

**OFFICE DE CONSULTATION PUBLIQUE DE MONTRÉAL**

ÉTAIENT PRÉSENTS:            M. JEAN PARÉ, président  
   Mme MARGUERITE BOURGEOIS, commissaire  
   M. ALEX HARPER, commissaire

**PROJETS DE RÈGLEMENTS  
COUR GLEN  
CENTRE UNIVERSITAIRE DE SANTÉ MCGILL (CUSM)  
HÔPITAL DES SHRINERS**

**DEUXIÈME PARTIE**

VOLUME 1

Séance tenue le 15 juin 2005, 19 h  
Trinity Memorial Anglican Church  
2146, rue Marlowe  
Montréal

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## MOT DU PRÉSIDENT

### LE PRÉSIDENT :

5            Bonsoir Mesdames, Messieurs. Je vous souhaite la bienvenue à la deuxième partie de la consultation publique sur le projet du Centre universitaire de santé McGill. Je m'appelle Jean Paré, et je suis commissaire de l'Office de consultation publique de Montréal. Les commissaires qui me secondent sont maître Marguerite Bourgeois et monsieur Alex Harper.

10           Le personnel qui nous accompagne comprend madame Michèle Bertrand, madame Stéphanie Espach et monsieur Rémi Manesse qui sont les analystes de la Commission, maître Alain Cardinal, secrétaire général de l'Office. Sont également présents à la table d'accueil, Luc Doray, Faustin Nsabimana et Benjamin Olivier.

15           L'assemblée de ce soir est enregistrée et sténographiée. L'enregistrement de même que la transcription des notes seront accessibles au public. Alors c'est madame Yolande Teasdale qui s'occupe de la sténographie et monsieur Guy Legendre, de la sonorisation.

20           The meeting of tonight is recorded both on tape and in shorthand and the audio recording and the transcription will be available to the public.

25           Comme je vous l'ai dit l'autre jour, l'Office de consultation publique est régie par la Charte de la Ville de Montréal. Quant aux personnes qui composent la Commission, elles se sont engagées à respecter le Code de déontologie des commissaires. Vous pouvez prendre connaissance de ce Code à la table d'accueil et sur le site Internet de l'Office.

30           Au mois de mai, la Commission a tenu une première série de séances publiques pour vous permettre de vous informer sur le projet. À partir de ce soir, la Commission entendra les opinions et les commentaires de tous ceux et celles qui désirent s'exprimer.

35           Tonight, we will hear those who want to express their views on the McGill University Health Centre project and under related municipal by-law proposals. You've probably noticed that the representatives of the City or the Health Centre are no longer seated at the front like in the previous meetings.

40           Comme en première partie, toute personne qui veut donner son opinion doit s'inscrire. Plusieurs d'entre vous l'ont déjà fait par téléphone ou par courriel et ont envoyé un mémoire à l'Office. Les autres peuvent s'inscrire à la table d'accueil. Normalement, la Commission entend d'abord les personnes qui se sont enregistrées à l'avance puis celles qui s'inscrivent ce soir. Nous nous efforcerons d'accommoder tout le monde et les préposés de la table d'accueil pourront vous indiquer approximativement à quel moment vous serez entendu.

45 Veuillez noter aussi qu'il y aura une deuxième séance demain soir, ici même, à 19 h.

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50 Contrairement aux séances d'information, on ne peut intervenir qu'une seule fois pour présenter son opinion. Chaque intervenant dispose de dix minutes au maximum et après chaque présentation, mes collègues et moi pouvons poser des questions pour nous assurer de bien comprendre les opinions exprimées. Souvenez-vous que la Commission a déjà lu les mémoires qui lui ont été envoyés d'avance.

55 Par ailleurs, nous avons apporté deux cartes grand format, l'une illustrant la proposition d'implantation du Centre universitaire de santé McGill et l'autre, la proposition relative aux accès et aux infrastructures routières. Vous pourrez vous en servir si vous voulez durant votre présentation, par exemple pour pointer un élément particulier et il y a un pointeur sur la table.

60 Those who want to express themselves must register first. Many of you have already done so by calling the Office de consultation publique and several have submitted a brief that all the commissioners have read carefully. Those who aren't registered yet may give their names at the table near the entrance. We will call them after those who registered in advance.

65 There will be a second hearing tomorrow evening at 7 o'clock in this hall. You may come once to state your views. You will be given ten minutes to do so, after which the Commission may ask a few questions to make sure we fully understand your concerns and your expectations.

70 We have two large maps, one of the Health Centre proposal and the other with the road and access proposal for those of you who want to refer to specific elements or point out some areas.

75 Une fois que nous aurons entendu les commentaires et les opinions de tous ceux qui sont inscrits, je lèverai l'assemblée.

En terminant, j'ai pour tâche principale de favoriser la participation de tout le monde et de permettre à tous de bien se renseigner. Pour y arriver, rien de tel qu'un climat serein où les échanges se font dans le respect mutuel et la courtoisie.

80 Alors vous en avez donné vous-même la preuve la dernière fois, en participant aux séances avec beaucoup de civisme. Donc malgré tout, je ne permettrai aucune forme de manifestation, que ce soit d'approbation ou de désapprobation, ni de remarques désobligeantes, de propos diffamatoires ou d'attitude méprisante.

85 Une fois les séances publiques terminées, la Commission fera rapport de ce qu'elle aura entendu et préparera son avis et ses recommandations à partir de l'information reçue et des opinions exprimées. Le président de l'Office transmettra ce rapport au maire et au président du Comité exécutif de la Ville de Montréal. Il rendra le rapport public quelques jours plus tard.

90 Les personnes intéressées à recevoir ce rapport pourront laisser leur nom et leur adresse à la table d'accueil.

95 Alors j'appelle maintenant le premier intervenant de ce soir, pour l'Association libérale provinciale de NDG, monsieur Dennis Béland.

100 Bonsoir, Monsieur Béland. Alors on vous écoute et comme vous avez déjà envoyé un document, je vous invite à en faire une présentation la plus courte possible parce qu'on pourrait avoir des questions à vous poser.

**M. DENNIS BÉLAND :**

105 Donc mon nom est Dennis Béland, je représente l'Association libérale provinciale de Notre-Dame-de-Grâce. C'est une Association qui a un intérêt depuis à peu près quatre ans dans ce projet. Comme on dit dans notre mémoire, nous appuyons avec enthousiasme l'arrivée du nouveau CUSM dans notre communauté. Nous croyons surtout que cette institution va avoir des impacts positifs sur la qualité des soins de santé dans notre communauté et aussi dans la province.

110 We also believe that the new MUHC will have a strong positive impact economically both directly in our community in terms of indirect attraction of services but also in the greater Montreal area as an anchor for the biotechnology, biomedical industry that is so important to our City.

115 Nous avons listé quelques avantages du projet. À notre avis, les principaux avantages plutôt que de lire la liste, je vais mentionner rapidement : d'abord, le projet ramène un hôpital dans notre communauté. Ceux qui étaient là au milieu des années 90 se rappellent du tollé de la population locale quand l'Hôpital Reine-Élisabeth a été retiré de notre communauté.

120 Nous voyons aussi comme étant positif le fait que le site, un ancien site industriel, sera décontaminé selon les normes applicables à un site résidentiel et institutionnel. Parmi les autres avantages, on voit l'arrivée d'une piste cyclable qui va faire un lien entre les côtés Est et ouest de Décarie. On voit comme étant positifs aussi les investissements dans le réseau routier local. Tout le monde dans la salle est familier avec les investissements qui

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seront faits au niveau des bretelles de l'autoroute, aussi au niveau du viaduc du CP du boulevard Décarie et le CP.

130           Donc somme tout, à notre avis, tous ces facteurs sont positifs pour notre communauté et nous considérons que ce projet mérite l'appui du milieu local.

135           We are also pleased with the efforts that the MUHC has been making to consult, in cooperation with yourselves, of course, the local community. We've taken note of the memorandum of understanding that the MUHC has signed with community groups in the three nearby boroughs. We see that as a positive sign of commitment to the local area.

140           But we would also note and hope that Hospital Management will pay particular attention to some of the concerns that have been expressed at these consultations to date. Two particular areas of concern that struck us were first of all measures to mitigate disruptions during the construction period. Again, we see positive signs coming from the Hospital Administration, Hospital Planning Department in terms of, for example, setting up the dedicated phone line for complaints related to decontamination. The measures to control dirt and dust and noise levels that have been taken, the fact that independent agency has been hired to measure noise levels. We see all of this as signs of a serious commitment to  
145           addressing the needs of nearby residents.

150           Another issue that has raised concerns, obviously, are traffic-related issues. One of the areas where we've perhaps received less information than we feel we should receive is in regards to traffic patterns during the construction period. The studies that we've seen to date seemed to focus primarily on traffic patterns once the Hospital is up and running but there seems to be somewhat of a lack of information on traffic patterns during the construction period. More information in that regard, more evidence that mitigation measures are being considered in that regard would be helpful.

155           Another area of concern to our members is just the quantity of vehicular traffic that would be attracted by the Hospital. Again, the studies that have been conducted seem to be highly professional. There's no particular assumptions that we would contest, what we would request though is that the MUHC stick to its game plan, particularly in respect to public transit.

160           One of the principles that the MUHC has presented in terms of its traffic plan is the concept of getting traffic off the local roads as quickly as possible onto the limited access highways and we would ask that the Hospital as well as the ministère des Transports pay as close attention as possible to whether that plan actually comes to fruition, in the sense that if  
165           there is evidence that some drivers are adopting patterns, short cuts and so on that are taking them through the local road network, not getting them off the local road network as it is

desired, we would ask that the MUHC and the MTC address that as quickly as possible if it arises.

170           Donc somme totale, on voit l'arrivée de cette institution comme étant un atout pour notre communauté. On croit et on espère que ça va être un bon voisin et les indices qu'on a à date des gestionnaires de l'Hôpital indiquent que ça va être bien le cas.

175           Merci.

**LE PRÉSIDENT :**

180           Merci à vous, Monsieur Béland. Une première question assez rapide avant de passer peut-être la parole à ma collègue madame Bourgeois. Donc vous accueillez bien, bien sûr, le projet de l'Hôpital, vous dites même que votre groupe s'y est intéressé depuis quatre ans au moins, est-ce qu'il y a des retombées spécifiques que vous attendez pour la collectivité de Notre-Dame-de-Grâce sur le plan social ou économique de la présence de cet établissement?

185           **M. DENNIS BÉLAND :**

190           Les retombées sociales, c'est surtout la question de la qualité des soins de santé. Et nous croyons fermement que cet Hôpital, la modernisation de cette institution va apporter une meilleure qualité, continuité des soins. En plus, juste le fait d'avoir un hôpital dans notre communauté, en terme d'accès aux urgences, et cetera, on le voit comme étant positif.

195           Côté économique, notre perspective c'est que les retombées sont probablement plus indirectes. On n'a pas des grosses institutions de recherche biomédicale, par exemple, dans notre quartier, mais nous avons sûrement des résidents qui travaillent dans cette industrie. En plus, on pourrait parler d'impact indirect au niveau des services, d'offres de service autour de l'Hôpital, que ce soit laboratoires, centres médicaux, même restaurants, et cetera.

200           Donc on constate qu'il y a des possibilités d'emploi à ce niveau-là pour les résidents de cette communauté.

**LE PRÉSIDENT :**

          Très bien, merci. Vous avez abordé la question de la circulation, je vais passer la parole à madame Bourgeois qui a probablement une question pour vous là-dessus.

205 **Mme MARGUERITE BOURGEOIS, commissaire :**

I read from your document here that you have, well you have concerns about the measures that will be taken to mitigate disruption during the construction and also you have concerns about how people will go about controlling disruption post-construction. I'd like you to tell me a little bit more about your thoughts and perhaps details of those concerns. You have given us one example – taking short cuts through roads – I don't know whether, in your working on this document, whether you looked into this issue in more detail, but I would like to hear more about what you had in mind.

215 **M. DENNIS BÉLAND :**

I'll address the post-construction first.

220 **Mme MARGUERITE BOURGEOIS, commissaire :**

Yes. Well both I guess.

**M. DENNIS BÉLAND :**

225 The post-construction, everything indicates that the studies have been done, the solutions are there. It appears positive but no plan is ever perfect, the concern is: is this idea that drivers may find ways to go around the plan by taking short cuts through local roads, and that sort of stuff. So what we'd ask is simply that attention be paid post-construction to whether that sort of activity is occurring and then to rapidly introduce measures to address it.

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We don't have any particular part of a neighbourhood where we predict that will occur, it's more a rapid response, sort of idea that if evidence does appear, residents bring that forward that certain streets are being congested by short cutters and that sort of thing, that it'd be addressed quickly.

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**Mme MARGUERITE BOURGEOIS, commissaire :**

Okay. But do you see that as being more of a City concern? It's not something that can be dealt with by the Hospital structure per se.

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**M. DENNIS BÉLAND :**

I think the hospital can play a role in creating a structure for on-going consultations. But I agree with you, I guess the primary responsibility falls on either the City or the ministère des Transports, probably the City more likely.

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250 As for the during-construction-period, our concern there was that some of our members are of the view that not enough information has been provided to date about the patterns and the impacts during construction. For example, when the viaduct Canadian Pacific is being redone, what's going to happen? Where's the traffic going to go, et cetera. I think people are looking for more information at that level.

**Mme MARGUERITE BOURGEOIS, commissaire :**

255 But during construction, you didn't mention favourably the establishment of that hotline for ...

**M. DENNIS BÉLAND :**

260 Right.

**Mme MARGUERITE BOURGEOIS, commissaire :**

265 But I am not or should I be hearing you mention that you want the establishment of this same kind of service or whatever post-construction because then I would question exactly what structure, what venue that that should take if you have a specific recommendation in that regard.

**M. DENNIS BÉLAND :**

270 No. Post-construction, not a specific recommendation, no.

**LE PRÉSIDENT :**

275 Monsieur Harper?

**M. ALEX HARPER, commissaire :**

280 Moi, je vais poser la question en français. Vous avez mentionné sur les aspects positifs du projet, c'est une piste cyclable. Nous avons eu d'autres mémoires où il y avait beaucoup de commentaires sur la question de la piste cyclable et je me demandais si vous aviez des échanges à ce sujet-là et si vous avez des commentaires qui sont en dehors de ce que vous avez mis dans votre mémoire qui peuvent nous donner un peu votre avis sur cette question-là.

285 **M. DENNIS BÉLAND :**

Non. Pour nous, la question n'était pas très complexe. Ce qu'on a actuellement, c'est un bris dans la piste cyclable quand on arrive à Décarie, donc ce qui crée un danger pour les cyclistes. Nous, le fait que le plan d'aménagement de l'Hôpital comprend une continuité  
290 d'une piste entre l'Est de Décarie et l'ouest de Décarie, pour nous, c'est de toute évidence un aspect positif, mais notre examen n'est pas allé plus loin que ça.

**M. ALEX HARPER :**

295 Donc vous pensez que même si ça va un peu vers le sud, et le trajet va vers le sud pour retourner vers le nord après, que ça ne sera pas un problème majeur?

**M. DENNIS BÉLAND :**

300 On ne l'a pas évalué à ce niveau-là. Encore une fois, tout ce qui est important pour nous, c'est la notion d'une piste continue et donc qui offre une opportunité aux cyclistes qui est beaucoup moins dangereuse que ce qu'il y a aujourd'hui.

**M. ALEX HARPER :**

305 Qui serait plus sécuritaire, en fait.

**M. DENNIS BÉLAND :**

310 Oui, oui.

**M. ALEX HARPER :**

315 Est-ce que je peux poser une deuxième question, Monsieur le président?

**LE PRÉSIDENT :**

Je vous en prie, Monsieur.

