

# Transcript of **Public Hearing Petition No. 4364, Volume 5**

**Date:** January 26, 2016

**Case:** Kane County Zoning Board of Appeals

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#### 639 1 BEFORE THE KANE COUNTY BOARD OF APPEALS 2 3 4 In Re: MAXXAM PARTNERS, LLC 5 6 Special Use request in the : 7 F Farming District for a 8 private-pay alcoholism and : 9 substance abuse treatment : Petition No. 4364 10 facility 41W400 Silver Glen : Road, Section 19, Campton : 11 12 Township (08-19-400-004) and : 13 Section 34, Plato Township : (05-34-300-032 & 05-34-400-025): 14 15 16 PUBLIC HEARING - VOLUME 5 17 St. Charles, Illinois 18 19 Tuesday, January 26, 2016 20 7:00 p.m. 21 22 Job No.: 102709 Pages: 639 - 808 23 Reported by:Paula M. Quetsch, CSR 24

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1	Report of proceedings held at the location of:	
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3	KANE COUNTY CIRCUIT COURT CLERK -	
4	BRANCH COURT	
5	530 South Randall Road	
6	St. Charles, Illinois 60174	
7	(630) 232-3495	
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10		
11	Before Paula M. Quetsch, a Certified Shorthand	
12	Reporter and a Notary Public in and for the State of	
13	Illinois.	
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1	PRESENT:	
2	JOSEPH WHITE, Chairman	
3	HAROLD BOWEN, Member	
4	PENNY CAMERON, Member	
5	DANIEL HEINRICH, Member	
6	ROBERT MOGA, Member	
7	GERALD REGAN, Member	
8	ROXANNE STOVER, Member	
9		
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17	ALSO PRESENT:	
18	MARK VAN KERKHOFF, Zoning Enforcing Officer	
19	KEITH BERKHOUT, Secretary	
20		
21		
22		
23		
24		

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1	PROCEEDINGS	
2	CHAIRMAN WHITE: I have 7:00. I'll call the	
3	meeting to order.	
4	Everybody please rise for the pledge.	
5	(The Pledge of Allegiance was recited.)	
6	CHAIRMAN WHITE: Secretary, please call	
7	the roll.	
8	MR. BERKHOUT: Bowen.	
9	MEMBER BOWEN: Here.	
10	MR. BERKHOUT: Cameron.	
11	MEMBER CAMERON: Here.	
12	MR. BERKHOUT: Heinrich.	
13	MEMBER HEINRICH: Here.	
14	MR. BERKHOUT: Moga.	
15	MEMBER MOGA: Here.	
16	MR. BERKHOUT: Regan.	
17	MEMBER REGAN: Here.	
18	MR. BERKHOUT: Stover.	
19	MEMBER STOVER: Here.	
20	MR. BERKHOUT: White.	
21	CHAIRMAN WHITE: Present.	
22	We have a quorum for this evening's public	
23	hearing.	
24	This is a continuation of the public hearing	

on Petition No. 4364. It is a petition for a special use request in the F Farming District for a private pay alcoholism and substance abuse treatment facility. It's located at 41W400 Silver Glen Road in Section 19 of Campton Hills Township and in Section 34 of Plato Township, and the petitioner is Glenwood Academy and Maxxam Partners, LLC.

2.4

Is the petitioner ready to proceed?

MR. KOLB: We have a quick housekeeping matter. We had prepared and tendered earlier to Mr. VanKerkhoff and Mr. Kinnally a motion to withdraw Art Passman as an expert and to clarify the record regarding his role as an attorney of record in the case.

If you recall, Mr. Passman was retained by the applicant to provide opinions regarding the applicability of the Fair Housing Act to this application, and Mr. Passman was listed as a witness when, in fact, we intend to offer those opinions as counsel of record, and there are certain privileges that apply in the attorney-client relationship that may be different when an expert is retained.

So we want the record to reflect that Mr. Passman's role is that of counsel of record as

647 1 opposed to an expert witness and that the law firm 2 of Holland & Knight so join in that motion I tendered earlier. 3 4 So we'd ask the Chairman for ruling on that 5 issue. 6 CHAIRMAN WHITE: Yes, I will agree to that. 7 MR. KOLB: Then we would like to call our 8 first witness, Dr. Hendrickson. 9 CHAIRMAN WHITE: And if you would like, 10 Dr. Hendrickson, we have a witness stand up at the front here, if you'd please accommodate us. 11 12 MR. KOLB: We have an exhibit, if I can so 13 approach. CHAIRMAN WHITE: Yes, you may. 14 15 I'll need to swear you in, Dr. Hendrickson. Please raise your right hand. 16 17 (Witness sworn.) 18 CHAIRMAN WHITE: Thank you. And then please 19 state your name and your relationship with this 20 petition for the record. 21 THE WITNESS: My name is Leslie Hendrickson, 22 and I've been called as an expert witness. 23 CHAIRMAN WHITE: Thank you. You may take 2.4 a seat.

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1	LESLIE HENDRICKSON, PhD,	
2	having been duly sworn, testified as follows:	
3	DIRECT EXAMINATION BY COUNSEL FOR THE PETITIONER	
4	BY MR. KOLB:	
5	Q Good evening, Dr. Hendrickson. How are you	
6	Dr. Hendrickson.	
7	Could you tell us a little bit about your	
8	background and professional experience?	
9	A Yes. I have 25 years in the Medicaid	
10	program, including working in both Oregon and	
11	New Jersey, and I retired from New Jersey as an	
12	assistant commissioner in the Department of Health.	
13	I worked for after that I worked for	
14	two years as the revenue services director of	
15	Maximus Consulting Firm where I went to I was	
16	mailed to a dozen or so states to work on Federal	
17	costs involving Medicare and Medicaid and including	
18	a lot of work for state mental hospitals. For the	
19	last 12 years, I've been an independent consultant.	
20	Q And would you consider yourself an expert	
21	with respect to a site location expert with	
22	respect to substance abuse treatment facilities?	
23	A Yes, I would. In my consulting work I	
24	really had two sort of main threads, if you will, or	

themes of work.

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First, I've been employed as a subject matter expert by national research companies, and in that respect I participated in really large-scale studies of state health programs: West Virginia, Oregon, Texas, and this last year in 2015 in Alaska. And these are studies where a team of people, three, four folks go to a state, spend two, three, four months there reviewing records, talking to providers, talking to State staff and then making recommendations as to how the mix of programs would be changed in that state, like where programs need to be located, for example, or changed.

The second thread of my consulting work has been work on locations of programs, and I've done some 70 studies on where to locate a program. About 30 of them are in long-term care, assisted living, dementia programs, nursing homes, and about 40 of my — these studies have been behavioral health, mostly substance abuse.

And there are two kinds of studies, one where folks ask you to look at a given address in this town or state, and then I attempt to predict how many people would actually use the service in

1 that location, outpatient, inpatient, detoxification. 2 And, also, I could be asked to look at a state or 3 region and to say where would the best place in that 4 area be to locate a program. 5 So before we dive in your experience with 6 alcoholism and substance abuse treatment facilities 7 and the work that you have done, can you tell the Zoning Board of Appeals and the chairman and the 8 9 County and the public some of your educational 10 background? I have a bachelor's, a master's, and a 11 Yes. 12 PhD in sociology, and I've just literally done that all my life. I've just been a sociologist all my 13 life doing research and studies. So I have a strong 14 15 quantitative background in research and statistics. That's what my doctorate was in, and I just have 16 17 done that all my life. 18 You're also an honorably discharged marine? 19 Yes, I am. Α All right. We note that you have -- well, 20 21 let me ask you this: In your work in the context of 22 site analysis, have you had the opportunity to study 23 the correlation between crime and an alcoholism and 2.4 substance abuse facility?

A Yes, I have. Because the concern about crime by the neighbors around a proposed location is just a common theme. I mean, it occurs literally every time a particular program is being discussed in front of a zoning board. So in that context I've done work on identifying to what extent crime actually occurs around treatment centers.

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In fact, I was commissioned to do a study in 2012 by a client who was trying to deal with the comments from the concerned people about an increase in crime around a particular proposed program. It's a very common topic when you're working on locations of programs.

Q How many other studies involving alcoholism or substance abuse treatment facilities have you conducted in your career?

A I really don't know. I probably have some 70 or 80 publications, and I mentioned some of the large case studies I've participated in; I've mentioned the site location work that I do. So it's really been an extensive background. I just visit a lot of programs and talk to a lot of people in the industry. I attend the national conferences on — like the — a few years back I went to the opiate

652 1 treatment center folks, the methadone maintenance 2 program national conference; twice I've been to their 3 conferences just learning about their programs and 4 listening to folks talk about the work that they do. 5 Now, we have -- my cocounsel and I have 6 found very few studies directly on point regarding 7 the correlation between crime and an alcoholism and substance abuse treatment facility. You've authored 8 9 more than a few that we found, so I'd like to draw everyone's attention to what is marked as Exhibit J18 10 and we ask -- which is a report authored by 11 Dr. Hendrickson and ask that it be admitted into 12 evidence in this proceeding. 13 MEMBER STOVER: So moved. 14 15 MEMBER CAMERON: Second. 16 CHAIRMAN WHITE: Moved by Ms. Stover, 17 seconded by Ms. Cameron. All in favor say aye. 18 (Ayes heard.) 19 CHAIRMAN WHITE: Opposed, same sign. 20 MR. KINNALLY: Mr. Chairman, I think we're 21 on J19. J18 was already identified in my notes. 22 That's what I have. It came in through Ms. Diedrich 23 the last time, so I think we're on 19. 2.4 MR. KOLB: That's fine. We'll use 19.

