

BOA CASE REVIEW SHEET

CASE: C16-2019-0001

BOA DATE: May 13, 2019

ADDRESS: 1201 W. 38th Street

COUNCIL DISTRICT: 10

OWNER: Steven Spratt, Seton Medical Center

AGENT: Rodney Bennett

ZONING: PUD-NP (Windsor Road)

AREA: Lot 1, Seton Medical Center

VARIANCE REQUEST: Replace freestanding sign within 12 feet of right of way

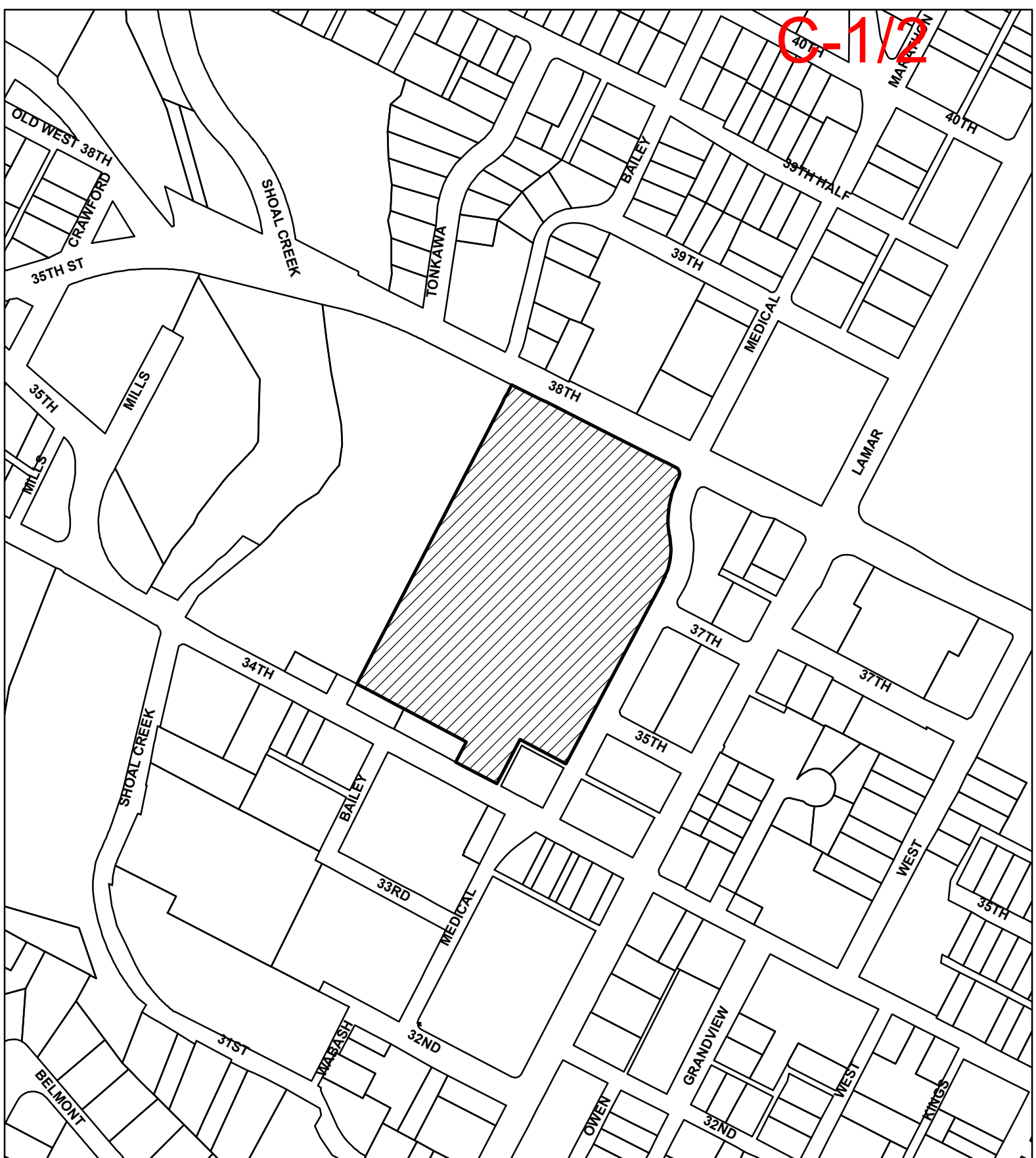
SUMMARY: Updated wayfinding sign

ISSUES: 2 signs permitted, 4 existing, 1 being replaced

	ZONING	LAND USES
<i>Site</i>	PUD – NP (Windsor Road)	Seton Medical Center
<i>North</i>	LR-V and GR	Commercial
<i>South</i>	CS-NP (Windsor Road)	Medical Offices
<i>East</i>	CS-V-NP (Windsor Road)	Commercial, Medical Offices
<i>West</i>	GO-V-NP (Windsor Road)	Medical Offices