320 **M. ALEX HARPER :**

Because that part of your brief is in English, I'll ask the question in English. I was wondering if you had any suggestions with regard to your comment on the last page of your brief about "incentives to encourage hospital employees to use public transit", if you have any  
325 ideas that we could have in terms of what those incentives might be?

**M. DENNIS BÉLAND :**

330 I appreciate the question because in trying to be brief, I had skipped over that section and it is important. To us, it seems obvious that any incentive that can be put in place to make use of public transit is positive to the community in terms of reducing vehicle traffic, consistent with an overall health agenda, given that we are discussing a health care institution.

335 In terms of specifics, the only specific idea that I've heard during our discussions in our Association is the idea of perhaps a subsidy to Hospital employees for the purchase of monthly mass transit passes.

**M. ALEX HARPER :**

340 Thank you.

**LE PRÉSIDENT :**

345 Merci beaucoup, Monsieur Béland.

**M. DENNIS BÉLAND :**

Merci.

350 **LE PRÉSIDENT :**

Alors j'appelle maintenant monsieur Larry Karass. Good evening sir.

**MR. LARRY KARASS:**

355 Good evening.

**LE PRÉSIDENT :**

360 Well, you have ten minutes to state your position and you did not send a brief to the Commission, did you?

**MR. LARRY KARASS:**

365 Unfortunately, I wasn't able to do that prior to coming here but I prepared a memoir.

**LE PRÉSIDENT :**

We would appreciate if you could leave it with us at the end, the paper; because it seems that you've prepared something so go ahead.

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**MR. LARRY KARASS:**

Sure, by all means. Bonsoir, Monsieur le président, Madame la commissaire, Monsieur le commissaire, Mesdames et Messieurs les représentants de la Ville de Montréal.

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Je vous sou mets ma présentation en français en vous demandant à l'avance de m'excuser pour mon français cassé.

Je suis, avec mon épouse, résident dans le quartier depuis 13 ans. Mes deux enfants de 12 et 13 ans ont grandi dans notre petit village Vendôme, entre de Maisonneuve et Sherbrooke, sur l'avenue Grey. Nous habitons une maison centenaire qui, comme bien d'autres, appartenait à la famille Décarie à l'époque.

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Mes principales inquiétudes portent sur l'impact sur la qualité de vie de notre quartier. L'impact sur la densification du parc immobilier, l'impact environnemental, sonore, atmosphérique et, évidemment, en tant que circulation et stationnement avec plus de trois millions de véhicules supplémentaires par année.

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Je dois aussi porter l'attention de la Commission sur toute l'implantation des commerces et services hors site qui – et je cite le promoteur : « Permettra de dynamiser les rues commerçantes des environs, Décarie, de Maisonneuve, Sherbrooke... » et cetera.

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En février 2004, l'OCPM s'est déjà penchée sur le projet de réglementation P03092, modifiant le Plan d'urbanisme, Plan directeur de l'arrondissement Côte-des-Neiges – Notre-Dame-de-Grâce. Je souhaite que les commissaires étudieront attentivement les conclusions de ce rapport qui n'ont pas permis le passage de deux à trois étages pour le secteur à l'étude.

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Je suis inquiet des conséquences d'un éventuel changement de zonage, tant au plan de la circulation automobile, pour la partie résidentielle du secteur, des problèmes de stationnement occasionnés par la présence de commerces ou de bâtisses de plus fort gabarit, de la sécurité des enfants dans les rues, que de la luminosité à l'intérieur des bâtiments à proximité des nouvelles constructions.

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Je sais que remettre en question le projet du Centre hospitalier devient une affaire de « motherhood » tel qu'a affirmé monsieur du Parti Libéral provincial auparavant, mais le choix de l'emplacement ainsi que la curieuse coïncidence que tout le développement des premiers cinq à dix ans va se faire du côté de Notre-Dame-de-Grâce et pas de Westmount

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me pose de sérieux doutes sur les motifs incitant l'arrondissement à proposer cette modification au Plan d'urbanisme.

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Durant les séances d'information du mois passé, nous avons à maintes reprises posé des questions encore non répondues – et vous m'excuserez, j'ai essayé de me garder au courant avec le site Web des réponses soumises par monsieur Galipeau et d'autres personnes, mais je n'ai pas vu des réponses à des questions. Comme, par exemple : « Des études ont-elles été faites sur l'effet sonore du projet? » On nous a indiqué que la conception des bâtiments doit privilégier la localisation des éléments techniques ou mécaniques à l'intérieur des bâtiments et favoriser, le cas échéant, un traitement qui minimise leur impact visuel et acoustique. Mais comment est-ce qu'on peut le faire sans qu'aucune « baseline » ne soit faite? Et je pense que madame le commissaire a déjà posé la question à un des promoteurs, et sans qu'aucun standard ne soit établi?

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Nous, qui vivons avoisinant les immeubles Air Canada et le Centre Reine-Élisabeth, supportons déjà trop de bruit. Mes enfants disent que c'est comme avoir l'océan puis on entend les vagues, jour et nuit, assez fort.

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On nous a dit que la construction d'un mur antibruit était envisagée le long de la rue Addington. Quelles en sont les caractéristiques? À quelles conditions serait-il construit? Est-ce qu'on prévoit un mur antibruit du côté nord du site? Quel serait l'effet sonore anticipé durant la phase de construction? Encore une fois, ça n'a pas été répondu.

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À quelle période les citoyens peuvent-ils s'attendre à des inconvénients, le soir, le weekend, le matin, les jours fériés et pendant quelles années? Quel sera l'effet de la circulation accrue? Quel sera l'effet de la circulation des ambulances, de l'accès? C'est nouveau, j'ai vu ça dans les documents, des hélicoptères d'urgence. Un hélicoptère qui pourrait être proposé, le cas échéant.

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Prévoit-on une centrale de chauffage ou cheminée imposante pour l'alimentation du site? Et si oui, de quelle ampleur et où sera-t-elle située? Je ne pense pas que les promoteurs ont pu répondre à ces questions-là lors de la rencontre de mai.

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Quel est l'effet anticipé sur l'environnement? L'odeur, son, poussière, fumée. On nous a dit que la seule place où ils prennent les mesures environnementales, c'est sur le coin de Décarie et Métropolitain. Alors encore une fois, on n'a aucune mesure de base. Quelle est la conception de l'harmonisation pour l'arrondissement? Est-elle plus de nature économique ou de qualité de vie? Comment la continuité résidentielle et architecturale seront-elles prises en compte?

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Je suis aussi préoccupé par les hauteurs et les densités permises ou qui pourraient être permises avec l'implantation du nouvel hôpital dans la section résidentielle de la Cour

450 Glen. On nous parle de 47,5 mètres, on nous a parlé de comment est-ce que ça pourrait être  
plus à l'intérieur du site que sur le côté nord, mais aux questions durant les rencontres :  
« Les trois bâtiments de moindre hauteur sur la ligne nord du site pourraient-ils être haussés  
en cours de projet ou plus tard, sans l'accord des citoyens de la communauté? » On nous a  
répondu : « De légères variations peuvent être possibles. » Sans nous indiquer les balises  
455 possibles.

Alors en conclusion, je crains sérieusement de voir se modifier le quartier et  
principalement que le secteur résidentiel perde sa vocation au profit de bureaux privés et  
commerces publics. Je cite monsieur Gilles Galipeau :

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*« La réglementation municipale contrôlant les usages et les  
constructions sur le territoire est une réglementation qui évolue en  
fonction de l'évolution des caractéristiques du territoire. C'est certain  
que si une demande vient à s'exercer sur une artère donnée, ça peut  
465 amener à revoir la réglementation et voir quelles seraient les façons  
de pouvoir accommoder la venue de ces activités-là en périphérie du  
site. »*

Fin de la citation.

470 Ce projet de modification du Plan d'urbanisme, sans tenir compte des besoins des  
résidents avoisinants, est considéré comme une vision partielle, comme dans l'autre cas  
devant le OCPM, du « spot zoning » plutôt qu'un regard d'ensemble. Une prise en compte  
des impacts en général pour le secteur.

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**LE PRÉSIDENT :**

Merci beaucoup, Monsieur Karass. Dans votre intervention, vous vous êtes inquiété à  
un moment donné du zonage et un peu plus tard, vers la fin, vous avez parlé également des  
480 craintes que vous aviez de voir le caractère résidentiel du secteur où vous habitez, changer.

Mais quand vous parlez de craintes à propos du zonage, est-ce que c'est le contenu  
du Projet de règlement concernant le centre de santé qui vous inquiète ou bien donc si c'est  
la possibilité qu'il y ait d'autres changements réglementaires en périphérie? Vous pouvez  
485 répondre en français ou en anglais, soyez très à l'aise.

**MR. LARRY KARASS :**

490 Okay. I'll try it in English. The answer to the question is yes on both, for both those regards. The way the zoning changes were presented to us, you have zoning starting at two, three stories on the east-end of the site moving up to the 47.5... No, what is currently six stories on the far western end. And the fact that you now give, you change the zoning to 47.5 across the whole site provides the promoters with the opportunity to build massive great walls if they want along any part of the site.

495 I think, as the promoters acknowledged during the presentation, what they've shown us in terms of design is conceptual only. So it can, you know, once we open, we change the limits, we give them the means to do, you know, to do more or less what they want within those limits.

500 For your information, back in 2003 a group of residents put together a massing model; again a conceptual idea where the same number of square meters of development you could build within the existing zoning, height limitations on the site. We showed that that could possible and I didn't want to come here, especially with the rain, with that model but that model is still available for the Commission and for any other individuals if they're  
505 interested in viewing how you could work within the existing zoning limitations of the community.

510 Now, as far as outside of the Glen property, of course we're very concerned. The hearing back in 2004 was looking at raising height from two stories to three stories on the northern side of de Maisonneuve between Claremont and Marlowe, if I'm not mistaking. And I think, I won't revisit that whole set of hearings, but I think that the Commission at that point in time was convinced, was persuaded that it wouldn't add value to the community, it would remove value from community to allow height to go, to be raised. The promoter had one  
515 condo between Grey and Vendome that he wanted to build to a third story and all the ramifications of that were taken into consideration.

520 So, of course, we're very concerned about the northern side of de Maisonneuve and, to be honest with you, I'm concerned about the southern side. I think that it's been acknowledged by other people that the Air Canada building and the Château Westmount building on the corner of Claremont and de Maisonneuve are aberrations. They shouldn't have happened. If commissioners like you had been looking at those projects at the time, they wouldn't have happened.

**LE PRÉSIDENT :**

525 That's a long time ago.

**M. LARRY KARASS :**

530 I guess, right. But you know, so I think that answers – I hope that answers your questions.

**LE PRÉSIDENT :**

535 Madame Bourgeois, est-ce que vous avez des questions?

**Mme MARGUERITE BOURGEOIS, commissaire :**

540 On that particular point, you have concerns with height. You mentioned the “luminosité des édifices avoisinants”. On the height issue, then your two principal concerns, the light that would be directly affected on adjacent buildings and the unsightly nature, well what you consider the unsightly nature of certain buildings that are there, would you have other considerations with respect to height?

**M. LARRY KARASS :**

545 Yes. I think the higher the building, the more the noise carries. We have the train track running between the buildings and the future Hospital site, so we’re going to have like a bounce back effect. Nobody has talked about that either.

550 There’s the industrial plant that, obviously, the higher the more massive the structures, the more the potential for the sound to carry, smoke, et cetera. So it’s much more than just the light. I mean, I think that there’s also an aesthetic... If you look down the streets – and that’s another thing that, you know, if you don’t mind me to ask, I mean I don’t know what the concept is called but where we have blocks and if we build between the blocks, then the impact of buildings is less than if you, at the end of it, block – like the ones from  
555 Sherbrooke to de Maisonneuve, you have buildings that are constructed so that they don’t allow the light to pass through. So you know, I think that there’s that massing effect as well. I’m not an architect or an urban planner so I’m sorry if I don’t have all the terms.

560 **Mme MARGUERITE BOURGEOIS, commissaire :**

No, I just wanted to make sure that I got the full impact. Thank you.

**LE PRÉSIDENT :**

565 Monsieur Harper?



**M. ALEX HARPER :**

570 I take it that you don't accept the answer that we got from the promoter when he was  
asked about the level of noise produced by the Hospital itself, and when he explained that  
the mechanical equipment that would normally be expected to be on the roof would actually  
be enclosed within the building and that there would be some minimal exposure to ventilators  
– and I'm not a technical person but I heard, that's the answer that I heard. And what I heard  
575 was that there was a preoccupation with noise but that it was being and would be addressed  
but you don't feel that that answer is sufficient for the purposes of resolving the issue of  
quality of life where you live, is that correct?

**M. LARRY KARASS :**

580 As a manufacturer, I run factories for 25 years and I know that whether my power  
generators or whether my equipment are situated on the roof, in the middle of the factory, the  
back of the factory, if you got equipment that is producing noise, you need to take really  
dramatic measures to deal with that and the fact that you put it below ground or in the middle  
of the building rather than on top of it isn't going to eliminate the noise. It's going to be there.  
585 So no – and nobody is trying to quantify, nobody said: "Well how much additional noise is  
there going to be?"

I read about this noise reducing wall that they want to build on, you know, on the  
Addington side; well if they're going to be doing such a great job about reducing noise, why  
590 build the wall? So I think that the promoter's answers were really lacking on that score.

And, you know, I personally used to live on Pine just below the Montreal General on  
the side facing far away from where the physical plant was and I can tell you, I couldn't sleep  
with my windows opened.  
595

**M. ALEX HARPER :**

Yes, but that was a hospital that was built 60 years ago.

600 **M. LARRY KARASS :**

Of course, but it's...

**M. ALEX HARPER :**

605           The technology is a little different today. That's, I mean, that's what I heard was that they would use the latest technology and this would resolve a lot of those kinds of problems of the past. Anyway, that's... You answered my question. Thank you.

**LE PRÉSIDENT :**

610           Do you have any other questions?

**M. ALEX HARPER :**

615           No.

**LE PRÉSIDENT :**

620           Well, thank you very much, Mr. Karass and if you care to leave us the paper and are willing, of course, that it'd be published on the site of the Office, kindly leave it at the desk at the back of the room.

**M. LARRY KARASS :**

625           I'll be glad to do that.

**LE PRÉSIDENT :**

630           Thank you very much.

**M. LARRY KARASS :**

          Thank you.

635           **LE PRÉSIDENT :**

          J'appelle maintenant monsieur Claude Veillette et madame Gaëtanne Lavoie. Alors s'ils ne sont pas ici, je vais appeler monsieur ou madame Wemmers.

640           Well you have, to the most, ten minutes to issue a statement and to give your opinion on the project.

**Mme JOHAN WEMMERS :**

And it is statement and questions, right?

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**LE PRÉSIDENT :**

I'm sorry?

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**Mme JOHAN WEMMERS :**

Statement and questions, if I have understood the procedure. I can ask question sand I can give...

655

**LE PRÉSIDENT :**

You cannot ask questions tonight, that was one month ago.

**Mme JOHAN WEMMERS :**

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I can't ask questions.

**LE PRÉSIDENT :**

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No.

**Mme JOHAN WEMMERS :**

Okay. No, I'll just make comments.

670

**LE PRÉSIDENT :**

Yes. Of course, perhaps like Mr. Karass; he stated questions, of course we cannot answer them tonight but they could be part of your opinion, in other words, or and even if you have suggestions in response to your own questions, that is also interesting to hear.

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**Mme JOHAN WEMMERS:**

Thank you. Okay, thank you for the invitation of move me up and slot. As my neighbour Larry Karass said, we've been at this since, what, 2002 already. I remember going to the Queen-Elizabeth for one of the first consultations that McGill organized and we were given these wonderful brochures with pictures of what the new site would look like.