CHAIRMAN WHITE: That's fine. 1 2 (Exhibit J19 marked for identification 3 and retained by the Board.) 4 BY MR. KOLB: 5 So I note on page 1 -- this is a summary of 6 your findings, and I'll just read it and make sure 7 it still is your summary. Your conclusion of your report it says, 8 9 "Studies cited show that there is not a correlation 10 between crime and the presence of substance abuse treatment centers." Is that correct? 11 12 Yes, it is. Α All right. What's -- what's the context of 13 this report? Why was it prepared, and for whom, 14 15 and when? It was originally done around 2012. I think 16 17 that was the first version of it, and I updated it a 18 little bit for this hearing by adding a few more 19 studies that I found. But it was done for a substance abuse provider in White Plains, New York, 20 21 who was proposing a program there and was concerned 22 about finding some factual way of addressing concerns 23 of people in the area that there might be increased 2.4 crime because of the presence of their residential

and their detoxification program.

2.4

Q And can you go through some of the sources and data that you qualitatively reviewed for this report?

A Yes. The report is short. It's very straightforward. I really just identify the studies and repeat the findings from the studies. So I'm not really adding much interpretation to them at all. This is just a literal representation of what's in the data.

These -- in the first part of the paper I mention the most relevant studies that really directly discuss substance abuse treatment centers and the presence of crime. And the reason these are significant studies is because of the measurement techniques that are involved.

What the focus to do is they do very precise measurements of where crime is located. So they get the exact longitude and latitude coordinates of the crime so they can very accurately put them in a GPS system. So you know pretty much to the foot or at least the small micro area where the crime occurred.

So then they take the locations of both

treatment centers, as well as a host of other businesses, bars, sexually-oriented businesses, convenience stores, retail stores, hospitals, and they plot the -- they measure the distance from the crime to each of these various business types.

2.4

And then they also -- because there's other variables affecting the incidence of crime such as the socioeconomics, the SCS levels in the area, they then measure those factors, as well, and control -- they use regression techniques, and they control variants to eliminate the impact of those factors, those other factors and just try to get at what the relationship is between that particular business and the location of crime around it.

And I think there's some good descriptive examples in here how the logic works, how the thinking works, and it's pretty straightforward.

You measure — if there's a lot of crime immediately adjacent to the business, you think of it as a crime center. But if the crime isn't much near the center but increases as you get farther away, then it isn't a source of crime, and that's kind of the basic logic that these studies use. They just do it in a very sophisticated way with GPS techniques and

probability distributions. But the main finding is that there are really other business types and other locations that are much higher -- have much higher probability of crime.

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Business types include bars, convenience stores, sexually-oriented businesses. Locations include things like subway entrances, highway ramps, bus stops, places where criminals can commit a crime and then more easily escape like onto the freeway, or into the subway, or out of the subway.

Most of the studies focus on what are called methadone treatment centers where folks receive some maintenance dose of methadone or morphine or some other opiate that isn't heroin that kind of helps ween them off the heroin addiction.

The reason they focused on those is because there's really more concern theoretically about those places because they are places where drugs are actually dispensed, and really the people who go to them typically have heroin habits or had heroin habits.

So the focus was on those kind of types of treatment centers because it was felt the problems of crime might be more severe, more salient, or more

likely to occur around them. But you will see there's at least one study that is shown in Table 1 that actually broke out types of drug treatment centers, including outpatient and residential centers, and found that residential treatment programs is one of the lowest business types of crime around them.

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So that was kind of a direct measurement of -that's probably most relevant to the residential
program that's being considered here.

Q So to illustrate your point, it seems to be -restated in layman's term -- that the SCS factors,
or socioeconomic factors, together with proximity
certain types of business cited in this report such
as businesses that distribute alcohol, halfway
houses, subway station entries, pawn shops, things
like that, definitely show a correlation with
increased crime.

But, for instance, the 2011 Taniguchi and Salvatore study that's cited in your report, you agree with the conclusion from that document that when you analyze the data, drug and alcohol treatment facilities are widely thought to have negative impacts on the community. However, that report found that there was no definitive

658 1 relationship between treatment centers and crime; is 2 that correct? 3 Yes, that's correct. 4 And then drawing your attention to the 5 2007 Philadelphia McCord and Lassiter report, similar correlation between socioeconomic status or 6 7 proximity to certain types of business, and that report, as well, found that drug treatment facilities 8 9 of the half dozen or so -- actually, dozen or so uses that were listed had actually the lowest incidence 10 of crime; correct? 11 12 Α Correct. And just for clarification, when the report 13 referred to drug treatment centers, were they 14 15 limiting their data to just residential inpatient treatment centers, or were they also looking at 16 17 opiate-only or methadone clinics, as well? 18 Are you talking about the McCord 2007 19 study --20 Q Right. 21 -- or just the studies in general? 22 Just in general. 23 The McCord study was really one of the few 2.4 studies that explicitly broke out types of programs.

As you see, they dealt with what is called outpatient; they dealt with combined programs, and then they dealt with residential programs. They actually identified three programs, substance abuse treatment programs.

Q So the study didn't filter out the methadone clinics?

A I don't -- not my recollection.

2.4

Q Tell me how your experience with screening has helped you understand how these facilities correlate or don't correlate to crime?

A Well, it's not -- so on the one hand I really relied extensively on pretty much the literal findings of the research, the national research to come to a conclusion that really residential programs really don't have a -- they're not crime-producing areas; they're not associated with crime. But, also, just my experience working in the field, visiting programs, talking to staff, talking to State staff, going to conferences, there's kind of -- it makes sense why residential programs aren't associated with crimes and there's three considerations.

First of all, they may not say on their website or talk about it in their policy documents,

2.4

but most of the residential programs, when you sit down and talk to admissions staff or their policy people, they really screen the applicants coming into the program. And they — basically, they eliminate folks who have violent backgrounds; they eliminate folks who have a long history of criminal behavior. They also eliminate folks who have really serious mental illness. By that I mean you're hearing voices; you're hearing voices and you have no medication inherence, so you're really uncontrolled.

Those kinds of folks are pretty disruptive for residential programs because residential programs try to build a community of users. I mean, they use peer counseling. These are people who are going to live together for weeks or months, and they try to promote a supportive community within that living arrangement.

So the screening tends to screen out the folks who are going to really continue using drugs. But, also, a second consideration is the people who go into treatment are really in the best part of their cycle. I mean, they're going for treatment; they're not continuing their addiction. They're folks who are trying to break out of their

addiction. What -- it helps if you understand a little bit of who they are.

2.4

Alcoholism is a real problem in our society.

I mean, there's far more alcoholics than there are drug users. I know some folks call alcohol a drug.

I'm just distinguishing between alcohol and other kinds of substances.

I've been in public meetings where folks have been asked or the public has been asked, "In your lifetime, do you know someone who had alcohol problems?" A lot of people, most people in the room raised their hands when they're faced with that question.

So in a residential program most of the people who are going to use it are really alcoholics. Anywhere from 50, 55, 60 percent of the folks most likely in residential programs.

Of the other folks -- I know the word heroin addiction is kind of a scary word. I mean, the image of someone, you know, in the bathroom, you know, with a needle in their arm is really kind of a frightening sort of image to people, and it's certainly a shock when you see it in movies or on TV. But a lot of people who use this program are

really middle class folks, middle-aged folks who got caught with opiate prescription misuse.

2.4

One of the best correlations on a county level in the research literature of opiate use is the number of doctors in the county because it's directly tied to the number of prescriptions for opiate use that are written. These are folks whose doctors prescribed too much, or too high dosage, or did it for too long, and folks kept taking it for too long and got stuck with an addiction.

So your residential programs certainly in the last 5 or 10 years have a lot of those kinds of folks in them.

Q So would you characterize a patient seeking care at a residential inpatient alcoholism and substance abuse facility like the one proposed by the applicant to be in their best stage of the addiction process?

A Yes. It's not a crime-prone population.

Most of the stats show that the more treatment you go through, really the less problematic behavior:

Fewer divorces, better job retention, fewer crimes, fewer drunken arrests — or arrests for drunken driving. The treatment really does have a lot of

impact in a lot of situations on folks.

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But there's a third consideration I'd like to mention, and that is the program itself.

Residential programs, they typically have a lot of security; they have cameras; they have full-time staff; staff knows what's going on in the facility; they kind of monitor folks pretty regularly. And you — you just tend not to have a lot of untoward incidents within the residential programs because of just the nature of them as a program.

I did mention earlier the effort to build a community within programs. That's very common. You can see that on websites or see that when you talk to folks. So the actual functioning operation of the program itself tends to inhibit — it tends to inhibit criminal behavior or the desire to be a criminal.

See, because very often in these programs they take people's cell phones away -- I mean, they kind of take them out of the old -- you have a residential program because folks aren't making it as an outpatient in the community, and you need to take them out of whatever set of circumstances,

friends, triggers that create the addictive behavior.

So your residential program tends to isolate them from those friends, and those triggers, and those social situations. So just in operation the program itself has a mitigating effect on whatever behavior they had before they went into the bathroom.

Q So, in your opinion, the screening process that the facility would undergo with respect to new patients, combined with the fact that the patient would be at the best stage of the addiction process serves to mitigate the likelihood of crime?

A Yes.

2.4

Q I'd like to draw your attention in your report to the T&M Protection Services study that was performed. Can you tell me some of the conclusions you learned through that study?

