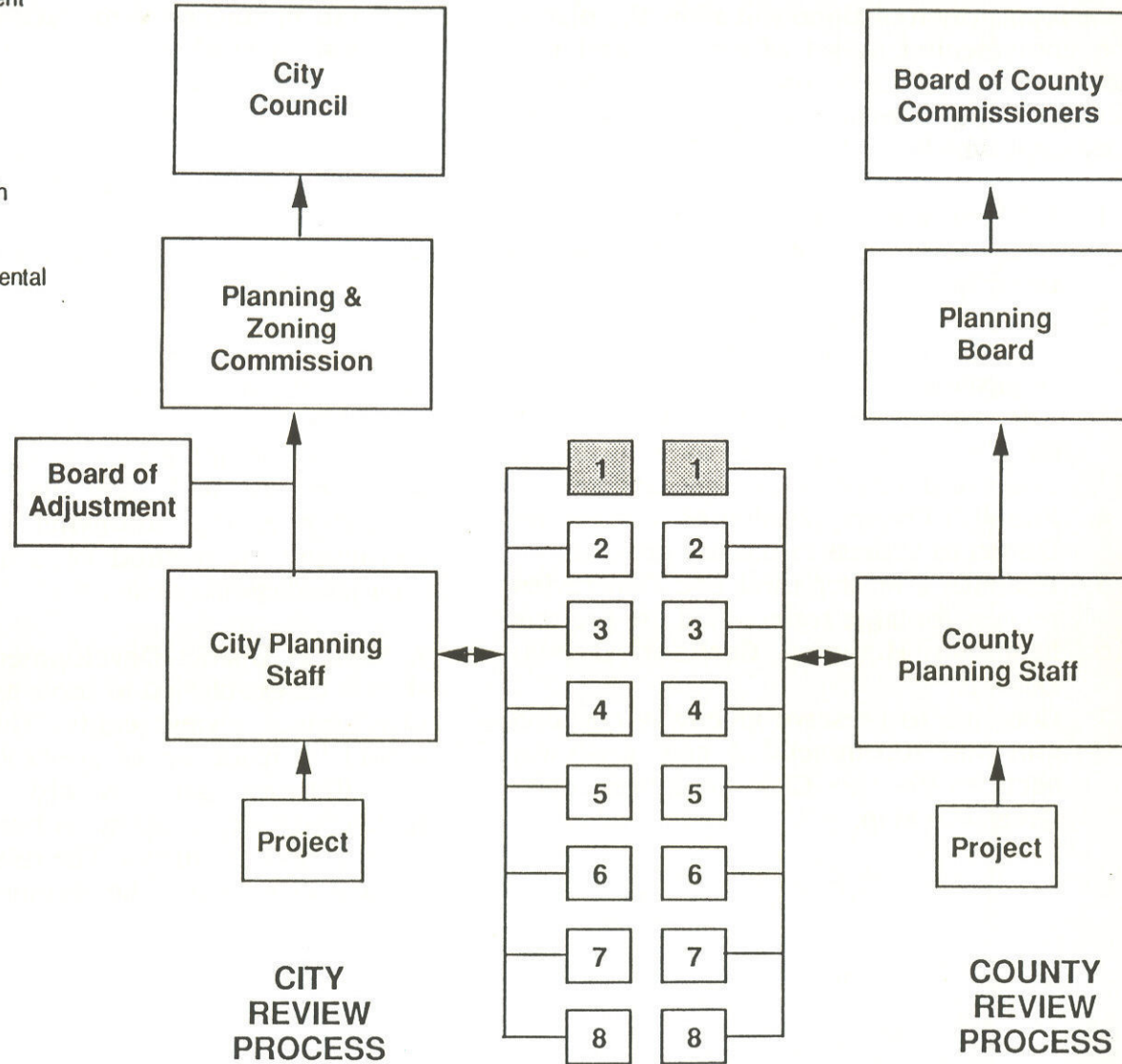
4. Soil Conservation Service

5. Environmental Health Services

6. Service Providers

7. Postal

8. Corps of Engineers



NOTE: There are a number of other State, County or City departments and agencies which are involved in the review of specific projects that are not shown on this chart.

The (MDDC) is intended to provide an overview of the Medical District to assure conformance with the adopted land use plan and to make recommendations to City and County staff as to revisions that may need to occur over time.

With the exception of the Technology Park, the majority of the land uses which are of a density which require City services are already within the City extraterritorial limit. The only notable exceptions occur around Focus Zone 2 and a small area of higher density housing west of Focus Zone 1. In order to get services to any of these high density parcels in the County, a developer would have to request annexation by the City. Because these parcels would eventually be within the City's Extraterritorial Limit, one option would be for the City to administer the review, planning and zoning of these parcels. The County's role in this process would be to ensure that land designated for the higher density uses, such as focus zones, is not prematurely used for inappropriate uses.

Another consideration would be to pursue extension of the Extraterritorial Limit to include this small area beforehand, since this would be required at some point to implement uses indicated on the Land Use Plan. If the Technology Park is implemented, it may be possible to negotiate an agreement between the City and County, whereby the Park would remain in the County with the City providing water and sewer service.

The following are recommended implementation strategies for each of the critical land use categories:

### **Technology Park**

Past Medical District Task Force reports outline several specific implementation strategies relative to the Technology Park which are still valid. They include:

1. *Establishment of a non-profit corporation* to buy necessary land and oversee development management and marketing of the Technology Park.
2. *Purchase land for the park.* The corporation should buy land within the area shown on the Land Use Plan for development of the Technology Park.

As stated in the Task Force reports, initial funds to acquire the land might be obtained from the City of Greenville, Pitt County, East Carolina University, Pitt County Memorial Hospital, corporate sponsors, and even the general public; and infrastructure to serve the park could be developed with assistance from sources such as the Greenville Utilities Commission and the North Carolina Department of Transportation.

3. *Marketing Program.* As stated in the Task Force report, the non-profit park corporation should institute a marketing program for the park. This is seen as a further service to property owners and could be conducted by the corporation itself along with the Pitt County Development Commission.
4. The Technology Park may be more viable if done as a Planned Unit Development or Planned Business Park. Such an arrangement will ensure conformance to and coordination with transportation master plans, district standards for buffers, setbacks, landscaping and corridor district overlay review processes.

A more tangible, physical image of the Park is now available as the Land Use Plan has identified the most desirable location and conceptual layout for the Technology Park. Perhaps this will help initiate the implementation steps identified by the Task Force. In the event that support and interest are not generated for the Technology Park within the near future, the Park concept should be deleted as development pressures for other land uses extend to this area.

The Master Land Use Plan process (as described under Community Focus Zones) should also be used as a review tool for the Technology Park.

### **Community Focus Zones 1 and 2 and Mixed Use Village (City and County)**

For these important activity nodes, the establishment of an Overlay District or Mixed Use Zoning District is recommended. The primary purpose of the districts would be to provide for the coordinated development of office, commercial and residential uses, and their necessary support functions in the vicinity of key highway intersections.

Currently, Community Focus Zone 2 is within the County, Focus Zone 1 is within both the County and City, and the Mixed Use Village is within the City.

#### **MASTER PLAN**

As part of the application and review process for Mixed Use Districts, it is recommended that a Master Land Use Plan process be included. It is the intent that the development and approval of a Master Land Use, or Conceptual, Plan would permit greater flexibility in the design and development of tracts of land twenty (20) acres or greater in size; and therefore promote and encourage more creative and imaginative design while conserving the value of land. This process is intended to provide a procedure which can relate to type, design and layout of residential, commercial and office development to a particular site in a general way,

providing the basis for subsequent, more detailed development plans and applications. The Master Land Use Plan would convey the general intent and sequence of development. It is a conceptual plan that illustrates and defines land use areas for residential, office, commercial, open space and special facilities or other land uses. General circulation patterns, both vehicular and pedestrian, would be identified and indicated on the conceptual plan.

All Master Land Use Plans should demonstrate a high quality of overall site design. The design and construction of site elements should include appropriate consideration of the relationship and balance among site elements, the relationship of the development to natural features, neighboring developments, and access and circulation systems, retention of natural vegetation, minimal alteration of natural topography, mitigation of erosion and sedimentation, mitigation of storm water drainage and flooding, arrangement and orientation of buildings and amenities in relation to each other and to neighboring developments and streets, landscaping, preservation or enhancement of vistas and mitigation of traffic impacts.

Potential models for the Mixed Use Zoning District and Master Plan process are the *Town of Chapel Hill, Development*

*Ordinance*, Article 4 – Mixed Use Zoning Districts, and Article 19 – Site Plan and Master Plan Approvals.

#### **Medical Core (City)**

The Medical Core area of the Land Use Plan is very consistent with those areas currently zoned MD·1. The two areas that have been added are currently being used as MD·1 type uses and rezoning of these parcels at some point may be appropriate.

#### **Medical Transitional (City)**

The expansion of the Medical Transition area (comparable to MD·2 Zoning) further to the west is intended to allow enough expansion to provide medically related uses which can be near each other for doctor and patient convenience. Rezoning of the area identified as Medical Transitional from MD·7 to MD·2 between Allen Road and B's BBQ Road and north of MacGregor Downs Road would preserve one of the few areas left for Medical Core and Transitional expansion.

#### **Medium/High Density Residential (City and County)**

Within the City, the areas being suggested for Medium/High Density Residential (which are not already multi-family) are currently zoned MD·7, which is low density housing. For these areas, the Land Use Plan should be used as a guide to evaluate future rezoning requests or the area could be rezoned from MD·7 to MD·5 or R6.

For the Medium/High Density areas which are within the County, extension of the City's Extraterritorial Jurisdiction and R6 zoning may be a consideration since they are immediately adjacent to the Community Focus Zones and will have high infrastructure needs.

### **Other Residential Areas Within County Jurisdiction**

Because the County currently does not have zoning classifications, the Land Use Plan and supporting text should be used as a guide for future development requests. As the County initiates zoning, it may be appropriate to zone these areas into the comparable classifications listed.

To ensure the preservation of natural features and rural character, incentives such as higher gross densities should be established which will encourage cluster development. "Leap frogging" of residential development to adjacent parcels further west should be carefully restricted due to environmental constraints and service extension requirements.

### **Conservation Areas/Greenway Corridors (City and County)**

The majority of the areas identified as Conservation Areas occur within the 100 year flood plain and adjacent to perennial streams. An overlay district (similar to the City's current Floodway District) should be established, which would be extended beyond the floodway line to include all of the designated

Conservation Zone. Items that would be addressed in the overlay zone would be stream buffers and preservation of vegetation.

In conjunction with Overlay Zoning, the Greenville Greenway Comprehensive Plan outlines very specific implementation and acquisition procedures for greenways which should be implemented to preserve these corridors. It is the policy of the City of Greenville that new subdivisions of land and proposals for new urban and suburban development of existing lands shall be required to reserve land for greenway purposes if a portion of the land to be subdivided or developed lies within one of the designated City of Greenville Greenway Corridors, as illustrated on the City's Comprehensive Greenway Map. Accordingly, the sections of greenway that have been added on this Land Use Plan (the east/west greenway connector to the Medical Core) should be added to the City's Comprehensive Greenway Map.

As stated in the Greenway Comprehensive Plan, a number of communities in North Carolina have incorporated the greenway concept in their land use ordinances. In these communities, certain kinds of developments are required to set aside and dedicate land for recreation and open space purposes. Greenville's subdivision regulations require the reservation of land for recreation purposes; however, the City must pay the subdivider the fair market value of the property to secure



public dedication. Some cities require both reservation and *dedication* of recreation land. Dedication is usually made to the municipality or to an approved homeowners' association. Dedication of recreation areas may be an option that could be considered to ensure more timely and cost-effective acquisition and implementation of greenways. The County should adopt policies similar to the City to ensure preservation of greenway corridors. Examples of the zoning methods listed above for conservation areas can be found in the *Durham City/County Zoning Ordinance*, Section 5.1 – Stream Buffer Overlay District, and Section 17 – Flood Hazard Area Regulations, as well as *The Durham County Open Space Corridor System*.

#### **Major Highway Corridors**

To enhance orderly development adjacent to major transportation corridors, a Highway Overlay District(s) should be established. U.S. 264, U.S. 264 Bypass and NC 43, because of their critical importance to the function and image of the Medical District and environs, would be included in the Highway

Overlay District. The Highway Overlay District would establish standards to ensure that the major transportation corridors reflect a beneficial quality of life through their aesthetic appeal and positive image, thereby enhancing trade and investment within the jurisdiction. The standards would also enhance the efficiency and safety of traffic movement for visitors and residents by reducing visual clutter and improving site design. Specific criteria that would be addressed include:

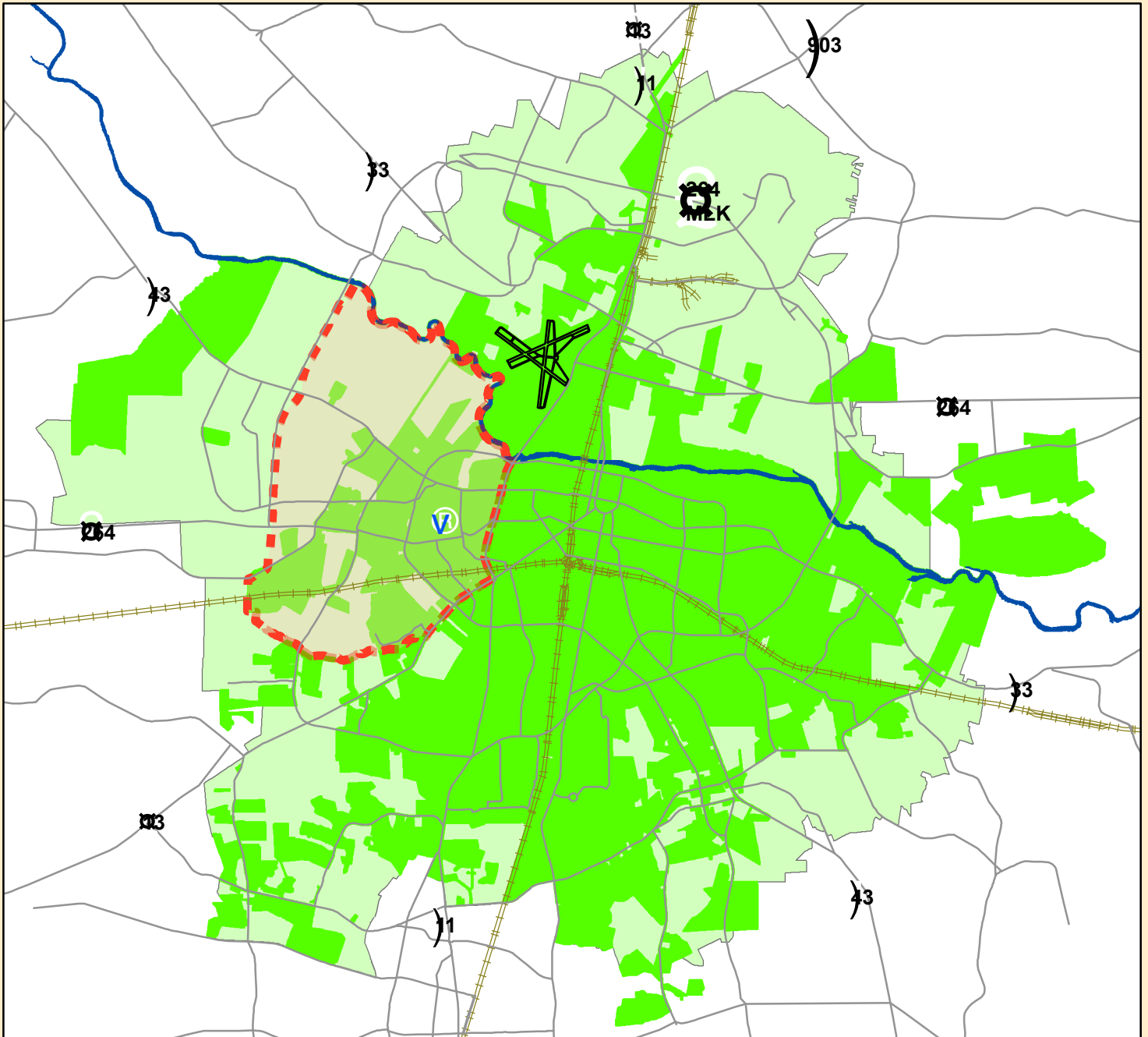
- Buffers
- Possible Additional Signage Regulations
- Possible Additional Landscape Regulations
- Permitted Uses
- Building Height
- Access Points
- Rural Character Preservation

Examples of this type of overlay district are the *City of Raleigh Zoning Ordinance*, Section 10-2058 – Special Highway Overlay District (SHOD.1 and 2) and *Durham Joint City County Zoning Ordinance*, Section 5.3 – Major Transportation Corridor Overlay District.



# ***Medical District Land Use Plan Update***

## ***December 20, 2007***



## **ACKNOWLEDGEMENTS**

### **Greenville City Council and Administrative Staff**

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Mayor Pro-Tem Mildred A. Council  
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## Table of Contents

1. Background Information	1
2. Objective	6
3. District Description	9
4. Existing Institutional Medical Facilities	9
5. Primary Employment Center	9
6. General Medical Employment	10
7. General Office and Commercial Businesses; Pitt County Offices	11
8. Transportation System	11
9. Residential Development (single-family, duplex and multi-family)	18
10. Environmental and Site Location Constraints	22
11. Existing Land Use	34
12. Government Owned Properties	36
13. Fire/Rescue and Life Safety	37
14. Utilities	38
15. Zoning Map	40
16. Previous Use Table Amendments	43
17. Focus Area and Transportation Corridors	44
18. Future Land Use Plan Map	46
19. Analysis and Recommendation	48
20. Focus Area Map – Recommended Changes	49
21. Future Land Use Plan Map – Recommended Changes	51
22. Future Land Use Plan Map – Proposed Changes	54
23. Supplemental Information	56

# **Medical District Land Use Plan Update** **Horizons: Greenville's Community Plan**

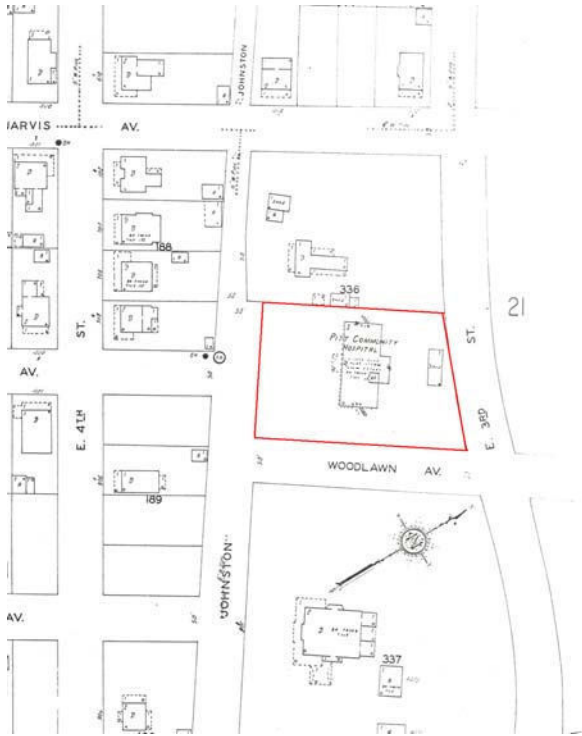
**December 20, 2007**

## **1. Background Information**

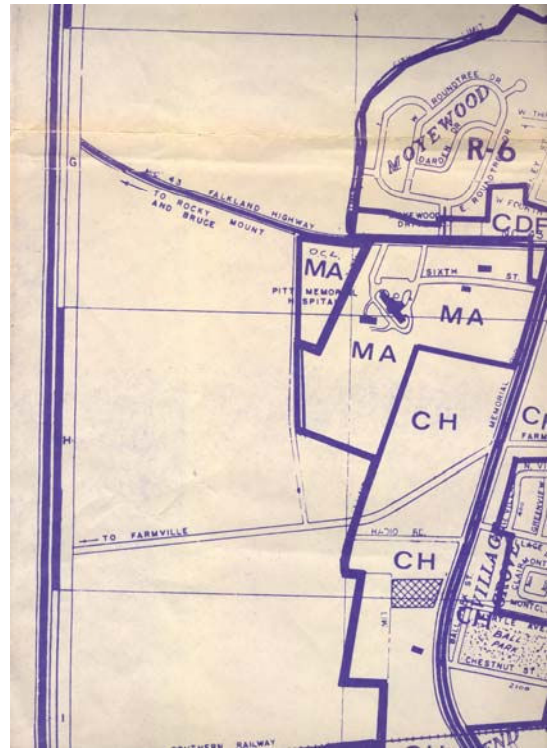
The Pitt Community Hospital was once located immediately east of downtown in the residential area referred to as the Tar River Neighborhood. The hospital operated at this location until it was replaced by Pitt Memorial Hospital (now Pitt County Office Building) in 1951. The 1951 hospital was designed to accommodate 130 patient beds and was later expanded to 200 beds. In 1967 a periodic licensing inspection and survey of the 1951 hospital revealed numerous facility deficiencies and an annual bed utilization rate of over 85 percent. Following the 1967 report, the Hospital's Board of Trustees conducted a study to assess the feasibility of expanding the hospital or constructing a new 300 bed facility at a remote location. In the fall of 1970, the hospital bond issue passed and a detailed plan for construction of the new hospital was developed. Construction for the present Pitt County Memorial Hospital (PCMH) began in 1974 and has undergone continuous expansion since opening in 1977.

The original Medical District Development Plan, adopted and implemented in October 1974, created the supportive environment necessary to facilitate the present hospital and medical complex. The 1974 Plan ultimately resulted in the establishment of a HC (Health Care) zoning district and the expansion of the MA (Medical Arts) zoning district in the areas extending from the 1951 hospital facility (now Pitt County Office Building) west to the present day Stanton Square Shopping Center. This original HC - MA zoning plan encompassed approximately 1,000 acres (1.5 sq. miles) and established the core area of all subsequent medical district plans.