680

685 What is interesting to me is, when I see the changes that have taken place and the things that we've been saying to the MUHC for now, what, three, four years, is that it seems that everything has been said but no one is listening.

690 In the original plan, if you want you can see it, there was buildings right across to the Westmount side. Now, I see in this new plan, there's a wonderful park on the Westmount side and all the complaints that we, in Notre-Dame-de-Grâce had about this wall, in essence, being built along the south side of de Maisonneuve, it's still there.

695 Our complaints about the height haven't changed. It's still an issue. We've made a number of comparisons – Larry just did that – to the building already there, Château Maisonneuve it's called on de Maisonneuve, so we have an idea of what that's like in our residential neighbourhood such a huge immense building. And as Larry said, and I believe you agreed, today we wouldn't do that.

700 So I'm surprised to see that we're still doing it. So one of the things I would like to ask is more of a philosophical question that I don't expect an answer to is why the map or the proposal has changed the way it has now leaving this wonderful park in Westmount and this big concentration of buildings in Notre-Dame-de-Grâce? It's curious.

And another question more philosophical I don't expect an answer to...

705 **LE PRÉSIDENT :**

I'm sorry. Does that mean you would rather have the Hospital built, occupy more throughout the...

710 **Mme JOHAN WEMMERS:**

715 Well, as it was mentioned before, a number of years ago, we made a model to see if you could do the same building space on using the existing zonage rules that are there in place and you can. You just have to build shorter buildings and use more of the property, so you don't end up with this wonderful park in Westmount.

**LE PRÉSIDENT :**

Okay.

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**Mme JOHAN WEMMERS:**

Okay?

**LE PRÉSIDENT :**

725

Go ahead.

**Mme JOHAN WEMMERS:**

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Does that answer? Another philosophical question is why the Provincial Liberal Party is here speaking for NDG and not our local city councillor? But that's more philosophical, I don't expect an answer to that.

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Another comment that I have has to do with the information that is being made available and I understand your site got a lot of information on and I've looked at that as well but one of my complaints is that I'm not an architect. I have no idea. If you say to me: the density of a building is 2.5 or 3.0... That's Chinese to me. But if you say to me that it is going to be 47 feet tall or meters tall, and better yet if you tell me how many stories that will be and then compare it to not hospital stories but actual apartment building stories, that I can visualize. That I can imagine. And I really wish that the City would make that kind of information available.

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I received a wonderful brochure talking about the density of the building but nowhere in the brochure did it explain to me in plain language what that would mean to someone who's not an architect or an urban planner. And if your objective is to inform the citizens, then it's not clear to me why you wouldn't put it in simpler terms.

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And a final comment following what, I think, was your question to Larry regarding the sound – or excuse me, Mr. Haper's question to the sound is: as you know, right next door, we have the former Queen-Elizabeth Hospital and when they were changing that to this Health Centre that is now being changed to a couple of years ago, the neighbours were in regular contact with the developers. They felt that they had good communication and good contact in letting their concerns known and they felt that they had been listened to.

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However, now that the building is in place, the people who live there have complained repeatedly that nothing in reality, once it's there, that the problem is there, that they can't open the windows in the summer, that they have major problems with sound and that's a building that was just built, what, four years ago, maybe? Not that long ago.

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So in contrast to say the General which has older technology – you're right on that count – even with the modern technology and even in the situation where there was a dialogue, it proved to be fruitless in the end. And once it's there, there is very little we can do about it. And so this is one of our reasons why we want to make that clear and have – well, to the best of our ability, clarity and good agreements in knowing what will be done about that.

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770 As Larry said, there's been little talk about, you know, what is acceptable in terms of decibels and what would that mean. And when it's all in place, if there are still complaints from the neighbours, what avenues are and can be taken? I think that was in relation to something that was brought up by the first speaker. What will they do with complaints once everything is in place? Because there is dialogue now when it's happening, but I think a lot of stuff won't become clear until it's really there, at least for the people living in the neighbourhood. Will they continue to add input and better yet I'd rather see it avoided before we get that far.

775 So those are our main concerns and again perhaps the largest frustration for a lot of the residents here is that we've been saying this for four years now, and when I look at the plans, I don't see any of our concerns being taken into account, but I see other changes which to me are inexplicable. Okay?

780 **LE PRÉSIDENT :**

That's it, okay. Can I ask you if – you participated, I understand, in some reflection and thinking about what the project could look like; with whom did you do that or were you in contact with either the City, the borough or the planning team of the Health Centre?

785 **Mme JOHAN WEMMERS :**

We've been in contact with a lot of people at a lot of different times.

790 **LE PRÉSIDENT :**

There were some discussions or... You put forward your ideas to these people?

795 **Mme JOHAN WEMMERS :**

800 Of course! As I said, ever since the first meeting that was organized here in the Queen-Elizabeth Hospital by – what's his name? Not Steiner... Anyway. So we've spoken with the people from McGill, we've spoken with the City, we've spoken with a lot of different people at different stages regarding the changes on the proposal for the north side of de Maisonneuve, I think we've done our best to be active. Unfortunately, I don't feel that we've been heard.

**LE PRÉSIDENT :**

Okay.

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**Mme JOHAN WEMMERS :**

Okay. Oh, one final thing. The parking; I'd like to know what you're doing to... Parking is already a major problem in our neighbourhood, especially where we live on Grey Avenue, we have the tennis courts and in summer, it's a nightmare. I don't see that getting any better with the Hospital. People short cutting and that sort of thing, I'd like to know in concrete terms what exactly is being done to reduce that.

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**LE PRÉSIDENT :**

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Well, as I said, Mrs. Wemmers, many of the questions you asked have been raised during the three meetings we had one month ago and it could be a good idea perhaps for you to look at the information on the Internet site, the Web site of the Office de consultation publique. You'll find there all the documents that were produced before and during the hearings plus the answers we got – whether they are satisfactory or not is another question but the answers we got to the questions or requests that were made and also you'll find out the transcriptions of all the questions and answers that were asked.

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**Mme JOHAN WEMMERS :**

825

But then to what extent does the City wish to take into account the concerns of the citizens living in the area?

**LE PRÉSIDENT :**

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Well, that's a question you should have asked a month ago and perhaps you could complain that it was not taken into account, but there were some questions raised one month ago on how the process was carried at that time and in the following years until now. What I'm saying is that you are raising questions that have been answered one month ago, so you'll find the answers in... We cannot start again the information session tonight.

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**Mme JOHAN WEMMERS :**

But obviously, my point again is that I don't think that they are taking into account the concerns of the residents, if I look at the changes that have been made to the proposed plan.

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**LE PRÉSIDENT :**

Well that, we hear you very well saying that.

845 **Mme JOHAN WEMMERS :**

Okay. But then there's the answer to the question, it's not...

**LE PRÉSIDENT :**

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I'm sorry, do you have a question?

**Mme MARGUERITE BOURGEOIS, commissaire :**

855 Yes I have a question. On that point, I'm hearing you say that you feel that your concerns have not been addressed...

**Mme JOHAN WEMMERS :**

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Thank you, yes.

**Mme MARGUERITE BOURGEOIS, commissaire :**

865 And that your communication has therefore not been effective. It's one thing to query whether the City is listening to you but I'm asking you now whether you have any specific recommendations that you might think would be conducive to the establishment of a more productive and result oriented dialogue?

**Mme JOHAN WEMMERS :**

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Specific recommendations in terms of what we would like to see?

**Mme MARGUERITE BOURGEOIS, commissaire :**

875

To the City. Is there something that you would like to say that would be sort of an outcome? You're expressing frustration that the concerns that you have voiced have not been addressed. So what should be changed to make sure that in the future, citizens' concerns are more appropriately addressed?



**Mme JOHAN WEMMERS :**

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Perhaps if they see that the things they said are taking into account and have concrete – have influence on the decisions made and that when changes do happen, they're directly related to the complaints of the residents.

**Mme MARGUERITE BOURGEOIS, commissaire :**

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How can that happen? Are you looking for a different form? For a venue? For a voice for your complaints?

**Mme JOHAN WEMMERS:**

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I'm looking for their proposal in terms of the zoning – we are here for the zoning, aren't we?

**Mme MARGUERITE BOURGEOIS, commissaire :**

895

Okay, fine.

**Mme JOHAN WEMMERS :**

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Okay? So when we talk about the zoning, that the concerns about heights, height for example of the buildings, the distribution, the focus on Notre-Dame-de-Grâce and everything is on one side, that these concerns are taken into account when you look at the proposal and then when we see modifications to the actual proposal, that those reflect the concerns raised by the citizens. And what I'm saying concretely is they don't.

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**Mme MARGUERITE BOURGEOIS, commissaire :**

Okay. We will try to translate your concerns.

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**Mme JOHAN WEMMERS :**

Thank you.

**M. ALEX HARPER :**

915

You made a comment as well with regard to the parking but could you just talk a little bit about what the problem is and what do you think the solution could be for the parking as an element of something that might be considered by us for our report.

920 **Mme JOHAN WEMMERS :**

Perhaps less parking abilities in the street; what we have already are people constantly, because of the shortage of parking in the neighbourhood and the tennis, parking in front of driveways, that sort of thing, making it very unpleasant for the people who live there. I don't see that getting any better when there is now another group that is fighting for parking in the same area.

925  
So there are number of ways and I'm sure the City knows how we can do that by having more parking for the people who live in the neighbourhood, imposing "No parking" signs, also perhaps the surveyors, the reaction by the City. I've called a number of times when people are blocking the drive-way; they are not there right away. And often that causes a problem as well.

930  
I've seen literally the trucks go by from the City. they'll give out parking tickets at 2 o'clock when it's illegal but if they see someone blocking a drive-way, that's not a problem. So I think a lot of this has to do with how the City deals with parking issues.

935  
**M. ALEX HARPER :**

940 So it's at the borough level as opposed to the big City.

**Mme JOHAN WEMMERS :**

945 I don't see... I don't work for the City so I have no idea how these things are distributed, but I'm sure that this is a problem not unique to our neighbourhood but in many residential neighbourhoods. I'm sure in the Plateau, they have the same problem.

**M. ALEX HARPER :**

950 Okay, thank you.

**LE PRÉSIDENT :**

955 Well, thank you very much Mrs. Wemmers. Je vérifie de nouveau si monsieur Claude Veillette et madame Gaëtanne Lavoie sont ici. Alors j'appelle donc Peter McQueen for NDG Citizens Concerned about Super Hospital Traffic.

**M. PETER McQUEEN :**

960 Is it possible to get a map?

**LE PRÉSIDENT :**

Do you have a transparency?

965 **M. PETER McQUEEN :**

No, I don't have one.

**LE PRÉSIDENT :**

970

Well, I'm sorry. These are the two maps that you could use. Mr. McQueen, we will just start and then... The point being that of course you have to sit before the mic or use it with you if you travel.

975 **M. PETER McQUEEN :**

Does anybody have a point?

**LE PRÉSIDENT :**

980

There is a pointer right in front of you. So if it works...

**M. PETER McQUEEN :**

985 Okay, perfect.

**LE PRÉSIDENT :**

Now, I must say that you have ten minutes to make your point.

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**M. PETER McQUEEN :**

Ten minutes? I thought I had half an hour.

995 **LE PRÉSIDENT :**

You have ten minutes.

**M. PETER McQUEEN :**

1000

Ten minutes.

**LE PRÉSIDENT :**

1005 Yes. You sent your brief already, we read it and as I said at the beginning, you have ten minutes to make your point and then we may ask some questions. So I will really ask you to go to the core of your intervention.

**M. PETER McQUEEN :**

1010 Okay. The MUHC Planning Committee has come up with a traffic plan surrounding the Super Hospital and I've come up with an alternative one and it's on the site and you've read it as you said.

1015 So I just want to go over – I mean, I think there are some things we have in common, both my plan and their plan and some differences. Now, I think their plan basically what they want to do is make Decarie street in front of the Hospital, two ways, which is going to be a major... I mean, that's where the main gates of the Hospital are.

1020 Basically, they started with the problem that this site is a big-enough site for the Super Hospital and has very good connections for public transportation because of the Metro and the train to the West Island. But the problem is the access; the road access is not very good. The only place where there's good road access is actually Decarie street because on the St-Henri side, there's a cliff and on the Westmount side, there's the train tracks and it turns out they can't even go under the train tracks at Claremont because the metro tunnel is  
1025 not deep enough under the tracks. So that was ruled out also.

So you're left with Decarie. Given that they were left with that – they also have a situation where, I think, they talked to the Sherbrooke Merchants Association and have come up with, I think, a reasonable goal of trying to get the traffic off of Sherbrooke. Sherbrooke  
1030 already has too much traffic so they were also trying to avoid traffic on Sherbrooke.

So what they came up with was that they were going to get traffic down here but without going by Sherbrooke. So they decided to put, to have a new ramp off the Decarie expressway coming from the north, therefore the southbound of Decarie, have it go under  
1035 Sherbrooke and have it come onto Addington street just at de Maisonneuve, make de Maisonneuve street two ways back to Decarie and then turn that traffic down onto the two way Decarie street.

The problem is of course Upper Lachine road comes into that intersection, that  
1040 already complex intersection. So what they decided to do is shut the Upper Lachine underpass here, so that all this traffic coming on de Maisonneuve can then turn right down onto Decarie street.

1045 I think they basically – the plan is not going to work very well, for two reasons: 1, people who live in St-Raymond's area, we rely on the Upper Lachine underpass to get back out, both to Westmount, to get up to Sherbrooke, to get on the highway and we take that u-turn back on to de Maisonneuve to get into Upper NDG. And a lot of traffic does this and it's very important for us. So we don't want to be cut off.

1050 But also, I think their plan doesn't even work for what it is suppose to do. It's going to get some traffic off Sherbrooke but the problem is there's Upper Lachine road – Right now, people want to go out to Loblaws or Super C or Canadian Tire or Reno Depot out on St.Jacques street west, if they're coming from Westmount, they can take Upper Lachine road right now. I mean, if they cut Upper Lachine road, how are those people going to get there? They're going to have to go along Sherbrooke through the busy part where they're trying to  
1055 get traffic off of. So right away, even with their logic, they've got a number of problems.

1060 Another question I've got that I forgot to ask last time is: when exactly – if they're going to have two lights on Decarie street facing the Hospital, the idea is the pedestrians can cross there – to do what? I mean, what exactly is going to be on Decarie street across from the Hospital? At the moment, there's a carwash, a few apartment buildings, a garage and I don't know exactly why they want to have pedestrian crossing there.

1065 My alternative plan keeps Decarie one-way going north as it does now on this stretch, with no light on the stretch, no pedestrian crossing. The cars merge over into the Hospital and merge out of it without any light. This way, traffic keeps moving.

1070 Pedestrians can still get into the Hospital from minor routes in St. Raymonds because the pedestrians coming along Upper Lachine road right now, they can cut on to Addington and right here, when they rebuild this bridge – and they're going to have to rebuild that bridge under the tracks, they should make pedestrian, a pedestrian walkway on both sides of the track, both on the north side so that bicycles coming along de Maisonneuve and pedestrians can get across Decarie and either go on their way into Westmount or loop back under to go to the Hospital. But also, on the south side of the tracks, there should be a pedestrian and a bicycle walkway so that people coming along Upper Lachine can cut over and cut over the  
1075 Decarie street and into the Hospital grounds.

1080 There's one point we have in common; I think we both, they have realized and I've seen too, is the way you can have a new entrance ramp onto the southbound 15, which is also the westbound 20 because from the southbound 15 there's the entrance ramp to the westbound 20 which takes you back to the West Island, and that this new entrance ramp can up Upper Lachine here, just before Decarie. There's kind of an unused triangle of land there; there's no buildings, it's going to be a bit of a tight circle but it is doable.