A Well, one of the subsidiary considerations —

I've sat through a bunch of zoning board hearings,

whether nursing homes or assisted living, and one of

the constant concerns is the impact on local public

authorities, hospitals, police department, fire, EMS

squads, and that's always an area which people provide

comment about.

So the T&M study was an explicit look at

two cites, one in Florida, one in New Jersey, and really been an exhaustive review of incident logs and talking enforcement officers trying to see if there was any change in the use of civic services when this new program came into place. And it didn't find there was any.

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2.4

Q Right. One of the conclusions in the report was there was not a substantial drain on municipal resources such as police; correct?

A Right. And what I noticed -- what I also noticed -- and I include a reference to the Salem Patch, which is a Salem, Massachusetts, paper, in which it cites a Salem area police officer saying there's no impact because of the treatment program. That's a kind of typical sort of comment that you can read in newspaper accounts of these public discussions in front of zoning boards. You often see the local police chief or the fire chief coming in and saying that they don't anticipate any increase in the need for public services.

Where that's -- in my experience, where it's most salient is really in nursing homes with EMS.

Nursing homes tend to have higher usages of emergency services for hospital-related, illness-

related issues. That's really where the civic drain or the civic utilization comes from.

Q What types of facilities were studied in the T&M Protection Resource?

A My recollection of both were certainly detoxification with some residential attached to it.

Q So there was an outpatient detox component?

A No, it was an inpatient detox.

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Q So what qualifies you, in your opinion, to be able to analyze the data in these reports in an effort to author this paper that you had drafted back in 2012? What's your background with respect to statistical analysis?

A My website you can -- certainly earlier in my career you can see the kinds of articles that I coauthored which typically sometimes had more formulas than words in them.

So I guess there's two components in these studies. First of all, it's the use of GPS techniques which are really their own and a really fascinating, interesting field. I use a lot of GPS work. In my consulting I've got a GPS mapping, a GIS mapping platform I use; I use streets in polygons, for example, the same kinds of techniques

that you can see talked about in some of these studies.

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So I'm familiar, again, with what the GIS systems can do, and I'm also familiar with the, you know, regression in variance, and autocollinearity, and the kinds of statistical analyses that folks do to try to tease out the impact of one variable while controlling for others.

So it's that combination of technical interest that makes me read and think about these kinds of studies as being an authoritative and reliable work.

Q So when Maxxam approached you to act as an expert witness in this case, you weren't asked to analyze the specific operations of the specific applicant's facility; correct?

A No. I really was just asked to address the very narrow question of what research I had done on crime and substance abuse treatment programs.

Q And although you're aware that the applicant's facility is a residential facility with a detox component similar to the two facilities studied in the T&M Protection Resources 2012 report, you really didn't analyze the actual applicant's proposed

#### 1 operation?

2.4

A No, I haven't.

Q All right. So just generally, as an expert in the field and based upon your analytics of all the data that you analyzed in your report, is it safe to say in your expert opinion to a reasonable degree of certainty that all the studies you've cited, which is the body of empirical evidence in the field show that there is not a correlation between crime and the presence of a substance abuse facility?

A That's what -- that's what these studies in plain language kind of clearly say in their conclusions.

And I would note that I came across a newspaper reporter in the Charleston Gazette who had done a story in mid-2015 who went through a lot of the same studies and kind of cited two or three of the same studies and came to a similar conclusion.

So I think that the analysis, the conclusions that I reached are really reasonable ones, and you can see other people reviewing the same studies and coming to the same conclusion.

MR. KOLB: Thank you. Nothing further.

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1	CHAIRMAN WHITE: Thank you.	
2	Board members have any questions at this time?	
3	Ms. Stover.	
4	MEMBER STOVER: You did say your doctorate	
5	was in statistics; correct?	
6	THE WITNESS: It was in sociology and I	
7	majored in quantitative methods.	
8	MEMBER STOVER: Okay. Thank you.	
9	CHAIRMAN WHITE: Any other Mr. Regan.	
10	MEMBER REGAN: The unit we're talking about	
11	changing into an addiction center has eight buildings,	
12	and it's on 125 acres, and there's no fence around	
13	it. Would you have you ever analyzed anything	
14	like that?	
15	THE WITNESS: No, I haven't. I haven't	
16	analyzed any substance abuse treatment program like	
17	that. I've worked in some developmental centers	
18	which had cottage systems, but I haven't encountered	
19	a substance abuse treatment program with this same	
20	kind of configuration.	
21	MEMBER REGAN: Thank you.	
22	CHAIRMAN WHITE: Any other Board members	
23	have any questions?	
24	(No response.)	

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1	CHAIRMAN WHITE: County have any questions	
2	at this time?	
3	MR. KINNALLY: I do, Mr. Chairman.	
4	CHAIRMAN WHITE: Mr. Kinnally.	
5	CROSS-EXAMINATION BY COUNSEL FOR THE COUNTY	
6	BY MR. KINNALLY:	
7	Q You started your work on your report on	
8	January 23rd, isn't it true?	
9	A I wrote this report originally in 2012.	
10	Q I'm not talking about the original report.	
11	I'm talking about J19 that the lawyers showed you.	
12	A Yes.	
13	Q Okay.	
14	A I spent three to four hours updating sources	
15	and references and checking web links.	
16	Q I appreciate that.	
17	You started your report on January 23rd,	
18	approximately three days ago; isn't it true, sir?	
19	MR. KOLB: Objection.	
20	A It's not entirely true. The vast majority	
21	of the report, 95 percent of it was from 2012 and I	
22	just added I only added a few updates of some	
23	studies, one on sexually-oriented businesses because	
24	it had a really nice description of the methodology	

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1	as you study crime I mean, it's kind of a nice,	
2	self-contained, kind of clean study of how to think	
3	about that.	
4	Q When were you hired by Maxxam?	
5	A Late last week.	
6	Q And since late last week up until today is	
7	when you completed the report that you've submitted	
8	to the Board here; isn't that true?	
9	A Yes.	
10	Q Now, why didn't you sign your report?	
11	A Why didn't I sign it?	
12	Q Right.	
13	A I think it has my business logo on the top	
14	of every page.	
15	Q I didn't say it didn't. I just asked you	
16	why you didn't sign it.	
17	A I believe on the last page of the report I	
18	have my name.	
19	Q Okay.	
20	A Are you asking me why I didn't like write my	
21	handwriting out? Is that what you're asking, sir?	
22	Q No. You know what a signature is. I asked	
23	you whether or not you signed. I wanted to know why	
24	you didn't.	

672 1 I have my name on the last page, and my name 2 is on every page of the report. 3 Okay. Now, you stated, did you not, that 4 you did a study in 2012? 5 Α Yes. 6 Which one is it? Can you point it to me in 7 your report here? It's --8 9 Because I don't see it. 10 The -- the report that you have was originally written, a version of it was originally 11 12 written in 2012, and then I made some updates to it, 13 so minor updates to it to -- what I did was I 14 searched the literature again to see if there was 15 any more studies since 2012 on the topic, and I also contacted some of the researchers like Boyd or like 16 17 the folks who did the medical marijuana dispensary 18 study to see if they had done any current work or 19 they knew of any people who were doing work in the field. 2.0 21 So the report that you have there is the 22 2012 report which is rewritten to become an updated 23 report. I could send a copy of the 2012 report if 24 you want.

1 Q My question is a lot simpler. You have 2 indicated in your report that you're asking the 3 Board to consider various articles that you 4 reference from 2012, as I understand it, back to 5 2003, which includes a newspaper article in some 6 newspaper that you reference as authoritative; isn't 7 that true? I'm not sure what your question is. 8 9 Well, let me try a different way. 10 You indicate beginning on page 3 that you have comments on articles found. Do you see that? 11 12 Yes. Right. Okay. Α And those are articles that you assembled 13 because you believed they were authoritative; true? 14 15 Α Yes. And those go back to 2003; is that true, sir? 16 17 I'm not sure which 2003 reference you're 18 talking about. 19 It's your report but if you look, it says Price Waterhouse Coopers report for City of Oshawa. 20 21 It's on page 15. 22 Yes. Α 23 It indicates there are multiple newspaper 2.4 accounts back in 2003. Do you see that?