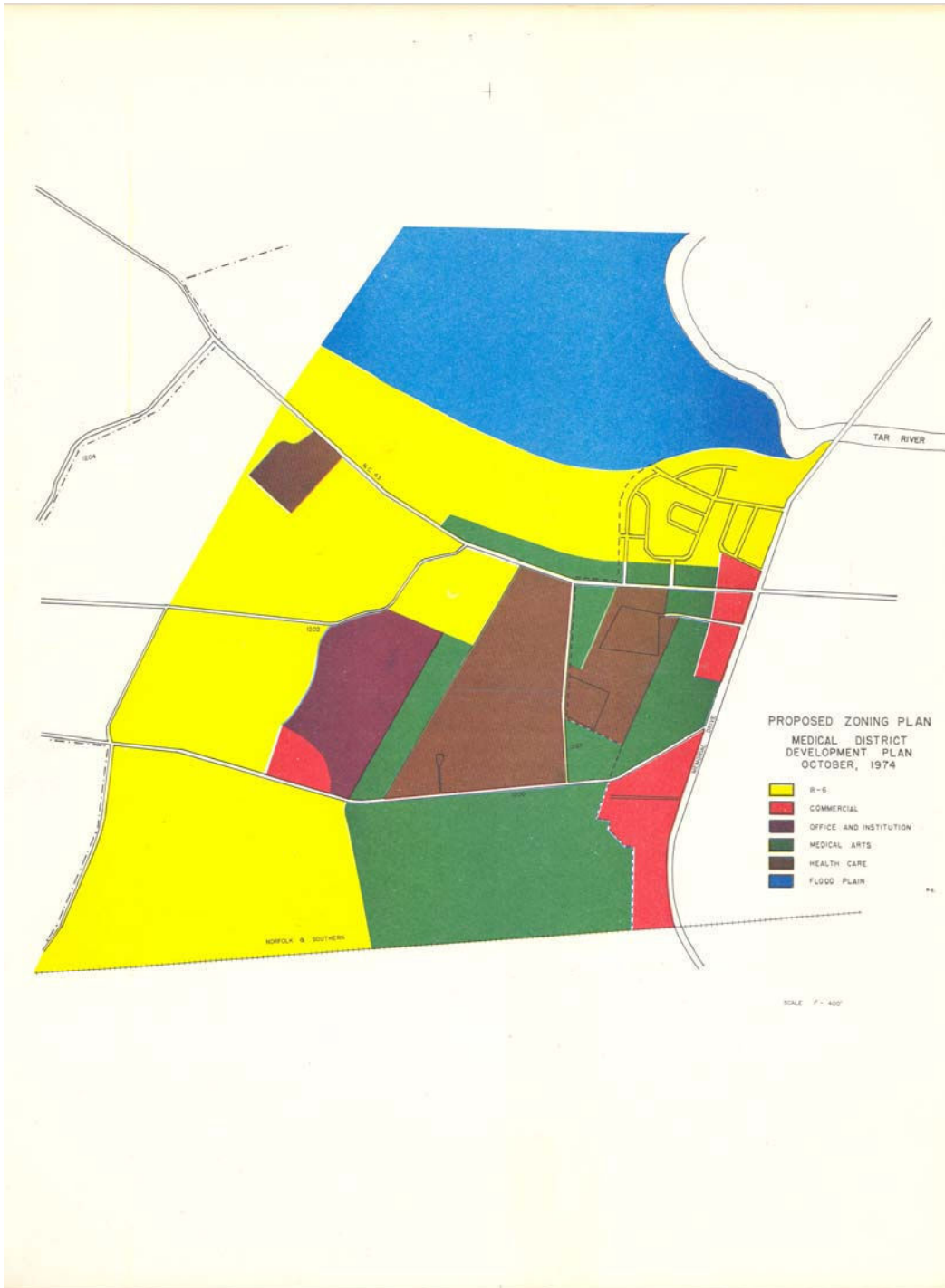
***Pitt Community Hospital - 1929***



***Pitt Memorial Hospital  
Pre-1974 Plan Zoning  
(See MA Zoning District)***

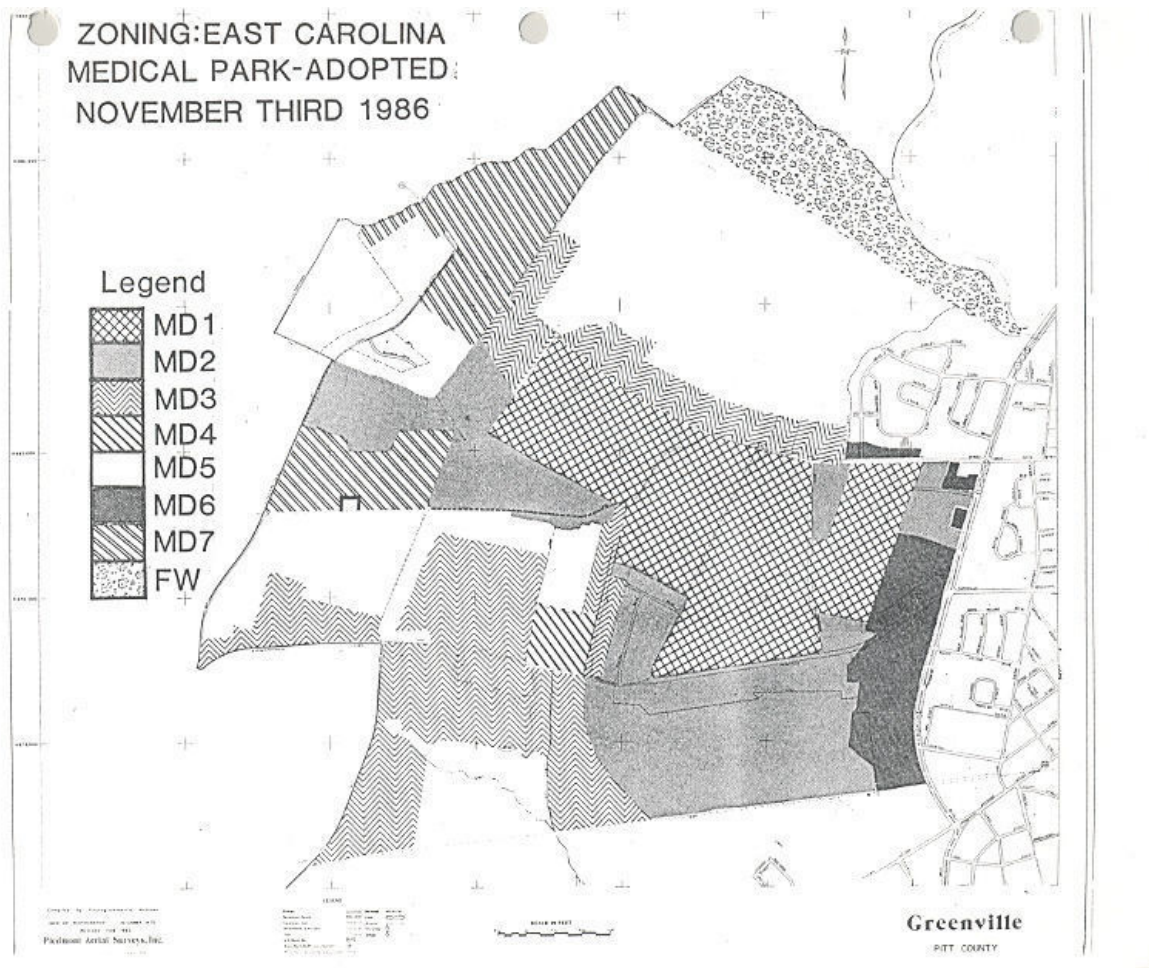


### 1974 Medical District Plan



Since the adoption of the 1974 Plan, the “Medical District Plan” has been updated several times in response to evolving conditions.

The first major update occurred in 1986 and resulted in the adoption of the plan entitled East Carolina Medical Park, A Comprehensive Proposal for the Development of a Medical Park. The 1986 Plan recommended expansion of the medical district boundary to include a total area of 5,300 acres (8.2 sq miles) extending from Memorial Drive to beyond the City's jurisdiction (ETJ) in the vicinity of Frog Level Road and the present day Ironwood Subdivision. Implementation of the plan resulted in adoption of zoning standards for seven (7) new and/or consolidated medical zoning districts. The new districts (MD-1 through MD-7), established by City-initiated rezoning, included medical-institutional, medical-office, commercial and residential zones. The resultant medical district zoning was extended to encompass an area of approximately 1,750 acres being generally bound by Memorial Drive on the east, the Norfolk-Southern Railroad on the south, the Tar River on the north, and Allen Rd. - B's Barbeque Rd. - Harris Mill Run on the west. In the years following the initial medical district zoning, the City extended the extraterritorial jurisdiction (ETJ) four (4) times, to include additional un-zoned County area (approx. 1,268 acres), along the western boundary in proximity of the current US 264 – Martin Luther King (MLK) Jr. Highway interchange. The 1986 Plan and subsequent city-initiated zoning established a medical compatible land use pattern that effectively prohibited unrestricted commercial development on the thoroughfare streets located within the district, while creating opportunities for public and private medical-related uses.





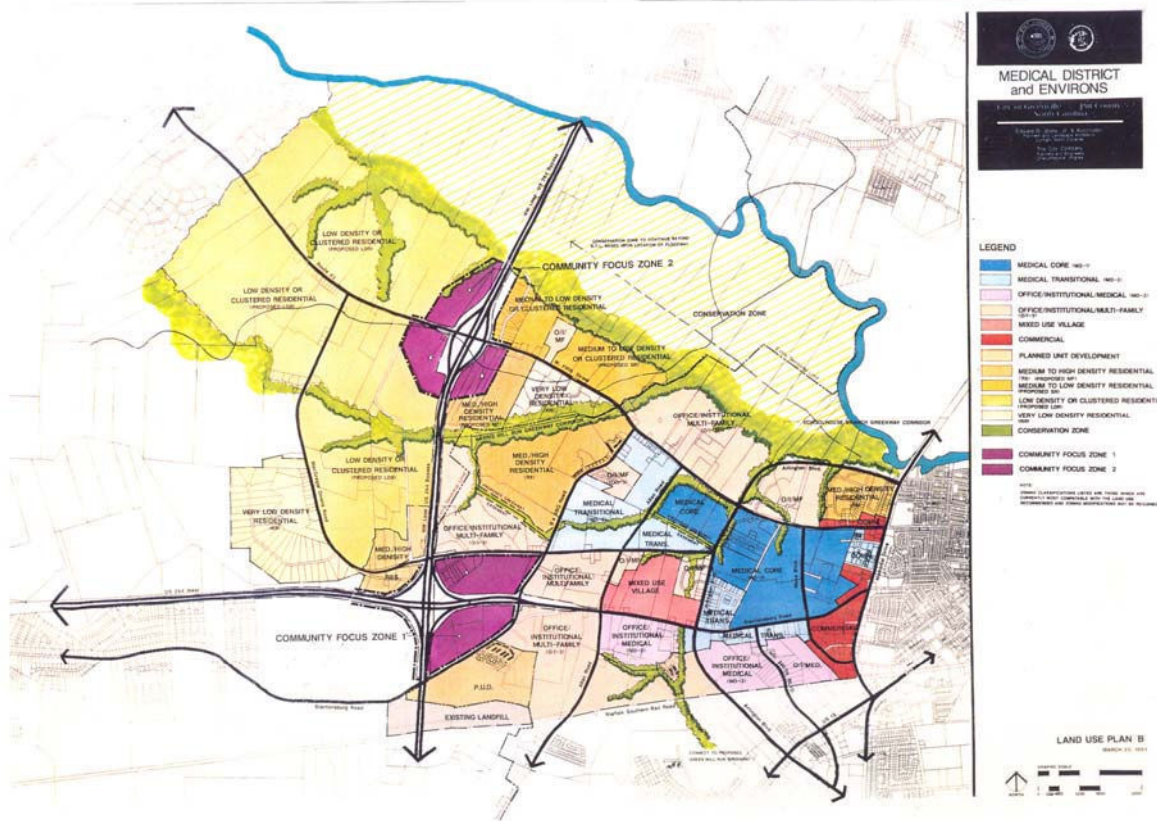
The second major update occurred in 1993 with the adoption of the Medical Districts and Environs Land Use Plan. The 1993 Plan reconfigured the medical district boundary to the areas north of the Norfolk-Southern Railroad and extending west of the US 264 (MLK Jr. Highway). The 1993 boundary encompassed approximately 6,200 acres (9.6 sq. miles) with 40% of the area (3.8 sq. miles) being within the City's jurisdiction.

The most recent ETJ extension, containing approximately 3,798 acres (5.9 sq. miles), occurred in 2001 and included the intervening areas between Ironwood Subdivision and US 264 (MLK Jr. Highway). Although this additional (jurisdictional) area is no longer considered to be part of the "medical district", the 2001 action has extended the City's ETJ to include the majority of the medical district boundary area originally included in the 1986 Plan, and the entire 1993 Plan boundary.

The 1993 Plan reemphasized that the "medical district" should contain a medical core, consisting of the hospital – medical school campus and a medical clinic transition area, residential neighborhoods, including multi- and single-family housing, and a commercial component adequate to serve the resident population, daily visitors, and district employees. The 1993 Plan included specific zoning based objectives including:

- Provide an appropriate mix of residential densities and balance of land uses so that residents and employees might live and work in the area
- Provide for reasonable expansion of the primary medical core to the west
- Transition the intensity of the medical core to the outlying portions of the land use plan area
- Create community focal points at the US 264 and NC 43 interchanges
- Encourage the development of commercial uses at the identified focal points and discourage "strip commercial development" along transportation corridors
- Effectively integrate existing land use and lifestyles into the future land use pattern.

The 1993 Plan contained a Land Use Plan 'A' and a Land Use Plan 'B'. Plan 'A' included the recommendation: "identification of a suitable location for a medical research/technology park along [west of] the NW Bypass [MLK Jr. Hwy] corridor", while Plan 'B' recommended residential development. The ultimately adopted, citywide, 1997 Future Land Use Plan Map incorporated the Plan 'B' recommendations, including residential development in the US 264 (MLK Jr. Highway) corridor in lieu of the research/technology park option.



Greenville Medical District and Environs Land Use Plan

Copies of the referenced plans, including the 1974 Medical District Development Plan, the 1986 East Carolina Medical Park, A Comprehensive Proposal for the Development of a Medical Park (Plan), the 1993 Medical Districts and Environs Land Use Plan, and the current 2004 Horizons: Greenville's Community Plan and Future Land Use Plan Map (as amended), are on file in the City of Greenville Community Development Department, Planning Division.

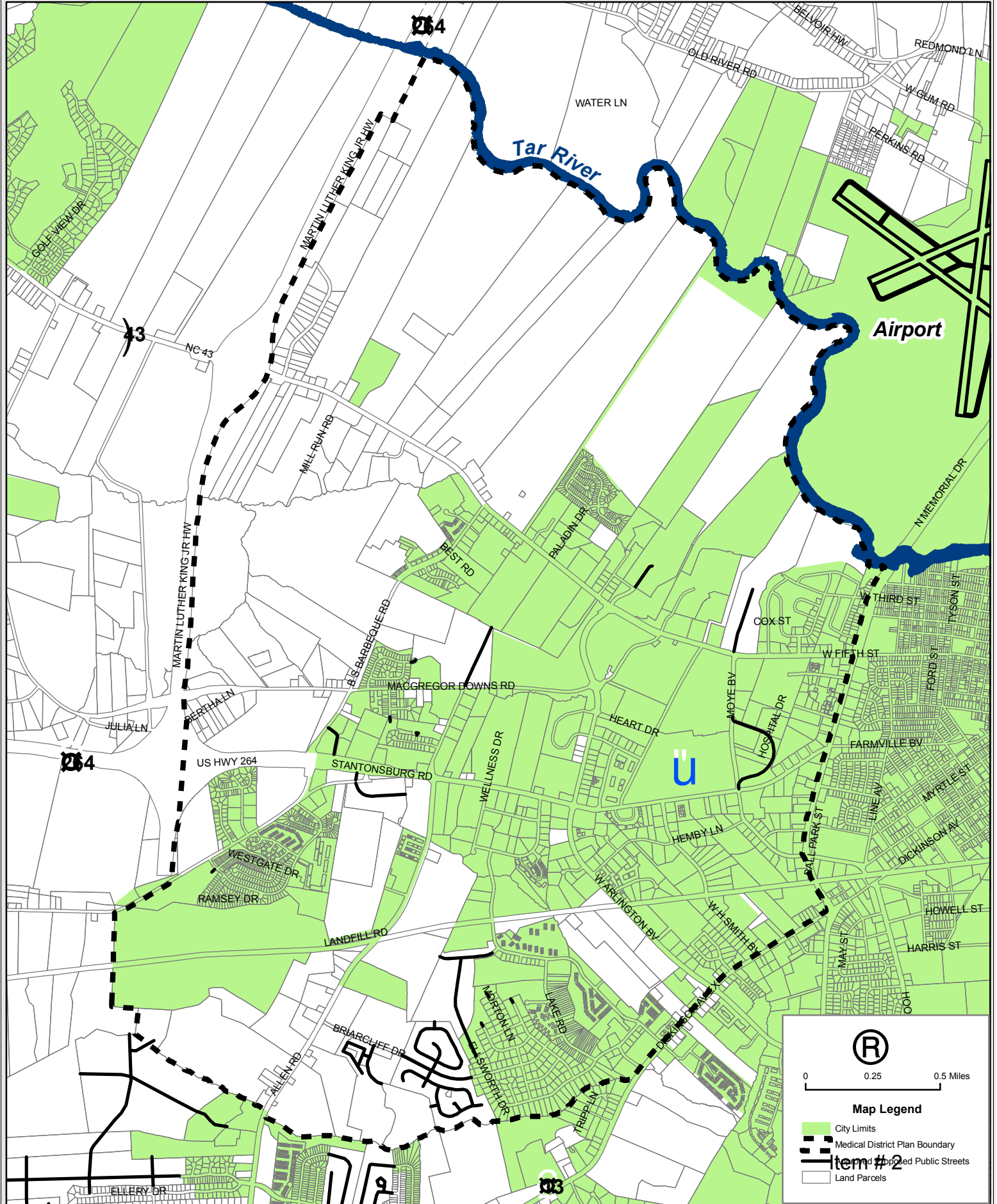
## 2. Objective

The objective of the Medical District Land Use Plan Update (2007) is to insure continued adherence to the goals established by the previous “Medical District Plans” and Horizons: Greenville's Community Plan, while at the same time to recognize that evolving conditions necessitate appropriate changes in recommended land use patterns in support of a sustainable and vibrant medical and residential environment.



# City Limits Map

November 9, 2007



**Map Legend**

- City Limits
- Medical District Plan Boundary
- Item #2 and Proposed Public Streets
- Land Parcels

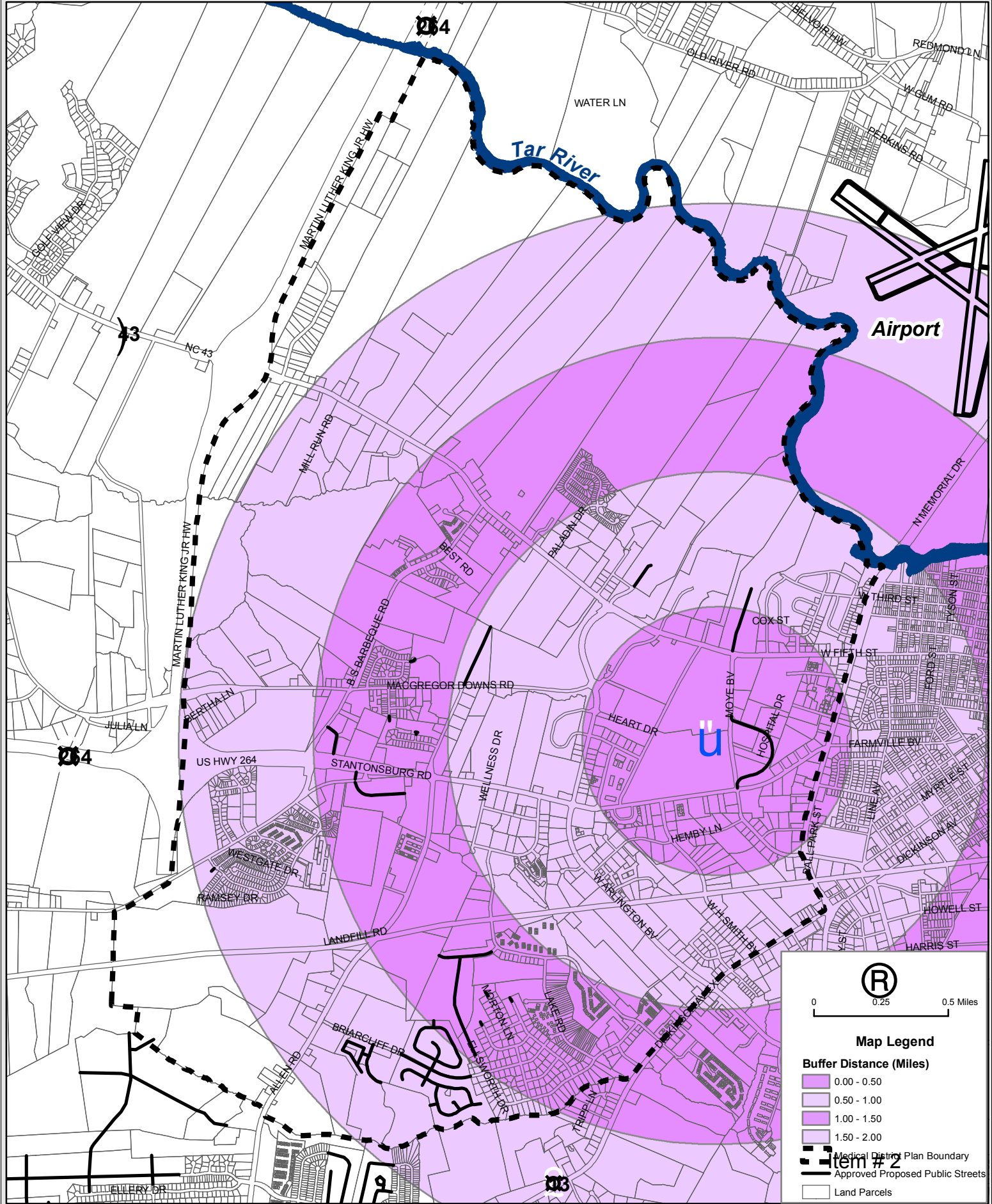
0 0.25 0.5 Miles



# 1/2 Mile Increment Map

(For the Purpose of Illustrating Distance from the Medical Core Area)

November 9, 2007



**Map Legend**

**Buffer Distance (Miles)**

- 0.00 - 0.50
- 0.50 - 1.00
- 1.00 - 1.50
- 1.50 - 2.00

**Medical District Plan Boundary**

**Approved Proposed Public Streets**

**Land Parcels**

**Scale:** 0 0.25 0.5 Miles

### 3. District Description

For purposes of this report and plan, the “medical district” area is generally described to include the area west of Memorial Drive, north of Dickinson Avenue-Green Mill Run, east of US 264 (MLK Jr. Highway), and south of the Tar River containing approximately 4,872 acres (7.61 sq. miles).

A substantial portion of the medical district is within the Greenville city limits (45%), and all district properties are located within Greenville’s planning and zoning jurisdiction. As sanitary sewer dependent development occurs, those properties receiving sanitary sewer service must petition for voluntary annexation to the city as a condition of service per the City of Greenville and Greenville Utilities Commission Joint Statement of Policy on Development executed on June 28, 1982.

The entire district is located within Vision Area F (Horizons Plan), and Municipal Voting District # 1.

### 4. Existing Institutional Medical Facilities

The “medical district” includes a regional medical complex, major employment center and residential area, and includes the following existing institutional medical service facilities:

- Pitt County Memorial Hospital (PCMH) – 761 bed facility
- ECU Brody School of Medicine
- East Carolina Heart Institute (ECHI) – 162 bed facility (anticipated completion 2008)
- ECU College of Allied Health Sciences
- ECU College of Nursing
- ECU/Laupus Health Sciences Library
- Moyer Medical/ECU Practice Plan Building
- PCMH SurgiCenter

Future institutional medical service facilities include:

- ECU Dental School – first anticipated class in 2009
- Family Medicine Center and Monk Geriatric Center – anticipated completion 2010
- Children’s Hospital

### 5. Primary Employment Center

Pitt County Memorial Hospital (PCMH) currently employs 6,300 full-time workers and provides services to thousands of patients on a weekly basis. In 2006 PCMH recorded 36,983 in-patient admissions, 79,862 emergency department (ED) visits and 20,431 outpatient visits. Projected admissions for the upcoming year exceed 38,000 inpatients, as well as a comparable or greater number of outpatients and ED visits.

The East Carolina Heart Institute (under construction) will employ an additional 1,200 full-time workers and is anticipated to provide services, on an annual basis, to as many as 5,000 inpatients separate from the main (PCMH) hospital.

The ECU Brody School of Medicine currently employs 1,291 full-time workers and has 435 faculty members. The ECU Colleges of Allied Health Sciences and Nursing currently employ 99 full-time workers and have 177 part- and fulltime faculty members. In combination, both educational facilities serve approximately 1,777 students and intern/residents on a daily basis.

The combined floor area of existing institutional medical facilities (4. above) is approximately 3¼ million square feet.

At present day estimates, the primary institutional medical employment center will employ more than 9,000 full-time workers and provide services to more than 43,000 inpatients on an annual basis. In addition, more than 100,000 (total) yearly ED and out-patient visits are anticipated.

## **6. General Medical Employment**

There are currently 268 private practice physicians in Pitt County, with a significant number of those physicians having office locations in the medical district (Source: AHEC). Based on Planning Staff survey (10/07) of medical/clinic office addresses, approximately 78% of all private practice physicians' offices in Pitt County are located in the medical district.

The majority of physicians' offices in the medical district are multiple physician practices that typically include a high ratio of physicians' assistants, nurses and technicians to doctors. In small to medium size offices (2 to 9 doctors) the typically ratio is 4 to 5 additional employees per each doctor and in larger offices (10 to 20+ doctors) the typical ratio is 8 to 10 additional employees per each doctor (Source: Planning Staff survey).

There are currently 95 private practice physicians' offices, including other medical-related offices, located in or near the core area of the medical district.

Planning Staff would estimate that the private practice physicians' offices located within the medical district currently employ in excess of 1,000 full-time workers, including doctors, physicians' assistants, nurses, technicians and administrative staff.

For comparative purposes the number of private practice physicians by random years was as follows: 1973 – 64, 1979 – 88, 1985 – 114, 1988 – 127, and 1991 – 144 (Source: 1993 Plan study). The average rate of increase over the 18-year study period was approximately 4½ private practice physicians per year. This number does not include the number of medical school physicians which increased from zero (0) in 1973 (pre medical school) to 175 in 1991. Since 1992, the number of private practice physicians has increased from 144 to 268. The average rate of increase over the 16 year period (1992 through 2007) was approximately 8 additional private practice physicians per year.