A few pedestrians use the north side of Upper Lachine, there's many more pedestrians on the south side, so they can do it.

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So I think we agree with that. But say if they'd have to close Upper Lachine and all the traffic that is got to come out of the Hospital down to St. Jacques back over to Girouard and then up here to get on this ramp where, as I say, if you keep Upper Lachine opened, they can just leave the Hospital, take the left turn on Upper Lachine and then onto the

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entrance ramp.

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As well as what they've told our neighbourhood in St. Raymonds because they're going to close the Upper Lachine underpass, they then come up with this other plan, it's about Girouard is going to become two ways and they're going to put a roundabout at the corner of Upper Lachine and Girouard.

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As I put in my document, of course, we don't even, we're not even sure that this is a serious plan, it seems so fantastical. But even if it is serious, the problem is that there's simply going to be too much traffic trying to go around that roundabout. For one thing, to make Girouard two ways, the current entrance to the southbound 15 and the 20 to the West Island, which is over in the left lane of Girouard here and goes under the tracks and then it goes on to the highway, all that traffic is going to have to come all the way down Girouard and do a U-turn around this roundabout in order to get back into the entrance ramp, as well as the traffic from the Hospital coming here trying to get onto the entrance ramp, as well as

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all the traffic from St-Raymonds coming along Upper Lachine and having to do a 90° left to get going back up Girouard street to get back up to Sherbrooke.

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And once again, all the traffic – say we were trying to get to Westmount, well you're going to end up, if your from my neighbourhood and you're trying to get to Westmount or if you're from Westmount and you've just been at Loblaws and you're trying to get back to Westmount, you know, you're going to have to take... go up Girouard and then where are you going to be? Back at Sherbrooke, you know, where they are trying to get less traffic on Sherbrooke because you're not going to be able to get across on Upper Lachine.

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So you know, I see their plan as being fairly flood, very flood. I see a bit where they're coming from but I think they've just started with a few wrong premises and have ended out with a plan that is not going to work.

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Another aspect of their plan is that their plan is a bit "all or nothing". I know that the Hospital right now is juggling a lot of things. We all know they're juggling the Shriners situation, decontaminating the land, you know, then, they're finally going to get the go ahead to build certain parts of the Hospital.

1125 At the same time, they've got to try to get the road work, built before – you know, they don't want to build it after the Hospital is already opened, of course, because then the traffic, heavier traffic will already be there.

1130 So they're juggling a lot of things. The problem with their plan is that there is a lot of road work that's got to be done. So, you know, they're not sure, they're not going to be sure whether they should start the road work if they're not sure exactly what's happening at the Hospital.

1135 My plan is more small tweaking, small adjustments that can... They are reasonable road investments even if the Super Hospital doesn't get built. For instance, as I said, I think this new entrance ramp, this new 270° loop here from Upper Lachine to enter, to join into the current ramp, that's a reasonable idea, hospital or not. It will get some traffic off Sherbrooke, which is already traffic bound as their own document states.

1140 So already some of the traffic coming from Westmount or whatever can come along Côte Ste-Catherine, along de Maisonneuve in front of the metro station on to Upper Lachine and there can enter onto the highway that way and it doesn't have to be up on Sherbrooke, all the way through across Decarie down Girouard onto the entrance ramp.

**LE PRÉSIDENT :**

1145 I'll ask you to conclude, Mr. McQueen.

**M. PETER McQUEEN :**

1150 Okay. As I said in my documents their plan will slowdown traffic, well-known traffic patterns that NDG residents depend on, my plan just tweaks with these patterns and leaves them as they are.

1155 Their plan is trying to deal with the traffic jam on Sherbrooke but it's going to simply move that traffic jam down onto Decarie and Girouard and lower NDG. My plan tries to help with the traffic on Sherbrooke and doesn't cause a traffic jam down here.

**LE PRÉSIDENT :**

That's about it?

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**M. PETER McQUEEN :**

That's about it. I have copies for you who haven't been on the Web site or haven't read my traffic plan, I have copies here, in French and in English.

1165

**LE PRÉSIDENT :**

Please address the Commission, sir. So thank you, we have some questions. As we said we read your document very carefully. First of all, am I right in saying that your proposal involves less new construction than the one...

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**M. PETER McQUEEN :**

Absolutely. My proposal takes advantage of St-Jacques street and Upper Lachine which are already built, fairly wide – Upper Lachine is certainly in a fairly good shape, both of them are in a fairly good shape because they redid the bridge just a year or two ago, they redid the concrete. Now, it's much less construction to do.

1175

**LE PRÉSIDENT :**

Okay. Now, in terms of the workability, have you made some estimations or assessments using perhaps data from the traffic, what we call the "enquête origine-destination" or other sources of information?

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**M. PETER McQUEEN :**

Yes. I read carefully their traffic, the current traffic volume at all the intersections which is in their plan and indeed, what it showed was if you look at the volume of traffic, it's coming off the expressway, coming on to St-Jacques and both going straight through the St-Jacques intersection or turning right onto Decarie to come up onto de Maisonneuve, which is very popular for NDG residents.

1190

You'll note that those volumes of traffic are much higher than any of the volumes getting through on Sherbrooke because it's simple; that light is almost always green, I mean you don't have – on occasional, maybe one quarter or one eighth of the signal is people turning left onto St-Jacques. You're almost continuously getting a green for that right turn, so it can handle much more traffic, something like a thousand vehicles per hour at rush hour, evening rush hour where as up on Sherbrooke, because you got four-way intersections with traffic coming down and off at each one of the intersections, you know you've got to divide the light signal to all those different cars going – and the most, I noticed, getting through at any of those intersections in any one direction at rush hour is 500 or 600.

1195

1200



1205 So you know, needless to say that if something like a thousand turns right on to going up Decarie and a thousand goes straight on St-Jacques – and anybody who lives in NDG knows that. People coming from downtown and come off the expressway and, you know, move that way, once their plan is in effect and you're taking, say, that light in St-Jacques, I mean the number of new lights that people are facing is four new lights.

1210 There is, first of all, there's a light where there's this new entrance which is half way right at the bottom of the ramp coming off the expressway, and they want to have an entrance to the Hospital. They've got to move that entrance down to St-Rémi or somewhere down near. It's almost dangerous for the traffic coming off the access. They, themselves, write in their plan that they think it might be dangerous. They have reservations about it.

1215 So there's the first intersection – a first new intersection. Of course, there'd be some kind of a left turn into the site and we also have when traffic leaves at that exit. So that's several different signals happening at that light. At this light at St-Jacques, now, okay, you've got the usual people turning left onto St-Jacques but you have part of the signal where all the people coming south on the new sort of south two-way Decarie are turning both ways and blocking. So you're going to have a major backup there.

1220 Then, once traffic finally gets onto Decarie...

1225 **LE PRÉSIDENT :**

Mr. McQueen, you have more than answered my question. I have another one. Do you consider that the roadwork must be completed before the Hospital is built? And I'm asking you about, on the basis of your own experience as somebody living and perhaps driving in NDG.

1230 **M. PETER McQUEEN :**

1235 Well, I think that's only common sense. I mean, they themselves told me that it was clear that the roadwork would be built at the same time as the Hospital would be built, to be completed by the time all the users of the Hospital start coming. I took that as common sense.

**LE PRÉSIDENT :**

1240 Okay, thank you. Mr. Harper?

**M. ALEX HARPER :**

I'm sure glad we brought the map tonight because it made it a lot easier to understand your brief. I read it several times before I was able to get a grasp of it. And I'd like to go to another aspect of your brief which is with regard to... you made a comment about roundabouts and how roundabouts were not the tradition here. Have you checked out any of the existing roundabouts to see how they actually work? Because we've been told that they are increasing in number in Quebec and that more and more people are getting used to them. I just wonder what your experience is.

**M. PETER McQUEEN :**

Yes. I am familiar with roundabouts from having driven in other countries and how they work for the cars. I know there's one in Nuns' Island, I have been down there but there's nobody walking in Nuns' Island where as Girouard and Upper – a very few people walking on Nuns' Island compare to the number of the people walking at Girouard and Upper Lachine.

Now, I understand they're building a new roundabout at the eastern tip of the island, I read in the newspaper, way, way at the eastern tip in Pointe-aux-Trembles, it's under construction now and I will go take a look once it's built. But, I mean, what I am concerned about with the roundabout, as I put in my draft, is they're going to have continuous flow around it and I already said why it's going to be a lot of traffic.

So there's constantly going to be cars going around this roundabout. How a pedestrian is going to get by? They're saying "Pedestrian walkway". Now, I think you know and we all know enough about what pedestrian walkways in the City are barely respected. People are not even aware of the law in pedestrian walkways, I mean, this is not Toronto and to suddenly poise that on our neighbourhood is absurd, as far as I can... That's what I think.

**M. ALEX HARPER :**

So your preoccupation is with regard to pedestrians as opposed to...

**M. PETER McQUEEN :**

Both preoccupations. I don't want to be caught in a constant traffic jam there and I also walk there or ride my bicycle there often, my children walk there and I think it's... I'm completely concerned about pedestrians being able to get there and I'm also concerned – our neighbourhood...There is, you know, a commercial street. Upper Lachine is a commercial street, there are six, seven restaurants now, a few other businesses and those restaurants and cafes are hoping to get some of the pedestrian traffic from the Hospital, and that's fair enough. I'm sure many will be going up to Sherbrooke, one, but they're hoping to

1285 get some people over coming at lunch at their breaks and at, you know, all hours of the day.  
And with this roundabout there, the people are not going to be coming on foot over to Upper  
Lachine.

So you can imagine the merchants in my neighbourhood are not happy about that  
and they're going to fight this plan.

1290 **M. ALEX HARPER :**

How far away are the restaurants from the site?

1295 **M. PETER McQUEEN :**

Not that far. It must be 400 to 600 meters. I don't know, it's hard to guess.

**M. ALEX HARPER :**

1300 Oh, that close?

**M. PETER McQUEEN :**

1305 That close, yes. As close as Sherbrooke, I mean, you roughly... That's Sherbrooke  
and that's – the first one, you know, Momesso is as we know is at Old Orchard so you're  
talking like that as opposed to like that up to Sherbrooke.

**LE PRÉSIDENT :**

1310 Madame Bourgeois?

**Mme MARGUERITE BOURGEOIS, commissaire :**

1315 Non, c'est beau. J'ai eu la réponse à ma question.

**LE PRÉSIDENT :**

So Mr. McQueen, thank you very much for your intervention.

1320 J'appelle maintenant Jill Prescesky.

**Mme JILL PRESCESKY :**

1325 I'm here probably echoing Peter's concerns. I didn't bring a package and maps but I would like to zero in on that lovely roundabout we've been talking about right there. I live a block over from that roundabout and first of all, I have never seen a roundabout in Montreal. I've seen it in several other countries in the world, mostly in places where people respect pedestrians but we all know in Montreal that's not the case, let's just be honest.

1330 So I have real concerns about the aesthetic of a roundabout. These plans are conceptual, I would like to see an actual plan, an actual drawing of the roundabout. Is there going to be a green space in the middle with a little policeman watching to make sure motorists are respecting...

**LE PRÉSIDENT :**

1335 Are you making a proposal of it?

**Mme JILL PRESCESKY :**

1340 Why not? I'd like a policeman with a little whistle and... No, I've seen them work in places like in England and Bermuda. The problem of pedestrians is a huge – it's a huge issue because we get a lot of pedestrians, people taking public transportation, catching the bus, walking to the metro. It takes us five minutes to walk to the metro. And I own a duplex and I rent an apartment and one of the big selling points is that it's a five-minute walk to Vendome metro.

1350 And they're proposing to cut us off right here. So I'm completely opposed and I'm not the only one in my community who is opposed and that's my major concern, it's this roundabout. I realize it looks great on paper but I would like to see a more realistic concrete drawing of what exactly they're going to build. Also, there's another... there's an entrance to the Decarie expressway so like Peter said, all the traffic coming down from Sherbrooke is going to now go through my neighbourhood, and we already have serious problems at that intersection. A couple of old people have been killed by motorists and that's with the traffic light there.

1355 So with a roundabout that makes me very, very nervous and I'm completely opposed to it. I've never seen a roundabout work in Montreal.

**LE PRÉSIDENT :**

1360 Do you mean by that that you would prefer the intersection to remain served by traffic lights? Is that the point?

**Mme JILL PRESCESKY :**

1365 I would like to see Upper Lachine road remain opened and I would like that intersection to remain the same. So if you look at Peter's proposal, in my estimation, it works. Traffic on the north side of Upper Lachine where there are no pedestrians or very few can access the Decarie expressway easily using the turn and you're using already the infrastructure that is already there. Why go and rip up roads and cause noise and spend  
1370 millions of dollars? I don't understand.

**LE PRÉSIDENT :**

1375 Do you have other concerns or opinion about either the Health Centre project or the by-laws?

**Mme JILL PRESCESKY :**

1380 My concern is basically the traffic. It's basically the traffic and how it's being addressed and like I say, it's all conceptual at this point, we, residents, would like to see something more concrete. How is it going to affect our flow? Like it was raised also, people cutting down local streets where we don't have a lot of traffic to avoid a roundabout, maybe somebody is going to come down and drive down my street where a lot of children are playing, maybe that will... So it's mostly traffic, circulation that's my concern.

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**LE PRÉSIDENT :**

1390 Besides the concern about the roundabout and taking into account your general concern about traffic, have you ever considered or discussed traffic common measures with either the City or your borough?

**Mme JILL PRESCESKY :**

1395 No.

**LE PRÉSIDENT :**

I just raise that because...

**Mme JILL PRESCESKY :**

1400

Well, I did. I actually did speak with Marcel Tremblay at the last meeting and voiced my concerns, yes. But I've looked at Peter's proposal and I back his proposal a hundred percent and so do many people in our neighbourhood.

1405

**LE PRÉSIDENT :**

Okay. Stay there, we may have some questions. So very well, thank you very much.

**Mme JILL PRESCESKY :**

1410

Thank you.

**LE PRÉSIDENT :**

1415

Now, I will call upon Mr. Warren Allmand, please.

Bonsoir, Monsieur Allmand, bienvenue.

**M. WARREN ALLMAND :**

1420

My name is Warren Allmand and I live in the neighbourhood. I favour the construction of the Hospital on this site but Mr. Chairman and members of the panel, I'm extremely concerned with the traffic problems resulting there from.

1425

I was present at the information meeting on May 11<sup>th</sup>, and since that time I've been in touch with community organizations and other people concerned with the project and they confirmed with me that the traffic problem, as you can see from tonight's meeting, this is a major concern, especially the prospect of extremely heavy traffic on Decarie, St-Jacques, de Maisonneuve and Upper Lachine road. And I must tell you, I travel on those streets often and

1430

it's very bad now and after the construction of the Hospital, it will be much worse unless you recommend changes in the plan.

1435

By the way, some of the earlier witnesses tonight were frustrated in which they felt that they weren't being listened to, and it's my understanding that the purpose of these consultations and your report can lead to changes in the plan. Otherwise, I hope...

**LE PRÉSIDENT :**

Hopefully.

1440 **M. WARREN ALLMAND :**

1445 This is a hopeless exercise, otherwise. So as I see it, the main problem with the traffic problem is that there's only one principal exit entry for the public and that's on Decarie. It's the only entry - exit for the public and I can't see the logic in this because there is room for other exits - entries on the project site, in particular on the east end of the site.

1450 Now, I want to recommend strongly that there'd be an entry - exit on the east end of the site, preferably from the Glen road. Now, they have right now, when this was first presented to me, they have an emergency road going down from the site to the Glen and it seems to come out or enters just across the street from one of the entrances for the Home Depot on the Glen road, just before you go under the tunnel.