NEIGHBORHOOD ORGANIZATIONS: Austin Independent School District; Austin Neighborhoods Council; Bike Austin; Central Austin Community Development Corporation; Central West Austin Neighborhood Plan Contact Team; Friends of Austin Neighborhoods; Homeless Neighborhood Association; Neighborhood Empowerment Foundation; Preservation Austin; SEL Texas; Shoal Creek Conservancy; Sierra Club, Austin Regional Group

C-1/2



SUBJECT TRACT



PENDING CASE



ZONING BOUNDARY

NOTIFICATIONS

CASE#: C16-2019-0001

LOCATION: 1201 W 38TH STREET



This product is for informational purposes and may not have been prepared for or be suitable for legal, engineering, or surveying purposes. It does not represent an on-the-ground survey and represents only the approximate relative location of property boundaries.

This product has been produced by CTM for the sole purpose of geographic reference. No warranty is made by the City of Austin regarding specific accuracy or completeness.

1" = 333'

Board of Adjustment Sign Variance Application

WARNING: Filing of this appeal stops all affected construction activity.

This application is a fillable PDF that can be completed electronically. To ensure your information is saved, [click here to Save](#) the form to your computer, then open your copy and continue.

The Tab key may be used to navigate to each field; Shift + Tab moves to the previous field. The Enter key activates links, emails, and buttons. Use the Up & Down Arrow keys to scroll through drop-down lists and check boxes, and hit Enter to make a selection.

The application must be complete and accurate prior to submittal. All information is required (if applicable).

For Office Use Only

Case # _____ ROW # _____ Tax # _____

Section 1: Applicant Statement

Street Address: 1201 W. 38TH STREET

Subdivision Legal Description:

SETON MEDICAL CENTER

Lot(s): 1 Seton Medical Center

Block(s): _____

Outlot: _____

Division: _____

Zoning District: PUD

Sign District: _____

I/We Ann Lewis of Lewis Sign on behalf of myself/ourselves as
authorized agent for Ascension Seton affirm that on

Month May ☐, Day 13 ☐, Year 2019 ☐, hereby apply for a hearing before the
Board of Adjustment for consideration to (select appropriate option below):

☒ Erect ☐ Attach ☐ Complete ☐ Remodel ☐ Maintain ☐ Other: _____

Type of Sign: 1 FREESTANDING SIGN

Portion of the City of Austin Land Development Code applicant is seeking a variance from:

CHAPTER 25-10-131-C-D-E

Section 2: Variance Findings

The Board must determine the existence of, sufficiency of, and weight of evidence supporting the findings described below. In order to grant your request for a variance, the Board must first make one or more of the findings described under 1, 2, and 3 below; the Board must then make the finding described in item 4 below. If the Board cannot make the required findings, it cannot approve a sign variance.

Therefore, you must complete each of the applicable Findings Statements as part of your application. Failure to do so may result in your application being rejected as incomplete. Please attach any additional supporting documents.

I contend that my entitlement to the requested variance is based on the following findings:

1. The variance is necessary because strict enforcement of the Article prohibits any reasonable opportunity to provide adequate signs on the site, considering the unique features of the site such as dimensions, landscaping, or topography, because:

The ~~5~~ signs are replacing existing signs which are wayfinding directionals. The hospital fronts on four streets and needs adequate signs for the safety of traffic flow and finding the emergency room.

—OR—

2. The granting of this variance will not have a substantially adverse impact upon neighboring properties, because:

The ~~5~~ signs will only help the surrounding properties and will cause no adverse effect.

—OR—

3. The granting of this variance will not substantially conflict with the stated purposes of this sign ordinance, because:

These signs are directional and wayfinding to the emergency room and parking for safety and traffic flow. Purpose of signs is for information.

AND,

4. Granting a variance would not provide the applicant with a special privilege not enjoyed by others similarly situated or potentially similarly situated, because:

No special privilege will be enjoyed, just life saving information. This hospital covers a city block and has four entrance driveways. We are replacing existing signs.

Section 3: Applicant Certificate

I affirm that my statements contained in the complete application are true and correct to the best of my knowledge and belief.