In addition to private medical clinics, there are twelve (12) nursing/retirement homes and treatment facilities located in or near the core area of the medical district providing residential care to more than 950 persons on a 24-hour basis.

Alterra Sterling House	Ronald McDonald House
Carolina House of Greenville	Willow Spring
Spring Arbor of Greenville	Golden Living Center
Tar River Manor	Stafford Glen
Oak Haven Senior Village	Greenfield Place
ACS McConnell-Raab Hope Lodge	Howell Care Center
Walter B. Jones Alcohol and Drug Abuse Treatment Center	

## **7. General Office and Commercial Businesses; Pitt County Offices**

There are approximately 106 general office and/or commercial business uses located within the medical district boundary including professional services, restaurants, and general retail. Included in the inventory of uses are ten (10) existing and two (2) proposed hotel/motel's with a combined room count of 924.

Planning staff would estimate that the general office and commercial businesses currently employ in excess of 1,000 full-time workers.

Pitt County's Office Complex, in and adjacent to the 1951 Hospital, including general government and social services, currently employ 244 full-time workers.

## **8. Transportation System**

The medical district is currently served by a public street system consisting of City and State maintained roadways. Several developments also provide associated establishments with secondary access via private streets and/or named accesses, and common property parking lots. The following map illustrates the public street system including approved (preliminary platted) streets not yet final platted, constructed or accepted for public maintenance.

The attachment entitled "Thoroughfare Plan Map" illustrates the adopted Greenville Urban Area Thoroughfare Plan (2004).

The Greenville Urban Area Thoroughfare Plan (2004) includes the following (major and minor) thoroughfares on the "Inventory and Recommendations" list as follows:

**Major Thoroughfares (Travel Lanes – refer to Thoroughfare Plan for recommended cross sections)**

**NC Highway 43 (West Fifth Street)**

Currently 4-travel lanes from Memorial Drive to Paladin Drive (segment 1)

Proposed 4-travel lanes from Paladin Drive to VOA Site Road (segment 2)

Note: The proposed widening from 2- to 4-travel lanes (divided highway) from Paladin Drive to US 264 - Martin Luther King, Jr. Highway (MLK, Jr. Highway) is currently included on the State Transportation Improvement Program (STIP), and work is scheduled to begin by fall 2008 with completion anticipated within 30 months. Segment 1 will be upgraded to a 4-travel lane divided highway as part of the improvement project.

**Stantonsburg Rd (SR 1467) and US 264 (West)**

Currently 4-travel lanes from Memorial Drive to US 264 (MLK Jr. Highway)

Note: (i) US 264 is a controlled access 4-lane divided highway west of MLK Jr. Highway and abutting property access is prohibited, with the next available interchange at Mazingo Road (2.5 miles west of MLK, Jr. Highway), (ii) Stantonsburg Road west of B's BBQ Road is controlled access

**Dickinson Ave**

Currently 4-travel lanes from Memorial Drive to Spring Forest Road and 4-travel lanes from Allen Road to Frog Level Road

Currently 2-travel lanes from Spring Forest Road to Allen Road

Proposed 4-travel lanes from Spring Forest Road to Allen Road and 4-travel lanes from Frog Level Road to Speight Seed Farm Road

**Allen Road**

Currently 2-travel lanes from Dickinson Avenue to MacGregor Downs Road

Proposed 4-travel lanes from Dickinson Avenue to Stantonsburg Road

Proposed 2-travel lanes from MacGregor Downs Road to W. Fifth Street

Note: The right-of-way for the proposed section from MacGregor Downs Road to W. Fifth Street to be acquired by mandatory dedication at the time of development of the intervening properties.

**West Arlington Boulevard**

Currently 4-travel lanes from Memorial Drive to W. Fifth Street

Proposes 6-travel lanes from Stantonsburg Road to Greenville Boulevard

**Stantonsburg Road (SR 1467 south of B's BBQ Road intersection)**

Currently 2-travel lanes to west of proposed SW bypass

Proposed – no change

**Memorial Drive**

Currently 6-travel lanes from W. Fifth Street to Dickinson Avenue

Proposed – no change

**US 264 (MLK Jr. Highway) and SW Bypass**

Currently 4-travel lane controlled access divided highway

Proposed 4-travel lane controlled access divided highway from the current terminus of US 264 (MLK Jr. Highway) to its intersection with NC Highway 11 (Ayden)

Right-of-way acquisition to begin after 2008 and construction to begin after 2015



**Minor Thoroughfares** – (Travel lanes – refer to Thoroughfare Plan for recommended Cross Sections)

**Moye Boulevard**

Currently 4-travel lanes from W. Fifth Street to Dickinson Avenue

Proposed 4-travel lanes on relocated R/W north of Stantonsburg Road (ECHI project)

**W. H. Smith Boulevard**

Currently 4-travel lanes from Dickinson Avenue to Stantonsburg Road

Proposed 4-travel lanes from Dickinson Avenue to W. Arlington Boulevard

Note: The right-of-way for the proposed section from Dickinson Avenue to W. Arlington Boulevard to be acquired at the time of development of the intervening properties.

**B's Barbeque Road**

Currently 2-travel lanes from US 264-Stantonsburg Road to W. Fifth Street

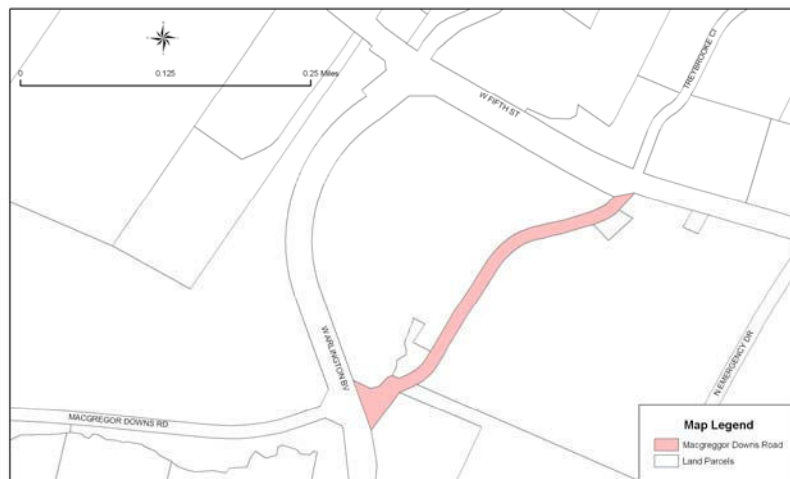
Proposed – no change

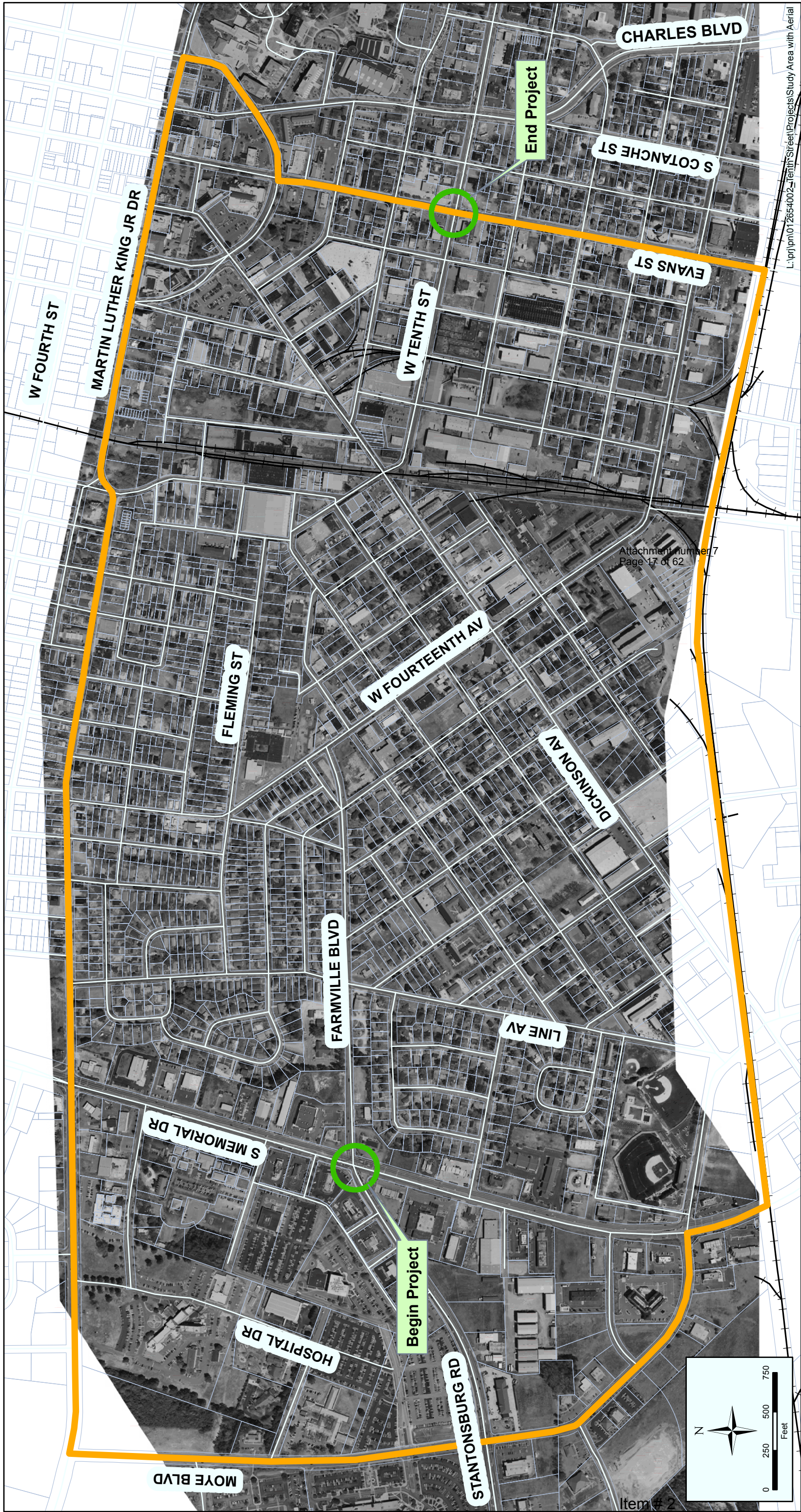
**Other Streets**

The section of MacGregor Downs Road between Arlington Boulevard and W. Fifth Street is anticipated to be closed to through-traffic as part of the ECU master plan in this area – the date of application for closure has not been determined.

The Tenth Street (10<sup>th</sup> St. – Stantonsburg Rd.) connector is a funded project with construction anticipated to begin no earlier than 2011. Once completed, the proposed 4-travel lane roadway will more directly connect the medical district to the ECU main (east) campus. A major feature of this thoroughfare improvement will be the grade separation of the street – railroad crossing at W. Tenth Street and Dickinson Avenue.

***MacGregor Downs Road (Anticipated Future Road Closing)***





# Tenth Street Connector (Project U-3315)

Greenville, Pitt County, NC  
November 17, 2005

# Study Area



- Legend**
- Study Area
  - Railroad
  - Streams
  - Parcel Boundary
  - Major Water Sources



Kimley-Horn  
and Associates, Inc.



# Thoroughfare Plan Map

(Adjusted to depict Road Realignments within Plan Boundary)

November 9, 2007

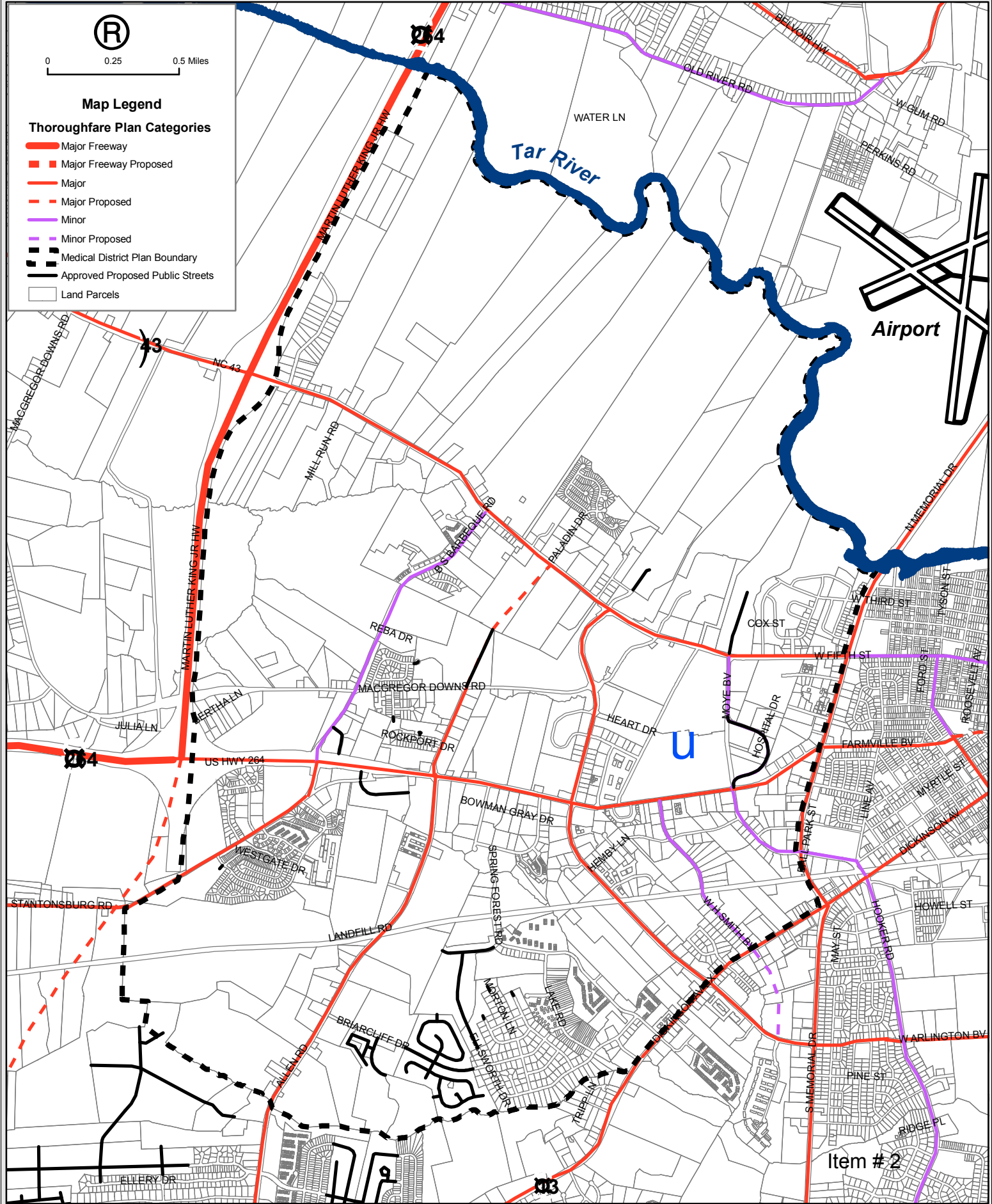


0 0.25 0.5 Miles

### Map Legend

#### Thoroughfare Plan Categories

- Major Freeway
- Major Freeway Proposed
- Major
- Major Proposed
- Minor
- Minor Proposed
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels



Item #2








# Sidewalks & Greenway Map

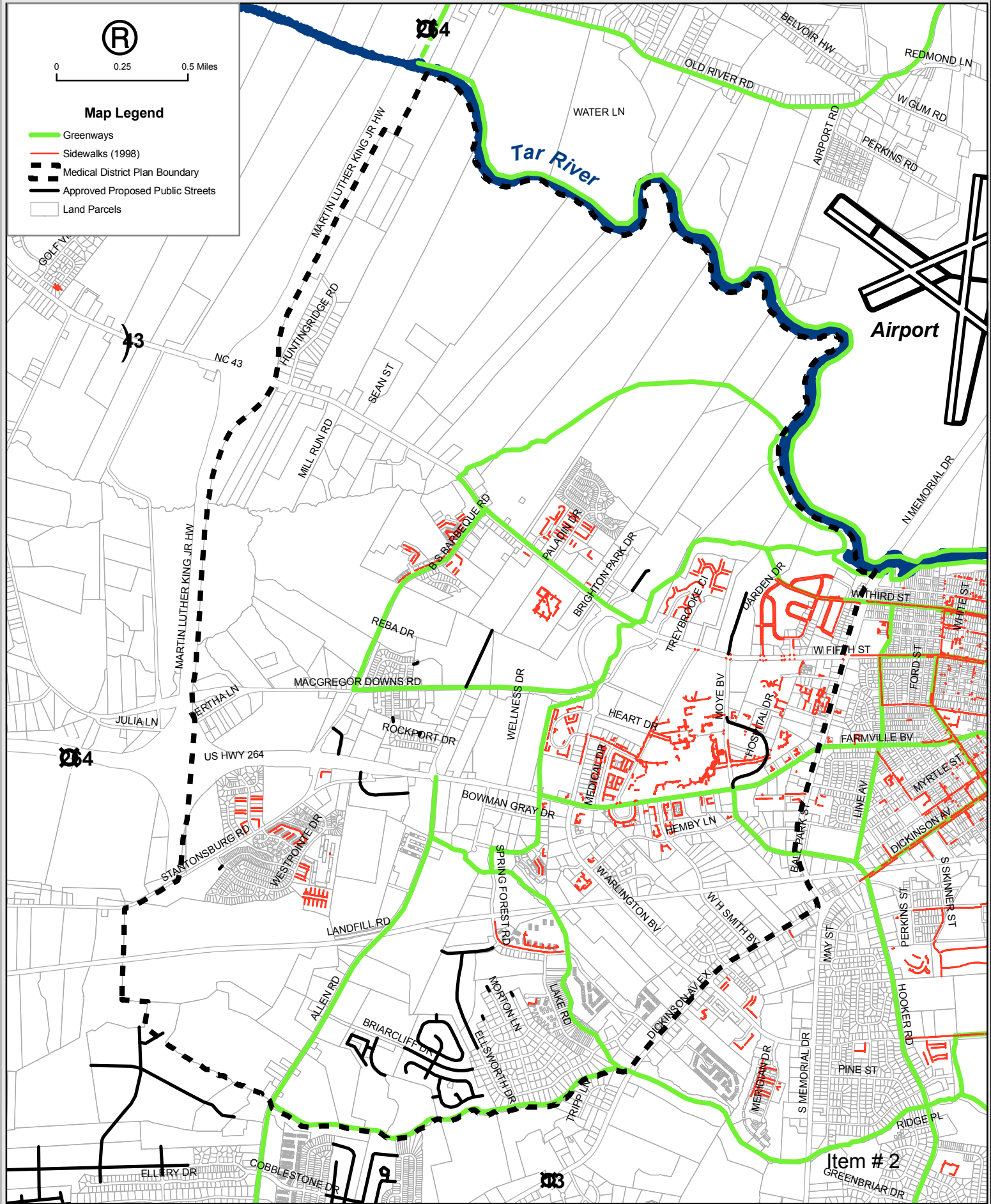
November 9, 2007



0 0.25 0.5 Miles

### Map Legend

-  Greenways
-  Sidewalks (1998)
-  Medical District Plan Boundary
-  Approved Proposed Public Streets
-  Land Parcels

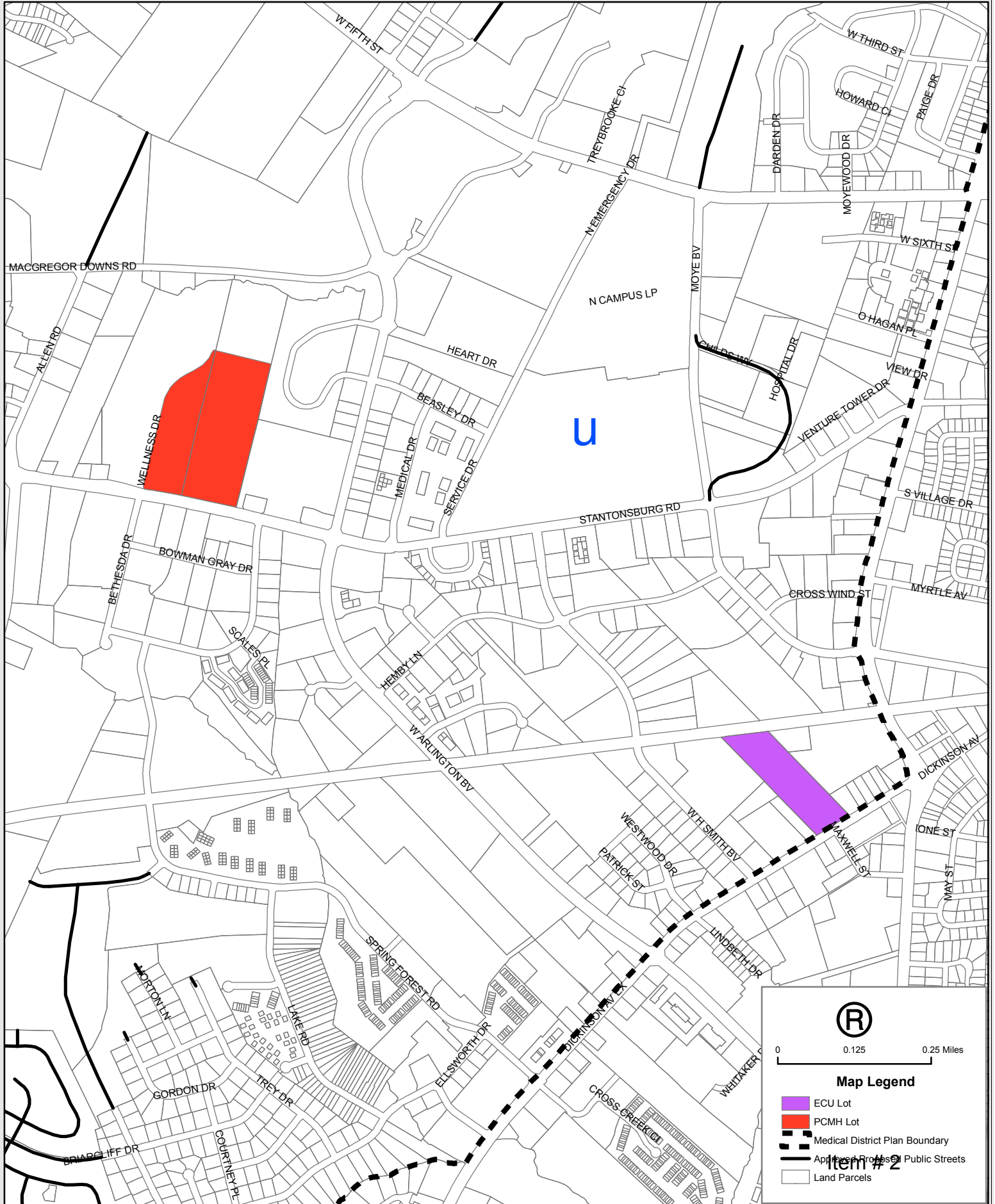


Item # 2  
GREENBRIAR DR



# PCMH & ECU Remote Shuttle Lots

November 9, 2007



0 0.125 0.25 Miles

**Map Legend**

- ECU Lot
- PCMH Lot
- Medical District Plan Boundary
- Proposed Location of Public Streets
- Land Parcels

**Item # 2**

### **Pedestrian paths, bikeways and remote commuter parking lots**

Greenways are planned along several of the medical district watercourses and roadways as indicated on the adopted Greenway Master Plan. Greenway corridors will be obtained via required access easement dedication at the time of development of corridor contiguous properties, or by donation, etc., and may include future pedestrian and bicycle path improvements.

Sidewalks are required to be installed by the developer in new subdivisions and the City currently has a budget-funded sidewalk improvement program for pre-existing streets. Several sidewalks have been constructed in the medical district under the City's sidewalk improvement program. Sidewalks existing as of 1998 are indicated on the preceding map – updated mapped (GIS) coverage of post 1998 sidewalks is not available at this time.

The City recently constructed sidewalks (2006) along Stantonsburg Road from Moye Boulevard to Wellness Drive (both sides) with funds from the City's sidewalk improvement program and complementary funding from PCMH and the NC Department of Transportation (NCDOT). Future improvements include sidewalks along the southern side of W. Fifth Street from Memorial Drive to Arlington Boulevard. The W. Fifth Street sidewalk project, to be funded by the City, ECU and NCDOT, is anticipated for competition in the spring of 2008. Prior to the projects noted above, NCDOT constructed a sidewalk (2002) along the northern side of Stantonsburg Road from Moye Boulevard to Memorial Drive. Sidewalks were also installed along both sides of Arlington Boulevard as part of the recent thoroughfare extension (to W. Fifth Street) project.