1455 I don't see why this can't be a fully alternative public entrance to supplement the one on Decarie. If you did that, the traffic coming from the east that would be coming, let say west along Ste-Catherine street, if they could go down the Glen road and enter by that way, they would certainly relieve the traffic on de Maisonneuve... Excuse me, yes, on de Maisonneuve in front of the metro station on Decarie.

1460 Also, the traffic that would come along St-Antoine, coming westward along St-Antoine could enter there. Traffic from St-Henri coming up either De Courcelles or St-Rémi could go over and go out going that way and come out that way. So you'd take a lot of traffic off Decarie and de Maisonneuve and the western side of the site.

1465 So to me, this is – you know, there are many other points I could raise but this is one that really strikes on to me and I'd say others have mentioned to me as well, and I can't see why you can't do that when they're already planning – I asked the question to officials what this particular little road was and they said it was for emergency situations. Well, it seems we're going to have lots of emergencies if you only have one exit - entrance on Decarie and you've already been receiving many complaints and many recommendations.

1470 To me, that's a solution. Now, I have another solution and that's with respect to the Service employee entrance on St-Jacques and this may have been mentioned to you before.

1475 I don't see why that entrance could not originate on the Pullman road where, I believe, they're going to have a... where they're going to park construction vehicles and so on. The Pullman road was a private road that came off St-Rémi just below St-Jacques. It seems to me that you could build an entrance off Pullman that would go under with tunnel under St-Jacques and enter the site almost at the same place that you have the entrance now on St-Jacques.

1480 But if you have it on St-Jacques in the middle of that hill with cars coming off the ramp  
from the Ville-Marie expressway coming from downtown and cars coming in and out on that  
hill, you're going to have a much more severe problem than we even have now. So I would  
like you to look – I'm not an engineer but look seriously at the possibility of having that  
entrance for employees and for service vehicles which were supposed to be on St-Jacques,  
1485 enter from Pullman, tunnelling into the site under St-Jacques and not disrupting St-Jacques.

Those are my only recommendations.

**LE PRÉSIDENT :**

1490 Okay, thank you Mr. Allmand. Just to make sure we read you well, having an  
additional entrance through Glen, its main purpose is to divide the traffic that would be  
concentrating on Decarie?

1495 **M. WARREN ALLMAND :**

That's right.

**LE PRÉSIDENT :**

1500 And the second one for the employees and others would be to alleviate the risks  
associated with the... and traffic on St-Jacques.

**M. WARREN ALLMAND :**

1505 Well, alleviate the traffic on St-Jacques, especially – I don't know about the...

**LE PRÉSIDENT :**

1510 There is a pointer right in front of you. Do you want to try the laser?

**M. WARREN ALLMAND :**

1515 Yes. This is where there's a ramp coming off the Ville-Marie expressway right here  
but also the traffic that's proceeding up St-Jacques from St-Antoine street and from St-Rémi  
coming up the hill, it seems to me, with all this traffic and people, trucks and vehicles going in  
and out here, the service vehicles and provisions and employees, that if you had it coming  
tunnelling in from down here where the Pullman road is, under St-Jacques into the site, this  
wouldn't cause any great inconvenience for service trucks or for the employees. It's a couple  
1520 of seconds or minutes, but it would certainly relieve traffic on St-Jacques.



1525 And by having an entrance here – by the way, you know, a Home Depot which is on the other side of the road it has two entrances and two exits. There is one on the Glen road, there's one on St-Antoine street so you can come in and go out on either side. It would be a terrible mess if they all go in one way and go out the one way. So it's a simple recommendation.

**LE PRÉSIDENT :**

1530 Okay. Madame Bourgeois, vous avez des questions?

**Mme MARGUERITE BOURGEOIS, commissaire :**

Non, it's very clear.

1535 **LE PRÉSIDENT :**

Mr. Harper?

**M. ALEX HARPER :**

1540 Mr. Allmand, did you look at the question of something of an entrance on the north side over the railway tracks or under the railway tracks?

**M. WARREN ALLMAND :**

1545 Yes. There could be if for some reason... You know, at the beginning, I was recommending that... Where are we here? This is Claremont, I believe.

**LE PRÉSIDENT :**

1550 Right.

**M. WARREN ALLMAND :**

1555 I was wondering why there couldn't have been an entrance off Claremont or this is Prince-Albert here. At the foot of Victoria, you have the old Westmount station which they're making into a museum so I wouldn't want to disrupt that. But that would be my secondary recommendation on the north side in Westmount. But I would prefer, I think it would be more advantageous to vehicles and the travelling public, for people visiting the Hospital to drop off  
1560 or to collect their friends and family members whatever, to build on this particular road here which they've already considered. And it would certainly relieve the traffic on the west side of the site.

**LE PRÉSIDENT :**

1565

Thank you very much, Mr. Allmand.

La Commission, nous allons prendre, dis-je, une pause d'une dizaine de minutes. Le registre demeure ouvert pendant ces dix minutes-là pour les personnes qui ne se sont pas déjà inscrites et qui ne sont pas intervenues et la Commission pourra les entendre en fin de soirée. Après quoi, on fermera le registre.

1570

So there will be a ten minute break, it's the last period for those who have not already registered and have not spoken, if they want to intervene. Back in ten minutes.

1575

**SUSPENSION DE LA SÉANCE**

**REPRISE DE LA SÉANCE**

1580

**LE PRÉSIDENT :**

Alors j'appelle maintenant les gens de NDG Community Council, Anne Usher et Sharon Leslie. Bonsoir, Mesdames.

1585

**Mme ANNE USHER :**

Bonsoir Monsieur le président, Madame, Monsieur. C'est un plaisir de vous voir encore à Notre-Dame-de-Grâce.

1590

**LE PRÉSIDENT :**

Oui, merci aussi à vous. Effectivement, la Commission a déjà reçu le mémoire que vous lui avez fait parvenir, on l'a lu et j'aimerais que vous ne preniez pas plus que dix minutes pour nous donner l'essentiel et qu'on puisse vous poser des questions.

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**Mme ANNE USHER :**

Oui, je serai très brève.

**LE PRÉSIDENT :**

1600

Et vous vous passerez le micro l'une et l'autre si vous parlez toutes les deux.

**Mme ANNE USHER :**

1605

Oui, je vais commencer.

1610

My name is Anne Usher, I'm the past president of the NDG Community Council and just to say that we've participated at the information meeting. We have had, we've participated at the community based regroupement of organizations from Westmount, St-Henri and NDG for a couple of years and we've been keeping, you know, up to date about what is going on.

1615

In NDG, we had an informal gathering a few weeks ago and had input from local businesses and people that live in the area and we actually looked at a larger map and we would recommend first of all that you look at the map on page 27 of the proposal which gives you a broader picture of all of the activity that is going on around this site upon which the Hospital is to be built. So just a start with that, I was hoping you might have a slide of that tonight but you don't. But anyway, that's our first recommendation.

1620

In essence, we are very pleased that this project is coming into our area and we support the proposed by-laws, that they be adopted to allow for the development of this project with the consideration of some concerns that we'll go into in a bit more depth.

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The opportunities are amazing for this area; the opportunities for economic development, the development of jobs – and our colleagues from the CDEC will be going into this in more detail. Also, the opportunities for new green space and the bike path of course is something that is of great, you know... It sights our president, particularly, who's an habit cyclist. With regard to that, though we hope that the City takes the opportunity of this green space to see if there isn't a way of connecting the bike path to the Lachine Canal, using the falaise, but this is really not the concern of this evening, it's just another of those opportunities. There are also opportunities for further community gardens and running tracks and all sorts of other things.

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I guess we would note, coming from NDG, that there seems to be a disproportion allocation of green space to the eastern sector, probably in the borough of Westmount, so we wonder about that and that really comes down to the placement of the bulk of the buildings and we would question why there's such a concentration on the eastern sector. But we're not architects and we're not planners but we do note that with some concern.

1640 We have a couple of concerns that are historic with our organization. One in general, and this will be of no surprise to you, Monsieur le president, if indeed something happens and this project does not come to fruition, we would hope that the change in by-law that is to institution, that we would hope that that site be preserved for housing, and in particular a large part of it for affordable housing.

1645 We're always told by the City of Montreal that there's not enough space to develop and we know this from our own work that space to develop affordable housing and take advantage of some of the grants, et cetera, there are around, space is always the big problem. So we would like that as a P.S. somewhere in our presentation, but we do mention it in our brief.

1650 We also are concerned that the affordable housing that exists on the east side of Decarie between de Maisonneuve and Sherbrooke is respected. I'm sure people may be rubbing their hands in glee but those are old apartments, they house many, many people and it isn't... We have gone to bat to save those buildings before and we will do so again.

1655 Our main concern is something that's not new to you, you've heard it several times tonight and that is what really seems like overwhelming congestion of traffic focused on that entrance on Decarie between St-Jacques and de Maisonneuve.

1660 The reason we would ask you to look at a larger map on page 27 is that you begin to see other activities in this area that also draw traffic already. Starting with the big box stores in Angrignon, and the access to Angrignon from St-Jacques which is one thing, then the big box stores on St-Jacques that have already been developed, that are causing a lot of traffic already.

1665 Then, there is a rumour that this site might be developed as a Loblaws which would... That's a rumour. But it's inevitable that there will be other large places that really are only accessible by car and they're built so that people go there by car and do their shopping. So that's why we would ask that the people that look at traffic would take in a larger, a larger geographical area and also consider the extension of Cavendish and what the extension of Cavendish is going to mean bringing at least car traffic into NDG and having to move somewhere. So all of those considerations are not new probably.

1670 Our main preoccupation though is access to this new facility. We understand that ambulatory care and the growth of ambulatory, the expansion of ambulatory services, meaning day surgeries, et cetera, et cetera, and day treatments is one of the reasons why this new complex was conceived in the first place. And we note that – I think the ambulatory buildings are on de Maisonneuve side and we wonder then why there is not at least a second access point somehow coming from the east, so we're just repeating what you've heard from many other people tonight; we think it's absolutely crucial, we wonder about underground

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parking under the green space, if that's a possibility – we haven't heard anybody talk about that, so we're going to focus on access to this building.

1685 It seems that there is an assumption that most people will come to this facility by car from highways. But living in Montreal, I mean personally, I very rarely go on the highway to go anywhere in Montreal, and I'm thinking of people that come from the Plateau, Parc Extension, Côte-des-Neiges, Hampstead, Côte-St-Luc and NDG to this facility, none of them will take the highway. They will be coming in on, you know, regular city streets somehow. So the only access they have right now is to come along Sherbrooke or somehow down to that  
1690 entrance on Decarie and it seems like a huge bottleneck. Madame Leslie will go into more details.

**LE PRÉSIDENT :**

1695 And I will ask you to be brief, please, Mrs. Leslie.

**Mme SHARON LESLIE :**

1700 Just to note that apparently most hospitals when planned have more than one public access and so we would encourage you to perhaps look at other designs and that just reinforces or echoes what Anne was just saying.

1705 We are concerned about the occasions, if Decarie expressway should be blocked; we've lived that many of us in the immediate neighbourhood. We're also concerned about the impact of traffic going between the two campuses of the Hospitals. There may be a natural tendency to take Decarie boulevard and then across to the mountain campus which again would mitigate in favour of a second public access on the eastern side of the site.

1710 One of the principles that underlies many of the position that we put forward in our brief is a notion of equity. We note that in the current design, most of what could be considered the negative impacts, the increase in the volume of traffic, whatever pollution and environmental negative influences that there are, the noise, the vast majority of those will impact on the western, meaning NDG part of the surrounding neighbourhoods.

1715 We, in part, ask that that be shared more equitably along with the green space. We heard at the information session that the reason why the green space was exclusively on the – or pretty much exclusively on the eastern side was because one of the architectural commission said that it wouldn't look very good to have an open field on Decarie and that a façade of buildings would be much more attractive.

1720           Amongst those that we've talked to about that, people have a very different opinion and would be very pleased to have some additional green space that is closer to our neighbourhood.

1725           The only other point that I'd like to highlight before turning it over to you for questions is the issue of parking. There are concerns that people would like more reassurance about the absolute number of parking spaces around the institution which will be relocated to the Glen Yard site, not only directly in the institution such as at the General but also in the surrounding areas because the concern of the neighbours is what's going to happen to the spill over which is inevitable into the surrounding neighbourhoods. And there's a worry that  
1730 perhaps the 2,500 that are planned is not sufficient to even equal what is there at this point in time.

              So there are other points that are covered in our brief but we'll leave that for you to explore through questions.

1735

**LE PRÉSIDENT :**

              Very well. Thank you, Mrs. Leslie and Mrs. Usher. Of course, as you say, you raise many points in your brief. You said that the main issue for you was related to access and  
1740 traffic. And you say also that you want to share sort of both the impact and the better aspect such as green space; does that mean in your opinion that the whole building concept should be laid out differently than what is illustrated on the right here?

**Mme SHARON LESLIE :**

1745

              The only clear suggestion that we made was shifting the alignment somewhat towards the east. We understand and recognize the rationale of having the link with the Vendome metro being as short, relatively speaking, a distance as possible but if we understood the presentation correctly, there is still a portion that went further west than that.  
1750 So if the buildings were shifted over more towards the east, well not necessarily being absolutely centered, that would free up some additional green space on the western side, not completely displace everything but merely shift it somewhat.

**LE PRÉSIDENT :**

1755

              But how does that relate to the access and traffic aspect of your concerns?

**Mme SHARON LESLIE :**

1760 That's less related to the access and traffic it's more related to having more of the  
good stuff, the extra green space closer to people in NDG. The traffic issue is primarily linked  
to our recommendation to open a second access on the eastern side, a second public  
access. We suggest that underground parking under the existing green space in the eastern  
side be considered which could be linked underground to the eastern portion of the Hospital  
1765 about considering using Pullman.

We don't consider ourselves engineers and traffic experts but we would really hope  
that there would be some more serious explorations and public presentations of some  
options that would also recognize the traffic that would be going, that could be going via  
1770 Atwater to the Montreal General site as well.

**LE PRÉSIDENT :**

1775 About one of your last sentences, you're asking for public presentation. Now, of  
course, you know where this public consultation takes place in the whole process, there are  
some steps that have happened or decisions even previously and some will follow. What do  
you suggest to make sure that a feedback goes to the public from the decision...

**Mme SHARON LESLIE :**

1780 What would be ideal would be at some point when the – after your report is received  
by the City of Montreal, that there would be some forum for a presentation of their responses  
to your recommendations where as people concerned about this, we could have easy public  
access and exchange about their recommendations. It has been one of the sometimes  
1785 disappointing phases of having participated in other consultations and been very much  
involved all the way through and then finding that when the last stage comes, the  
recommendations and the responses deposited at City Council by the City are very sketchy,  
don't contain rationale, give us next to no information about why those decisions were made,  
so we're kind of left at the end going, you know, what happened?

1790 So I don't know exactly what the mechanism, whether the Office would have a role to  
play or whether that means the City of Montreal providing a next step and more coherent and  
transparent information about the basis of their deliberations and recommendations following  
your work.

1795 **LE PRÉSIDENT :**

Do you think that could be done while still keeping what I would call a diligent pace in developing the project and...

1800 **Mme SHARON LESLIE :**

I believe it's possible. I think if the will is there, there certainly is an interest on the part of the population and the community. It would involve, you know, at least one more meeting. I would say if the citizens are willing to be there, then I would hope that our elected officials and their staff would be willing to participate in something like that.

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**LE PRÉSIDENT :**

Thank you. Madame Bourgeois, vous avez des questions?