Applicant Signature: AB Lewis Date: 4-9-19

Applicant Name (typed or printed): ANN B LEWIS

Applicant Mailing Address: PO BOX 1665

City: BUDA State: TX Zip: 78610

Phone (will be public information): (512) 361-9286

Email (optional – will be public information): [REDACTED]

Section 4: Owner Certificate

I affirm that my statements contained in the complete application are true and correct to the best of my knowledge and belief.

Owner Signature: Steven C Spratt Date: 4/8/19 SIGN HERE

Owner Name (typed or printed): Steven Spratt

Owner Mailing Address: 101 S. Hanley Road

City: Clayton State: MO Zip: 63105

Phone (will be public information): (314)-733-8795

Email (optional – will be public information):

Section 5: Agent Information

Agent Name: Rodney Bennett

Agent Mailing Address: 12618 EAGLE NEST DR

City: BUDA State: TX Zip: 78610

Phone (will be public information): (512) 627-7227

Email (optional – will be public information): [REDACTED]

SAVE



Sign Recommendation

SECTIONS: Brand Moments Entrances Interior Wayfinding Regulatory Approach Photos

E-5

Existing

Sign Type: Pylon
Quantity: 1
Location: Visitor Parking
Illumination: Internal
Approx. Size:
H: 3'-10"
W: 3'-10"
OAH: 13'-3"
HOG:
Comment:



Context



Detail Side A



Detail Side B

Action: Replace

Make Good:

Recommended

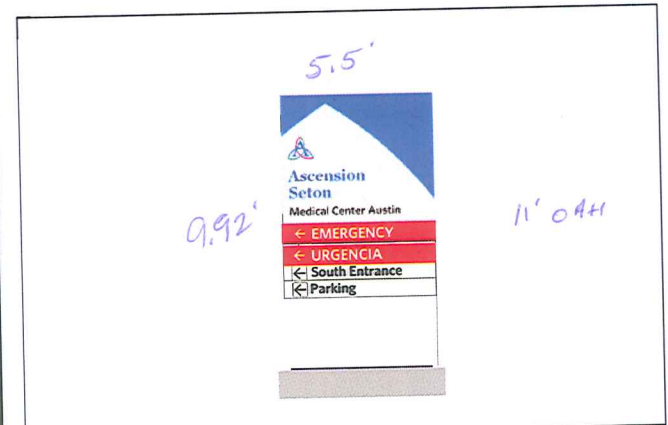
TECHNICAL SURVEY IS REQUIRED PRIOR TO SIGN MANUFACTURING

Sign Type: Monument
Sign Code: MON.56
Quantity: 1
Attachment: Base/Plinth
Illumination: Illuminated
Approx. Size:
H: 9'-11"
W: 5'-6"
OAH: 11'-0"

Comment: Remove existing sign and pedestal. Install new. Make final electrical connect. Dress up landscaping.



Recommended - Side A



Recommended - Side B

Code Compliant:

Survey area of sign. Need to determine property line and if there are any setbacks or easements.

54.07 SF

54.56 SF

RETURN TO WAYFINDING
RETURN TO BRAND MOMENTS

Sign Recommendation

SECTIONS:

Brand Moments

Entrances

Interior

Wayfinding

Regulatory

Approach Photos

E-3

Existing

Sign Type: Pylon
Quantity: 1
Location: Visitor Parking
Illumination: Internal
Approx. Size:
H: 3'-10"
W: 3'-10"
OAH: 13'-3"
HOG:
Comment:

Action: Replace

Make Good:

Recommended

TECHNICAL SURVEY IS REQUIRED PRIOR TO SIGN MANUFACTURING

Sign Type:
Sign Code:
Quantity:
Attachment:
Illumination:
Approx. Size:
H:
W:
OAH:
Comment: Remove existing sign. Leave base. Install new sign on pedestal.
Connect power.