1 That's certainly not one of the main Yes. reports that I talk about. 2 3 I didn't say it was. I just want to get out 4 the fact these are the things that you referenced -correct? -- as authoritative. Yes or no. 5 I wouldn't call Price -- I wouldn't call the 6 7 reference to Price Waterhouse as one of the authoritative reports. 8 All right. My question then is, sir, can 9 you tell the Board in any of these articles, which 10 is the article that you wrote in 2012 on this topic? 11 Because I don't see it in there. 12 A I'm really not sure I understand what your 13 14 question is. 15 Well, sir --I've already said that I wrote a report in 16 17 2012 and that I changed -- I made slight modifications, 18 some modifications to that to metamorphose it into 19 this report. I could send you a copy of the report 2.0 I did in 2012. 21 My point is, sir, you don't reference your 22 own article on this topic in the articles found as 23 authoritative; isn't that true? 2.4 A Yes, it is correct I do not include my

675 1 reference to 2012's work in that list of articles. 2 And as you sit here today, you don't know 3 anything about the residential treatment program 4 that Maxxam Partners has proposed to the Zoning Board; isn't that a true statement? 5 I know a little bit about it. 6 7 Okay. And what you know is what somebody told you; isn't that true? 8 9 A Well, I did go online and read some newspaper articles about the Zoning Board hearings. 10 Q Okay. You didn't do any investigation with 11 12 respect to the facility; isn't that a fair statement? Nor was I called upon to do that. 13 MR. KINNALLY: Okay. Thank you. 14 15 I don't have any further questions, Mr. Chairman. 16 17 CHAIRMAN WHITE: Thank you. Mr. VanKerkhoff. 18 19 MR. VAN KERKHOFF: As a point of view 20 clarification, how many pages are in your report, 21 sir? I'm only asking because I have only up to 22 page 15, and it appears to have a sentence that 23 carries over, so I'm concerned that we don't have a 2.4 complete --

676 THE WITNESS: 16 is the last page. 1 2 MR. KINNALLY: That's the one I didn't have. 3 THE WITNESS: That's probably why he didn't 4 have the signature on the bottom. 5 MR. VAN KERKHOFF: Counsel, if you could make 6 sure we get page 16 added to the exhibit, please. 7 THE WITNESS: There's another three lines. CHAIRMAN WHITE: Can you read those lines 8 9 for the record? And I'd ask you to begin on page 15 at the beginning of the sentence. 10 11 THE WITNESS: This was I quess subsidiary 12 research, and I'm trying to identify discussions of treatment centers and crime that are available in 13 the literature. So this is from a New York Times --14 15 this is from a New York Times story. It says, "In fact, Mr. Armstrong noted that 16 17 a report prepared by the substance abuse division in 18 1981 found that a residential drug treatment center 19 had only a minimal impact on the Long Island 20 community of Melville. In the three years" --21 that's the end of page 15. 22 Beginning of page 16 says -- "before and 23 after the Alba Neck halfway house opened in Melville

in 1977, the report concluded, 'There's no adverse

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677 1 effects upon real estate values or crime rates in 2 the community.'" And I would like to add I included all the --3 4 all of the stuff that I found. I didn't cherry pick 5 anything; I didn't discard a story because it had one conclusion and I didn't like the conclusion. I 6 7 just tried to identify the main empirical studies and then identify secondarily anything else that I 8 9 could find in the literature, newspaper accounts, 10 whatever. 11 CHAIRMAN WHITE: Okay. Thank you. Mr. VanKerkhoff. 12 MR. VAN KERKHOFF: One more question. 13 need to clarify what Mr. Kinnally was trying to 14 15 get at. 16 So your exhibit here tonight, J19, is not 17 really an independent research but really a review 18 of the literature and your summarizations of your 19 review of the literature? Would that be a --20 THE WITNESS: Yes. I didn't go out and do a 21 separate study of crime around this proposed location. 22 This is really a review of the national literature. 23 MR. VAN KERKHOFF: Okay. Thank you.

MR. KINNALLY: Mr. Chairman, is the

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1	applicant or the petitioner going to mark his CV as	
2	J20 just for the record? Because I think you	
3	referenced it.	
4	MR. KOLB: We'll do that on redirect.	
5	CHAIRMAN WHITE: That'd be fine.	
6	MR. KINNALLY: Thank you. Sorry to interrupt.	
7	CHAIRMAN WHITE: Mr. Carrara.	
8	MR. CARRARA: Thank you, Mr. Chairman, just	
9	a few questions.	
10	CROSS-EXAMINATION BY COUNSEL FOR THE APPELLANT	
11	BY MR. CARRARA:	
12	Q Sir, in your testimony earlier you said	
13	residential rehab facilities are generally safe	
14	because they have a lot of security; is that a fair	
15	statement of what you said?	
16	A Yes.	
17	Q How many security guards will the Maxxam	
18	facility have?	
19	A I don't know.	
20	Q Would two security guards, in your mind, be	
21	enough security for a 120-acre facility?	
22	A I don't I haven't had an opportunity to	
23	study that topic. It would be inappropriate for me	
24	to make a comment on it off the cuff.	

1 So you're not here opining on safety of 2 these facilities then? 3 I'm not here opining on the ratio of 4 security staff to residents. 5 Q When you were doing your studies and 6 analysis over the years, I think you mentioned that 7 a lot of those state studies and the like were based on needs for the programs. Correct? 8 9 Α Yes. Were any of those studies based specifically 10 on zoning standards and whether residential rehab 11 12 facilities fit within the zoning context? That's -- those are legal issues and I --13 it's not a -- I've watched enough zoning board 14 15 hearings to -- to realize that those are complicated topics, and they're really best left to zoning board 16 17 members and professionals who work on these topics. 18 Earlier you were making some reference to a 2007 McCord and Lassiter study. 19 20 Α Yes. 21 I think your -- at least what I understood 22 your takeaway of that to be is it was your opinion 23 in reviewing that study that residential rehab 2.4 facility programs do not bring an increase in crime

to the neighborhood. Is that an accurate statement of what your opinion is?

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A They were the lowest of the establishments studied in that study. They had the lowest rates.

Q What is the geographic makeup in terms of the locations of the studies in Philadelphia?

A I'd probably have to go back to the original article and read it to just be sure. Because I believe it was really the city of Philadelphia and possibly surrounding suburbs, but I would have to go back and read exactly what they — how they defined Philadelphia, whether it was city limits or whether it was beyond.

These were folks who worked a lot with the Philadelphia Police Department and were really some criminologists. They did a whole flurry of study, various criminological mapping efforts when they worked with the police department back in this time period. So I believe it was probably the regions that were covered by the Philadelphia police department.

Q So is it fair to say that those areas were probably urban or City of Philadelphia locations?

A I don't -- I don't know. It's been a long

1 time since I lived in Philadelphia. I mean, that 2 did include Germantown which gets pretty, you know, 3 almost on the edge of the suburbs. It's not entirely 4 clear to me what -- I don't have a factual way to 5 answer that question. 6 Clearly Philadelphia is a large urban area 7 and has a lot of urban in it for sure. Q Let me ask it this way maybe. How many pawn 8 9 shops are located near where the Maxxam facility is to be sited? 10 Α I don't know. 11 12 How many beer establishments are located near the Maxxam facility? 13 A My understanding is that it tends to be --14 15 it's a more rural location and has some expanse of forest, or woods, or agricultural area around it. 16 17 It's not in a densely populated urban area. I don't know if that's true or not. 18 19 can't really answer your question, sir. 20 So, then, do you think it's a fair comparison 21 to use a study that looked at apparently an urban 22 environment of Philadelphia that referenced pawn shops, 23 beer establishments, cash checking stores, subway 2.4 stations, homeless shelters, and outpatient and

682 inpatient drug treatment facilities as a comparison 1 to the location of rural Kane County where the 2 3 Maxxam facility wants to be located? 4 Well, ideally we could -- it would be 5 wonderful if there were a lot of studies that, you 6 know, looked at rural, and looked at urban, and 7 looked at all the various types of businesses that were in every year. But in terms of the literature 8 9 on this topic, crime and treatment centers, it's not 10 a well-studied topic in the sense you don't find 50 articles or 100 articles on it. So you take what 11 12 you have and report on that. Is that possibly because a lot of those 13 facilities are located in more dense, urban areas as 14 15 opposed to rural areas? A You mean beer -- beer establishments and 16 17 pawn shops? 18 Q No, no, the facilities you were just 19 mentioning. Drug treatment facilities in general, 2.0 you said you couldn't find a lot of studies on them 21 in the rural environment as compare to the urban 22 environment. 23 A Folks typically tend to study -- like Boyd's 2.4 work on methadone clinics, they tended to study

urban areas.

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Q Let's move ahead. You then moved ahead to the T&M study, I think. That's a 2012 study from -- that you referenced as -- for call volumes or not an impact on the local municipalities; is that fair?

A Yes.

Q The areas that were studied there, Palm Beach County, is that comparable to Kane County?

A I don't know. I haven't studied Kane County, so I'm not sure. I haven't done maps and the like looking at population density or socioeconomic standing. So I'm not sure what the comparability is.

Q But we're using the T&M study -- at least you're trying to use it to support your opinion that these types of facilities are not a draw on the municipal resources based on the Palm Beach County study; correct?

A I think I would want to say or characterize it that the T&M study really made an effort to accurately measure what the draws on civic resources were by these treatment centers, and it's just really hard to find that kind of literature, that kind of study. So that's why I reported on it.

It doesn't -- the Florida site is probably

located on the coast. The coast of Florida, if you 1 look at a population density, it's got a really high 2 3 population density right next to the coast and it's 4 got a -- you don't have to go very far inland before 5 that population density drops off. So it's kind of a mixed -- it's kind of a mixed area on the Florida 6 7 coast, the mid-south Atlantic coast on down to Miami. The New Jersey site tends to -- is in a --8 New Jersey is the most densely populated state in 9 the country. So it's in an undoubtedly densely 10 11 populated area. 12 So you'd agree with me that those two examples of the densely populated areas are dissimilar to the 13 Kane County area where the Maxxam facility is 14 15 proposed to be sited? 16 I agree that the areas -- I assume your 17 characterization of Kane County as being rural.

Q No, I'm asking you. You would characterize the location of where the Maxxam facility to be sited as rural?

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A I don't know. I just haven't studied the characteristics of Kane County. I don't know what the population density is.