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**Mme MARGUERITE BOURGEOIS, commissaire :**

Looking at your brief, you do mention on the question of equity having... getting more involved with local merchants and having the personnel of affected boroughs getting some sort of preferential treatment. Did you have anything specific in mind as to how this would work, of course within...

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**Mme ANNE USHER :**

We have not worked on that very much in our brief because I think the next people you're going to hear from will.

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**Mme SHARON LESLIE :**

We could say though that it would be worthwhile to examine some of the projects in the south western sector where RESO over a good number of years has made those same kinds of requests and that there has been an impact on local economic development through collaboration of institutions.

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1830 **LE PRÉSIDENT :**

Mr. Harper?



**M. ALEX HARPER :**

1835 I appreciate what you've just said because as I was looking through your brief the  
other day and looking at it again a few seconds ago, I noticed that there is a tremendous  
amount of overlapping between your recommendations and comments and many of the  
other briefs, which is fine. And that's important I think, as a result, to focus on some of the  
key issues for you.

1840 One of the issues that I was wanting to hear you talk about a bit, because others  
have talked about it in some ways but you're the first that I've seen that has talked about it in  
a way of getting the employer to do something to encourage people to use bicycles and you  
had comments, you had some comments about incentives that could be given and so on.  
1845 Maybe you'd like to just expand on that a little bit?

**Mme SHARON LESLIE :**

1850 Yes. We are, I would say, strong supporters of promoting the use of mass transit and  
cycling as an alternative to car use because of the environmental impacts. We understand  
there already have been efforts at the existing institutions to accommodate cyclists and we  
believe that those could be more extensive. There're needs to be adequate parking for  
bicycles so that they can be safely locked up and that people are not worried about them.

1855 For employees who may live in the Montreal area and chose to cycle to work, access,  
easy access to showers is really critical if they're going to be working a shift afterwards and,  
you know, not just coming in and having to cope uncomfortably.

1860 Again, there are many other corporations that have started to implement, you know,  
the physical features that would encourage that. We also hope that the MUHC will  
collaborate with the Société de transports de Montréal in doing everything possible to  
encourage people whenever feasible to use mass transit, et cetera, as their means of  
accessing the site. We understand for employees from off island that that's more difficult and  
therefore the highway traffic but we don't want to lose sight, even with our comments about  
1865 the parking, that we ought to be encouraging as much as possible the people that are leaving  
their cars at home and gaining access – because that's one of the strength of this side, is the  
intermodal transport systems that are there.

**M. ALEX HARPER :**

1870 Thank you.

**LE PRÉSIDENT :**

1875 Well, thank you very much. J'appelle maintenant le CDEC Notre-Dame-de-Grâce – Côte-des-Neiges, Claude Lauzon et Johnattan McElland.

Bonsoir Messieurs, j'aimerais que vous vous présentiez l'un et l'autre, à la fois pour notre bénéfice à nous et celui de la sténotypiste. Vos noms?

1880 **M. JOHNATTAN MCELLAND :**

I'm Johnattan McElland from the CDEC Côte-des-Neiges – NDG. I'm an "agent de consultation".

1885 **M. CLAUDE LAUZON :**

Claude Lauzon, directeur général de la CDEC Côte-des-Neiges – NDG.

**LE PRÉSIDENT :**

1890 Parfait. Alors on vous écoute et on vous demande de présenter votre opinion en 10 minutes, maximum.

**M. JOHNATTAN MCELLAND :**

1895 Okay, thank you. We did not submit a written brief however I can leave this document behind for the Committee after. Basically, we have four areas of concern that we will present. I would like to begin by just giving our perspective on the context a little bit.

1900 Because we are a community economic development corporation, when there is economic development, we try as much as possible to marry that to the development of the community.

1905 So what's happened is for a number of years, the three territories surrounding the Glen site, St-Henri, Westmount and Côte-des-Neiges – NDG, various community organizations from those three territories have been negotiating with McGill, with the CUSM, the MUHC to try and ensure that community concerns would be addressed as the project unfolds.

1910 We succeeded in signing, which has been mentioned once or twice this evening, "une entente de principe" with McGill that set up an official, I guess, body that is ongoing, that will ensure that the areas of community concerns are brought to McGill's attention and that

we, within this committee, will try and do things in order to maximize the positive aspects of the McGill installation.

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I just want to name the members of that committee. We've got from St-Henri, there's Solidarité St-Henri, le CLSC St-Henri and the CDEC from that area which is called RESO; from Westmount, there's the Westmount Municipal Association and the Contactivity Centre, and representing NDG, there is our CDEC, the NDG Community Council and the CLSC NDG.

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So as far as possible we try to get the partners from the health and the community and the economic areas or spheres together.

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So having said that, I'd like to move on now to our four areas of concerns. We're certainly very happy that McGill has shown an homeyness to working with us up to this point. And we'd like to just make the committee aware of the four areas that we would like to see addressed in the future.

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**M. CLAUDE LAUZON :**

Merci. Comme vient de le dire mon collègue Johnattan McElland, effectivement nous appuyons le projet de McGill puisque nous sommes signataires de l'entente inter quartier qu'on nous a présentée.

1935

Nous avons des intérêts particuliers également sur quatre volets, le premier étant la circulation et non pas en termes d'accès au niveau des grandes artères de circulation mais en particulier par rapport aux impacts que cela pourrait avoir sur la rue Sherbrooke qui est une rue, je vous le rappelle, où nous avons des commerces de proximité et non pas donc de grandes, ce qu'on appelle en anglais les « big box » donc de grandes surfaces.

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Ces commerces de proximité là donc sont essentiellement de petites entreprises dont les atouts particuliers sont, entre autres, l'accès tant pour les piétons que pour les véhicules et également le stationnement pour les véhicules. Donc à cet effet-là, lorsqu'on parle de réaménagement et d'accès pour les voitures, on voudrait que vous teniez compte de cette préoccupation-là.

1945

Nous avons également un intérêt particulier, comme vous pouvez le constater, dans le développement économique. D'une part, on est conscient que durant la phase de construction du projet et après la construction, il est difficile, lorsqu'on parle d'achat local en termes de biens et services, de prioriser des entreprises sur une base territoriale puisque ces institutions publiques sont soumises à des règles où on doit, en termes d'appels d'offres et de soumissions, choisir le plus bas soumissionnaire.

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1955 Également, dans le domaine de la santé, depuis de nombreuses années, il existe maintenant une corporation d'achats en commun pour tous les biens que ces institutions de santé achètent. Néanmoins, et on l'a souligné à nos vis-à-vis de McGill, nous aimerions qu'une attention particulière soit accordée à tout ce qui concerne l'achat local, ne serait-ce qu'au niveau de la circulation de l'information que des entreprises à but lucratif mais également des entreprises d'économie sociale, soit des entreprises à but non lucratif, qui offrent également sur une base d'affaires des produits et services, puissent avoir accès, un, à l'information et, deux, idéalement puissent se qualifier.

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1965 Un mot également en termes de développement économique sur les terrains qui sont disponibles pour des développements futurs. Nous savons que ces institutions de savoir ont également un mandat qui en est un de commercialisation de la recherche, recherche qui se fait au sein autant des murs de l'Hôpital que de l'Université et à cet effet-là, on est particulièrement intéressé à collaborer dans le développement de ce qu'on appelle en anglais « the spin-off » donc des entreprises qui sont issues de la commercialisation, qui sont issues donc de la commercialisation de la recherche universitaire.

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Le troisième volet concerne la question de l'emploi. Encore une fois, la construction de l'édifice va entraîner donc le transfert de nombreux emplois. On ne dit pas de nouveaux emplois, on parle bien sûr d'emplois existants, mais tant pour les opportunités qui peuvent exister que celles à venir, on veut également accorder une attention particulière sur le volet « employabilité ».

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Ça veut dire que nous pouvons, avec d'autres partenaires au niveau local, travailler pour répondre à des besoins précis de main-d'œuvre d'une institution comme l'Hôpital McGill. Par exemple, dans le cadre d'un projet pilote qu'on fait dans notre territoire, on est à même de supporter des infirmières de langue anglaise qui ont reçu une formation à l'extérieur du Canada et qui, présentement, ont de la difficulté à faire reconnaître leurs acquis.

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Dans le cadre du projet qu'on est en train de développer, il y aurait possibilité que cet obstacle soit levé et parce qu'elles sont également de langue anglaise, on pense que ça pourrait être un atout pour l'Hôpital. C'est un exemple, on peut parler également de projets de formation, on peut parler également de projets de mise à niveau. Il existe une kyrielle de programmes, mesures, outils méconnus de la part d'employeurs, incluant de grandes institutions, et qui peuvent être des leviers lorsqu'on parle d'intégration en emploi, de maintien en emploi ou même de stage.

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Je terminerai sur la question qui porte sur le volet de l'habitation où bien sûr nous voulons, comme ça a été mentionné par nos amis du Conseil communautaire NDG précédemment, vous sensibiliser au fait qu'on doit préserver le stock de logements existants autour des terrains, tant au niveau donc du logement privé que du logement à caractère

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social. Et bien sûr, s'il y a développement de projets de nature commerciale, que ce soit bureau, commerce ou autre dans le périmètre autour de l'Hôpital, on veut évidemment s'assurer qu'il n'y aura pas de perte pour les individus qui résident là et non plus de phénomène de « gentrification » qui pourrait entraîner une hausse des loyers ou de la valeur la propriété ce qui, dans le passé, s'est déjà vu et évidemment entraînait des problématiques pour ces individus-là.

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Alors ce sont les quatre volets sur lesquels on voulait attirer votre attention et, effectivement, on pourra vous laisser un document mais si c'est possible, on aimerait faire une ou deux petites modifications avant de vous le laisser si jamais vous y êtes intéressés.

**LE PRÉSIDENT :**

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On est certainement intéressés, Monsieur Lauzon, et effectivement prenez le temps qu'il faut peut-être pour y apporter des ajustements. Je vous demanderais de le faire parvenir à l'Office au plus tard à la fin de la semaine prochaine, disons, parce qu'on veut quand même afficher ça comme tout le reste sur notre site Web.

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J'aurais une bonne question peut-être à vous poser sur le dernier point que vous avez soulevé, la question de l'habitation. Quand vous dites que vous souhaitez évidemment qu'il n'y ait pas « gentrification » du secteur par effet d'entraînement, comment une préoccupation comme celle-là peut-elle se traduire dans des interventions, dans des mesures? À quoi pensez-vous comme façon d'éviter d'atténuer les pressions tendant à la « gentrification »?

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**M. CLAUDE LAUZON :**

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Écoutez, je pense qu'en ayant un message très clair qui stipule que les résidents de Notre-Dame-de-Grâce, parce qu'on parle surtout de Notre-Dame-de-Grâce ici, qui habitent à proximité de l'Hôpital ont non seulement le droit d'avoir un environnement de qualité mais également d'avoir accès à un logement, que ce soit au niveau à titre de propriétaire ou de locataire, c'est déjà un pas dans la bonne direction.

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On a, bien sûr, des associations, comme me le montre mon collègue, qui sont spécialisées dans le droit tant des locataires que des individus au niveau de l'habitation qui peuvent être associées à des instances municipales ou autres pour faire en sorte qu'on fait, encore une fois, circuler l'information de part et d'autre sur, d'une part, les droits que ces individus-là peuvent avoir à titre de résidents locataires mais d'autre part également sur les conséquences possibles d'un phénomène qui sévit dans d'autres quartiers.

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2040 Pour vous donner un exemple précis, à Côte-des-Neiges, l'Université de Montréal qui s'est développée sur le flanc de la montagne le long de Edouard-Montpetit a eu des besoins importants en termes d'édifices et on a transformé de nombreuses conciergeries sur la rue Edouard-Montpetit entre Decelles et Louis-Collin en bureaux de l'Université. Donc le nombre de logements disponibles, d'une part, de ce secteur-là a été réduit et ça a causé, bien sûr, en termes de rareté, une hausse des loyers.

2045 Nous avons, au sein de notre comité de revitalisation, prévu dans le comité des trois quartiers, un groupe qui se penche sur les questions d'habitation et qui pourrait également, en partenariat avec nos vis-à-vis de McGill, proposer des avenues à cet effet-là.

**LE PRÉSIDENT :**

2050 Monsieur Harper?

**M. ALEX HARPER :**

2055 Vous avez parlé de la question du stationnement sur la rue Sherbrooke pour les commerces, est-ce que vous avez pensé à des éléments de solution? Qu'est-ce que vous feriez si vous aviez le rôle décisionnel à ce sujet-là?

**M. CLAUDE LAUZON :**

2060 Essentiellement, je m'assurerais que dans le projet il y a un nombre de places suffisantes pour répondre aux besoins, à la fois des employés et des visiteurs de l'Hôpital. Vous savez, un des atouts au niveau du stationnement, ces rues commerciales là c'est qu'on a du stationnement de courte durée. Donc qu'il y ait un roulement dans la journée, même avec des parcomètres de façon à ce qu'on sache qu'on peut toujours trouver, en marchant des fois un petit peu, une place de stationnement sur la rue lorsqu'on va faire du shopping.

2065 Si, malheureusement, un flot de véhicules tel fait en sorte qu'on soit obligé de stationner son véhicule sur Sherbrooke, ne serait-ce que pour deux heures, si on va faire des visites ou autres, c'est évidemment des places en moins pour les clients des commerces de la rue Sherbrooke.

2070 **M. ALEX HARPER :**

En d'autres mots, vous laisseriez la politique telle qu'elle est actuellement.

**M. CLAUDE LAUZON :**

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Essentiellement, oui. Ce qu'on vous dit c'est que cet atout des rues commerciales comme la rue Sherbrooke doit être préservé parce que face à la concurrence des grandes surfaces, si c'est de plus en plus difficile de trouver du stationnement sur ces rues commerciales, malheureusement une partie de la clientèle risque de se retourner vers les

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grandes surfaces où il y a d'immenses parkings et où le stationnement n'est pas un problème.

Encore une fois, il faut comprendre que le commerce de proximité dans un quartier, c'est non seulement une activité économique mais c'est un des volets, lorsqu'on parle de la

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qualité de vie des résidents d'un quartier. Avoir accès à des services à proximité, c'est une des particularités qui, à notre avis, fait que c'est une valeur rajoutée d'avoir des commerces ayant pignon sur rue comme sur la rue Sherbrooke.

**M. ALEX HARPER :**

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Merci.

**LE PRÉSIDENT :**

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Madame Bourgeois?

**Mme MARGUERITE BOURGEOIS, commissaire :**

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Un peu suite aux questions qui ont été posées relativement au logement et à la protection des services de proximité, moi, je vous demande si vous avez des idées précises relatives à l'encadrement de vos recommandations relatives à l'emploi. En d'autres termes, on part de l'examen d'un projet de règlement, est-ce que relativement à l'emploi, vous êtes satisfait de continuer ou de travailler par voie d'entente ponctuelle et volontaire avec les intervenants ou bien si vous souhaitez qu'il y ait un encadrement un tant soi peu coercitif en

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regard de ces éléments-là?

**M. JOHNATTAN MCELLAND :**

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Non, je peux dire que ça se déroule très bien. Suite à l'entente qu'on a signée avec le CUSM et les groupes communautaires, il y a un sous-comité « employabilité » et on a eu quelques rencontres. McGill, de leur part, ont précisé leurs besoins pour les emplois et de notre part, on a regardé les clientèles qu'on a. Et on propose, à l'heure actuelle, deux projets pilotes : un pour la clientèle de St-Henri, un pour la clientèle de NDG. Donc jusqu'à ce point, McGill s'est montrée très ouverte à favoriser les projets qui permettraient aux résidents aux

2115 alentours du site, d'accéder aux emplois actuels et aussi d'être formés pour les emplois  
futurs.