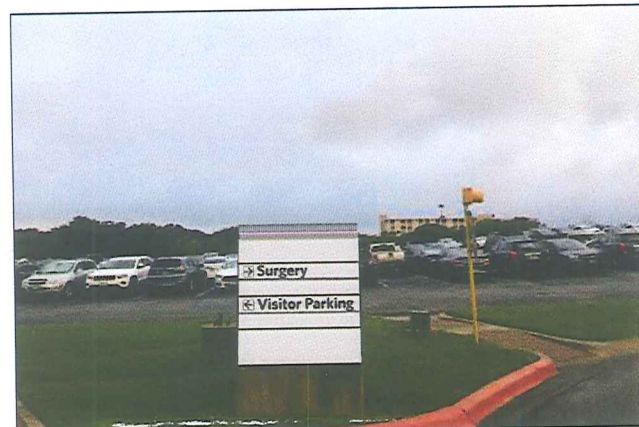
Context



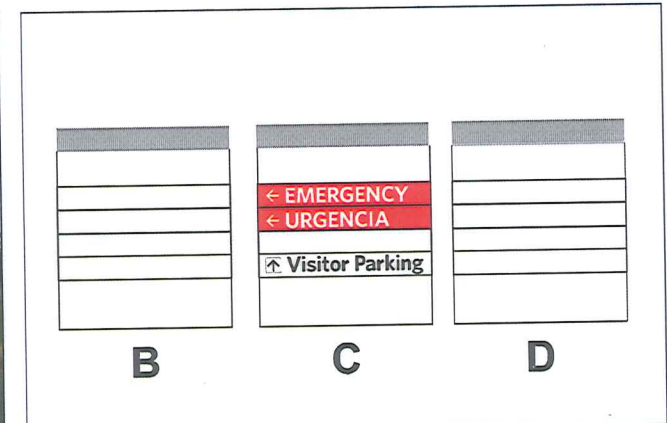
Detail



Detail



Recommended - Side A



Recommended

Survey sign. Measure H, W, D of pedestal.
Determine existing mounting method.

RETURN TO WAYFINDING

8' 20SF

Sign Recommendation

E-4

SECTIONS: Brand Moments Entrances Interior Wayfinding Regulatory Approach Photos

Existing

Sign Type: Monolith
Quantity: 1
Location: Secondary Entrance
Illumination: None
Approx. Size:
H: 2'-0"
W: 2'-0"
OAH: 6'-2"
HOG:
Comment:

Action: Replace

Make Good:

Recommended

TECHNICAL SURVEY IS REQUIRED PRIOR TO SIGN MANUFACTURING

Sign Type: Wayfinding
Sign Code: WF.20
Quantity: 1
Attachment: Base/Plinth
Illumination: Internal

Approx. Size:
H: 6'-0"
W: 2'-9 1/2"
OAH: 6'-6"

Comment: **internal illumination recommended for ER wayfinding.** Remove existing sign and pedestal. Install new sign. Quote running electrical and final connection.

Code Compliant:



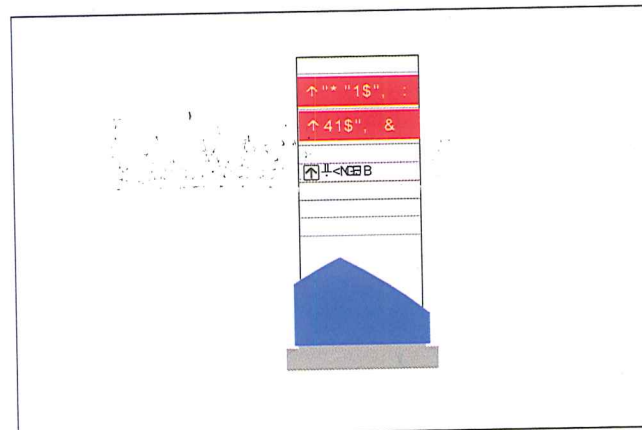
Context



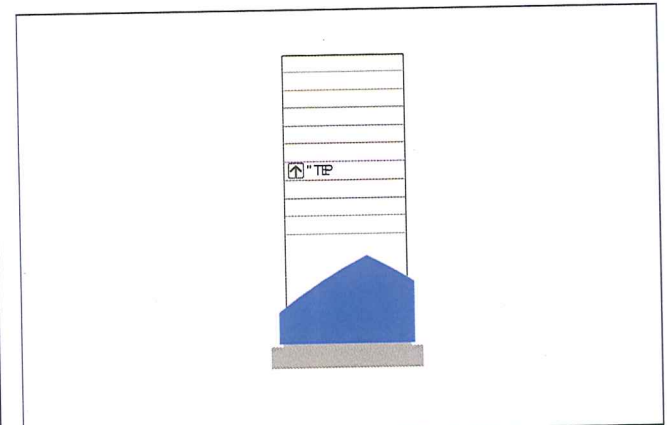
Detail Side A



Detail Side B



Recommended - Side A



Recommended - Side B

Survey sign. Determine existing mounting method.
Measure H, W and depth of pedestal.
Probe to determine depth of foundation.

C-1/10



C-1/11



C-1/12



C-1/13