PCMH currently operates a 1,531 space (paved) park and shuttle lot on a remote site located at the northeast intersection of Stantonsburg Road and Wellness Drive between the Viquet Center and the Stanton Square Shopping Center. ECU currently operates a 900± space (gravel) park and shuttle lot on a remote site located south of the Norfolk-Southern Railroad, fronting Dickinson Avenue opposite the Maxwell Street intersection.

See also Pitt County Memorial Hospital Master Plan Traffic Study, prepared by HDR Engineering, Inc., dated November 2005.

### **9. Residential Development (single-family, duplex and multi-family)**

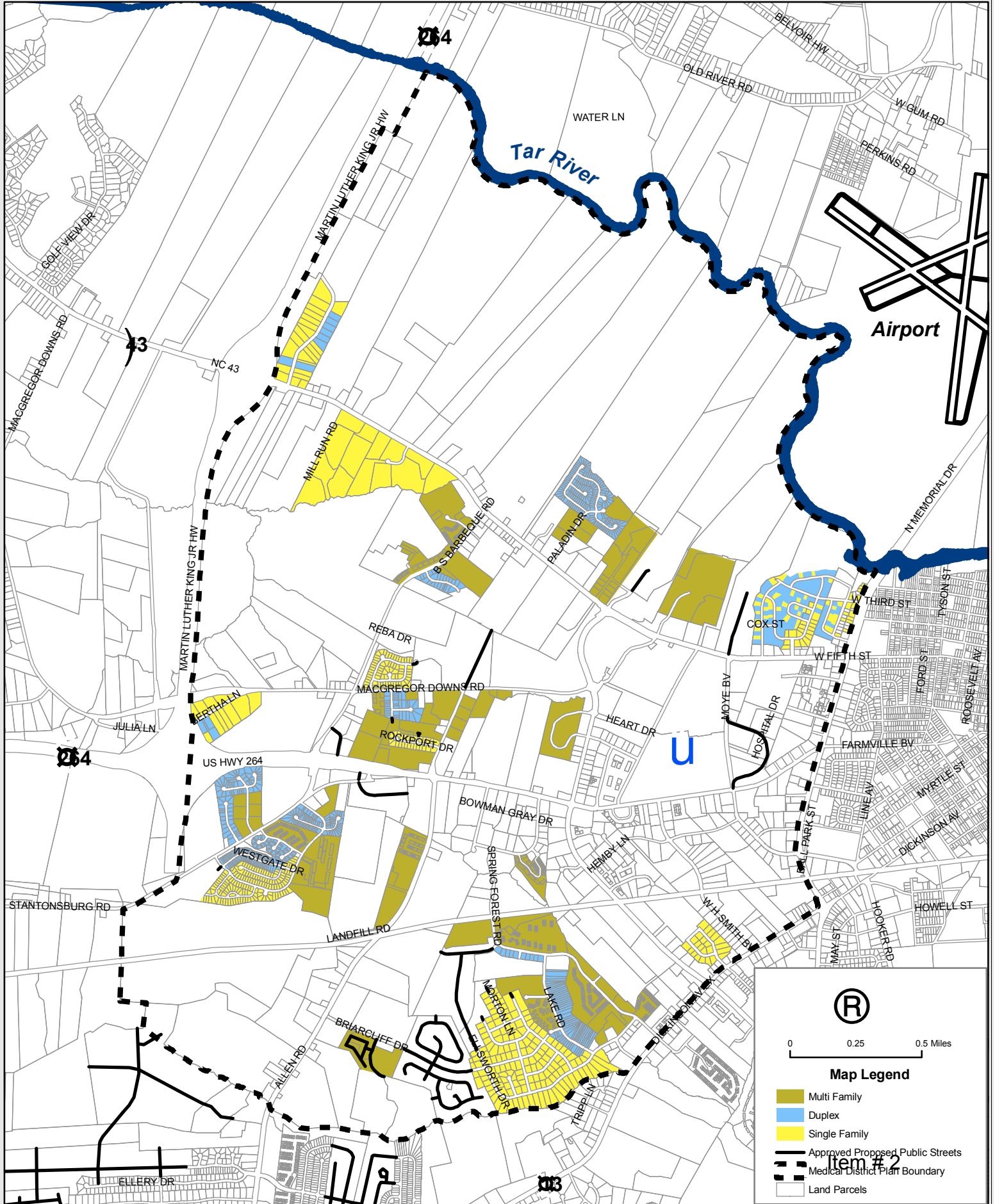
Staff anticipates (based on A-3, B-3 and C-3 below) that the medical district will have a total combined residential dwelling count (including single-family, duplex and multi-family) of 11,278± dwellings (units) at full build-out, with a resident population of 28,195± persons at an average of 2.5 persons per dwelling unit.



# Residential Development Map

(Excluding Scattered Lots)

November 9, 2007



**Map Legend**

- Multi Family
- Duplex
- Single Family
- Approved Proposed Public Streets
- Medical District Plan Boundary
- Land Parcels

0 0.25 0.5 Miles

**A-1 Single-family development (existing and/or approved subdivisions)**

There are currently ten (10) single-family subdivisions and ninety (90) scattered single-family lots located within the medical district including:

<b>Name</b>	<b># of Units</b>	<b>Acres</b>
Bertha Lane	11	15.75
Carrington Square	27	5.35
Huntingridge	21	23.72
Lake Ellsworth	151	73.88
Magnolia Creek	14	69.92
Medford Pointe	187	55.98
Moyewood	54	14.53
Scattered Home Sites	90	70.81
West Pointe	167	22.91
Westwood	23	9.53
Wyngate	69	11.08
<b>Totals</b>	<b>814</b>	<b>373.46</b>

**A-2 Single-family development (anticipated additional future subdivisions)**

Based on the existing and anticipated single-family residential zoning patterns, environmental limitations, and similar site development, staff estimates that up to 200± additional single-family residential lots may be developed in the medical district.

**A-3 Total estimated single-family lots (existing and future) at full build-out = 1,014**

**B-1 Duplex (two-family attached) development (existing and/or approved subdivisions)**

There are currently nine (9) duplex subdivisions located within the medical district including:

<b>Name</b>	<b># of Units</b>	<b>Acres</b>
Bertha Lane	3	2.46
Cascade	48	7.17
Greenridge	46	4.8
Huntingridge	8	6.63
Moyewood	180	26.14
Paladin Place	172	18.73
Park West	110	13.77
Spring Forest	66	17.53
Westpointe	198	19.44
<b>Totals</b>	<b>831</b>	<b>116.67</b>



**B-2 Duplex (two-family attached) development (anticipated additional future subdivisions)**

Based on the existing and anticipated duplex residential zoning patterns, environmental limitations, and similar site development, staff estimates that up to 200± additional duplex units may be developed in the medical district.

**B-3 Total estimated duplex units (existing/approved and future) at full build-out = 1,031**

**C-1 Multi-family development (existing and/or approved)**

There are currently thirty-three (33) multi-family developments located within the medical district including:

<b>Name</b>	<b># of Units</b>	<b>Acres</b>
Allenton Estates	74	5.80
Breckenridge Court	72	9.12
Brighton Park	310	22.84
Brookside West	20	1.16
Cascade	38	2.34
Country Manor	13	0.91
Dubber-Laney Woods (GHA)	32	3.96
Forest Glen	64	7.88
Greenpointe	72	9.73
Holy Glen	230	14.19
Lakeside	96	8.15
Lakeview	103	13.07
MacGreger Place	12	0.99
Macgregor Townes	3	0.44
Macgregor Village	80	8.54
Medford Pointe	351	14.53
Medical Oaks	88	5.82
Monticello Court	24	1.48
Moss Creek	194	14.24
Paladin Place	114	6.30
Paladin Village	64	3.93
Park West	165	9.09
Rowndtree Woods	181	16.28
Signature Place	170	15.44
Spring Forest	136	21.01
Spring Lake	84	7.06
Spring Village	61	4.58
Stanton Pointe	60	3.25
Treybrooke	456	34.16
University Medical Park	76	6.32
Waterford Place	432	27.80
Westhills	72	7.67
Westpointe	286	24.51
<b>Totals</b>	<b>4,233</b>	<b>332.59</b>

### **C-2 Multi-family development (anticipated additional future development)**

Based on the existing and anticipated multi-family residential zoning patterns, environmental limitations, and similar site development, staff estimates that up to 5,000± additional multi-family units may be developed in the medical district. Approximately 60% of the estimated future multi-family units will be developed on existing and/or future OR (office/residential) zoned properties. The estimated number of multi-family units may be reduced by 11 units per each acre developed for office/medical uses. For example, if 50% of the proposed (104 acre) Office/Institutional/Multi-family area located west of Allen Road (currently zoned R6) is developed for office/medical use the estimated number of multi-family units (5,000) may be reduced by 570± units.

### **C-3 Total estimated Multi-family units (existing/approved and future) at full build-out = 9,233**

## **10. Environmental and Site Location Constraints**

The medical district is bordered on the north by the Tar River and on the south by Green Mill Run. There are regulatory flood hazard areas associated with both drainage systems. Within the regulated flood hazard area, no fill and/or construction is permitted in the floodway, and building floor elevation requirements apply in the adjacent 100 year flood plain. With the exception of portions of University Medical Park and Park Place Office Park, which are impacted by the Green Mill Run lateral stream that drains to Lake Ellsworth, existing medical related development areas are located outside the regulated flood zones. The core area of the medical district (PCMH) has a ground elevation of 70 ± (NGVD) and has not experienced any river related flooding.



Tar River

Several additional perennial (blue line) streams drain the interior areas of the district including Schoolhouse Branch, Harris Mill Run, and other unnamed streams associated with the Tar River and Green Mill Run. The noted blue line streams and other perennial streams shown on the Pitt County Soil Survey are subject to the Tar-Pamlico buffer setback rules, as well as greenway easement dedication requirements where indicated on the official Greenway Master Plan map.



Green Mill Run

The Hydric and Flood Soils and Potential Wetlands Maps indicate problematic building conditions in the areas abutting the Tar River and in the areas south of Stantonsburg Road, and specifically in proximity to the US 264-MLK Jr. Highway interchange. The presence of regulatory wetlands may significantly impact the development potential of affected properties.

The Cultural Resources (historic landmarks and archaeological sites) Map indicates that thirteen (13) locations include, or may have included, archaeological sites. Although no specific regulations apply, the owners and/or developers of the sites are encouraged to minimize disturbance of any catalogued or discovered resources. No district properties or buildings are included on the National Register of Historic Places, and no properties have been designated as a local historic landmark or as a local historic property.

The extreme northwest corner of the medical district is included in the water supply watershed, the regulated area that drains directly to the in-river intake of the Greenville Utilities Commission (GUC) water treatment plant. Within the mapped area (north of NC Highway 43) total impervious coverage including buildings, parking, etc. is severely limited.

The flood hazard areas associated with the Tar River and sections of Harris Mill Run afford significant urban wildlife habitat. The vast majority of the forested area associated with the Tar River is expected to remain undeveloped due to the environmental limitations noted above.

The regulatory airport overlay zones extend outwardly a distance of 14,000 feet from the ends of the primary surfaces of the airport runways and includes all of the medical district core area and a majority of the outlying land northeast of Lake Ellsworth Subdivision and northeast of the US 264 (MLK Jr. Highway) interchange. Within the airport overlay zones, the height of buildings is restricted in the interest of aircraft and building safety. With the exception of the Brody School of Medicine, the East Carolina Heart Institute (ECHI) and several telecommunication/radio transmission towers, all other district structures are well below the maximum height allowance, which varies with distance from the runways. The Board of Adjustment has granted variances from the maximum height standards on two (2) occasions: the Pitt County Office Building communication tower and the EC Heart Institute.



EC Heart Institute



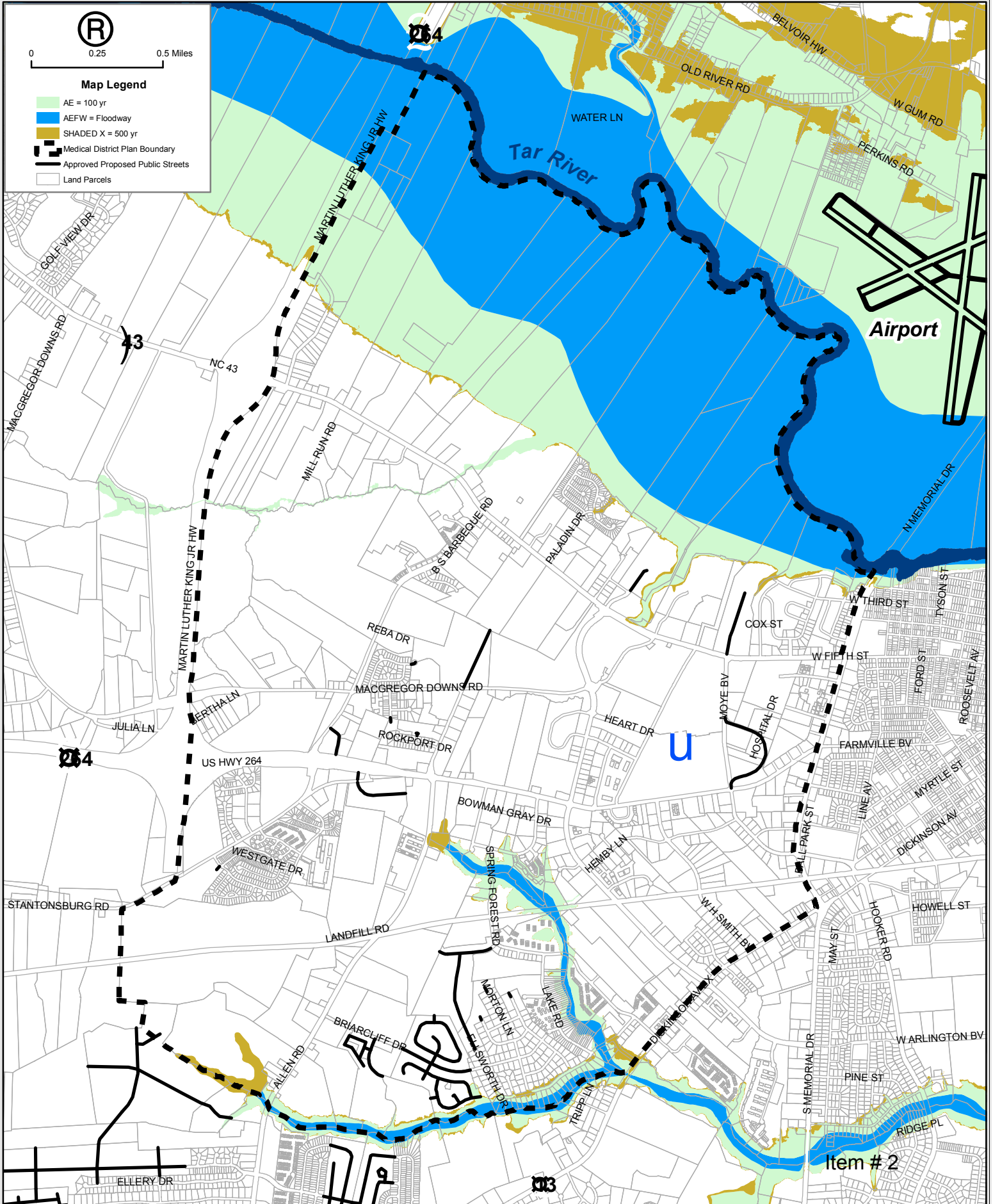
# Floodplain Map

November 9, 2007



### Map Legend

- AE = 100 yr
- AEFW = Floodway
- SHADED X = 500 yr
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels



Item # 2

# Streams & Open Ditches Map

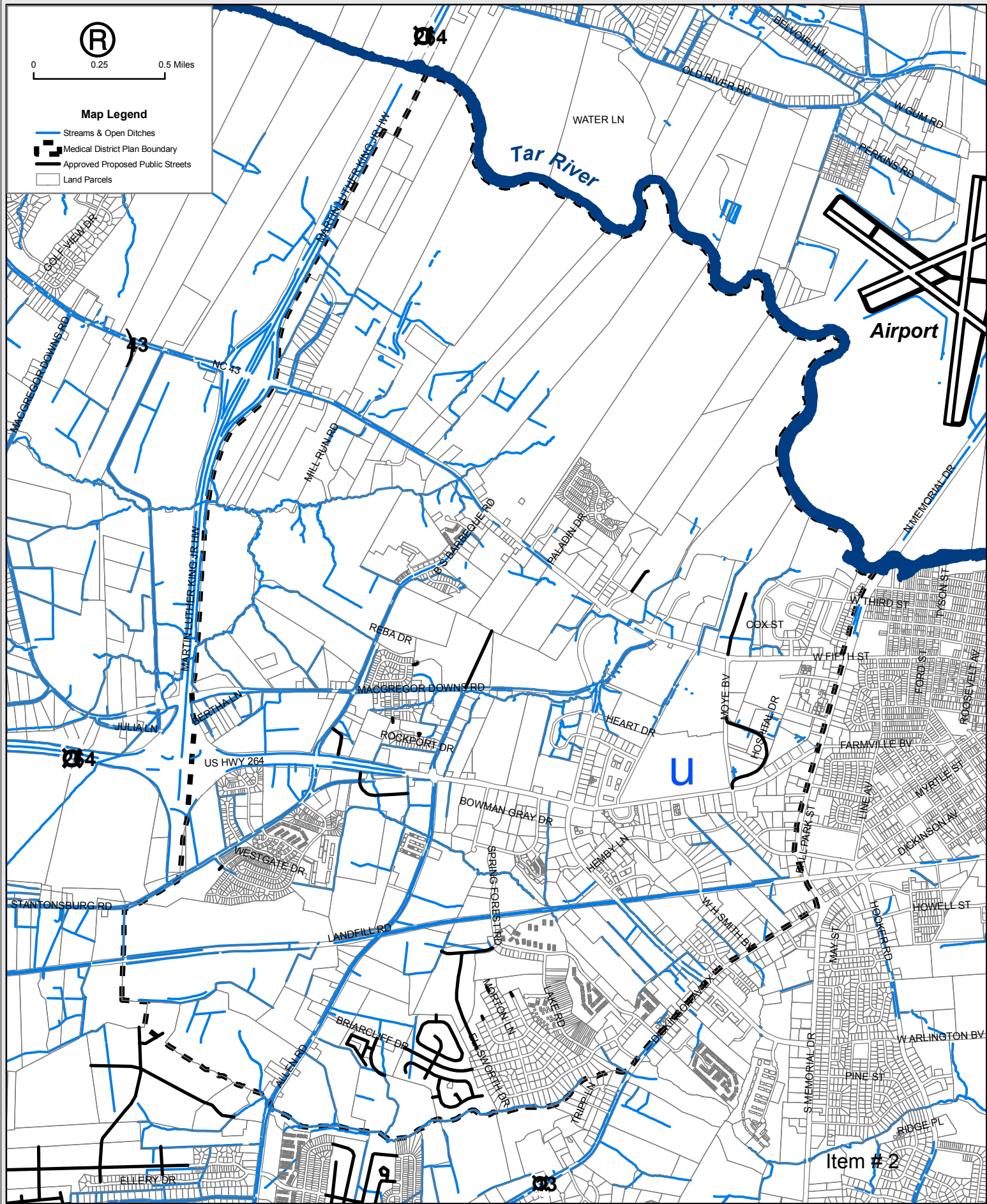
November 9, 2007



0 0.25 0.5 Miles

### Map Legend

- Streams & Open Ditches
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels





# Contour Map

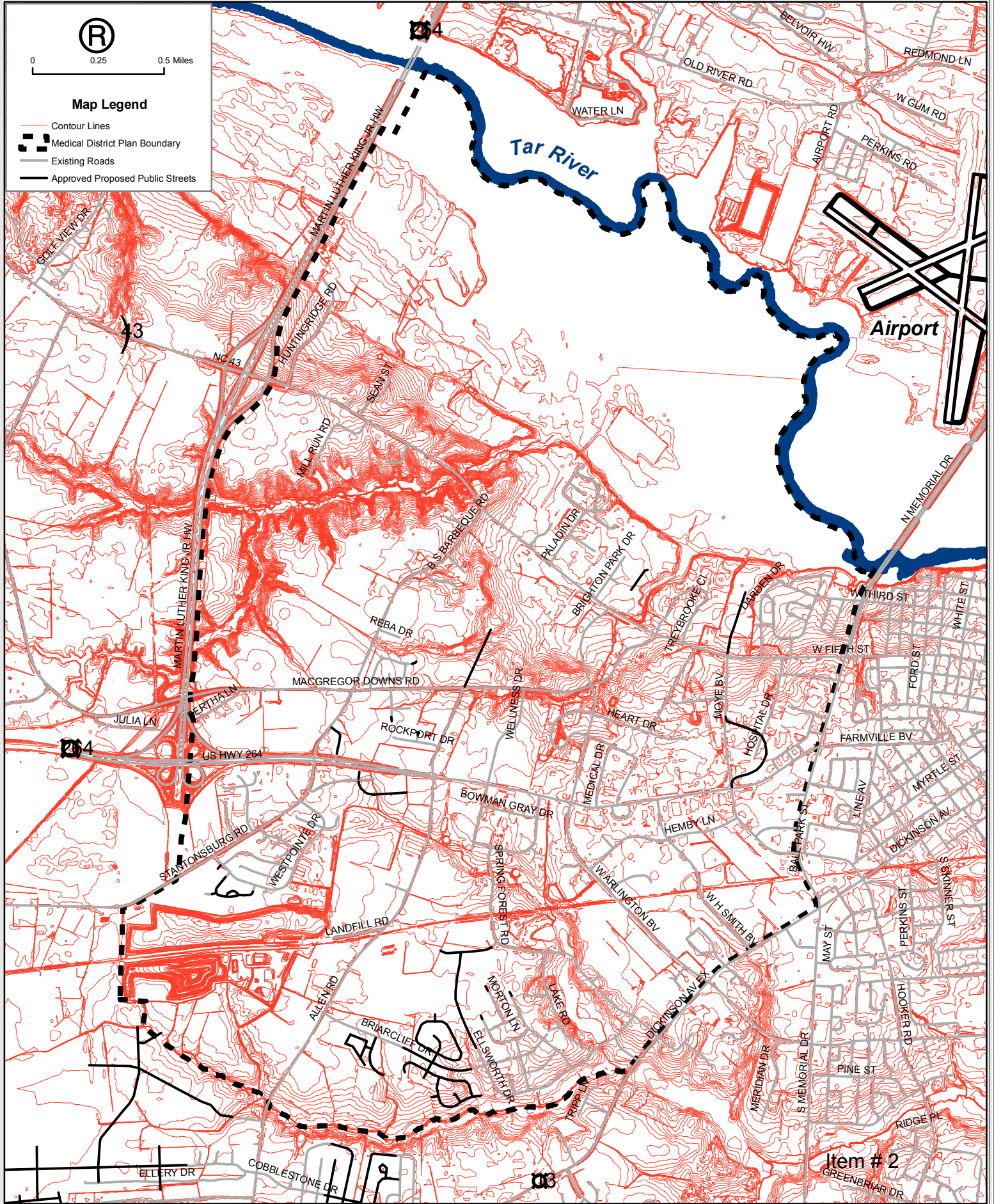
November 9, 2007



0 0.25 0.5 Miles

### Map Legend

- Contour Lines
- Medical District Plan Boundary
- Existing Roads
- Approved Proposed Public Streets