**Mme MARGUERITE BOURGEOIS, commissaire :**

2120 Merci.

**LE PRÉSIDENT :**

2125 Merci, Messieurs. Et effectivement, je comprends que vous nous enverrez le  
document aussitôt qu'il sera prêt.

**M. CLAUDE LAUZON :**

2130 C'est ça.

**LE PRÉSIDENT :**

Merci beaucoup. J'appelle maintenant monsieur Siasb Zanganeh. Good evening sir.

2135 **M. SIASB ZANGANEH :**

Good evening.

**LE PRÉSIDENT :**

2140 Welcome. And you have ten minutes to expose your point of view and then we may  
want to ask you some questions.

**M. SIASB ZANGANEH :**

2145 Sure. Yes, I'm again resident of Prud'homme and I'm also speaking for other  
residents to who I spoke with earlier and they had the same problem regarding traffic actually  
on Prud'homme and Crowley essentially.

2150 Earlier in the last meeting or question sessions, I spoke regarding one of the  
problems that was actually more of a nuisance to us. Since I detected some other problem  
which was actually a problem, not a nuisance, in the traffic design and I brought it with McGill  
staff and they were very nice and they spoke with their traffic engineers and they said: "Yes,  
2155 there is actually a problem" and there was a possibility of a suggestion that they suggest that  
I should bring it up officially in the meeting here, so it is registered and hopefully there is a  
process of actually going through it and solving it in that regard.



**LE PRÉSIDENT :**

2160 Well, at least by stating your concerns and suggestions here, they are recorded and as well as in writing so and obviously they will be taken into account in our report.

**M. SIASB ZANGANEH :**

2165 I appreciate it, thank you.

**LE PRÉSIDENT :**

2170 So I would ask you then to go ahead with that.

**M. SIASB ZANGANEH :**

2175 Of course, thank you. Okay. The problem is right now, we have two areas of usage that we have, one of this is Sherbrooke, the other is St-Jacques. The problem that we have is that – main problem is St-Jacques. Coming back from St-Jacques, currently we have two means of accessing to Prud'homme. St-Jacques coming back what I mean is basically going eastbound from St-Jacques, arriving at Decarie – if I can point with the pointer there – coming eastbound from St-Jacques to Decarie, we currently turn left on Decarie and then turn left on Crowley to get to Crowley and Prud'homme.

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**LE PRÉSIDENT :**

Which is, I'm sorry, on the map you should show the large, the wider street...

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**M. SIASB ZANGANEH :**

On this one?

**LE PRÉSIDENT :**

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No, no, no, except that you're showing Decarie autoroute there. I think you were referring to the boulevard which is the one...

**M. SIASB ZANGANEH :**

2195 This is the boulevard, correct?

**LE PRÉSIDENT :**

2200 That's Decarie, right.

**M. SIASB ZANGANEH :**

2205 Right, Decarie Boulevard, correct. Currently, from St-Jacques we come here, we turn left on the Decarie Boulevard, on the small street Decarie, and then on Crowley we turn left again to access Prud'homme, Crowley and Prud'homme streets here in this section.

2210 Now, when we have the divider blocking the Crowley, basically this road is blocked, the only alternative that we use sometimes before the... currently that road is two ways, it was one way, we were able to do a U-turn sometimes and take, and then turn around and take Crowley.

2215 Now, since the road is two ways now, we cannot really do U-turn and although the sign is not there – probably it has to have some kind of signalisation for that purpose, if you do a U-turn. The engineers did suggest the U-turn. Although, if you do going to do a U-turn, we need some kind of a signalisation to make sure that it is safe, that it is done properly.

2220 The other suggestions were to opening here right in front of the Prud'homme from St-Jacques to allow us to do a left turn into the street but they looked at it briefly apparently and this space is not large enough for us to open an opening. So whether we do a U-turn to be able to go back to Prud'homme or any other suggestion, we at least need some kind of a safe solution to be implemented in this regard because right now, we're blocked in this design, to go back to...

2225 The only other solution that I can see from the map is we go all the way to St-Rémi, which is almost two kilometres extra to go to St-Rémi, go, turn right, do a turn around the roundabout or on the bridge and then come back all the way to go back again to Prud'homme which is almost two kilometres extra to just get to our street.

2230 So unless we have that solution or some kind of a safe solution, that is basically blocked and they already acknowledged that this is a problem.

**LE PRÉSIDENT :**

What you're saying, in fact, is the whole, that whole part of Prud'homme street is practically blocked with that proposal.

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**M. SIASB ZANGANEH :**

Coming from St-Jacques.

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**LE PRÉSIDENT :**

And you would like measures either allowing some special movements for the cars to come in or go out from that street.

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**M. SIASB ZANGANEH :**

Going out is fine, just basically coming from St-Jacques to Prud'homme. Going out, we're fine. The problem that we had that I mentioned was more of a nuisance, going northbound on Decarie from Crowley and Prud'homme, that is – right now, we have to do kind of... There's two ways to do that, one is the immediate way going actually to the Hospital and doing a round around the area there and then go back up there or actually go back to St-Jacques and take the Girouard up.

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Now currently, we're coming back, coming back toward Prud'homme, we have to take Girouard because Decarie is blocked for us. So we basically, one way we're giving up Decarie on the other side, we gain the other side, so it's basically a trade, a null trade for us in that with respect. That is more or less terrible, but nuisance but more terrible.

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**LE PRÉSIDENT :**

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Now, you've said that you discussed that problem with the people of the Hospital Centre, is there in any way some prospects that they brought satisfactory answer to your...

**M. SIASB ZANGANEH :**

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The U-turn on Decarie is fine with us; I mean we do that before we had a double light, as long as it's done safely because as long as we actually have a green light for that purpose and we can do that reasonably. I mean, we don't... Most people in the place don't have large cars. If they need a large car to bring in a truck, they could probably take that St-Rémi for special purposes, as far as I understand.

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2275 So the U-turn should be fine, unless engineers determine that a U-turn is not sufficient enough to be able to do there, then some of the solutions have to be implemented. So that was the suggestion that came out but I just wanted to make sure that if they go forward and they actually look at the measurements and the U-turn cannot be done for whatever reasons or parameters, then another solution will be needed to be implemented that is safe and is reasonable.

**LE PRÉSIDENT :**

2280 Okay. Just as a piece of information, do you have any idea of the number of families that live on Prud'homme?

**M. SIASB ZANGANEH :**

2285 We have approximately, we have something around 30 houses on the block and we have approximately five per block, we have somewhere around 60 cars in the block, 50 or 60 cars, and I average. I'm just ball parking it.

**LE PRÉSIDENT :**

2290 Very well. Just an order of magnitude.

**M. SIASB ZANGANEH :**

2295 Yes.

**LE PRÉSIDENT :**

2300 All right. Mr. Harper, no? Madame Bourgeois? So thank you very much, sir.

J'appelle maintenant monsieur Xavier Oriol.

**M. XAVIER ORIOL :**

2305 Bonjour.

**LE PRÉSIDENT :**

2310 Bonjour, Monsieur. Je vous invite à présenter votre opinion dans un maximum de dix minutes pour qu'on puisse vous poser des questions.

**M. XAVIER ORIOL :**

2315 Donc moi je suis Xavier Oriol, je suis propriétaire d'un triplex sur l'avenue Prud'homme entre Sherbrooke et de Maisonneuve. Alors j'avais deux remarques à faire principalement dans différents domaines.

2320 D'abord le premier, c'est sur le processus. En tant que propriétaire je n'habite pas là mais j'ai déménagé il n'y a pas tellement longtemps, avant j'habitais là et je n'ai pas été prévenu des réunions publiques.

Donc je n'ai pas pu avoir véritablement accès à toute l'information technique et aux personnes présentant vraiment les architectes, ce qu'ils allaient faire et les personnes concernant les travaux publics ou l'accès à l'autoroute, ce qui allait être fait.

2325 Alors je trouve ça dommage. Je ne sais pas si dans le processus il y a quelque chose qui est fait pour les propriétaires qui ont des propriétés et qui sont concernés par un projet, qui est quand même énorme, autour, dans le quartier, quoi. Donc ça c'est la première remarque.

2330 Dans la deuxième, je suis sensibilisé à l'accroissement du trafic qui va être très important. Donc entre Sherbrooke et de Maisonneuve ou St-Jacques, je fais une demande officielle pour avoir un mur antibruit parce que l'autoroute Décarie est déjà pas mal saturée mais, là, ça va être encore énorme et donc je sais que sur Addington, en face, il y a un projet de mur antibruit. Donc en plus, si en face il y a un mur antibruit, il y a des chances que ça se répercute du côté de Prud'homme, donc que ça accroisse encore la nuisance sonore du côté de Prud'homme, par rebond, je dirais, tout simplement.

2340 Donc, moi, je demande un mur antibruit aussi du côté de Prud'homme à ce niveau-là.

**LE PRÉSIDENT :**

Et ça fait le tour de vos...

**M. XAVIER ORIOL :**

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Exactement.

**LE PRÉSIDENT :**

2350 Bon, d'accord. Sur le premier point, le manque d'information, écoutez, je prends note. Je vais simplement rappeler qu'on essaie d'aviser les citoyens intéressés de la tenue d'une consultation publique, premièrement en publiant des avis en français et en anglais dans bien des cas, dans le présent cas aussi, dans les journaux principaux de même que dans les journaux locaux et également en distribuant plusieurs milliers de dépliants à toutes les portes du quartier.

2355 Bon. Peut-être que quelque part vous êtes tombé entre deux planches à titre de propriétaire non occupant. On le déplore mais jusqu'à maintenant, notre politique d'information à l'Office de consultation publique comportait ces volets d'avis publics dans les journaux plus les dépliants. Bien, là, écoutez, on espère aussi que le bouche à oreilles fait le reste.

2360 Plus fondamentalement sur la question que vous soulevez donc de vos préoccupations relativement au trafic, est-ce que vous avez déjà fait des demandes soit à la Ville ou au ministère des Transports concernant une protection acoustique?

2365

**M. XAVIER ORIOL :**

2370 Bien, nous, je sais qu'on a déjà rempli une pétition qui nous avait été apportée par monsieur Tremblay, qui habite donc l'avenue Prud'homme aussi dans cette partie-là. Bon, il n'y a pas eu de suite, et je pense que l'autoroute Décarie est là depuis combien de temps? 30 ans? Donc je pense que s'il n'en a jamais été fait en 30 ans, bon, c'est que manifestement il y a un blocage quelque part.

2375 Bon, maintenant, c'est une occasion, je le pense, parce que cette artère est quand même une véritable plaie, je dirais, au niveau des gens qui habitent autour et donc c'est une opportunité. Moi, je pense qu'à ce niveau-là, il est pratiquement obligatoire sur Prud'homme parce que si sur Addington, il y a un mur antibruit qui est fait, ça va être insupportable de l'autre côté si jamais il n'y a rien d'autre qui est fait pour canaliser le rebond du bruit de l'autre côté.

2380

Donc ça va véritablement être un vrai problème. Voilà.

Pour revenir un petit peu à ce que vous dites au sujet de l'information, moi, je trouve ça franchement dommage parce que...

2385 **LE PRÉSIDENT :**

Est-ce que vous avez une suggestion à faire?

2390 **M. XAVIER ORIOL :**

Oui, j'ai tout à fait une suggestion. C'est que en même temps qu'on nous envoie nos taxes aux propriétaires, on nous envoie ce genre d'information. On ne parle pas d'un petit projet, on ne parle pas de replanter un arbre, on ne parle pas de refaire un trottoir, on parle d'un méga projet d'un milliard de dollars. C'est quand même énorme. Et je trouve ça franchement dommage que nous, on a déménagé en six mois de temps, il n'y a pas de problème pour que nos taxes nous suivent. On les a reçus à notre nouvelle adresse. Mais par contre, là, pas d'information, rien.

2395  
2400 Alors ça dénote, je dirais, une approche vis-à-vis des propriétaires qui sont principalement propriétaires payeurs, et puis c'est tout. Alors je trouve ça franchement dommage.

**LE PRÉSIDENT :**

2405 Alors on en prend note, Monsieur.

**M. XAVIER ORIOL :**

2410 Merci.

**LE PRÉSIDENT :**

Est-ce que mes collègues ont des questions, non? Merci beaucoup, Monsieur Oriol.

2415 **M. XAVIER ORIOL :**

Merci.

**LE PRÉSIDENT :**

2420 Alors j'invite maintenant monsieur John Bishop à venir. So Mr. Bishop, welcome. We read your proposal because you were kind enough to send it to us earlier, but I would like you indeed to explain it to us.

**M. DON BISHOP :**

2425

I'll try to. Sorry, it doesn't come out perfectly as well as... There are papers here with this thing all written up. Just make one comment when we talk about the number of parking spaces – 2,500, you can never have enough of anything, you know. But the way it can be regulated is the price changes according to how many people are using it and whatever other system is used and one of the ways is that people use the metro system by going to a station where they can park within five or ten minutes of a station and get there at a nominal price.

2430

Second little comment. I was quite impressed with what I found in the written report of the traffic plan that is been done. This was my basic concern. I was so concerned about this junction and how they would ever solve the problem with the additional hospital, but I think they have. And one of the interesting ones is how they're getting both access and in both ways; going and coming from all the major highways. Expensive but...

2435

So the only thing I could concentrate on and what I felt would be in addition that hasn't been pushed very hard is basically...

2440

**LE PRÉSIDENT :**

Please take the mic with you if you want...

2445

**M. DON BISHOP :**

It's this bikeway along de Maisonneuve on the north side which will... And this is about 45% of the direction to Claremont, which I'm using the existing thing but from here on it's just the same as that area there.

2450

But what this involves is – and of course this bikeway goes all the way to Montreal West and in this direction, it goes all the way to the Green Avenue through Westmount. And it's just this little section that hasn't got it and it's dangerous for the people moving there.

2455

Fundamentally, what has to be done is I'm suggesting the road has to be widened between this point where you can – without affecting any buildings, you have to take some of the land there and right to Marlowe because this is the area that you have to build up traffic for the lights when they're red. And you have a lot of traffic coming up but I think there's enough room, even for a third lane here to cover that problem.

2460

Of course, the way you can also regulate that is how long, how often you have to change the cycle but now this particular bit of work that has to be done from here to here is about a hundred meters and Marc Perreault has just suggested that that's about \$600 a



2465 meter out of the blue sky, which is \$60,000 is get you a bikeway. And to me this is kind of a small fry with the rest of the money that is being spent.

I'll come back with the sketch if anybody wants to look at it again (inaudible).

2470 **LE PRÉSIDENT :**

Mr. Bishop, once again, please speak in the mic or bring it with you. You're commenting while you're doing it so perhaps we're missing things.

2475 **M. DON BISHOP :**

I'm suggesting that de Maisonneuve bikeway north side, about 50% will be permanently a bikeway basically on the western end but about 50% — and there's no parking permitted in that area so we're not affecting the parking and of course that's where it is being widened too, but there is about 50% that goes from Marlowe east and that has about 18 parking spaces which the suggestion is that we have a kind of a signing, for example, of this kind in that area which permits the bicycles but does not permit any parking between — I'm suggesting in the evening between 4 o'clock and 6:30 and in the morning, in the rush hours.

2485 I did make an observation on Monday the 6<sup>th</sup> in-between 4:30 and 6:00, I found 92 bicycles travel per hour and the next day, in a little earlier time, it was 55 per hour. Now, I suggest that if this bikeway exists, there would be significant increase usages because it is safer, segregated, and also new trends are now favouring more exercise and greater energy conservation.

2490

The proposed bike route which I heard in the earlier thing which is going through the Hospital grounds, it was at least 65% longer than this direct route and to me, anybody trying to do this, they will not take that. They will use what they can now. So the direct route will best connect to the existing east-west bikeway. I've said that earlier.