Q Did you look at an aerial map of where the

1 proposed facility is seated to see what the surrounding area is? 2 3 No, I didn't. 4 Okay. Did you look to see whether the 5 municipal services offered by Palm Beach or by the 6 New Jersey facility -- what their departments are in 7 terms of staffing and the tax base that they have to support their police and fire departments? 8 9 A No, I didn't. I don't know of any studies that have looked at rural use -- or the use of 10 services by rural substance abuse treatment centers 11 versus urban substance abuse treatment centers. 12 don't think those studies exist. I think I would 13 have found them if they had existed. 14 15 I think Mr. Kinnally asked you earlier, but did you do any independent study on drug treatment 16 17 centers for police or fire call volumes? 18 No, I haven't done any study like that. Is there a number of calls in your mind that 19 20 you would think that would start to rise to a level 21 that would impact a municipality or the fire 22 protection to service that location? 23 MR. KOLB: Objection; calls for speculation.

CHAIRMAN WHITE: I would agree, Mr. Carrara.

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Q Let me ask you this: If you heard or you were given an example where an 80-patient drug treatment facility located in Florida had 205 calls to the police department over a one-year period, would you consider those calls to be rising to the level that it would concern yourself as an expert in this area?

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MR. KOLB: Objection; incomplete hypothetical.

MR. BROWN: The rationale behind that is that it could be a mental health facility; it could be a juvenile facility. Once again, as mentioned before, it's apples and oranges.

If he wishes to put in the full information as to what that facility is so we can compare it to the definition of what we are proposing, I would have no objection to that.

MR. CARRARA: I'd be more than happy to identify the facility. It's the Village Recovery facility which was a facility that was originally cited in the Maxxam application as one of their advisory members being an owner of. It's located in Oneida, Florida. They have 80 beds — again, I'm taking this from the Maxxam application using their information — and they had 205 police calls between

1 November 9th, 2014, to November 9th, 2015. 2 MR. BROWN: It still is an incomplete 3 hypothetical because it did not fully state as to 4 what the treatment was. That's my point. 5 Just because that was in our application 6 does not necessarily mean it's the same type of 7 treatment that's being offered here. And if he would like to -- so when he throws the question out, 8 9 the only thing I ask him to do is that he addresses, 10 if he knows, what type of treatment was involved. MR. KINNALLY: Mr. Chairman, just a point of 11 12 order. This witness has already said he has not done any of these studies, so I'm not sure where 13 we're going with this. If he hasn't done any 14 15 studies, how can he answer the question? 16 MR. CARRARA: I'm just asking him whether 17 these numbers would rise to the level of importance

these numbers would rise to the level of importance in his mind compared to a study he cited from Palm Beach County that he's using as a basis that there isn't a problem on municipal services that had 25 calls and potentially 76 calls. So I'm asking him to compare 205 calls to the 25 and 76 from his T&M report he cited in his report.

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MR. BROWN: It's another backwards way of

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1	him trying to get what he didn't have before where	
2	he said it was speculation. It would call for him	
3	to speculate because it's an incomplete hypothetical,	
4	and I won't say anything further on this issue.	
5	CHAIRMAN WHITE: Kevin, I'd like you to	
6	move on.	
7	MR. CARRARA: Thank you, Mr. Chairman.	
8	CHAIRMAN WHITE: Would you like me to come	
9	back to you?	
10	MR. CARRARA: If you could, please.	
11	Thank you.	
12	CHAIRMAN WHITE: Do we have anyone in the	
13	audience representing a unit of government who	
14	wishes to cross-examine the witness?	
15	We have Mr. Shepro coming to the stand.	
16	Please state your name for the record.	
17	MR. SHEPRO: Kenneth Shepro on behalf of the	
18	Fox River Countryside Fire District.	
19	CHAIRMAN WHITE: Is the microphone on?	
20	MR. SHEPRO: How is that?	
21	CHAIRMAN WHITE: That's fine.	
22	CROSS-EXAMINATION BY AUDIENCE MEMBER	
23	BY MR. SHEPRO:	
24	Q Dr. Hendrickson, did you do any original	

689 studies or research in reaching the opinions that 1 you've expressed tonight or in your report? 2 3 I only did a review of the literature 4 and what I could find from other subsidiary studies that were online or that I knew of. 5 6 In your field is there a particular term 7 that would be used to describe that kind of a report? That would be called a meta-analysis. 8 9 It's basically a compilation of the 10 literature that you surveyed? 11 Α That's right. 12 And you indicated I think that in many of the areas that you've referenced there was little to 13 no literature or studies with respect to some of the 14 15 questions that you were looking to address. Yes. The comments by police chiefs and fire 16 17 folks are generally anecdotal stuff in newspapers 18 where the reporter went out and asked the local 19 officials if they thought there would be an impact. 20 Q As a statistician, what is your opinion with 21 respect to the use of anecdotal evidence in reaching 22 statistical conclusions?

A Well, kind of like -- I think of it somewhat

in the same way as low sample sizes. Clearly, the

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1 larger your sample size, the more -- the less error 2 you have and the better off you are, but if it all 3 goes in the same direction or tends to kind of 4 convey the same results, it's at least worthy to 5 mention it as a fact that it tends to go in the same 6 direction. You don't think of it as definitive 7 proof, but it does sort of add to the factual 8 background. Now, I believe that I have you quoted 9 10 correctly here, but I think your testimony was that you often see fire chiefs come in and say there's no 11 12 impact. Do you recall that testimony? A I think -- I think I would say that to the 13 extent that you can find comments, newspaper 14 15 comments or court documents, the prevailing tendency is for the local public safety officials to believe 16 17 or to say that there's little to no impact. 18 Now, how many such anecdotal items did you 19 review either in preparation for your testimony 20 today or in the previous report that you prepared 21 back in 2012? 22 Probably five or six. 23 And out of -- from around the country? 2.4 Yes. Α

Q And were any of these studies, or were these newspaper articles?

A Those are mostly newspaper articles where the reporter went out and talked to the local official.

Q With the greatest respect to our fourth estate, did you actually do any research to determine the background or circumstances of the newspaper article and questions that were asked in the situations?

A No.

Q Now, I believe in response to Mr. Kolb's question you stated that you were not asked to analyze this specific operation, and you did not analyze the operation that is proposed here.

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A That's correct. In regard to fire activities, no, I didn't contact the local fire department or find out how many calls they made to Glenwood Academy or how many they made to various types of businesses or establishments.

Q And I take it that would also be correct with respect to any of the other studies of other facilities in other states. That is to say, you did

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not contact any local fire officials with respect to their experiences or call volume? A No. My experience in zoning board hearings is typically other folks address those kinds of They actually -- other expert witnesses issues. tend to deal with those topics. Q Now, I think you also stated that in your review of these studies there was no correlation between crime and the presence of a facility. Does that fairly state what you stated is your opinion? A Basically, they're -- substance abuse 12 treatment centers are not sources of crime. I mean, that's -- that's certainly the conclusion that the 13 various authors -- you could read in their own words 14

That statement, obviously, has no relationship to its impact on other emergency services such as fire, EMS, et cetera. Would you agree with that?

A I'm not sure. Could you please rephrase your question?

what they say in those studies.

Sure. The fact that you didn't find a correlation between the presence of a facility and incidence of crime doesn't speak to the issue of whether there's any relationship between the

693 1 presence of a facility and increased demand for 2 other emergency services such as emergency medical or fire? 3 4 A I certainly can't predict what your fire 5 district has encountered in the past with similar 6 establishments. 7 In that case it wouldn't be a prediction, would it; it would simply be looking at the past 8 9 history? 10 Do you have it? Well --11 0 12 I mean, do you have that kind of data? MR. BROWN: My objection would be he has not 13 opined on that particular issue, and I think it's 14 15 fair to say that he doesn't have an opinion, but he's trying get an opinion on something that --16 17 MR. SHEPRO: No, no. I got the answer I was 18 looking for. He doesn't have an opinion, and he 19 didn't look at the data. 20 MR. BROWN: Okay. We're in agreement. 21 CHAIRMAN WHITE: You need to wrap up, 22 Mr. Shepro. 23 You indicated, obviously, an ideal situation

would be if there were more studies available, but you

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indicated that there are not as many as perhaps you
would like to see? Is that a fair characterization
of what you said?
 A Folks tend to study other business types.

Q In your field as a statistician, is a study entitled to more weight or validity simply because

7 it might be the only one around?

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A I think if you have two, or three, or four, or five that all go in the same direction, then you tend to give some weight. But, also, you give weight to really well-done studies, studies that look like they have really tight methodology that did a good job of what they were doing.

Q What investigation -- I'm sorry. Finish your answer.

A If you get into these studies, some of these look really good. I mean --

Q Well, I want to explore that statement.

When you say some of them "look really good," how did you determine that?

A Oh, they used very careful measurement of crime, locations of crime. It's very quantitative. You've got -- the theoretical discussion of results show that they tended to control for significant

confounding factors; they generally draw reasonable conclusions; they don't try to overstate what they found or understate it. They seem to have high-quality work.

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Q Now, again, you use words like "seem to."

How did you determine that their conclusions were reasonable or that they seem to be reasonable?

A Well, I think you have to look at one, do folks have a good theoretical accounting of what they're doing. I mean, do they begin their research with a statement of what the problem is and why they're using the particular techniques and methodology that they're using?

Then you look at how thorough the application of that methodology was. You make judgments as to whether or not it carefully captured the data that they were attempting to measure. You try to look at the techniques they use to sort the results out, and you look at how they report the results. Were they stretching; were they not?