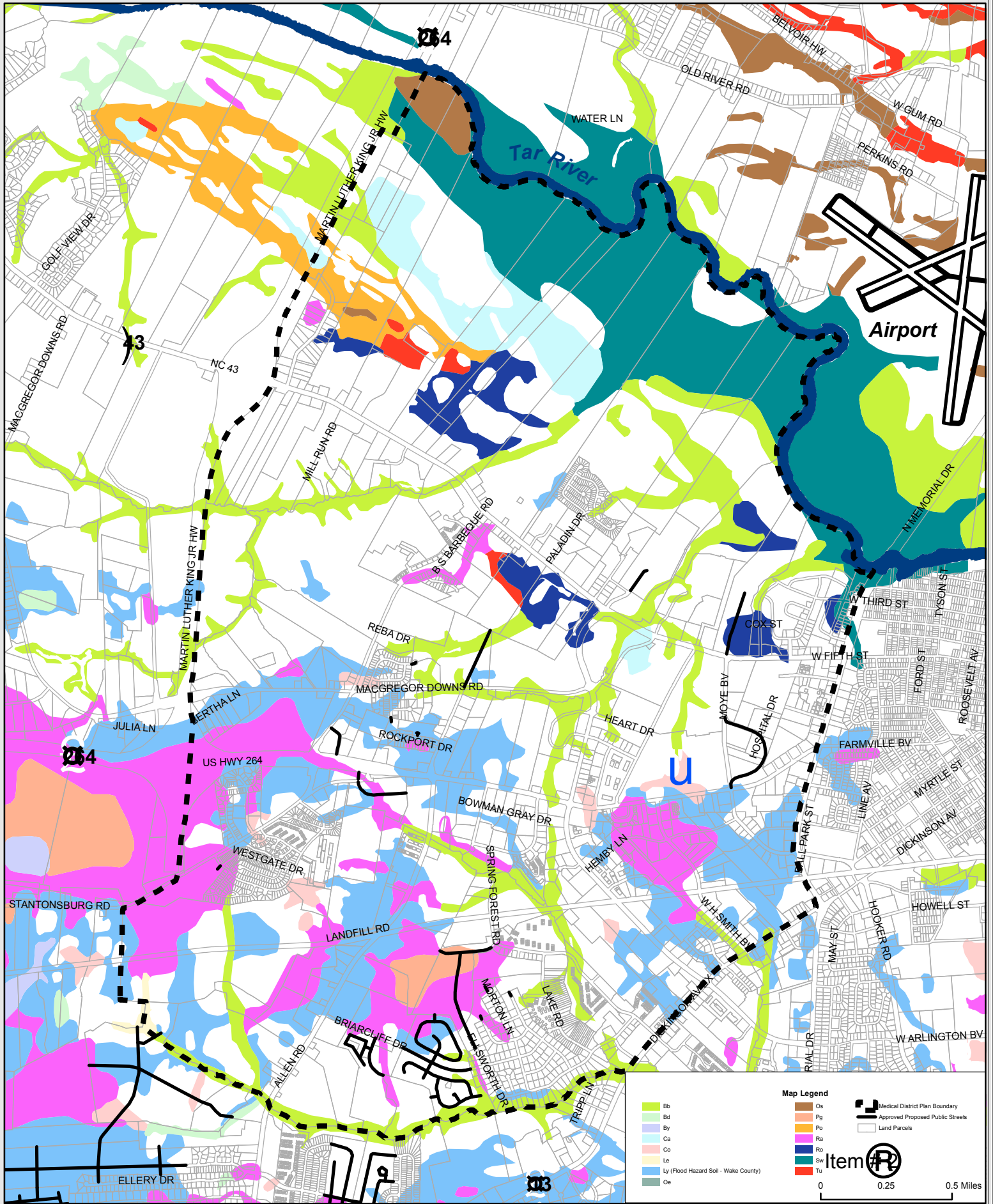


Item # 2  
GREENBRIAR DR



# Hydric & Flood Hazard Soils Map

November 9, 2007



**Map Legend**

Bb	Os	Medical District Plan Boundary
Bd	Pg	Approved Proposed Public Streets
By	Po	Land Parcels
Ca	Ra	
Co	Ro	
Le	Su	
Ly (Flood Hazard Soil - Wake County)	Tu	
Oe		

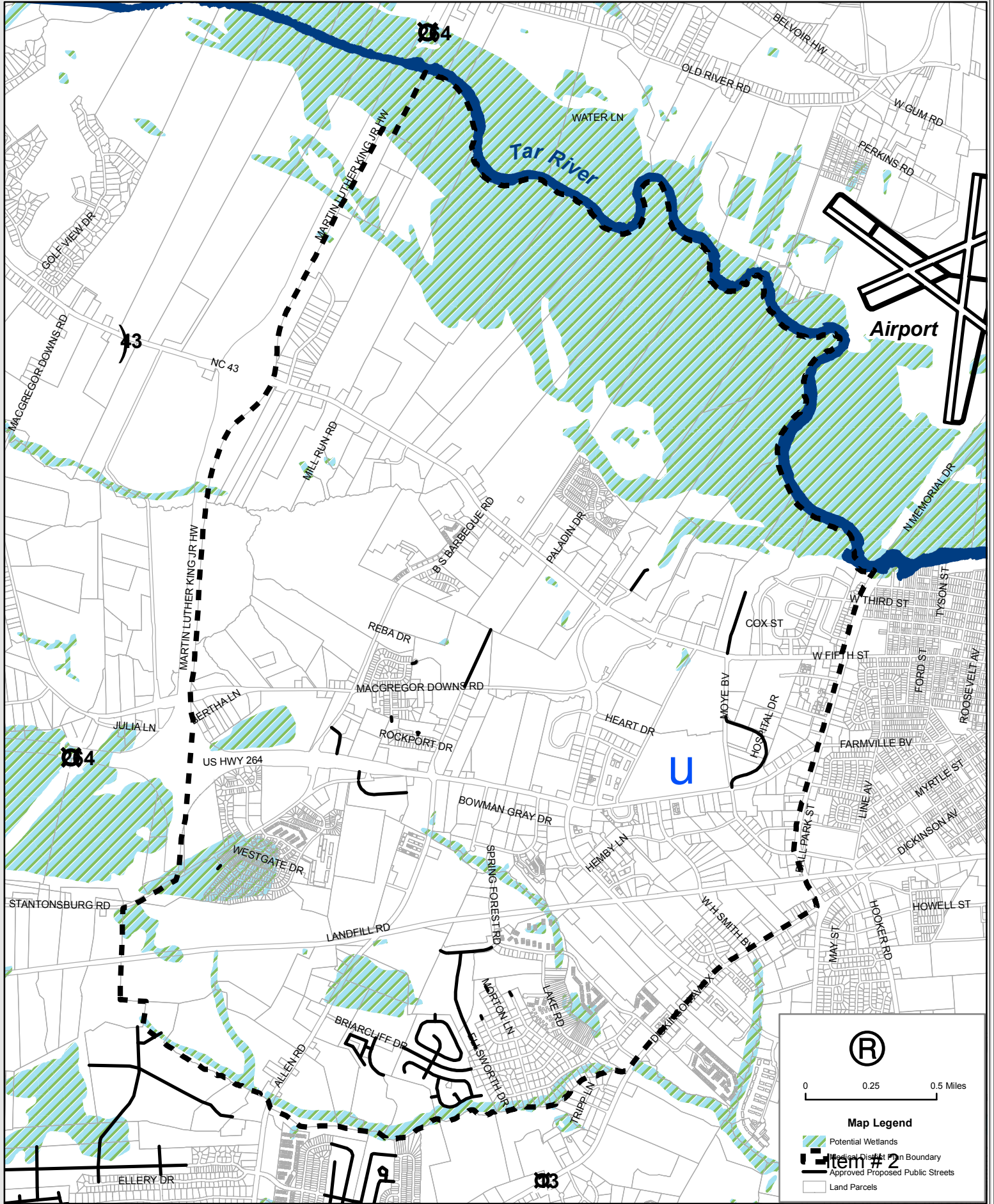
0 0.25 0.5 Miles





# Potential Wetlands Map

November 9, 2007





# Cultural Resources Map (Historic Landmarks & Archaeological Sites)

November 9, 2007

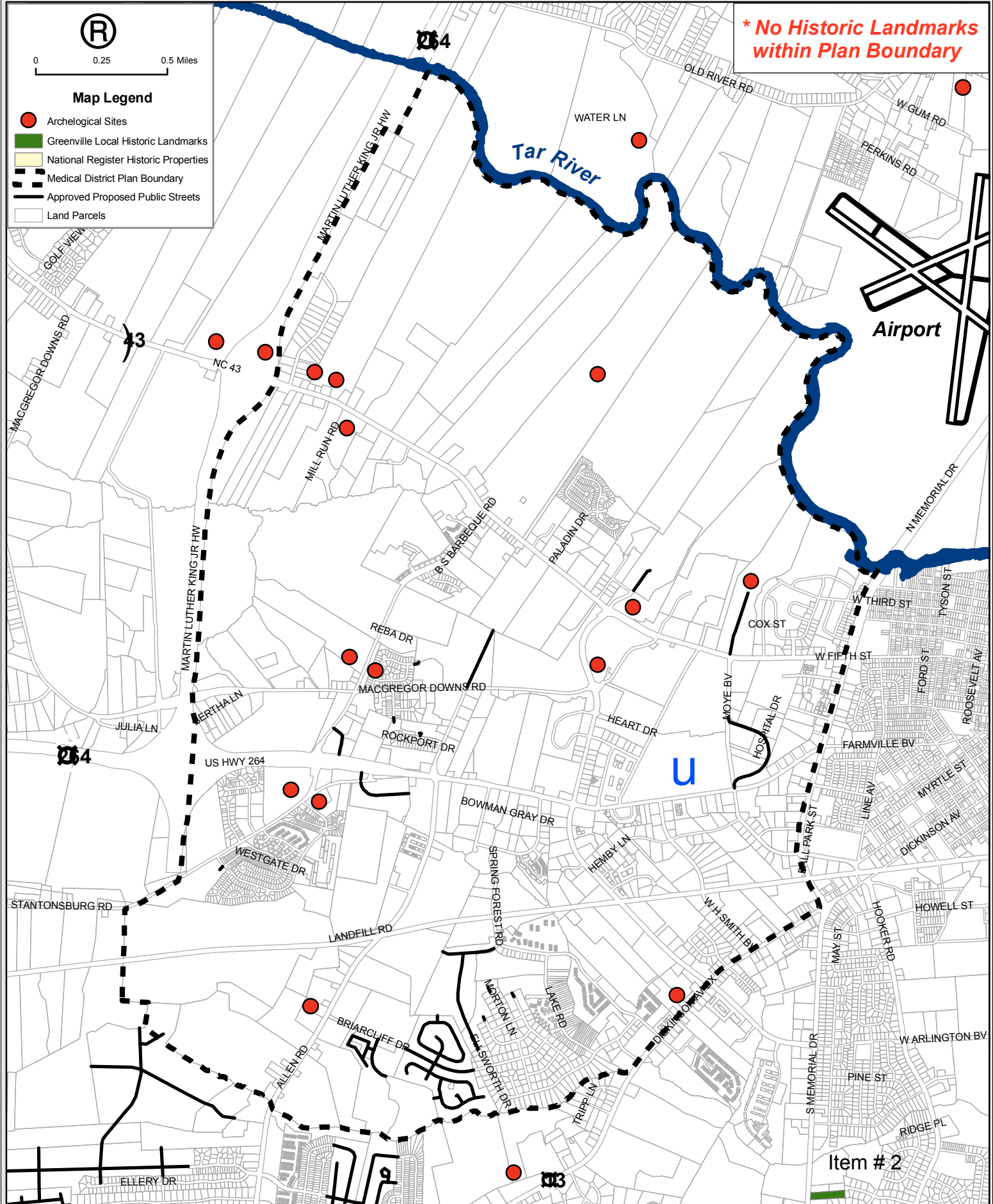
**\* No Historic Landmarks within Plan Boundary**



0 0.25 0.5 Miles

### Map Legend

- Archaeological Sites
- Greenville Local Historic Landmarks
- National Register Historic Properties
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels

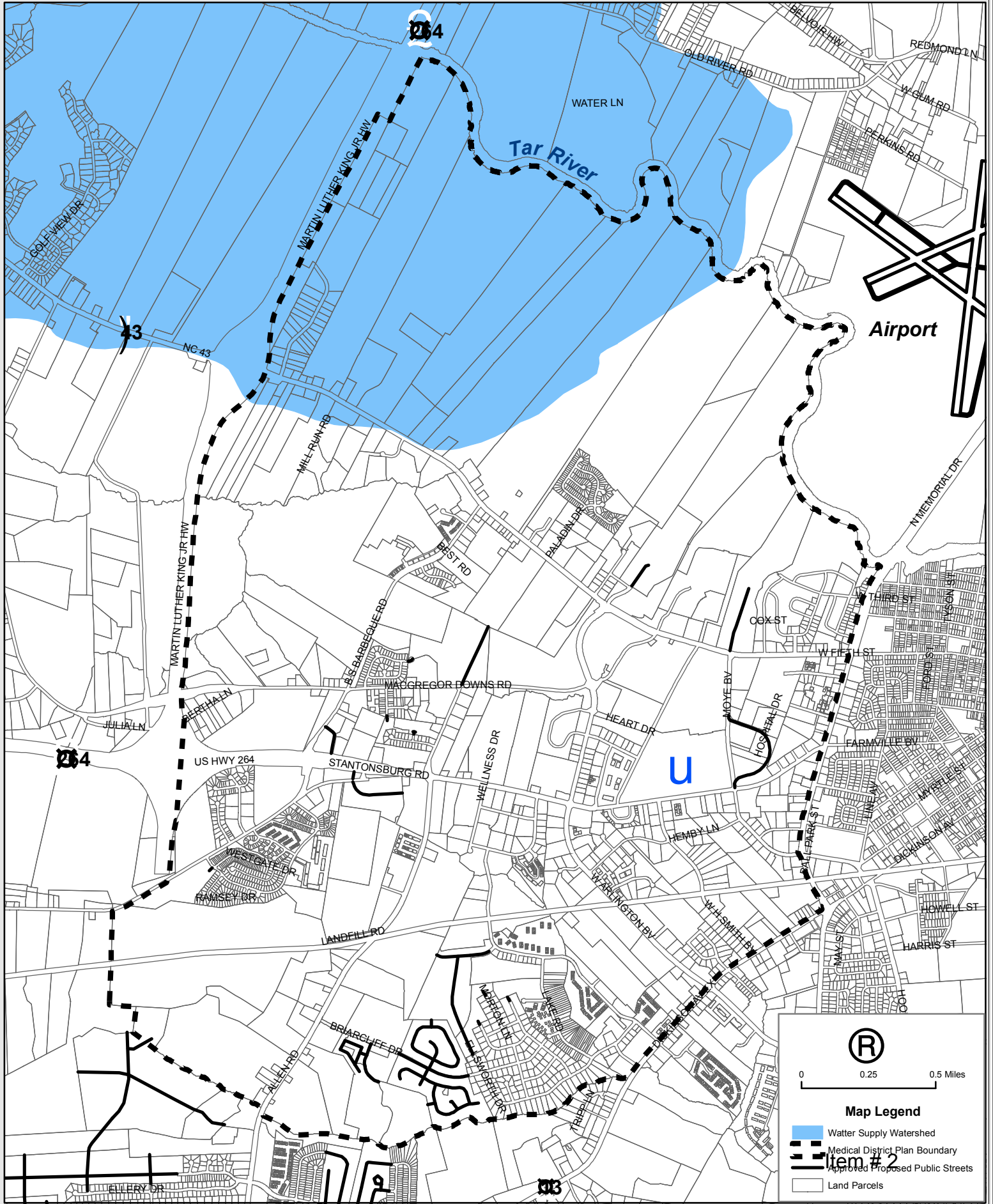


Item #2



# Water Supply Watershed Map

November 9, 2007



**Map Legend**

- Water Supply Watershed
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels

Scale: 0 0.25 0.5 Miles



# Wildlife Habitat Map

November 9, 2007



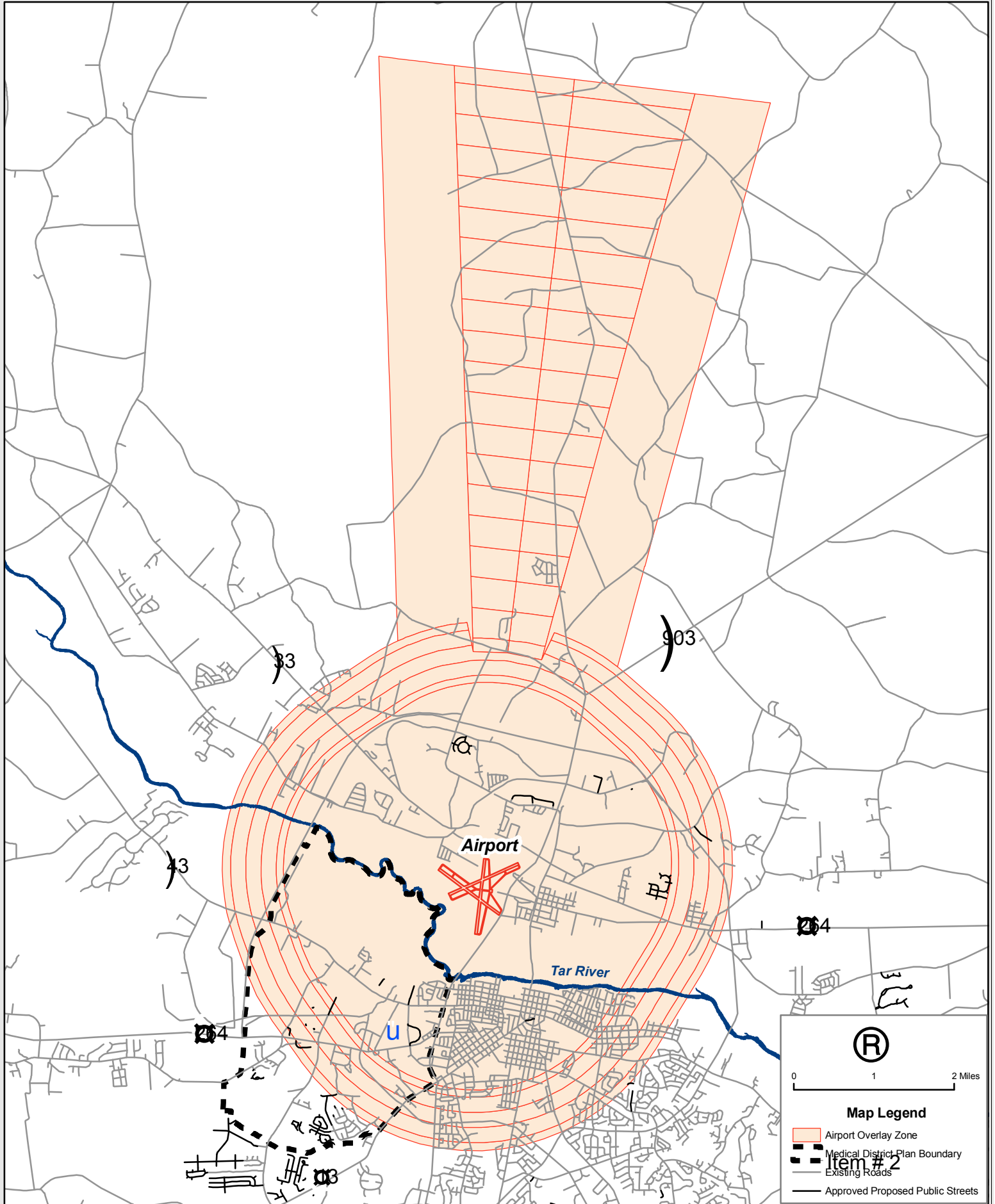
**Map Legend**

- Wildlife Habitat Area
- Medical District Plan Boundary



# Airport Overlay Zone Map

November 9, 2007



## 11. Existing Land Use (Table and Map)

For purposes of this plan update, the medical district properties have been classified into eighteen (18) existing land use categories. A parcel level field survey was conducted by the Planning Staff in October 2007 and the resultant data has been compiled and illustrated in the following table and map.

- The five (5) commercial land use categories have been consolidated for color-coded map display purposes (individual categories can be separated and depicted spatially)
- The existing land use table separates the consolidated land use categories for statistical purposes
- The existing land use categories **do not** coincide with or describe official Zoning Map districts and/or Future Land Use Plan Map categories.

The following is a general description of the existing land use categories and typical assignment.

- Heavy Commercial: auto repair, storage warehouse, etc.
- Restaurant: conventional and fast food
- Retail-Service: general consumer retail (e.g. florist, pharmacy) and personal/professional service (e.g. beauty shop)
- Medical Institutional: PCMH, ECHI, ECU facilities (including remote parking), etc.
- Medical Office & Clinic: physicians' office, medical labs, etc.
- Office: attorneys' office, real estate appraiser, bank, etc.
- Day Care: child and adult
- Residential Care/Treatment Facility: nursing home, retirement home, substance abuse facility, long term medical treatment facility, etc.
- City/County Government/Utility: Pitt County property and offices, GUC substations, City Fire/Rescue Station, etc. including vacant government property and public/private transmission tower sites
- Multi-family: 3 or more attached or detached dwelling units on 1 lot
- Duplex: 2 attached dwelling units on 1 lot
- Single-family/Mobile Home: 1 detached dwelling unit or mobile home on 1 lot
- Church: place of worship including sanctuary, meeting facilities, etc.
- Vacant: undeveloped land – excluding vacant subdivided single-family/duplex residential building lots and vacant City/County Government/Utility property

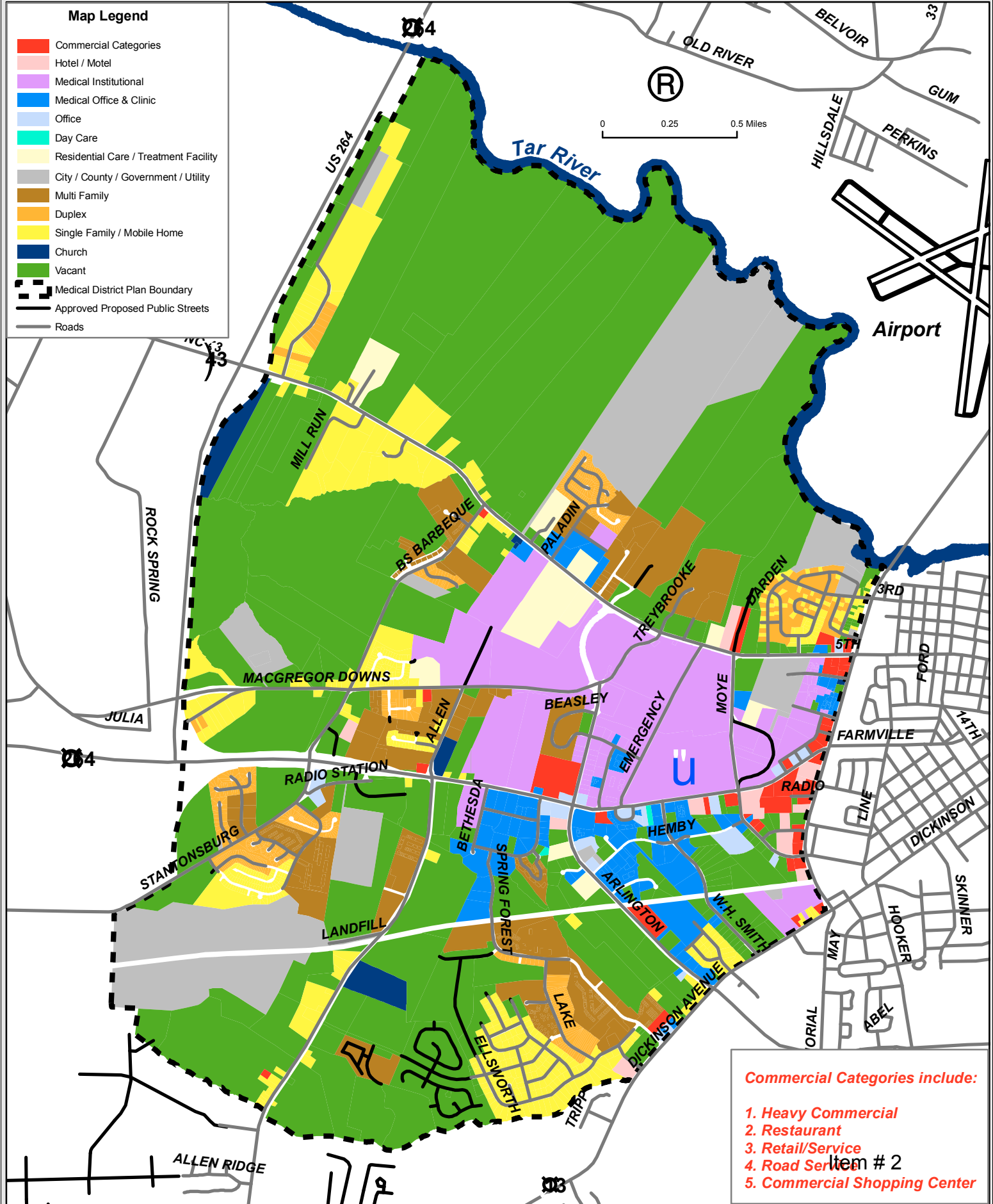


# Existing Land Use Map

November 9, 2007

## Map Legend

- Commercial Categories
- Hotel / Motel
- Medical Institutional
- Medical Office & Clinic
- Office
- Day Care
- Residential Care / Treatment Facility
- City / County / Government / Utility
- Multi Family
- Duplex
- Single Family / Mobile Home
- Church
- Vacant
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Roads



**Commercial Categories include:**

1. Heavy Commercial
2. Restaurant
3. Retail/Service
4. Road Service
5. Commercial Shopping Center

Existing Land Use Categories	Acres	% of Medical Area
Commercial (Heavy)	16.82	0.37%
Commercial (Restaurant)	14.99	0.33%
Commercial (Retail / Service)	8.28	0.18%
Commercial (Road Service)	3.51	0.08%
Commercial (Shopping Center)	20.30	0.45%
Day Care	1.44	0.03%
Church	38.69	0.86%
Hotel / Motel	28.33	0.63%
City / County / Government / Utility	485.41	10.76%
Single Family	373.46	8.28%
Mobile Home	10.56	0.23%
Duplex	116.67	2.59%
Multi Family	332.59	7.37%
Office	28.78	0.64%
Medical Institutional	430.94	9.55%
Medical Office & Clinic	163.24	3.62%
Residential Care / Treatment Facility	82.05	1.82%
Vacant	2,354.27	52.20%
<b>Totals</b>	<b>4,510.30</b>	<b>100.00%</b>

*\* All 5 Commercial Categories (Red on Map) total 63.89 Acres, making up 1.41% of the Medical Area.*

*\* Roads / Public Rights-of-Way total 362.16 Acres*

## 12. Government Owned Property (including quasi-governmental)

A significant portion of the medical district properties are owned by governmental and/or quasi-governmental entities including: the City of Greenville, Pitt County, PCMH, ECU/ State of North Carolina. For purposes of this report PCMH, a private not-for-profit hospital, is included under the quasi-governmental facility category.