2495

The second comment that I had was — which we have to go back to the other sketch but it's to make use of the tunnelling, the Upper Lachine tunnel for parking and I'll show you — which will get you about 45 more cars.

2500

In the tunnel, it is good wide space now and the bus will go through but there's plenty of room to have parking on each side here. And this way, you could get, as I said, whatever that number of cars was, but you have to have good signs at the new Girouard turn-around saying that there's parking but no outlet, which means that we have this turnaround that you have to do here, obligatory car turnaround and even there is ways to make it so you can't get across by having a flip but basically it starts with signage.

2505

2510 And this of course will be pay-parking and very handy for people that want to get in to the Hospital; it would be probably like 4-hour parking so you don't have... It's a useful kind of a thing and the price will go according to how heavily it is used. But that makes use of that space.

**LE PRÉSIDENT :**

2515 I will ask you to conclude, Mr. Bishop.

**M. DON BISHOP :**

That's it, I'm finished.

2520 **LE PRÉSIDENT :**

Wonderful. Mr. Harper?

**M. DON BISHOP :**

2525 Oh, sorry! There is one comment I didn't make and it's on the very new issue and it's not on these things.

**LE PRÉSIDENT :**

2530 Please speak in the mic.

**M. DON BISHOP :**

2535 I'll just read it. I thought after I had done this that there's a problem with the bicycles going into this area where that in the non-rush hours where the cars are parked, coming along they would be running on the north side and opposite direction very complicated. So you have to have a little sign posted at Vendome where we would read: "À l'extérieur des heures de pointe, les ciclystes en direction Est devront traverser de l'autre côté" and there's  
2540 a traffic light where the bus is coming right at... So they'll have to get going with the regular flow.

So that's my comment.

**LE PRÉSIDENT :**

2545

Thank you sir. Mr. Harper?

**M. ALEX HARPER :**

2550

I just got your brief this morning and I was so intrigued by it that I drove down and had a look at the area that you're talking about before the hearing tonight. And the question that I had was – and have – is what do you do between the one side of Decarie and the other side of Decarie where the cyclist would continue? How do you get across Decarie, in other words?

2555

**M. DON BISHOP :**

2560

We already have the route that's coming and there is a turnaround here. When you're building all this thing, you have to arrange to get a way the bikes can come down to that point. And then they have to use the traffic light to get over to here. But you have to wait for two lights to get over it.

2565

And also, somehow enough space that bicycles can work this. I mean it'll be nice to use, but you can't have there, but particularly it's pretty tight. But especially where you're rebuilding, this could be certainly covered to have two or three bicycles. Anyway, that's my answer.

**M. ALEX HARPER :**

2570

So you'd see this as an alternative to what the project is proposing inside the complex?

**M. DON BISHOP :**

2575

Oh, I think it's absolutely ridiculous. Who's going to take the time to go 65% of the way when they are over the way in their way home using that bikeway? They're not going to go through... It's a long way. You just look and figure it out.

**M. ALEX HARPER :**

2580

Thank you.

**M. DON BISHOP :**

2585 It's for enjoyment but not for usefulness which is why the people are using it. And they're coming there because they have to do it, but this is going to make it much more attractive and more people will do it.

**M. ALEX HARPER :**

2590 Excuse me. I guess one of the elements of it though is that there are people who would like to see this as a way to get to the Lachine Canal, so maybe there has to be some marriage between the two.

**M. DON BISHOP :**

2595 I have no ideas of that, I'm just trying to get this long way that we have all in one situation.

**M. ALEX HARPER :**

2600 Thank you.

**LE PRÉSIDENT :**

2605 Thank you very much, Mr. Bishop. Alors j'invite maintenant monsieur Michael Applebaum.

**M. MICHAEL APPLEBAUM :**

2610 Merci.

**LE PRÉSIDENT :**

2615 Bonsoir, Monsieur. Je comprends que votre collègue, monsieur Tremblay, présentera demain soir ce qui semble être le document officiel du Conseil d'arrondissement.

**M. MICHAEL APPLEBAUM :**

Pas exactement. Pas exactement, non.

2620 **LE PRÉSIDENT :**

C'est ce qui nous a été envoyé cet après-midi.

2625 **M. MICHAEL APPLEBAUM :**

Monsieur Tremblay présente un bref, je pense plus que c'est un bref de monsieur Tremblay, en même temps il y a aussi monsieur Searle qui va présenter peut-être quelque chose demain.

2630 Je ne suis pas venu ici ce soir pour présenter un bref et une raison, c'est parce que comme vous le savez, je suis le maire de l'arrondissement de Côte-des-Neiges – Notre-Dame-de-Grâce et pour moi, de présenter un bref où peut-être les personnes de London, Ontario peuvent l'utiliser pour essayer de convaincre des différentes personnes à Baltimore de voter en faveur de déplacer le Shriners Hôpital à London, je n'ai pas voulu le faire.

2635 Mais en même temps, en écoutant différents intervenants et que vous m'avez accordé quelques minutes, j'ai décidé de...

2640 **LE PRÉSIDENT :**

Mais à la condition que vous ne répondiez pas aux intervenants.

2645 **M. MICHAEL APPLEBAUM :**

Quoi?

**LE PRÉSIDENT :**

À la condition que vous ne répondiez pas aux intervenants ce soir.

2650 **M. MICHAEL APPLEBAUM :**

2655 Non, non, pas du tout. Pas du tout, je ne suis pas ici pour ça du tout, je suis ici pour expliquer quelques points de vue et quelques clarifications que j'ai, personnellement, comme citoyen de l'arrondissement mais même aussi comme maire de l'arrondissement et je ne suis pas ici pour contredire aucune personne, pas du tout.

2660 Premièrement, je dois dire que l'Hôpital est chanceux d'avoir pris la décision de venir dans Côte-des-Neiges – Notre-Dame-de-Grâce parce que comme vous le savez, on a beaucoup de différentes institutions sur notre territoire, on a Sainte-Justine, on a le Jewish General, Ste-Marys, the Queen-Elizabeth Health Complex, parmi aussi d'autres institutions

chez nous et comme vous le voyez, même des citoyens et des travailleurs de la Ville de Montréal ont fait tout ce qui est possible pour être capables d'acquérir l'Hôpital chez nous et encore plus pour essayer de convaincre les Shriners de rester chez nous et on va faire tout  
2665 notre possible d'assurer que l'Hôpital installé dans notre territoire, il y a aucune question pour moi d'essayer d'arrêter le projet de Shriners ni de l'Hôpital.

Il y a quelques choses que j'aimerais pointer à vous autres pour expliquer mon point de vue. La première c'est si les Shriners ne viennent pas, premièrement vous avez un gros  
2670 terrain et si les Shriners ne viennent pas, ça peut mettre en péril le projet comme tel et parce qu'en même temps, vous savez que la façon que tous les pavillons ont été construits, c'est fait pour avoir les enfants, la famille, les aînés et le Shriners est branché clairement avec the Children Hospital.

Si les Shriners ne viennent pas, ça remet en question comment tout le design est fait sur le terrain parce que tu ne peux pas installer quelque chose sur ces terrains-là qui ne rentre pas dans le fonctionnement de l'Hôpital. Et la raison que l'Hôpital est fait dans ce sens-là, c'est d'être capable d'être le plus efficace possible. Et s'il y a une modification, la modification qui devrait être faite c'est que plus d'alignement avec les rues comme Grey,  
2680 Vendôme et les autres rues. Et ça, c'est quelque chose qui peut être regardé si les Shriners ne viennent pas, mais on souhaite qu'ils viennent et je vais faire tout mon possible d'assurer qu'ils s'installent sur le site.

La prochaine chose c'est la circulation. Il faut toujours prendre connaissance des études qui sont faites par nos experts and we have to rely on our experts to make sure that  
2685 they know what the figures are and the numbers are.

Comme vous le savez j'espère, les personnes qui vont aller sur le site pour travailler, ils ne travaillent pas les mêmes heures que les autres citoyens qui vont aller au travail le matin. Ils arrivent plus tôt et ils partent plus tôt. Comme ça, ils ne sont pas dans la circulation normale que vous allez trouver à 4 h ou 5 h dans l'après-midi, comme ça la circulation va être un peu plus fluide que qu'est-ce que peut-être les personnes pensent et même dans le matin, les travailleurs arrivent vers 7 h le matin avant qu'il y ait tout le trafic sur toutes les autoroutes.  
2690

Et même, ces travailleurs sont déjà sur les routes et comme ça, ça ne met pas encore plus de personnes sur les routes.  
2695

Vous le savez que quand vous regardez le projet, Côte-des-Neiges – Notre-Dame-de-Grâce est ouverte à ces projets-là, c'est clair. On est ici et on a travaillé clairement avec tout le MUHC et aussi avec la Centrale qui pilote le dossier. Mais quand on regarde Westmount, il n'y a aucune ouverture. Aucune ouverture. Ils disent clairement : « Pas dans ma cour ». Et quand on parle des accès, je pense qu'il faut avoir un deuxième accès. Je  
2700

2705 comprends que le deuxième accès sort sur une rue qui appartient à Westmount, moi, je vous suggère de regarder l'opportunité de peut-être amener la deuxième entrée et sortie sur le coin de rue qui est situé dans la ville de Montréal. Comme ça, même si Westmount n'est pas d'accord de recevoir ce trafic-là, la Ville de Montréal accepte et les gens qui habitent dans Westmount, qui plusieurs peut-être vont travailler là, qui vont aller là quand ils ont des problèmes de maladie, qu'ils reçoivent aussi un peu de trafic pour assurer que dans un site  
2710 de ce type-là, qu'il y ait toujours deux accès.

Et la seule raison pourquoi cette entrée n'est pas faite, c'est parce qu'ils ont eu des bonnes négociations avec Westmount et Westmount a toujours refusé. Mais n'oubliez pas they're going to have benefits from that Hospital being there and it's the borough of Côte des-  
2715 Neiges allowing the Hospital to come, so I think that there should be corrections done. Il y a toujours une possibilité de le prolonger et de sortir sur la route de la Ville de Montréal et d'assurer que des gens qui viennent, qui parlent toujours d'une deuxième route ont un peu de succès dans ces audiences publiques.

2720 Il y avait un monsieur qui est venu pour Crowley – Prud'homme. Ça, c'est clair. Je ne veux pas commencer à vous dire quoi faire pour corriger le problème mais si vous habitez sur la rue Crowley et vous êtes chez Canadian Tire dans l'ouest de St-Jacques, il faut aller jusqu'à Sherbrooke pour retourner chez vous. Comme ça, il y a une correction qui devrait être faite là.

2725 Si on parle de Girouard avec l'entrée de l'autoroute, j'aimerais voir s'il y a une possibilité d'avoir des gens qui accèdent, pas seulement par le sud en direction nord mais même encore du nord dans la direction sud, comme c'est en ce moment. The way that it is at the present moment; so try to see if there's a possibility of having people coming in from both  
2730 sides and not having to do a roundabout.

I'm concerned about the roundabout. I've gone to Mont-Tremblant and it concerns me. As a matter of fact, I was just in the States this weekend and a couple of weekends ago and that roundabout causes problems for me. I find it difficult to figure out exactly who is going when and all that. I think that there should be a regular light at Girouard.  
2735

The next thing is the government has to build the roads. The project doesn't work if the roads are not being built and that has to be done and I believe it will be done but in the report it's very, very clear that when we talk about circulation and studies, that in order for it  
2740 to work, if you don't do one thing that it changes the numbers everywhere else and in order for the project to work and for the circulation to flow, all of the circulation has to be put in place. So that has to be done.

2745 Quand on parle de la piste cyclable, the bicycle path, c'est clair que les gens – maintenant vous avez la piste cyclable sur la rue de Maisonneuve et après ça, la proposition c'est de commencer d'aller sur le site et vraiment promener sur le site. Et c'est bien trop long. Les gens qui sont les cyclistes vont clairement utiliser la route la plus courte et la plus courte c'est de Maisonneuve.

2750 Je pense qu'à cause de la sortie sur Addington, sur de Maisonneuve, ça met en danger les cyclistes. Vous devriez prendre la piste cyclable et la mettre sur le terrain du CP. Vous avez une distance entre le trottoir qui n'est pas un trottoir, c'est seulement un morceau de béton et la clôture, bougez la clôture si c'est nécessaire mais enlevez les cyclistes de la rue parce que quand les voitures ou les camions, les gros camions vont sortir là, ils vont aller dans la piste cyclable, ce qui met en danger les cyclistes.

2755 Et quand vous faites aussi le pont sur Décarie, élargir le pont et laisser les cyclistes passer sur le pont parce qu'ils sont déjà à côté de la clôture, ils arrêtent, à un certain point ils arrêtent juste avant Décarie, ou Prud'homme, laissez les gens monter et utiliser le chemin, pas le chemin de fer mais juste à côté du chemin de fer, prolonger tout le long après ça d'être capable de connecter plus loin to the bicycle path of Westmount.

2760 **LE PRÉSIDENT :**

2765 Je vais vous demander de conclure, Monsieur Applebaum.

**M. MICHAEL APPLEBAUM :**

2770 O.K., oui. If we're talking about the tunnel, the tunnel at Claremont, it's a question of danger, I'm not sure exactly on how they're going to make sure that that tunnel is safe. If you go, my suggestion is if you do go around 7 o'clock or 9 o'clock at night to the tunnel of Melrose that goes underneath the train tracks, none of you will be going through that tunnel. It's a scary tunnel, it doesn't feel safe and I question that tunnel over there.

2775 In closing, if the borough had the opportunity, you realize that when land is divided, the borough is allowed to get 10% "fins de parc" either green space or 10% value; if we had the opportunity, the borough of Côte-des-Neiges – NDG would take 10% of green space and if permitted, they would then go out and take the land on Decarie and go out speak to private developers like the FTQ or maybe the Caisse de depot and do some development for office spaces. Because as you're aware, there's need for approximately 4,000 square meters of office space for the different doctors and for different types of clinics.

2780 We are not allowed to do so but what we're seeing here is we have a reduction of 900 and about 90 beds down to approximately 500 beds. You squish the project into Côte-des-Neiges – NDG what should be looked at here is when we're talking about PPPs, the



2785 Hospital should be looking at allowing some of this development to be built on their site so that this way here, there is generated revenue for the Hospital and the doctors and patients will stay on the site.

2790 We know that there is a lack of doctors and why make a doctor put on his coat, walk to Sherbrooke street, which will take him maybe half and hour and walk back and lose time when you have a pole of attraction. You've got the doctors and all this, all the clients, build on the site to give services to the people that are there instead of forcing them to go off the site and congesting also the streets that are around.

2795 Economic development is incredible because of this; we see it already, the people wanting to move into the area...

**LE PRÉSIDENT :**

2800 Pouvez-vous conclure s'il vous plaît?

**M. MICHAEL APPLEBAUM :**

2805 Yes. It's a great project, there are certain things that have to be modified et ça, c'est quelques suggestions que j'ai pour vous ce soir. Et merci de m'avoir donné la chance.

**LE PRÉSIDENT :**

2810 Merci, Monsieur Applebaum.

Alors ça met fin à la rencontre de ce soir. Nous reprenons demain pour une deuxième séance, ici même à 7 h.

2815 So see you tomorrow night at 7 o'clock.

**AJOURNEMENT**

\* \* \* \* \*

2820 Je, soussignée, YOLANDE TEASDALE, sténographe officielle, certifie sous mon  
serment d'office que les pages qui précèdent sont et contiennent la transcription exacte et  
fidèle des propos recueillis par moi au moyen du sténomasque, le tout selon la loi.

ET J'AI SIGNÉ :

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Yolande Teasdale, s.o.

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