And I guess I would just like to say that

I've been -- I'm 74 years old. I've been a PhD

sociologist since I was 30 years old. That is all

I've done for the last 44 years is really sociology,

696 1 doing reports, reading reports, talking about 2 reports, and after that time you get some sense of 3 whether you've got a study that has merits versus a 4 study that is interesting but may not be as valuable. 5 And you feel comfortable expressing an 6 opinion on a study that you did not yourself do but 7 merely read? Yes, I do. 8 Α 9 MR. SHEPRO: Okay. I have nothing further. 10 Thank you. 11 CHAIRMAN WHITE: Thank you. 12 I saw another individual get up. Please come forward and limit your response to questions to 13 the witness and please state your name for the record. 14 15 MR. JOHANSEN: Richard Johansen, Campton 16 Township clerk. Are you going to swear me? 17 CHAIRMAN WHITE: Are you going to submit an 18 opinion or just asking questions? 19 MR. JOHANSEN: No, I'm going to ask questions. 20 CHAIRMAN WHITE: Just ask questions, please. CROSS-EXAMINATION BY AUDIENCE MEMBER 21 22 BY MR. JOHANSEN: 23 Does correlation and statistics mean

causation, or is it an association with one thing

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with another?

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A Well, it's association of one thing with another. I mean, in its purest, simplest form that's what it is. But there are ways of getting it — of minimizing the purely correlative aspects and trying to get more into what might have some determinative impact.

Q So if no crime association with an alcohol rehab center and crime association with a bar in the neighborhood, you can't say the rehab center or the bar causes or does not cause crime; is that correct?

A Correct.

Q Thank you. So correlation in statistics is not causation.

You haven't studied facilities like the one proposed here; is that your testimony?

A No, that's not my testimony. I have actually done a lot of work with both detoxification programs and residential programs. My testimony has been that I haven't studied the particular program here in Kane County.

Q Thank you.

If there is no crime to worry about with this facility, why are there cameras, pass keys, an

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1	invisible fence, and guards around this proposed	
2	facility?	
3	MR. KOLB: Objection; scope.	
4	MR. BROWN: We'll withdraw it.	
5	CHAIRMAN WHITE: Go ahead and answer the	
6	question if you so desire.	
7	A I haven't asked the sponsors of the project	
8	what they do for their design considerations, but it	
9	is fairly commonplace in in just about all phases	
10	of our public life now to have cameras and security	
11	guards, whether it's this building or whether it's	
12	residential programs or detox programs. I think	
13	it's a fact of life. We live in an age, in a day	
14	when multiple cameras track our progress every day.	
15	MR. JOHANSEN: Thank you.	
16	CHAIRMAN WHITE: Is there anyone else wishing	
17	to come forward?	
18	Mr. Blecker, please state your name for the	
19	record and your position.	
20	MR. BLECKER: Harry Blecker, B-l-e-c-k-e-r,	
21	president of the Village of Campton Hills.	
22	CROSS-EXAMINATION BY AUDIENCE MEMBER	
23	BY MR. BLECKER:	
24	Q In your research in Pennsylvania,	

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699 1 Philadelphia, New Jersey, and Florida, did you take 2 into consideration the size of the police force in 3 those areas? 4 Α No. 5 Have you studied the size of the police 6 force in the proposed facility? 7 MR. KOLB: Asked and answered. No. 8 Α 9 You have not. All right. Would the size of the police force have a direct impact on the village 10 11 or on the community? 12 Let's say Philadelphia, which probably has a fairly large police force, and the Village of 13 14 Campton Hills and the County of Kane which have a 15 very limited police force -- in fact, the Village of Campton Hills only has two police officers on duty 16 17 at any time, and I'm not familiar with how many 18 officers the sheriff's department has, but there are 19 not that many in the area. Would that make a 20 difference in your opinion as to impact? 21 Excuse me, sir. I'm not -- could you redo 22 the question? 23 Let me try to put it another way. I'm not 2.4 an attorney. So let me see what I can do.

1 If you have 10 calls in an area, and you 2 have 50 policemen on the street versus the Village 3 of Campton Hills which has 2 police officers, would 4 the same 10 calls make a difference on impact in the 5 village and the facility's resources? 6 I think you're asking a general question 7 The same volume of calls would have a greater here. impact on a small police department or a fire 8 9 department or call center than a larger staffed 10 organization. Have you taken that into consideration when 11 12 you made these reports saying that the impact was 13 minimal? 14 I haven't tried to claim a particular impact 15 on this residential program or on your police department. All I'm doing is reviewing the literature 16 17 on impact and recounting what I have found in that 18 literature search. 19 Has any of the literature that you researched 20 looked at that disparity of impact? 21 By area of impact, you mean on a two-person 22 police force? 23 Versus a large city that would have many, 2.4 many people on the police force?

1 I don't know of any work that has tried 2 to correlate or look at the impact of substance 3 abuse treatment programs on townships with different 4 sizes of police forces. 5 Would you consider that to be important, 6 though? 7 Actually, his testimony has been the impact of criminal activity, not the impact it 8 9 would have to the police forces. So that would be 10 beyond the scope of the opinions he's been giving here today just for purposes of -- he's brought for 11 12 that limited purpose as to -- I mean, there's this incident that there's crime created because of these 13 things being here. He's opined on that. This would 14 15 be beyond the scope of his expertise. MR. BLECKER: Doesn't criminal activity have 16 17 a direct impact on police protection? 18 CHAIRMAN WHITE: Can you state a question 19 that you're trying to drive at here? 20 MR. BLECKER: I'm just trying to get to the 21 point where there's no study saying even if it's 22 minimal criminal activity that it's not an impact on 23 a very, very limited police force. 2.4 CHAIRMAN WHITE: Dr. Hendrickson, can you

		7
1	answer that? Do any studies exist?	
2	THE WITNESS: If you only have two persons	
3	on your police force, literally anything that goes	
4	on, whether it's a drunk in the streets or lost dogs	
5	has an impact on the two people. I mean, I'm not	
6	sure that there are you have a lot of current	
7	impacts on the two people on your police force now.	
8	CHAIRMAN WHITE: We do need to move on	
9	because we are exceeding the scope of this witness.	
10	BY MR. BLECKER:	
11	Q What you're saying to me is even if we have	
12	one incident, it's a major impact because we only	
13	have let me clarify. It's not a two-man police	
14	force; we have two men on each shift, and we have	
15	all 24 hours.	
16	A I'm not saying I didn't use the word	
17	"major."	
18	MR. BLECKER: Thank you.	
19	CHAIRMAN WHITE: You're welcome.	
20	I'll allow one question. Come forward,	
21	please, and keep your cross-examination to the	
22	witness and what he's testified to, please. State	
23	your name for the record.	
24	MR. PALACIOS: Elias Palacios.	

703 1 CHAIRMAN WHITE: Thank you. 2 CROSS-EXAMINATION BY AUDIENCE MEMBER BY MR. PALACIOS: 3 4 Dr. Hendrickson, I'm going to give you a 5 background quickly within 60 seconds and then get 6 the question. 7 The thing is -- you reviewed studies which 8 is inpatient in detox facilities, and the thing is 9 you're saying the screening, the screening is very important because they're not going to mix substance 10 11 abuse patients, mental illness, or maybe other 12 problems. And then in my experience over 20 years 13 working in the clinical field in substance abuse 14 mental illness and I saw --15 MR. BROWN: Objection -- excuse me. This is 16 not a question. 17 CHAIRMAN WHITE: You do need to come to a 18 question. 19 MR. PALACIOS: Yes. I'm giving the 20 background in order to formulate a question. 21 CHAIRMAN WHITE: Just ask the question. 22 BY MR. PALACIOS: 23 The question is, how do you know this 2.4 proposed facility will differentiate or screen the

1 mentally ill person with substance abuse and 2 personality disorders such as antisocial personality, 3 narcissistic personality disorder and they did have 4 a lot of problems with substance abuse? 5 MR. BROWN: He's already testified that he 6 does not have any opinions concerning that because 7 he's not reviewed that. We would stipulate to that. CHAIRMAN WHITE: He's not involved in the 8 9 operation of the facility and how they're going to operate it, but he has made statements to the effect 10 11 of other facilities and how that changes within those 12 facilities. So unless you have another question --BY MR. PALACIOS: 13 You did review. And then did you review 14 15 follow-up studies of the discharge of this facility, three months, six months, one year, or two years 16 17 follow-up studies regarding crimes or relapse? 18 A Not -- if I understand your question, you're 19 asking about a particular facility? 20 One of the facilities that you reviewed. 21 In general, the literature shows that folks 22 who have more treatment or longer periods of treatment 23 tend to have better effects, more abstinence, higher 2.4 rates of employment, better marital results, better

school retention. I mean, you asked about experiences subsequent to treatment and if the treatment made an effect on people I think.

Q Crimes in order to --

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A In general, the literature shows that the treatment does make an effect. For example, I reviewed a lot of -- each state has to report national outcome measures to SAMHSA, the Federal Substance Abuse and Mental Health Agency, as part of their state reporting. And I've gone through a lot of those state reports, and they do contain performance measures like that. The typical state performance record shows that with more treatment you get folks with better results.

CHAIRMAN WHITE: Thank you for your questions.

I'm going to turn to Mr. Carrara. Did you have any other questions of this witness?

MR. CARRARA: I don't at this time. The only thing I would ask, my exhibit ends at page 13, so apparently I have even less than the others. So if I could just get a complete one at some point, I'd appreciate it. Thank you.

CHAIRMAN WHITE: Mr. Kinnally, or any Board members have any questions of this witness?