City of Greenville, Pitt County and PCMH property and projects are subject to city zoning requirements and local building inspection.

ECU/State of North Carolina property and projects are subject to city zoning requirements where the principal use of property is intended to be housed in a building – in those cases all of the features of the site are subject to zoning. State building projects are however exempt from local building permit requirements and local building inspection.





Brody School of Medicine

<b>Government Agency</b>	<b>Acres</b>	<b>% of Medical Area</b>
City of Greenville	320.27	7.10%
PCMH (quasi)	247.14	5.48%
Pitt County	186.67	4.14%
State of NC and/or ECU	196.66	4.36%
<b>Totals</b>	<b>950.74</b>	<b>21.08%</b>

### 13. Fire/Rescue and Life Safety

Fire suppression and rescue services for the district are primarily provided by City Fire/Rescue Station # 2 (Hemby Lane – Arlington Boulevard), and City Fire/Rescue Station # 1(W. Fifth St. – Green St.) and/or City Fire/Rescue Station # 5 (Greenville Boulevard – Rollins Dr.), as needed. Fire hydrants are located throughout the district and the emergency response travel-time and distance from the service delivery stations to the furthest point in the district is in accordance with recommended standards. The Greenville Fire/Rescue Department provides Paramedic Service which is a higher level of service compared to basic Emergency Medical Technician (EMT) service.



Fire/Rescue Station 5

#### **14. Utilities (Public Water and Sanitary Sewer Systems)**

Public water and sanitary sewer are provided by Greenville Utilities Commission (GUC). The existing and proposed facilities of the Commission are sufficient to serve the existing and anticipated future land uses in the medical district and abutting area.

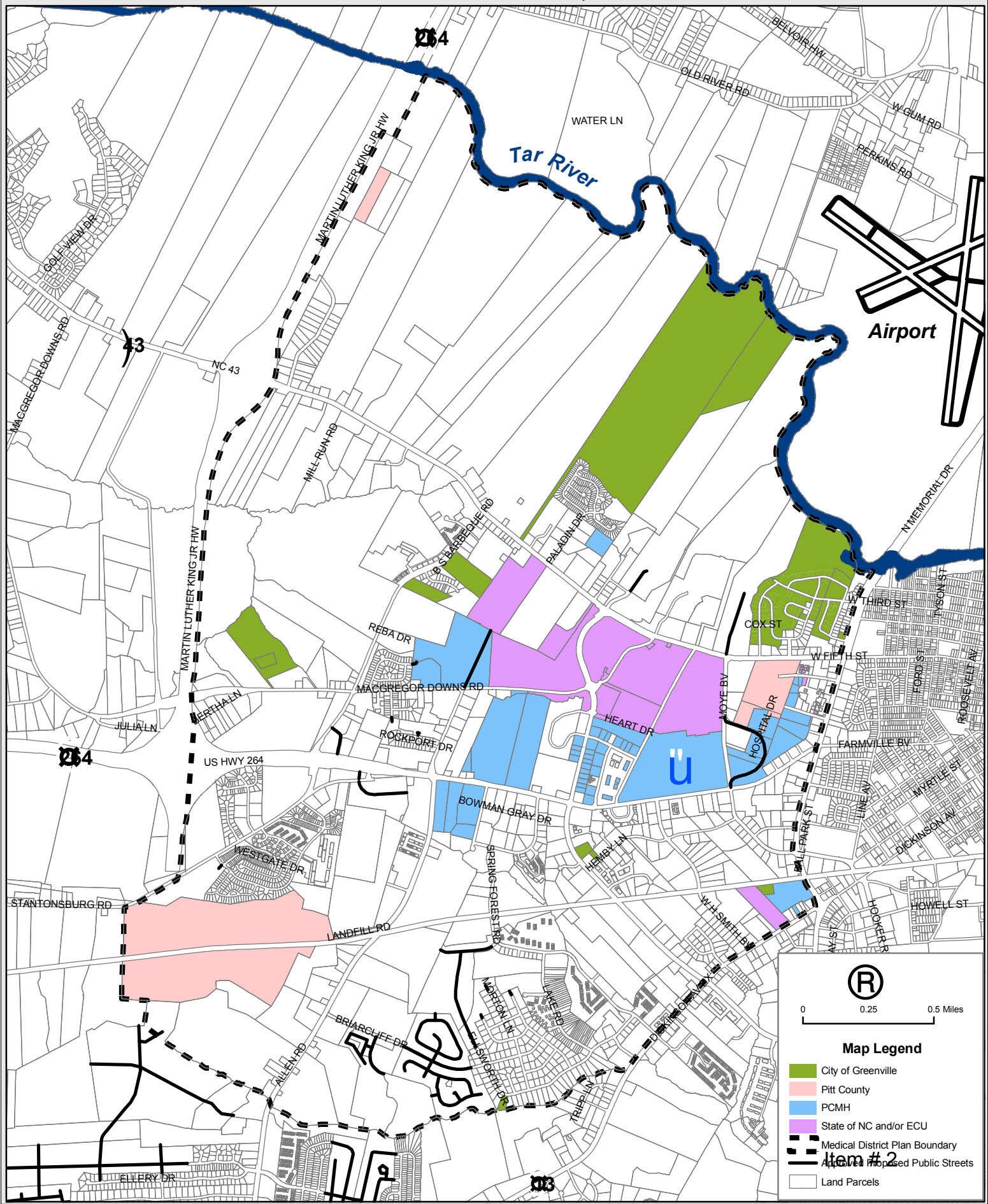




# Government Owned Property Map

(Includes Utilities and Quasi-Governmental)

November 9, 2007



0 0.25 0.5 Miles

**Map Legend**

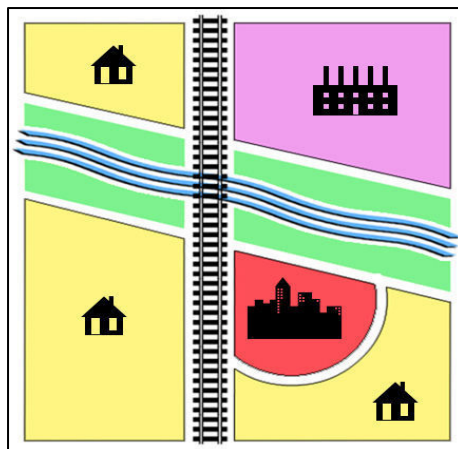
- City of Greenville
- Pitt County
- PCMH
- State of NC and/or ECU
- Medical District Plan Boundary
- Approved Proposed Public Streets
- Land Parcels

## 15. Zoning Map – Current (11/09/07)

The medical district area’s current zoning is illustrated by the map attachment entitled “Current Zoning Pattern Map”. Due to the scale of the mapped area, and for ease of display, the various zoning districts have been consolidated and color coded by similar type (commercial, industrial, office & institutional and residential/agricultural). Specific zoning by category is available, and may be obtained from the Community Development Department, Planning Division.

The following is a general location description of the medical district zones:

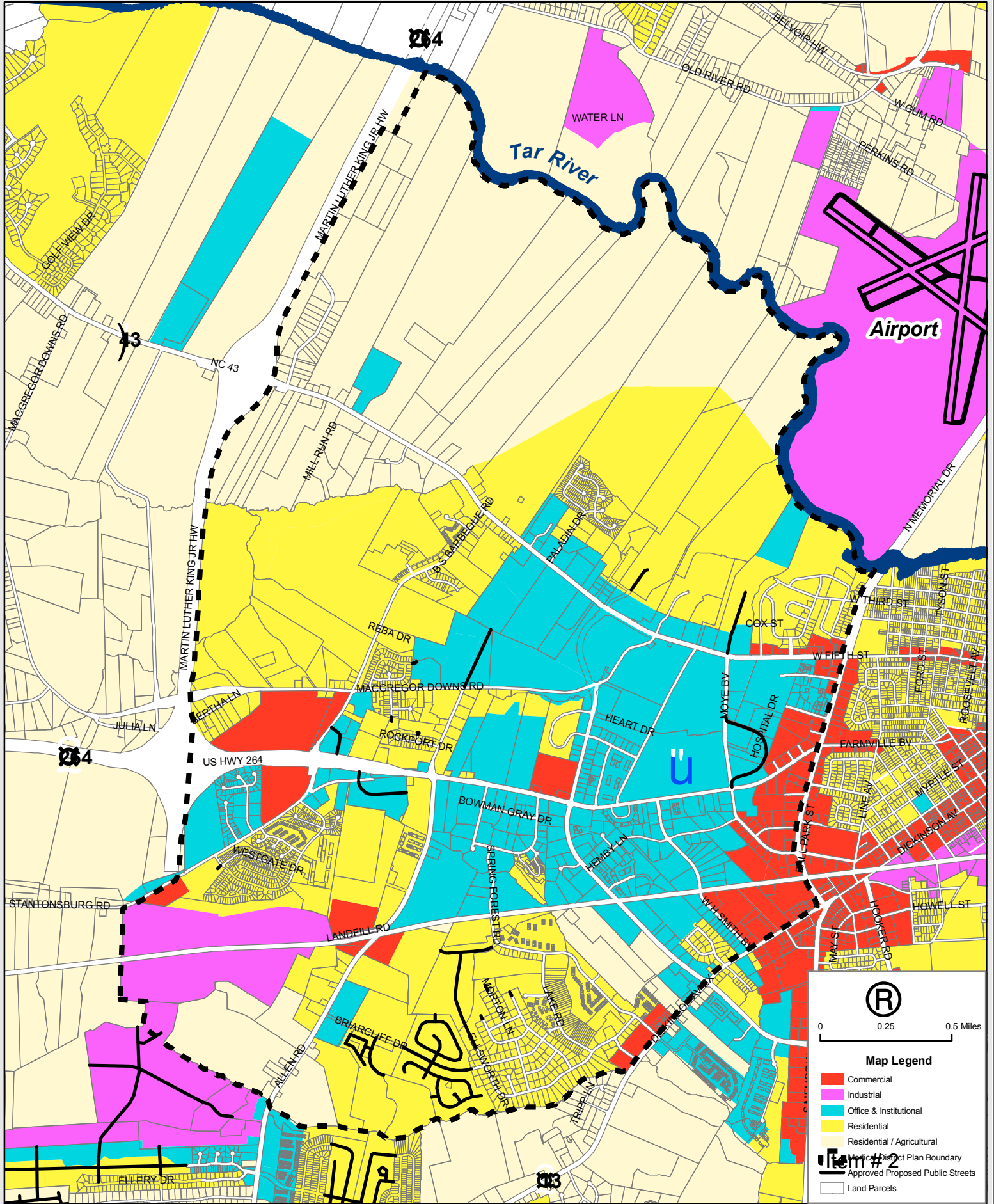
- The Medical-Institutional (MI) district, the core of the medical district, contains the Hospitals/Medical School and other direct support (typically governmental) facilities
- The Medical-Support (MS) district is typically located adjacent to the core area (MI district) and contains a mix of medical and business professional offices, medical supply businesses and limited non-medical services and retail establishments. Examples of the limited non-medical service and retail establishments currently allowed in the MS district include conventional restaurants, banks, general professional and business offices, hotel/motels, day care facilities, pharmacies and florists
- The Medical-Office (MO) district is typically located adjacent to the MI and/or MS district and is designed to facilitate office and other activities of limited intensity which will enhance and augment the medical district’s core uses
- Commercial areas have been historically limited by plan text and map description to both the eastern (Memorial Drive) and western (NW-SW Loop interchange) medical district perimeter, or to the sole interior commercial focus area centered on the Stanton Square Shopping Center
- Residential developments are generally located outside the core area.





# Current Zoning Pattern Map

December 13, 2007



A rezoning action (history) list is attached under the supplemental information section.

Zoning Pattern Category	Acres	% of Medical Area
Commercial	241.35	5.35%
Industrial	142.45	3.16%
Office & Institutional	1,010.51	22.41%
Residential	1,763.63	39.10%
Residential / Agricultural	1,352.36	29.98%
<b>Totals</b>	<b>4,510.30</b>	<b>100.00%</b>

Zoning District Category	Acres	% of Medical Area
CDF	6.78	0.15%
CG	98.94	2.19%
CH	30.59	0.68%
IU	152.15	3.37%
MCG	21.13	0.47%
MCH	93.61	2.08%
MI	265.07	5.88%
MO	507.18	11.24%
MR	635.28	14.09%
MRS	271.31	6.02%
MS	170.85	3.79%
O	15.85	0.35%
OR	51.46	1.14%
PUD	95.02	2.11%
R15S	31.97	0.71%
R6	598.47	13.27%
R6A	0.27	0.01%
R6A-RU	0.34	0.01%
R6S	101.03	2.24%
R9	1.95	0.04%
R9S	8.69	0.19%
RA20	1352.36	29.98%
<b>Totals</b>	<b>4,510.30</b>	<b>100.00%</b>

## 16. Previous Use Table Amendments – Medical-Office (MO) Zoning District

In June 2003, the Medical-Office (MO) district table of uses was amended to include a variety of limited commercial activities. Those amendments, initiated by private sector developers, with support of the medical community, were proposed in response to the need for additional service/retail in the medical area. The amendments resulted in the first major (table of uses) change in the zoning regulation affecting the medical district since the implementation of the 1986 Plan.

The 2003 ordinance amended the MO district table of uses to include, both Pharmacy and Florist as a permitted use by-right, and to include Barber or beauty shop; Manicure, pedicure or facial salon; Dry cleaning (household users), drop-off/pick-up station only; Office and school supply and equipment sales; Restaurant (fast food); Hobby or craft shop; and Medical supply sales and rental of medically- related products including uniforms and related accessories, each as a special use subject to Board of Adjustment approval.

In addition, the new regulations: (i) limit the gross enclosed floor area of each “Office and school supply” and each “Hobby or craft shop” to not more than five thousand (5,000) square feet per establishment; (ii) limit the gross enclosed floor area of each “Dry cleaning (household users) drop-off/pick-up station only” to not more than two thousand (2,000) square feet per each establishment, and (iii) prohibit fast food restaurants from being located in a freestanding detached structure exclusive to such use, and which further restricts such restaurants to attached multi-unit structures which contain not less than three (3) individual units occupied by, or are available for sale or lease, to separate district allowable establishments.

The maximum gross floor area allowances noted above under (i) and (ii) were designed to prohibit “big box” retailers and service providers, which typically are in the 20,000 to 50,000 plus square-foot range, that were not considered to be compatible with MO district objectives. The fast food restaurant, multi-unit structure requirement is designed to allow “over the counter sales” type cafeterias and eating establishments while discouraging the traditional high volume fast food restaurants commonly associated with highway corridors.

A specific concern that precipitated the MO district amendments was the loss of future service/retail area lands, due to their subsequent alternative use. The vacant land (85 acres) immediately to the west of Stanton Square Shopping Center was recommended to function as a “Mixed Use Village” in the 1993 update to the Medical District Plan. This mixed use area, if developed as planned in 1993, would have been available to fulfill a significant portion of the “limited service/retail” needs of existing and future populations. However, due to its acquisition and development by PCMH, this anticipated reserve of future service/retail space was removed from the land inventory originally intended to meet such needs.

## 17. Focus Area and Transportation Corridors – Current (11/09/07)

Focus areas are urban places which differ in scale. Mixed land uses, and higher intensities of development with high levels of visibility, should be encouraged within focus areas to give a sense of local focus of activity. Intense land uses, such as retail or office centers, should serve as the heart of a focus area in order to make the focus a more urban place, clearly distinguishable from less intense uses and adjacent areas. Commercial retail centers should be encouraged to locate at focus areas in lieu of linear roadside (strip) development. The adequate separation of focus areas, by the use of transitional (intervening lower intensity) zoning, is a primary tool used to accomplish this desired urban form. Generally, the retail component of Community Focus Areas should be spaced no closer than one mile from other Community, Intermediate and Regional Focus Areas. Regional Focus Areas should be located at least one mile from any Community Focus Area and at least three miles from each other. These recommended spacing standards are a “policy guide” which may not be achievable in every case due to various factors, such as the location of pre-existing roadway intersections. When considering the appropriate location of focus areas it is important to recognize the intent of the plan - and to take actions in support of that intent.

Focus area types include: Regional, Community, Intermediate, Neighborhood and Employment (educational, medical and industrial). Each focus area type is defined by location characteristics, and each is designed to achieve a specific level or intensity of activity.

Transportation corridor types include: Gateway, Connector, and Residential. The type assignment for a particular roadway specifies the recommended range of land use and level of activity for that corridor.

The location of focus area nodes indicated on the Focus Area Map have been established in concert with Transportation Corridor designations, the Future Land Use Plan Map’s anticipated resultant development pattern, and contextual recommendations set-out in Horizons: Greenville’ Community Plan.





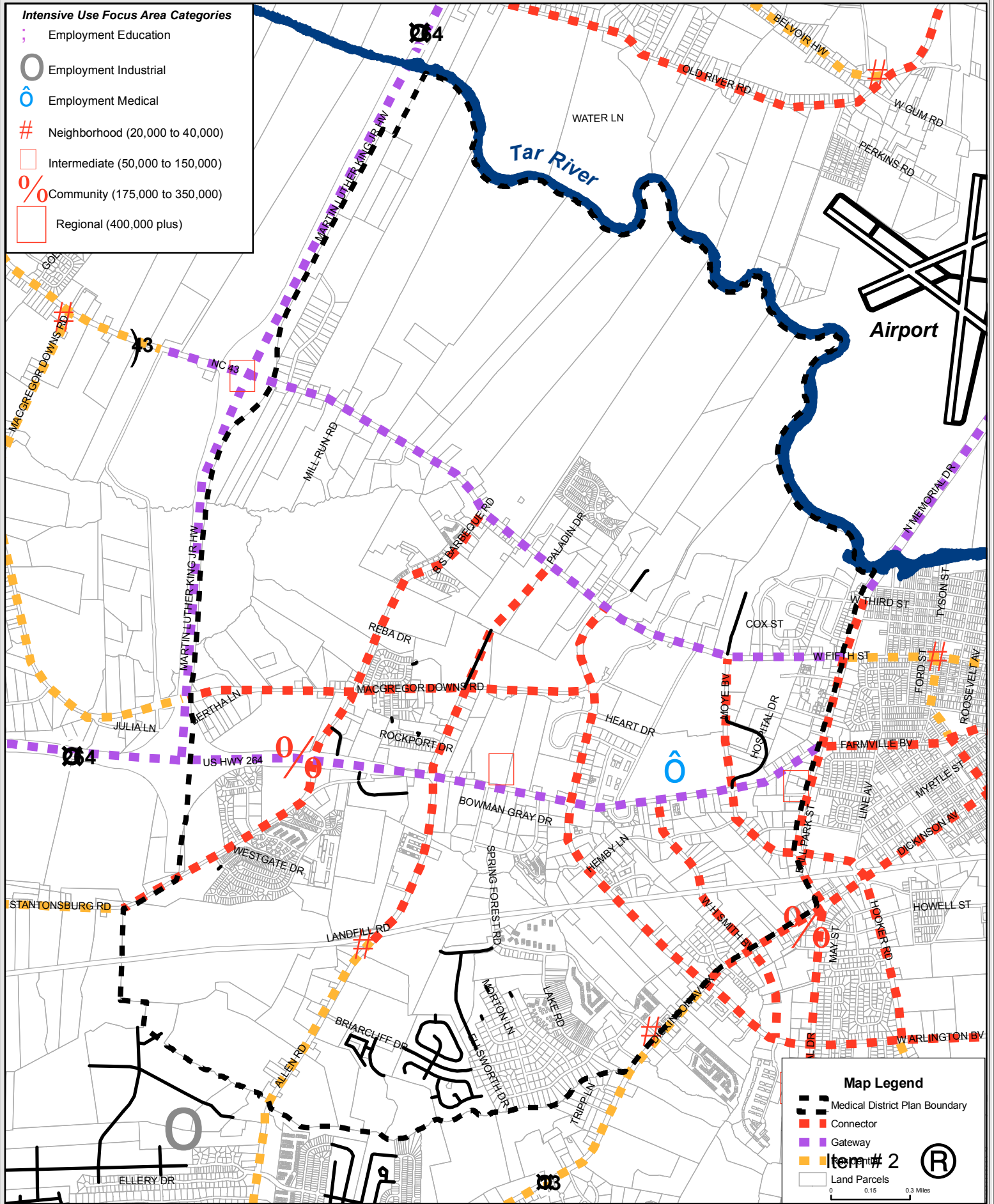


# Current Focus Area & Corridor Designation Map

November 9, 2007

### Intensive Use Focus Area Categories

- Employment Education
- Employment Industrial
- Employment Medical
- Neighborhood (20,000 to 40,000)
- Intermediate (50,000 to 150,000)
- Community (175,000 to 350,000)
- Regional (400,000 plus)



Airport

Tar River

### Map Legend

- Medical District Plan Boundary
- Connector
- Gateway
- Item # 2
- Land Parcels



## 18. Future Land Use Plan Map – Current (11/09/07)

The medical district area’s (current) future land use plan is illustrated by the map attachment entitled “Current Future Land Use Plan Map”. The various land use categories included in the attachment are an exact representation of the official Future Land Use Plan Map. Unlike zoning district boundaries, the land use plan recommendations are not dimensionally specific, the interpretation of which, should be evaluated in conjunction with the Focus Area Map, Transportation Corridor Map, and other contextual recommendations and policies set-out in Horizons: Greenville’ Community Plan.

All land use categories included on the Future Land Use Plan Map relate directly to one or more zoning district options, with the exception of the “conservation/open space” designation.

The Future Land Use Plan Map identifies certain areas for conservation/open space uses. The conservation/open space areas may not correspond precisely with conditions on the ground. When considering rezoning requests or other development proposals, some areas classified as conservation/open space may be determined not to contain anticipated development limitations. In such cases, the future preferred land use should be based on adjacent Future Land Use Plan Map designations, contextual considerations, and the general policies of Horizons: Greenville’ Community Plan.

