



**Greenwich  
Village  
Society for  
Historic  
Preservation**

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**Testimony of Andrew Berman, Executive Director  
Greenwich Village Society for Historic Preservation  
regarding St. Vincent's/Rudin proposal for  
demolition of nine buildings  
and 1.3 million square feet of new construction  
in the Greenwich Village Historic District  
January 22, 2008**

I appreciate the opportunity to testify before you tonight regarding what is far and away the largest proposed development in Greenwich Village in more than 50 years, and one with particularly far-reaching implications. If approved as is, this proposal would not only have a huge impact upon the surrounding West Village neighborhood, but it would essentially redefine what being in a historic district means, and how private developers can leverage institutions to get permission for demolition and bigger developments than they would normally ever be allowed. GVSHP recognizes the importance of St. Vincent's proposal to construct a new hospital, and have absolutely no objection to a new hospital being built. But we believe that the current proposal, with wholesale demolition and massive new additional development, cannot be the way to do it, and that reasonable alternatives that also protect the character of the neighborhood exist.

First I would like to remind you that while landmarks law allows one to apply for a hardship exemption from landmark regulations, these applicants have not chosen to go that route. Instead they are seeking a "Certificate of Appropriateness," which is based purely upon proving your proposed changes are "appropriate" to the historic district. As such, if approval is granted here, we have radically redefined what is "appropriate" in this or any other historic district, and believe me, others will follow upon this precedent.

And quite a precedent it will be. No one in the 43 year history of New York City landmarks law has ever gotten permission to demolish nine buildings within a historic district, much less even applied to do so. This clearly runs contrary to the entire meaning of landmark designation – why would the Landmarks Preservation Commission have designated these buildings if they thought none of them were worthy of preservation? The proposed new buildings are also awesome in their scale, and their precedent – no buildings of even remotely comparable size have ever been approved in any of New York City's 90 historic districts – including those in Midtown and the Financial District.

And this is not the only precedent to be set here. Institutions like St. Vincent's have been given special permission to build extra large buildings in our neighborhood because of the public service they provide. In some cases, like the hospital, we would argue this makes sense; in others, we would argue against it. Regardless, this proposal would now transfer the additional bulk St. Vincent's got for their last hospital expansion to Rudin for their luxury condo development, and actually increase it. This would in essence be an upzoning of the sites – [by 200,000 sq. ft. and 22%](#) -- and Greenwich Village has successfully

fought off any attempts to upzone our neighborhood for over a generation, and in fact has been seeking downzonings of our neighborhood. If this precedent is set, you can expect that every institution in our neighborhood – and there are a lot of them – will look to this to see how they too can sell their bonus to a private developer, and even increase it.

I would also urge you to remember that this is not a non-profit venture for Rudin. While the fee for the sale of land goes to St. Vincent's, the profit from the developments go to Rudin, and that is what these approvals will be supporting as well.

This is not the route we should be going, and [we and many others have tried to work with St. Vincent's from the beginning to get them to pursue other approaches](#). In addition to the feedback GVSHP has been giving the hospital for over a year, a coalition of more than a dozen neighborhood-wide groups, block associations, and nearby impacted buildings have offered a ["Community Alternative Plan"](#) that would allow St. Vincent's to develop every square foot of new hospital space it says it needs, and even allow properties to be sold for revenue-generation as they are proposing, but do it in a way which is consistent with landmark regulations and neighborhood character.

[The hospital's historic buildings should be preserved and re-used as part of the new development](#); whether it's for residences or whatever else. Don't let them fool you when they say it cannot be done; look no further than the former French Hospital in Chelsea or the landmarked former NY Cancer Center on the Upper West Side for buildings that have been re-used in this way. Those non-historic buildings which the hospital wishes to sell off, such as [Coleman, Link, and Cronin](#), can be demolished and redeveloped, but at a scale consistent with the neighborhood, rather than the massive scale now proposed.

[The huge proposed Rudin apartment block on 7<sup>th</sup> Avenue](#) should be eliminated – there is no excuse, and no precedent, for that scale of development in this neighborhood. And the hospital must consider the possibility of splitting its facilities between two moderately-sized buildings on either side of 7<sup>th</sup> Avenue, rather than the one gargantuan building now proposed. Because St. Vincent's in fact already has a tunnel under 7<sup>th</sup> Avenue connecting their facilities, it is hard to understand why such an arrangement would not be possible, other than the hospital and the developer's desire to maximize their return on this sale.

We want to work with St. Vincent's, rather than fight their proposal. But so far there have been no changes to their plans in spite of consistent feedback from the community urging them to do so. I urge you, in the strongest of possible terms, to consider the implications that approving the proposal as is will have on our neighborhood, and on future developments. Please join us in telling St. Vincent's and Rudin that the current plan is not acceptable, and that they should look towards the principles in the Community Alternative Plan to develop a new hospital which respects the fabric of our neighborhood and the landmark and zoning protections which are so incredibly vital to us.