706 (No response.) 1 2 CHAIRMAN WHITE: I'll allow one quick question. 3 I've identified this gentleman to my left, sir. 4 Please state your name and your petition 5 affiliation. 6 MR. TYRRELL: Mike Tyrrell, T-y-r-r-e-l-l, 7 Village of Campton Hills trustee. CROSS-EXAMINATION BY AUDIENCE MEMBER 8 9 BY MR. TYRRELL: Doctor, thank you for being here. 10 If I heard correctly in your testimony, your 11 submission was a compilation of various resources 12 and not your independent study; is that correct? 13 That's correct. 14 15 And in that compilation you cited a number of sources, which included past studies, independent 16 17 studies, newspapers, and online was your specific. 18 Sir, are you aware that both the attorney 19 for the petitioner and the Board has discounted and 2.0 rejected online submissions as testimony? 21 A No, I'm not aware of that, but I certainly 22 don't give as much weight to that as I do the 23 articles that are refereed journals that are the 2.4 main focus of the report.

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1	MR. TYRRELL: Thank you very much.	
2	CHAIRMAN WHITE: I'll allow this gentleman	
3	to come forward. We really do need to move on, so	
4	please make it quick and state your name.	
5	MR. CAPPELL: My name is Charles Cappell,	
6	C-a-p-p-e-l-1.	
7	CHAIRMAN WHITE: Do you represent a unit of	
8	government?	
9	MR. CAPPELL: I do not.	
10	CHAIRMAN WHITE: So you're a citizen of	
11	MR. CAPPELL: Campton.	
12	MR. CAPPELL: I'll need to swear you in,	
13	then. Please raise your right hand.	
14	(Witness sworn.)	
15	CHAIRMAN WHITE: Please state your address	
16	for the record.	
17	MR. CAPPELL: 6N812 Longacre Drive.	
18	CHAIRMAN WHITE: And approximately how close	
19	to this facility are you?	
20	MR. CAPPELL: About 4/10ths of a mile.	
21	CHAIRMAN WHITE: Thank you.	
22	CROSS-EXAMINATION BY AUDIENCE MEMBER	
23	BY MR. CAPPELL:	
24	Q Your report which we have not seen is a	

708 meta-analysis. So could you give me a description 1 2 of the standards used to conduct a valid meta-analysis 3 that is accepted in medical journals? For example, 4 how many articles need to be reviewed for the 5 meta-analysis to be considered valid? 6 In medical journals? 7 In general, in meta-analysis, whether it's educational research or whether it's in medical 8 9 research, there's a number of second-level units, articles, that need to be included to be able to 10 reach valid statistical analysis. 11 12 The meta-analysis I read, the numbers are really all over the place. You're really stuck with 13 what the universe of articles are. 14 15 I can tell you how I found the articles that I worked on. 16 17 That's part of it. I want to know, how many articles in total did you collect to analyze? 18 A Probably -- you know, I don't know. 19 probably maybe -- you know, I'm really not sure 20 21 because I did Pub Med, I did a National Institutes 22 of Health search through the library, and, basically, 23 I grabbed everything that looked reasonably relevant.

It's -- you can't do 100 articles if folks

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haven't written 100 articles. I mean, you're really stuck with whatever the volume of literature is that you can find through your -- in these large bibliographical databases.

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Q So that's what I want to know is, how many articles did you screen; how many did you include in your final analysis? And when you described your research as meta-analysis, there is a statistical procedure that is called meta-analysis, and it creates all of the correlations; it creates air boundaries around all of them, and it really does statistically summarize what this correlation effect is. I want to know if your paper was an qualitative meta-analysis or whether it was a statistical meta-analysis and how many articles were included.

A There were no correlation matrices in all of the studies to compare the cross studies.

So if you have -- if you've got studies of correlations and correlation matrices, then you can compare those matrices, and you can combine them and do averages and ranges of correlations, assuming they all study the same variable, but the literature in this field doesn't enable you to do that. I mean, it's not the same.

And I can't really -- I can't -- I can describe the literature sources I went to but I really -- I honestly can't tell you how many articles I looked at and rejected. For example, on each of these authors, on each of the authors that I've looked at in here I tracked them as to what they were doing now and I -- and those are like universities often have their résumé and their publications, so I went through what they have done since they did this, and I looked at those studies.

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You go through a lot of studies to find the ones that you finally use, but the ones that I use you can count in the report here.

Q If you were describing what you did to another quantitative sociologist with a PhD in statistical sociology, would you describe this as a technical quantitative meta-analysis with high validity about the size and magnitude of correlation between crime and location?

A I'd probably talk about how great the analyses in the studies were, the GPS stuff that controls for all the correlations, and that's the stuff I would talk about.

1 It's the quality of the individual studies 2 that are done, not the quantity of studies that you could find. 3 4 I mean, clearly -- you know, some fields have 50 or 100 studies, and you can do endless kinds 5 6 of comparisons among all the studies. If you're 7 stuck with a smaller number of studies, you're 8 really limited in what you can quantitatively 9 categorize and compare these studies on. MR. CAPPELL: So I conclude from that that you 10 did not do a quantitative statistical meta-analysis; 11 12 you did a, quote, "rigorous qualitative analysis" of the statistical validity of each individual study. 13 14 And to the Board members, those kinds of 15 meta-analysis have far less validity --16 MR. BROWN: Objection --17 MR. CAPPELL: -- under vigorous statistical 18 analysis that includes mean studies. 19 CHAIRMAN WHITE: Thank you. 20 (Applause.) 21 CHAIRMAN WHITE: I'd ask you to curtail your 22 applause. 23 Any other questions from Board members? 2.4 (No response.)

1 CHAIRMAN WHITE: We're going to take a short 2 break at this time then -- I'm sorry -- the petitioner would like to redirect at this time. Go ahead. 3 4 REDIRECT EXAMINATION BY COUNSEL FOR THE PETITIONER 5 BY MR. KOLB: 6 You're under oath here today? 7 Α Yes. And you stand by the report in front of you? 8 9 Α Yes. 10 And your 2012 report is essentially the same 11 report that was admitted into evidence subject to a 12 few updates; correct? That's correct. 13 And the updates, can you detail those very 14 15 quickly again? A Yes, I can. I added -- I added the McCord 16 17 article from 2014. McCord was one of the original 18 authors in 2012, and he published a really interesting 19 article on crime around sexually-oriented businesses 20 in Louisville, Kentucky, and it didn't involve a 21 substance abuse treatment center, but I thought it 22 was relevant because it was a clean example of what 23 a crime association around a business type looks 2.4 like when there's, in fact, an association between

crime and that business type.

Q In all of your research and all of your data, in your capacity of reaching statistical conclusions, were you able to uncover any studies including alcohol and substance abuse treatment facilities located in rural areas?

A No, not explicitly. This is a Biwater -this is a Biwater in both criminology as well as
substance abuse treatment. It's not -- other areas
of substance abuse treatment really such as treatment
outcomes, or types of pharmaceuticals given, or
attempted differential effects between outpatient
and inpatient programs, that's really where you get
the dozens and dozens of studies coming in.

Q Your conclusion that there's no correlation between crime and these types of facilities, did you prepare that opinion specifically for the applicant tonight?

- A No, I came to it years ago.
- Q And nothing in your report that you submitted tonight changes substantively from that overall conclusion --
- 23 A No --
- 24 Q -- just adds additional data to support that

conclusion; correct?

A -- no.

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Q All right. We had a question before about security, if there's no correlation between crime and these types of facilities, why would we need security such as security guards in place.

Wouldn't it be your opinion that security measures like the ones proposed by the applicant to have staff and a security system serve to mitigate crime?

A Well, it does serve to mitigate crime. But, you know, you could have insurance requirements; you could have deals cut with the local police force that they want security at the site so they don't have to provide security at the site. I mean, there could be a lot of reasons why you put security.

And I also think that, unfortunately, we live in a society that is now simply more security conscious, and people routinely incur the costs of having more security rather than less security. So I think to some extent it's kind of where we are as a culture and a people right now is to put in all these security measures in places even if sometimes you may not think they're necessary.

1 We all understand that you weren't hired, or 2 retained, or brought into this to analyze the 3 applicant's facility, to analyze the impact upon 4 local traffic, the impact upon local police, the 5 impact upon local fire protection districts; you were 6 brought in to give an opinion, and expert opinion 7 that there's no correlation between crime and the type of facility the applicant is proposing, and you 8 9 base that opinion upon all of your exhaustive review of the literature and resources available to you 10 over the course of years; is that a safe statement? 11 A Well, I did work in 2012, and I did a little 12 bit of work this year but it -- I guess in the 13 14 interval it would be fair to say that I kept my eye out on this kind of literature, and I just haven't 15 seen -- I subscribe to various journals. I mean, I 16 17 just haven't seen a lot of work or studies in this 18 There's not -- it's a hard topic to get 19 data on, good data. 20 Q You stand by your opinion today that there's no correlation --21 22 A Yes, I do. What would change my opinion is 23 finding three or four good studies where people found 2.4 the reverse.

716 And I'm just basing this on what's in the 1 data. I'm not adding anything to it; I'm not 2 3 embellishing it. This is simply what the research 4 literature is showing --5 Thank you. Q 6 -- and that's it. 7 (Witness excused.) CHAIRMAN WHITE: We'll break for the recess 8 9 at this time. I have 8:32. So about 10 minutes, 10 so 8:45, thereabouts. (Recess taken, 8:32 p.m. to 8:49 p.m.) 11 12 CHAIRMAN WHITE: We're going to go ahead and call the hearing back to order. Everybody please 13 take your seats. We have some business to take care 14 15 of before we begin hearing from this witness. There's been some documents presented to the 16 17 Board, and the Board has not moved to accept them 18 into the record. We have one that was submitted by 19 Mr. Carrara, an A9, and then we had a report that 20 came from the public that we're going to label as P1. (Exhibit P1 marked for identification and 21 22 retained by the Board.) 23 CHAIRMAN WHITE: I would ask for a motion to --2.4 MEMBER BOWEN: So moved, Mr. Chairman.