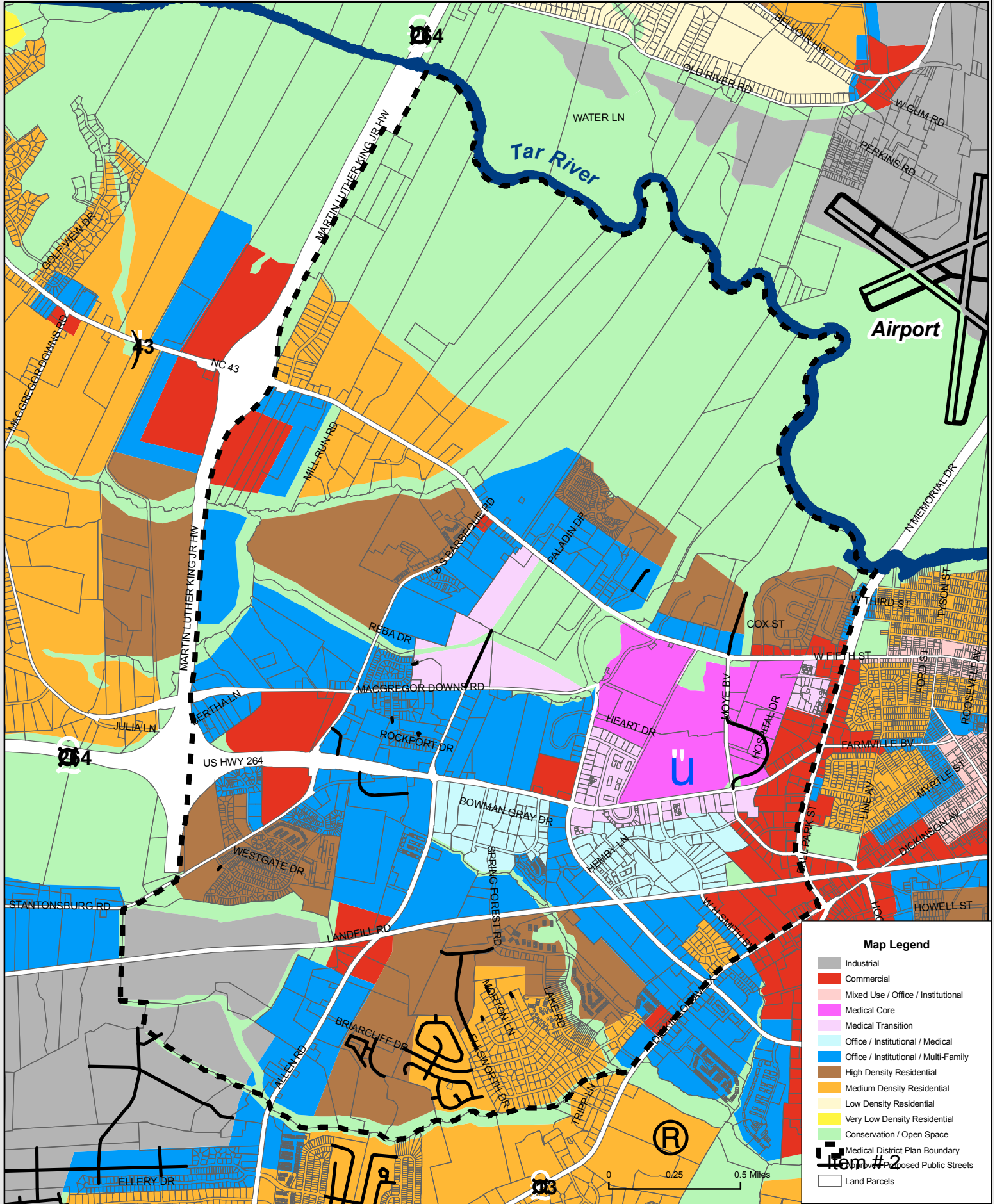
A land use plan map (history) actions list is attached under the supplemental information section.

Land Use Plan Category	Acres	% of Medical Area
Commercial	271.70	6.02%
Conservation / Open Space	1,527.95	33.88%
High Density Residential	668.41	14.82%
Industrial	163.64	3.63%
Medical Core	188.47	4.18%
Medium Density Residential	389.94	8.65%
Medical Transition	142.87	3.17%
Office / Institutional / Medical	151.23	3.35%
Office / Institutional / Multi Family	1,006.09	22.31%
<b>Totals</b>	<b>4,510.30</b>	<b>100.00%</b>



# Current Future Land Use Plan Map

February 12, 2004 as amended



**Airport**

### Map Legend

- Industrial
- Commercial
- Mixed Use / Office / Institutional
- Medical Core
- Medical Transition
- Office / Institutional / Medical
- Office / Institutional / Multi-Family
- High Density Residential
- Medium Density Residential
- Low Density Residential
- Very Low Density Residential
- Conservation / Open Space
- Medical District Plan Boundary
- Proposed Public Streets
- Land Parcels

Item #2



## 19. Analysis and Recommendation

Existing and anticipated development in the medical district as detailed in this report illustrates the high level of urban development that has and is occurring in this area.

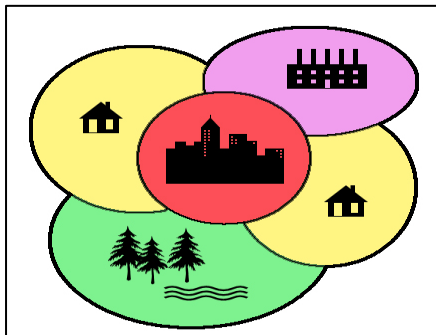
It is understood and emphasized that the continued protection of the medical core and support services, both public and private, is a primary concern for the long-term well-being and prosperity of the medical district. In that respect, future actions should be taken to insure that the available medical service expansion area is preserved and that medical-incompatible land uses are restricted to remote locations of minimal impact. It is also a basic finding that an adequate supply of support facilities, including personal services, restaurants and retail, in close proximity of the employment and residential centers is a vital and necessary component of a desirable and sustainable environment.

Based on the existing development pattern and current Future Land Use Plan Map recommendations, it is staff's opinion that, at present, there is an imbalance of existing and future allowable use that will result in a shortage of service delivery and retail options. Further, the lack of easily accessible services encourages employees, residents and visitors to make unnecessary and frequent out-of-district trips, which in turn contributes to reduced productivity and traffic congestion.

Therefore, in consideration of the goals and objectives of the previous "Medical District Plans" and Horizons: Greenville's Community Plan, staff would recommend that changes be made to the Focus Area Map and Future Land Use Plan Map that insure an adequate distribution of necessary services designed to promote a vibrant, efficient and sustainable medical district.

The recommended changes to the Focus Area Map and Future Land Use Plan Map are described and illustrated under sections 20 and 21 respectively. The Proposed Future Land Use Plan Map (see section 22) is reflective of all recommended changes.

All portions of previously adopted and applicable plans, not in conflict with the recommended changes to the Focus Area Map and Future Land Use Plan Map, are intended to remain in affect.



## 20. Focus Area Map – Recommended Changes (site locations correspond to map)

### Site 1:

A new Intermediate Focus Area designation is recommended at the southeast intersection of B's Barbeque Road and W. Fifth Street. The retail component of an Intermediate Focus Area is anticipated to contain 50,000 to 150,000± square feet of building floor area. Planned center type development, including shared access, internal drives and parking, is encouraged. The uncoordinated development of focus area sites is discouraged.

### Site 2:

A new Neighborhood Focus Area designation is recommended north of W. Fifth Street at the intersection of W. Fifth Street and Moyer Boulevard. The retail component of a Neighborhood Focus Area is anticipated to contain 20,000 to 40,000± square feet of building floor area. Neighborhood Focus Areas may include one independent use or several establishments in a planned center type development. Multi-use neighborhood centers should include shared access, internal drives and parking. The uncoordinated development of focus area sites is discouraged.

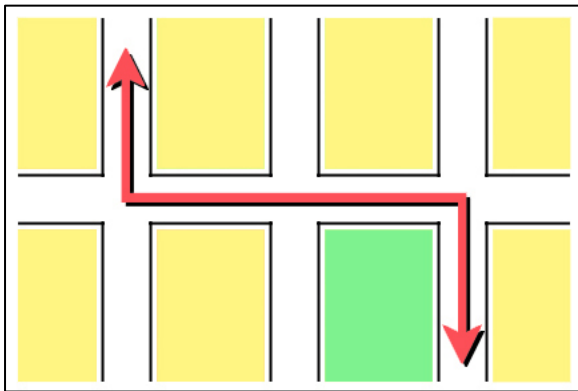


Illustration: Paths

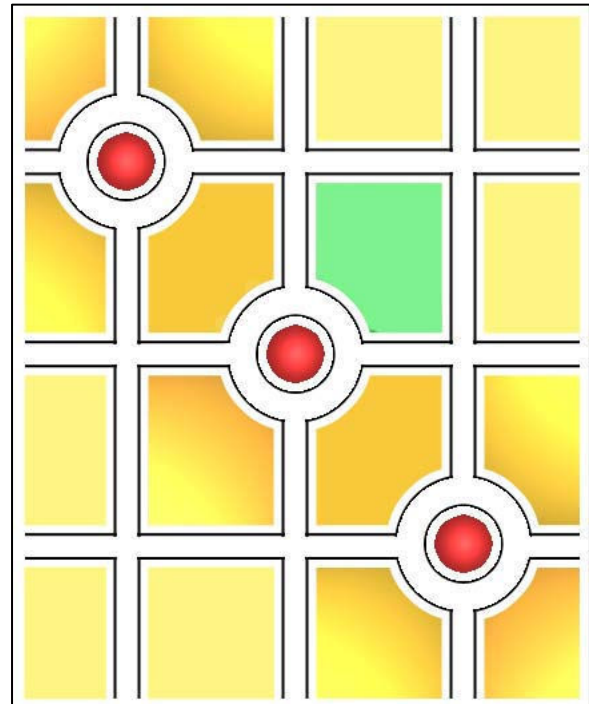


Illustration: Nodes

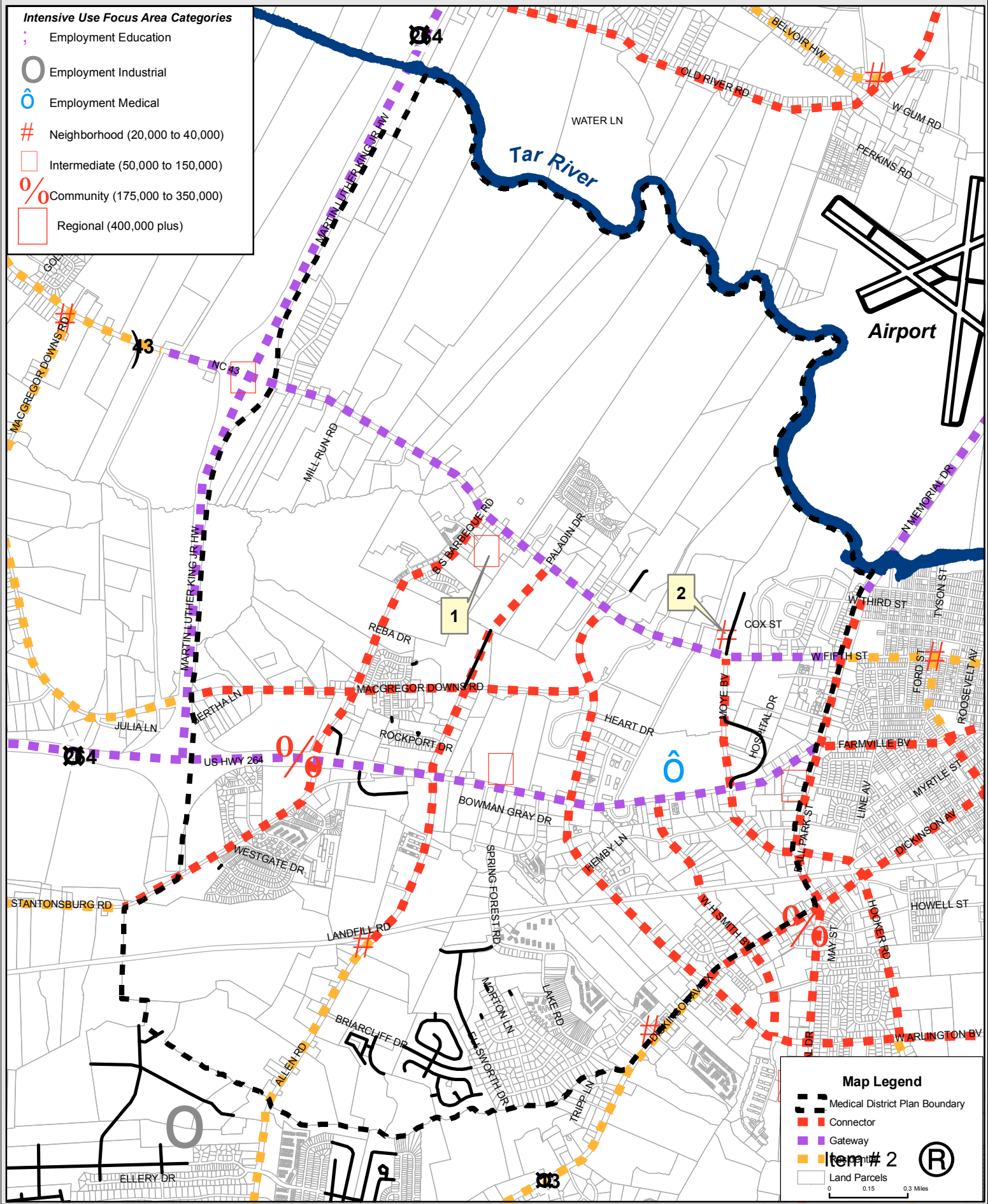


# Focus Area & Corridor Designation Map

Including Additional Focus Areas (1 & 2)

December 20, 2007

- Intensive Use Focus Area Categories**
- Employment Education
  - Employment Industrial
  - Employment Medical
  - Neighborhood (20,000 to 40,000)
  - Intermediate (50,000 to 150,000)
  - Community (175,000 to 350,000)
  - Regional (400,000 plus)



**Map Legend**

- Medical District Plan Boundary
- Connector
- Gateway
- Item # 2
- Land Parcels

0 0.15 0.3 Miles

## **21. Future Land Use Plan Map – Recommended Changes (site locations correspond to map)**

### **Site 1 (13 ± acres):**

The current Commercial designation is recommended for Medical Transition.

The site is currently owned by PCMH and is devoted to hospital-related medical uses.

### **Site 2 (26± acres):**

The current Medical Core designation is recommended for Office/Institutional/Medical.

The site contains the Pitt County Office Complex and Moye Medical Center Subdivision.

### **Site 3 (5± acres):**

The current Office/Institutional/Multi-Family designation is recommended for Commercial (new Neighborhood Focus Area – per section 20 above).

The site contains the University Medical Park (North) subdivision, wherein the Board of Adjustment has recently approved (6/28/07) special use permits (Case #07-11) for a motel and restaurant fronting W. Fifth Street. The recommended change will facilitate additional service and retail use options in the University Medical Park (North) subdivision in lieu of linear roadside (strip) development west of the intersection of Moye Boulevard. Additional commercial development along this section of W. Fifth Street should be confined to the designated Neighborhood Focus Area.

### **Site 4 (34± acres):**

The current Conservation/Open Space designation is recommended for Medical Transition.

The site contains the Walter B. Jones Alcohol and Drug Abuse Treatment Center and the Greenfield Place nursing home, and does not contain environmentally sensitive areas to the extent represented by the current designation.

### **Site 5 (18± acres):**

The current Office/Institutional/Multi-Family designation is recommended for Commercial (new Intermediate Focus Area – per section 20 above).

The southeast intersection of B's Barbeque Road and W. Fifth Street contains a restaurant site (B's BBQ) and is currently recommended for limited commercial development. The recommended (additional) Commercial will facilitate a development on the scale of Stanton Square Shopping Center.

### **Site 6 (104± acres):**

The current High Density Residential designation is recommended for Office/Institutional/Multi-Family.

The site contains substantial area and the recommended designation will accommodate both high density residential and office/medical development.

**Site 7 (16+ acres):**

The current Office/Institutional/Multi-Family designation is recommended for Commercial.

The designation of additional Conservation/Open Space, on wetland sites, at the center of the designated US 264 – MLK Jr. Community Focus Area has reduced the recommended commercial acreage for this general location. Site 7, in conjunction with Site 8, will provide the desired commercial acreage recommended for the Focus Area.

**Site 8 (12+ acres):**

The current Office/Institutional/Multi-Family designation is recommended for Commercial.

The designation of additional Conservation/Open Space, on wetland sites, at the center of the designated US 264 – MLK Jr. Community Focus Area has reduced the recommended commercial acreage for this general location. Site 8, in conjunction with Site 7, will provide the desired commercial acreage recommended for the Focus Area.

**Site 9 (23+ acres):**

The current Commercial designation is recommended for Conservation/Open Space.

The presence of regulatory wetlands is anticipated to severely impact the development potential of the central portion of the designated Community Focus Area.

**Site 10 (2+ acres):**

The current Office/Institutional/Multi-Family designation is recommended for Commercial.

The Commercial designation will allow additional development options for Site 10 that are complementary to the recommendation for Site 8. Significant easterly expansion of the commercial component of the Community Focus Area is discouraged.

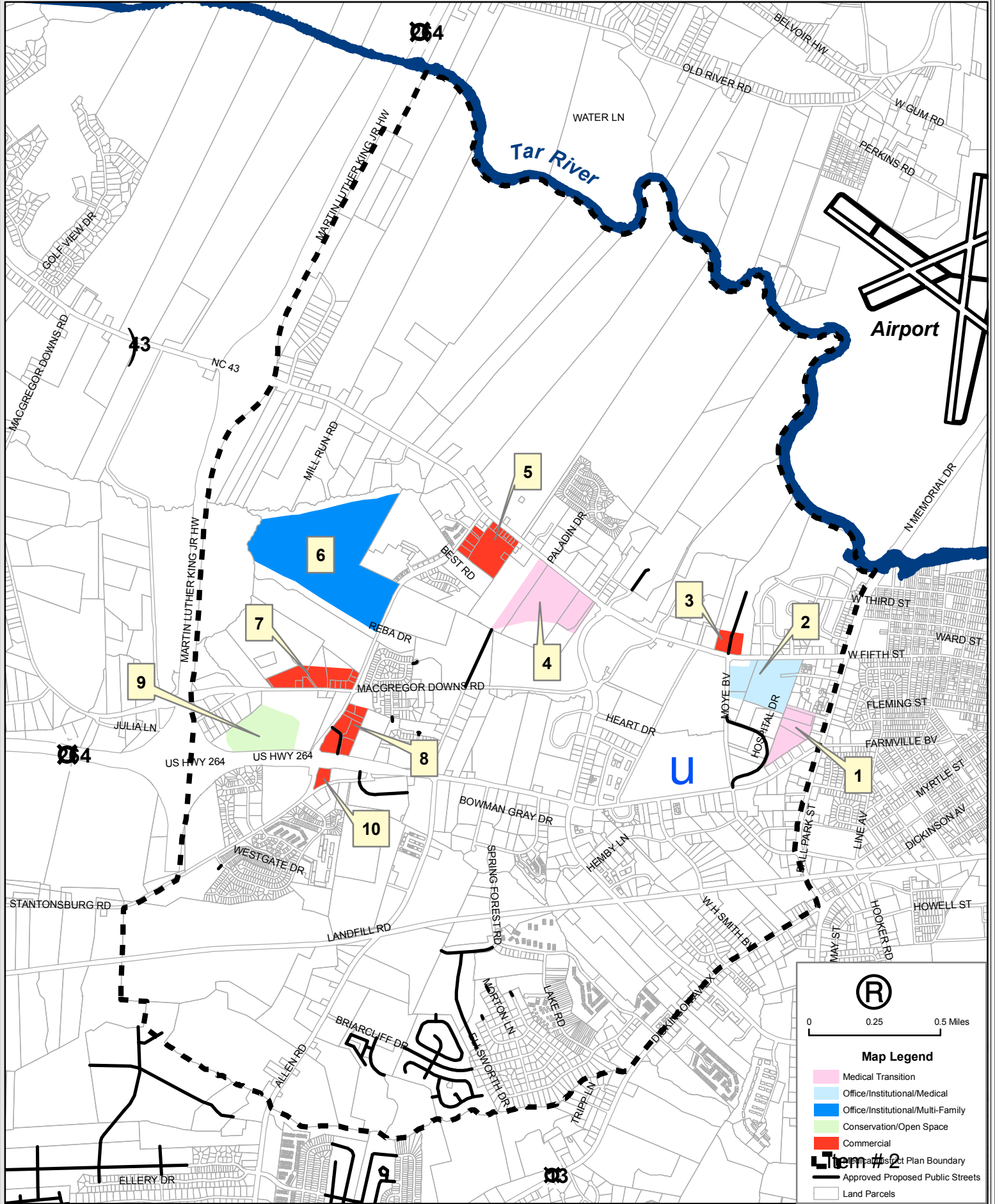
Land Use Plan Category	Acres	% Change of LUP Category
Commercial	53.02	20.83%
Conservation/Open Space	23.40	9.19%
Medical Transition	47.49	18.66%
Office/Institutional/Medical	26.34	10.35%
Office/Institutional/Multi-Family	104.26	40.96%
<b>Totals</b>	<b>254.51</b>	<b>100.00%</b>





# Future Land Use Plan Map - Proposed Changes

December 20, 2007



**22. Proposed Future Land Use Plan Map (includes Recommended Changes)**

<b>Land Use Plan Category</b>	<b>Acres</b>	<b>% of Medical Area</b>
Commercial	288.49	6.40%
Conservation / Open Space	1,516.80	33.63%
High Density Residential	564.16	12.51%
Industrial	163.63	3.63%
Medical Core	162.12	3.59%
Medium Density Residential	389.94	8.65%
Medical Transition	190.35	4.22%
Office / Institutional / Medical	177.58	3.94%
Office / Institutional / Multi Family	1,057.23	23.44%
<b>Totals</b>	<b>4,510.30</b>	<b>100.00%</b>

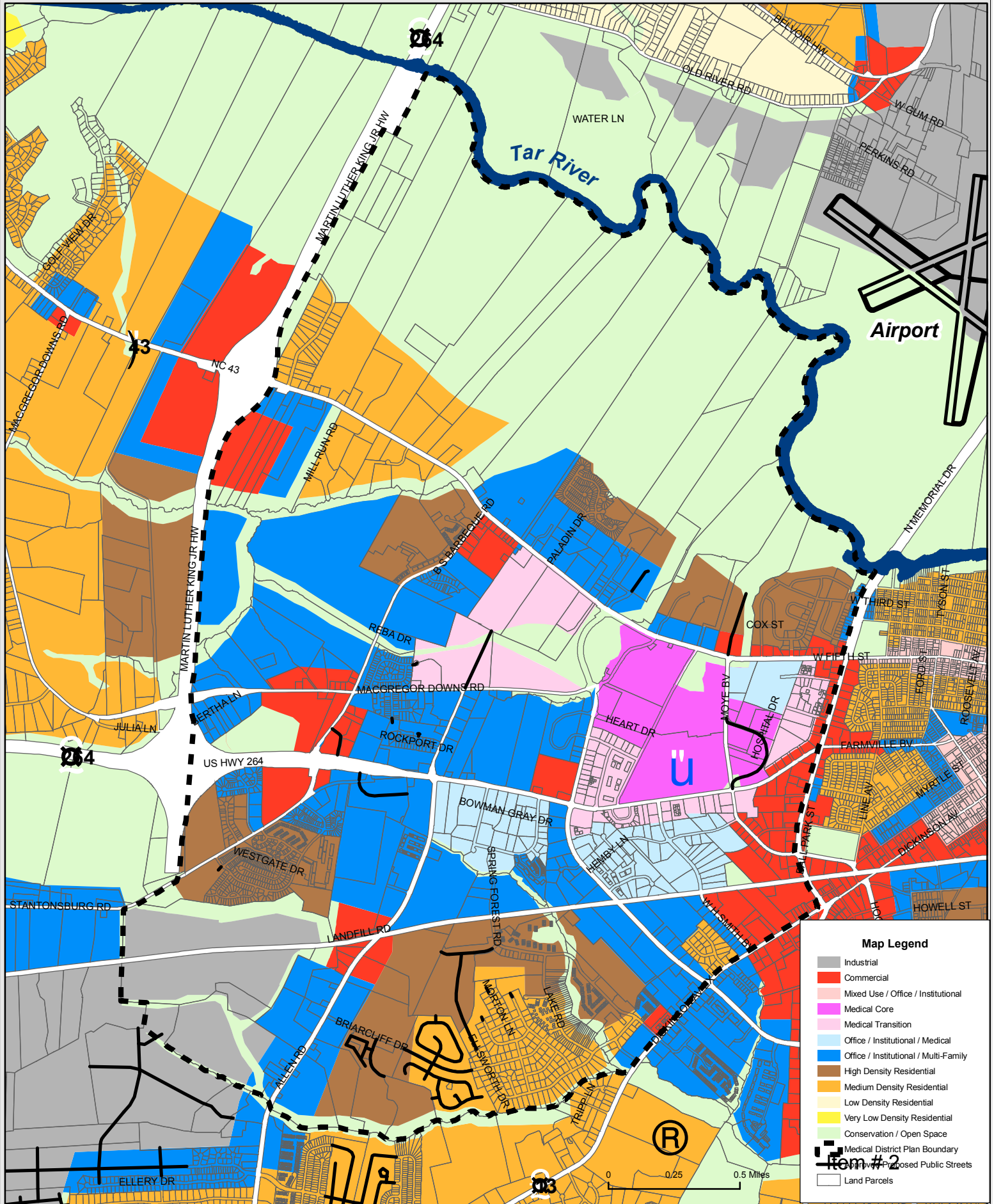




# Proposed Future Land Use Plan Map - Including Changes

December 20, 2007

Attachment number 7  
Page 58 of 62



### Map Legend

- Industrial
- Commercial
- Mixed Use / Office / Institutional
- Medical Core
- Medical Transition
- Office / Institutional / Medical
- Office / Institutional / Multi-Family
- High Density Residential
- Medium Density Residential
- Low Density Residential
- Very Low Density Residential
- Conservation / Open Space
- Medical District Plan Boundary
- Proposed Public Streets
- Land Parcels

### 23. Supplemental Information (Medical District Specific)

#### Rezoning Actions List (1986 through 2007)

Case #	Applicant	Location	From	To	Acres	Month
85-28	City of Greenville Medical Arts Comm. (John Kane Prop)	Arlington Boulevard and Stanton burg Road	CS	MD-4	16.50	9/1/1985
86-3	STP Properties; Jon Day	Allen Road and south of Norfolk Southern RR	RA20	R6	35.41	4/10/1986
			RA20	O&I	12.36	8/10/2004
			RA20	R6	4.18	7/20/2004
86-17	Medical District Study 1986	Medical District	HC	MD-1	352.00	11/1/1986
			O&I			
			MA			
			R6			
86-17	Medical District Study 1986	Medical District	MA	MD-2	370.00	11/1/1986
			O&I			
			R6			
			RA20			
86-17	Medical District Study 1986	Medical District	CS	MD-3	328.00	11/1/1986
			R6			
			O&I			
			MA			
			CH			
			RA20			
86-17	Medical District Study 1986	Medical District	O&I	MD-5	440.00	11/1/1986
			R6			
			CH			
			RA20			
86-17	Medical District Study 1986	Medical District	CH	MD-6	89.00	11/1/1986
			CS			
			CDF			
86-17	Medical District Study 1986	Medical District	R6	MD-7	154.00	11/1/1986
			RA20			
86-20	ETJ Extension MD- 7	Medical District	none	MD-7	571.00	12/1/1986
86-21	McGeorge-Maxwell	Medical District	MD-5	MD-3	27.00	1/1/1987
87-10	ETJ Extension	Medical District	ETJ	MD-7	140.00	6/1/1987
87-15	Rosa Bradley	Planning Office MA Zone-Hwy 11 North	MA	O&I	0.86	8/1/1987
87-20	Green Farm (Greenville Prop)	Stantonsburg Road (Westpointe area)	MD-7	MD-3	17.02	11/1/1987
			MD-7	MD-4	6.12	
			MD-7	PUD	100.97	
88-12	Greenville Surgeons Properties	South of John Hopkins Drive	MD-5	MD-3	11.00	6/1/1988
88-18	J. Bryant Kittrell	Between Stantonsburg Road and MacGregor Downs Road and east of Allen Road	MD-3	MD-5	0.44	10/1/1988
			MD-5	MD-3	0.44	

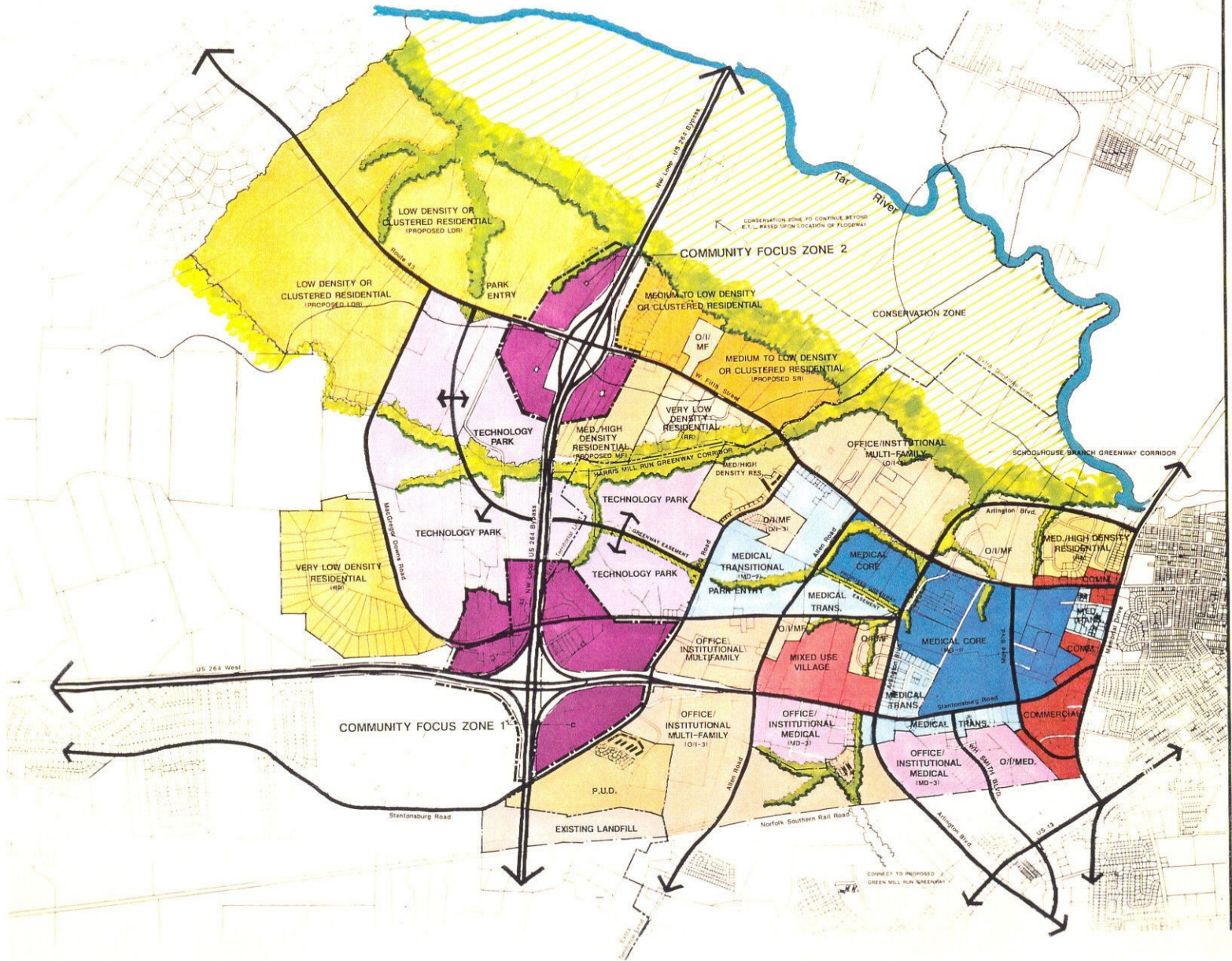
88-29	Collice C. Moore	Dickinson Avenue Extension and east of Westwood Subdivision	RA20	O&I-II	9.00	12/1/1988
			R9	CS	21.00	
89-2	Park West Properties	US Hwy 264 and north of Stantonsburg Road	MD-7	MD-3	29.144+	3/9/2004
89-45	James M. Moye	Off Stantonsburg Road	MD-2	MD-3	20.08	5/9/1991
89-49	C.T. Spruill, Etal	South of Stantonsburg Road	MD-2	MD-3	57.00	5/9/1991
89-50	C.T. Spruill, Etal	East and west of the proposed Moye Boulevard	MD-2	MD-6	1.69	5/9/1991
	Medical Shopping Center		MD-2	MD-6	0.90	
			MD-6	MD-4	0.03	
			MD-2	MD-4	3.29	
90-4	Donny Hemby	Stantonsburg Road and west of Medical Shopping Center	MD-2	MD-3	19.73	3/20/2004
90-11	STP Properties	Allen Road	RA20	R6	50.20	5/10/2004
				R9	21.00	
90-14	Nisbet, Kittrell Etal	NC Hwy 43 (Paladin West Subdivision)	MD-5	MD-3	2.54	6/14/2004
90-17	STP Properties	East of Allen Road	RA20			7/12/2004
			FW	R6	23.22	
90-22	K & F Leasing Co.	NC Highway 43 (Paladin West Subdivision)	MD-5	MD-3	2.68	10/11/2004
90-28	C.T. Spruill Etal	Moye Boulevard (Medical Shopping Center Subdivision)	MD-4	MD-2	0.98	12/13/2004
			MD-4	MD-6	2.10	
91-3	Lillian Allen Jenkins	Allen Road and Norfolk Southern RR	MD-7	MD-5	21.98	4/11/2004
91-6	Melvin R. Sugg	NC Highway 43		MD-3	15.00	5/9/2004
91-7	James H. Justice, Jr.	NC Highway 43	MD-1	MD-2	3.57	9/1/1991
91-9	Grace B. Tripp	North of Lake Ellsworth Subdivision	MD-5	MD-3	22.03	8/8/2004
			RA-20	R6	66.43	
91-10	Lake Placid Development Company of Greenville	North of Lake Ellsworth Subdivision	R6	R6S	3.03	8/8/1991
			R6	R6S	1.89	8/8/1991
			RA20	R6S	0.02	8/8/1991
			R6	R6S	2.29	8/8/1991
			R6	R6S	2.12	8/8/1991
91-11	Robert S. Weeks	Allen Road and south of Norfolk Southern RR	RA20	R6	30.58	8/8/1991
				R6A	79.05	
93-20	Kelly Barnhill & DJL Partnership	Stantonsburg Road and Radio Station Road	MD-3	MD-5	13.31	11/10/2004
93-21	Park West Properties (Derek Dunn)	Stantonsburg Road (across from Grovemont Drive)	MD-3	O&I	17.10	1/13/1994
93-23	GKS Investments (Steve Cohen)	Along the southern right-of-way of Radio Station and west of Allen Road	MD-7	MD-5	2.62	1/13/1994
94-22	James A. Evans, etal	Eastern right-of-way of Arlington Boulevard and north of Norfolk Southern RR	MD-2	MD-3	8.34	11/10/1994
95-13	Pattie Worthington ETAL	West Arlington Boulevard and west of Med-Moore Park Subdivision	MD-2	MD-3	9.33	9/14/1995
95-14	Vance Harrington ETAL	B's BBQ Road	MD-7	R15S	36.36	8/10/1995
			MD-7	R6	91.21	8/10/1995
95-15	Park West Properties	South of US Hwy 264 and north of Park West Subdivision	MD-3	O&I	10.00	8/10/1995
96-02	Vance Harrington, ETAL	East of B's BBQ Road and 1,400 feet north of MacGregor Downs Road	MD-2	R6	24.15	2/8/1996
96-07	James A. Evans	West of Arlington Boulevard and north of Dickinson Avenue	RA20	O&I-II	6.54	4/11/1996
97-01	D.C.W. Associates (Collice Moore)	West of Memorial Drive, 150 feet south of West Fifth Street, being the former Fast Fare site,506 Memorial Drive	MD-6	CS	0.59	2/13/1997

97-32	DJL Partners	Northeast corner of Stantonsburg Road and Westpointe Drive, and south of Radio Station Road	MO	O	2.85	2/12/1998
98-17	Pitt County Landfill Property	Adjacent to the west end of Landfill Road, adjacent to the north and south sides of Norfolk Southern RR, and 900 feet south of Westpointe Subdivision	RA20	IU	156.41	8/13/1998
			None	IU		
98-32	Bill Clark Construction Co. (Palmer Property)	Northeast corner of B's BBQ Road and MacGregor Downs Road	MRS	MR	22.05	12/10/1998
99-15	EMW Properties	Adjacent to the western right-of-way of Arlington Boulevard, adjacent to the southern right-of-way of the Norfolk Southern RR and 290 feet southwest of Medical Cross Drive	RA20	MO	8.38	6/10/1999
99-19	Pattie C. Worthington, etal	Southeast corner of Arlington Boulevard and Carolina and Northwestern RR and northwest of Westwood Subdivision	R9	MO	23.16	11/8/1999
				R9S	0.16	
00-04	Reggie Spain Construction (DJL Partners)	Southwest corner of Stantonsburg Road and Westpointe Drive	MO	MR	0.86	2/10/2000
00-28	K&F Leasing, LLC	Northwest corner of the NC HWY 43 and Paladin Drive	MR	MO	2.91	10/12/2000
00-31	Thomas F. Taft, Sr.	Adjacent to the western right-of-way of Allen Road, adjacent to the northern right-of-way of US Hwy 264 and immediately south of Carrington Square Subdivision	MO	MR	7.26	11/9/2000
00-36	FTY Pirates, LLC & STR Properties, LLC	Adjacent to the northern right-of-way of Norfolk and Southern RR, 170± feet west of Moye Boulevard and east of Med-Moore Park, Phase III	MS	MO	10.93	1/11/2001
			MS	MCH	8.21	
01-05	Thomas F. Taft, Sr	300± feet north of US Hwy 264 and south of Carrington Square Subdivision	MO	MR	0.32	3/8/2001
01-06	American Cancer Society	850± feet east of Allen Rd, 170± feet south of MacGregor Downs Road and north of the ViQuest Wellness Center	MR	MO	1.32	3/8/2001
01-09	Hilda Hudson Upton	Adjacent to the northern right-of-way of MacGregor Downs Road, north of the intersection of MacGregor Downs Road and Allen Road and 950± feet east of B's BBQ Road	MRS	MS	27.41	4/12/2001
01-23	Thomas G. Jefferson & Aileen Jefferson	150+ feet north of NC Hwy 43, east of Moyewood Subdivision and north of the Beltone Hearing Aid Office	R6	CDF	0.69	8/9/2001
02-07	Dartmouth Road Investments	Adjacent to the northern right-of-way of US Hwy 264 By-pass, west of Waterford Place Apartments and 600± feet east of B's BBQ Rd	MO	MR	6.09	4/11/2002
			MO	MR	1.70	
02-09	Margaret P. McGeorge & Joe P. Gelzer	400+ feet north of NC Hwy 43, west of Moyewood Subdivision and east of Treybrook Apartments	MO	MR	19.07	6/13/2002
02-18	Hicks I. Pollard Estate	Southwest corner of US Hwy 264 and Stantonsburg Road	MRS	CG	18.24	9/12/2002
02-19	Hicks I. Pollard Estate	Southwest corner of MacGregor Downs Road and B's BBQ Road, extending south to US Hwy 264	MRS	CG	5.40	9/12/2002
02-20	Hicks I. Pollard Estate	Adjacent to the western right-of-way of B's BBQ Road, north of MacGregor Downs Road and west of Mimosa MHP	MRS	R6	33.72	9/12/2002
02-26	George Frederic Salle	Northwest corner of Sixth Street and Memorial Drive	MS	MCH	0.32	12/12/2002

02-29	Max Pollard Heirs	Adjacent to the northern right-of-way of Stantonsburg Road, south of US Hwy 264 and west of Park West Subdivision	MRS	OR	21.64	1/9/2003
03-06	HMM Investments	North of US HWY 264 Business, south of MacGregor Downs Road and west of B's BBQ Road	MRS	CG	45.33	5/8/2003
04-09	Amos J. Evans	Northwest corner of Arlington Boulevard and Dickinson Avenue	RA20	O	2.76	5/13/2004
04-23	Thomas F. Taft, Sr.	Northeast corner of Stantonsburg Road and B's BBQ Road	MR	MO	9.53	2/10/2005
05-11	Bypass Properties III, LLC	South of US Hwy 264 and Radio Station Road, 500 feet west of Allen Road and north and south of Landfill Road	MRS	MO	17.45	8/11/2005
			MR	MO	2.61	8/11/2005
			MRS	MR	21.14	8/11/2005
			MRS	MCH	11.98	8/11/2005
			MRS	MCH	1.15	8/11/2005
05-25	JFJ Enterprises, LLC	Southeast corner of B's BBQ Road and McGregor Downs Road	MR	MO	4.08	11/10/2005
05-26	2004 Cumberland, LLC	Southeast corner of Allen Road and the Norfolk Southern RR	R6	CG	7.32	11/10/2005
06-03	Medford Pointe, Inc.	Along the eastern right-of-way of Allen Road, south of the Norfolk Southern RR, and west of Lake Ellsworth Subdivision	R6	OR	9.223	4/13/2006
			R9	R6S	20.789	4/13/2006
			R6	MO	5.553	4/13/2006
06-04	Judith Allen Vandiford	Along the western right-of-way of Allen Road and south of the Norfolk Southern RR	MRS	MCH	1.89	4/13/2006
06-05	Anne A. Hardee & Judith A. Vandiford	Along the eastern right-of-way of Allen Road and south of the Norfolk Southern RR	RA20	R6	21.97	4/13/2006
06-13	Robert Barnhill (U.S. 264 Bypass)	Along the eastern right-of-way U.S. 264 Bypass between NC 43 and MacGregor Downs Road	RA20	R6	60.21	8/10/2006
06-15	Community Development Department	Lake Ellsworth: Located east of Arlington Blvd., north of Dickinson Ave., and south of the Norfolk Southern Rail Road.	RA20 and R6	R6S	75.43	9/14/2006
07-18	Allen Thomas	Southeast corner of Dickinson Avenue and Arlington Boulevard	RA20, O	MO	7.70	9/13/2007
07-25	Sheila M. Johnson	Along the western right-of-way of Dickinson Avenue, south of Westwood Drive and north of Arlington Boulevard	R9	O	0.40	12/13/07

### Future Land Use Plan Map Actions List (1997 through 2007)

Case #	Applicant	Location	From	To	Acres	Month
06-01	Medford Pointe	Along the eastern right-of-way of Allen Road, south of commercial component of the Allen Road and Norfolk Southern RR Focus Area, 1,600 feet north of Green Mill Run and 600 feet deep.	HDR	OIMF	15	04/13/06
07-04	Kevin Haltigan	Along the eastern right-of-way of Allen Road, 450 feet south of Briarcliff Drive, 150 north of Green Mill Run and 550 deep.	HDR	OIMF	24	11/8/07



**LEGEND**

- MEDICAL CORE (MD-1)
- MEDICAL TRANSITIONAL (MD-2)
- OFFICE/INSTITUTIONAL/MEDICAL (MD-3)
- OFFICE/INSTITUTIONAL/MULTI-FAMILY (OI-MF)
- MIXED USE VILLAGE
- COMMERCIAL
- PLANNED UNIT DEVELOPMENT
- MEDIUM TO HIGH DENSITY RESIDENTIAL (RH) (PROPOSED MF)
- MEDIUM TO LOW DENSITY RESIDENTIAL (PROPOSED SR)
- LOW DENSITY OR CLUSTERED RESIDENTIAL (PROPOSED LDR)
- VERY LOW DENSITY RESIDENTIAL (RR)
- CONSERVATION ZONE
- COMMUNITY FOCUS ZONE 1
- COMMUNITY FOCUS ZONE 2
- TECHNOLOGY PARK

ZONING CLASSIFICATIONS LISTED ARE THOSE WHICH ARE CURRENTLY MOST COMPATIBLE WITH THE LAND USE RECOMMENDED AND ZONING MODIFICATIONS MAY BE REQUIRED.

**LAND USE PLAN 'A'**  
MARCH 22, 1993

GRAPHIC SCALE  
0 500 1000 1500 2000

NORTH





# City of Greenville, North Carolina

Meeting Date: 2/25/2013  
Time: 6:00 PM

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**Title of Item:** Discussion of Proposed Improvements to South Greenville Recreation Center

**Explanation:** **Abstract:** Schneider Electric is currently conducting a Guaranteed Energy Savings Performance Project with the City. South Greenville Recreation Center is one of many City facilities scheduled for improvements associated with this project. Meanwhile, the City has had preliminary discussions with Pitt County Schools regarding a potential partnership in replacing the aging facility with a new facility. As such, the City Council is being asked to discuss future plans for South Greenville Recreation Center, including whether staff should move forward with scheduled improvements associated with the Guaranteed Energy Savings Performance Project estimated at \$67,893.

**Explanation:** Schneider Electric is currently conducting a Guaranteed Energy Savings Performance Project with the City. South Greenville Recreation Center is scheduled to receive an estimated \$67,893 worth of energy efficiency related improvements as part of this project. Meanwhile, the City has had preliminary discussions with Pitt County Schools regarding a potential partnership in replacing the aging South Greenville Recreation Center, which is currently utilized by Pitt County Schools, with a new facility that would serve the needs of both entities for years to come. The cost of this new facility is preliminarily estimated at \$3.1 million with any potential cost share arrangement with Pitt County Schools not yet determined.

**Fiscal Note:** To be determined

**Recommendation:** Discuss the potential for reconstructing South Greenville Recreation Center and provide staff with direction on how to proceed with scheduled improvements associated with the Guaranteed Energy Savings Performance Project.

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**Attachments / click to download**

 [South Greenville Slide](#)

 [Revised Plan](#)

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# South Greenville Recreation Center

Implement a total reconstruction project jointly with Pitt County Schools.

Total Cost: \$3.1 million  
(50/50 Split with PCS =  
\$1.55 Million)



Item # 3

# MASTER PLAN



## VICINITY MAP



## LEGEND

- |  |   |
|--|---|
| <p><b>(A)</b> OPTION A - GYMNASIUM AND CENTER RENOVATIONS</p> <ul style="list-style-type: none"> <li>- GYMNASIUM INTERIOR RENOVATIONS, 6690 SQ. FT.</li> <li>- BUILDING RENOVATIONS             <ul style="list-style-type: none"> <li>- Two Offices</li> <li>- Computer Lab</li> <li>- Weight Room</li> <li>- ADA Compliant Restrooms</li> <li>- Multi-Purpose Room</li> </ul> </li> <li>- PAVED PARKING LOT</li> </ul> | <p><b>(C)</b> OPTION C - SPORTS FIELDS &amp; SITE IMPROVEMENTS</p> <ul style="list-style-type: none"> <li>- BASEBALL FIELD REMOVATIONS             <ul style="list-style-type: none"> <li>- New Turf</li> <li>- Irrigation System</li> <li>- Sports Field Lighting</li> <li>- Bleachers</li> <li>- Multi-Purpose Room</li> </ul> </li> <li>- MULTI-PURPOSE FIELD             <ul style="list-style-type: none"> <li>- Goal Posts</li> <li>- Irrigation System</li> <li>- Sports Field Lighting</li> <li>- Fences</li> </ul> </li> <li>- SITE FURNISHINGS             <ul style="list-style-type: none"> <li>- Water Fountain</li> <li>- Benches</li> <li>- Trash Receptacle and Recycling Bin</li> <li>- Billboards</li> </ul> </li> <li>- COVERED WALKWAY</li> </ul> |
| <p><b>(B)</b> OPTION B - BUILDING ADDITION</p> <ul style="list-style-type: none"> <li>- BUILDING EXPANSION, 4,645 SQ. FT.</li> <li>- Multi-Purpose Room</li> <li>- Locker Rooms</li> <li>- Dance Studio</li> <li>- Conference Room</li> <li>- PAVED PARKING LOT</li> </ul>   |   |

**SOUTH GREENVILLE RECREATION CENTER**  
**GREENVILLE RECREATION & PARKS**  
 DECEMBER, 2012

Item # 3





# City of Greenville, North Carolina

Meeting Date: 2/25/2013  
Time: 6:00 PM

**Title of Item:** Proposed City Council Workshop Schedule

**Explanation:** **Abstract:** The City Manager wishes to discuss multiple topics of importance in detail in a workshop setting over the next several months. A proposed schedule for these workshops is provided for Council's review and consideration.

**Explanation:** The City Manager wishes to discuss multiple topics of importance in a workshop setting over the next several months. A proposed schedule is attached. All of the proposed dates and times are either prior to currently scheduled City Council meetings or in place of the third monthly meetings in an attempt to accommodate everyone's availability and schedule. The topics to be discussed at the proposed workshops include Sanitation (March 7); Budget and Bradford Creek Golf Course (March 25); Economic Development Incentives (April 8); and Stormwater and Comprehensive Crime Plan (April 22).

**Fiscal Note:** N/A

**Recommendation:** Discuss, and consider for adoption, the proposed workshop schedule.

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Attachments / click to download

 [Proposed\\_Workshop\\_Schedule\\_2013\\_948186](#)

## Proposed Workshop Schedule

March 4 6:00 PM Regular City Council Meeting  
*March 7 5:00 PM Workshop: Sanitation*  
March 7 7:00 PM Regular City Council Meeting  
March 25 6:00 PM *Cancel regular meeting to hold workshop*  
*March 25 6:00 PM Workshop: Budget kick-off and Bradford Creek Public Golf Course Action Plan*

*April 8 4:30 PM Workshop: Economic Development Incentives*  
April 8 6:00 PM Regular City Council Meeting  
April 22 6:00 PM *Cancel regular meeting to hold workshop*  
*April 22 6:00 PM Workshop: Stormwater and Comprehensive Crime Plan*