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1	CHAIRMAN WHITE: Moved by Mr. Bowen,	
2	seconded by Mr. Regan. All those in favor say aye.	
3	(Ayes heard.)	
4	CHAIRMAN WHITE: Opposed, same sign.	
5	Motion carries.	
6	Go ahead and begin with your next witness.	
7	MR. KINNALLY: Just a point of order. With	
8	respect to P1, that's the certified FOIA request of	
9	January 21st, 2016, which was requested of the	
10	Village of Woodridge. I just wanted to make that	
11	clear for the record with your permission.	
12	CHAIRMAN WHITE: Thank you.	
13	Go ahead.	
14	MR. KOLB: For the record we'd like to move	
15	to admit Exhibits J21 and J22, which were respectively	
16	Dr. Hendrickson's report and his curriculum vitae.	
17	CHAIRMAN WHITE: I thought we labeled those	
18	differently.	
19	MR. KINNALLY: That's incorrect. They're	
20	labeled J19 and J20.	
21	(Exhibit J20 marked for identification	
22	and retained by the Board.)	
23	CHAIRMAN WHITE: I thought we moved on those	
24	already. We did. We had a motion to accept those	

718 1 in the testimony. 2 MR. KOLB: And I have another exhibit I'll 3 pass out which will be J21 for the record. 4 (Exhibit J21 marked for identification 5 and retained by the Board.) 6 MR. KOLB: We call Mike MaRous. 7 (Witness sworn.) CHAIRMAN WHITE: Please state your name and 8 your relationship to this petition for the record. 9 THE WITNESS: My name is Michael S. MaRous. 10 I have provided consultation and a report in regards 11 12 to the proposed project in regard to the value impact of the proposed project and have testified, I believe 13 a week ago tonight in regard to my report and its 14 15 conclusions. 16 MICHAEL S. MA ROUS, 17 having been duly sworn, testified as follows: DIRECT EXAMINATION BY COUNSEL FOR THE PETITIONER 18 19 BY MR. KOLB: 20 So, Michael, we had called you as an expert 21 witness last week to testify, in essence, that the 22 proposed alcoholism and substance abuse treatment 23 facility does not have a substantial negative impact 2.4 upon property values in the surrounding area amongst

719 1 other opinions you gave. Correct? 2 That is correct. 3 Now, since the time you testified last week, 4 in today's testimony the Zoning Board of Appeals chairman and the County has requested that you 5 6 review documents called "Not In My Back Yard, The 7 Effect of Substance Abuse Treatment Centers on 8 Property Values." 9 Did you review that document? I did. 10 Α All right. Now, the basis, I believe, of 11 the Zoning Board's request that you review this 12 document centers around the conclusion that is found 13 on page 1 of that document that, in essence, states 14 15 that the report finds that a neighboring treatment center is associated with an 8 percent reduction in 16 17 nearby home prices. 18 Do you recall seeing that conclusion to this 19 report? 20 I did. Α And the Zoning Board of Appeals and County, 21 22 and I assume Mr. Carrara, as well, since his expert, 23 Mr. Waller, coauthored this report, would like your

opinions as to the findings in this report.

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like to ask you a series of questions regarding those opinions.

A Understood.

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CHAIRMAN WHITE: And if I could ask you again to get right into the mic, Mr. MaRous.

Thank you.

Q So as a preliminary matter, drawing your attention, Mr. MaRous, to page 66 of the report, I'll read from the bottom: "The Fair Housing Act was designed to prohibit discrimination in housing. In 1988 the Fair Housing Act was amended to include persons with handicaps to protect classes under the FHA. The definition of handicapped under the Fair Housing Act is very broad, and drug addiction and alcoholism are considered to be disabilities that are covered. The Fair Housing Act also has a provision that permits the exclusion of those whose tendencies would constitute direct threats to safety of others."

Reading on, on page 67, first paragraph -first full paragraph, "The FHA covers almost every
aspect of a real estate transaction, and according
to the Act, it is illegal to discriminate in the
sale or rental of a dwelling against a person with a

disability."

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Do you have any reason to challenge the notion that's in this article regarding the application of this act?

A No.

Q You and I have pointed out some pretty fundamental flaws with this report. I'd like to go into those flaws carefully and slowly so everyone can kind of understand exactly where we're going.

Drawing your attention to page 74 of the report, is it not true that of the 36 facilities studied in this report, half, approximately 16, involved opiate-only or methadone clinics?

A Correct.

Q So the remaining half of the clinics then must be inpatient facilities such as the one proposed by the applicant; correct?

A Or hospital treatment, correct.

Q All right. And you recall in the course of your attendance at prior hearings Exhibit J15 wherein the applicant introduced a letter by Trina Diedrich of the IDHS indicating specifically that the State has made a finding that the applicant's facility is exceptionally different from a methadone clinic;

722 1 correct? 2 I was here for that testimony. Yes. All right. So if 36 facilities treated --3 4 50 percent were methadone clinics, would it be safe 5 to say that only half the facilities cited in this 6 report are similar to the applicant's? 7 Α Simple math, yes. Okay. And drawing your attention to page 80, 8 9 there's a chart with some qualitative data in this 10 report, is there not? A Yes, there is. 11 And I see from the top left-hand corner that 12 their appears to be with respect to all 36 facilities 13 14 studied an overall 8 percent decrease in property 15 I think the figure they use is .077, which values. I assume they round up to the tune of 8 percent. 16 17 Correct? That would appear to be my conclusion, yes. 18 But looking at the line directly underneath 19 20 that, I see that when the report addresses only 21 methadone clinics, opiate-only clinics, the 22 disparate impact is far greater. It's a negative 23 17 percent. In fact, it's 17.4 percent negative; 2.4 correct?

A Yes.

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Q Okay. So if the 50 percent of the 36 clinics study pulled the values down by 17 percent, in order to reach an 8 percent aggregate it would mean that the remaining half of the facility similar to the applicant's had what kind of effect on property values?

A Basically, zero. Or, actually, again, simple algebra, it would be plus 1 percent.

Q So although it's Mr. Carrara's expert who authored this report, would you say that it's safe to assume that this report actually supports the notion that facilities like the applicant's facility, a residential inpatient alcoholism and substance abuse treatment facility actually has no negative impact upon property values?

A Based on this portion of the study, correct.

Q We all know that the standard on a special use is that a special use -- and this is what the Board is to consider, all of you as we go forward and what the applicant's standard is to be able to submit evidence to satisfy, is that the special use, quote, "will not be injurious to the use and enjoyment of other property in the vicinity nor

substantially diminish or impair property values in the neighborhood."

Is it safe to say, Michael, that a positive

1 percent increase or no increase at all certainly

doesn't rise to the level, or in this case alter the

level of, quote, "substantially diminishing or

impairing property values"?

A Absolutely not.

Q Do you recall the other flaws that we discussed in this report that actually support our positions?

A Yes, I do.

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Q Okay. Specifically, is it not true that the report studied only properties — let me recharacterize this — within 1/8th mile radius where the Maxxam site takes place, there were no homes present in our proposed site; is that not correct?

A That's correct. The closest -- 1/8th of a mile is about 660 feet. The closest home to the subject facility is the large home that sits on about 39 acres to the north of the property that's about 700 feet away. Most of the other homes going east, west, and south are significantly farther

725 1 than that. 2 In fact, drawing your attention to page 89, let's look at some of the assumption that this 3 4 report makes that the County asked us to address. 5 The second paragraph says, "There were approximately 153, 96, and 60 properties listed 6 7 within .175 miles, .15 miles, and .125 miles of the rehab treatment facility respectively over the 8 9 period of time of our study." So is it safe to say, simply put, that in 10 this study there were 60 homes within 1/8th of a 11 12 mile of the subject facility? A Yes. 13 And in our case the situation is very 14 15 different; we have no homes within 1/8th of a mile; correct? 16 17 That's correct. 18 In fact, the nearest home is Mr. Carrara's client's home; is that correct? 19 20 I don't know who Mr. Carrara's client is, 21 but I'll take your word for it. It's the large 22 house to the north. 23 So if 1/8th of a mile is approximately 2.4 660 feet, is it not true that the nearest home is

1 actually 750 feet away?

- A Approximately, yes.
- Q So the report really in the 1/8th of a mile radius that surrounds the proposed facility where the maximum impact takes place studied higher density residential uses, 60 homes in that little radius of an eighth of a mile?
- A Correct. Basically, everything that would pertain to the subject example would fall outside of it.
- Q In this area in rural Kane County, we have no houses within an eighth of a mile?
  - A That's correct.
- Q So we have two fundamental flaws in this report. The first is the flaw that you had just mentioned regarding the lack of apples to apples residential density within the 1/8th of a mile where the maximum effect takes place, and the second is the anomaly that we had just discussed earlier where half the facilities are opiate-only-type facilities which really don't apply and pull the values down disparity?
- A Correct.
- Q Isn't there a third flaw to this report, as

well, regarding lot size?

A Yes.

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- Q Can you explain that one for us?
- A Basically, in the report it discusses minimum lot sizes, and it goes to maximum lot sizes, and it goes up to a maximum of 19 acres. The house in question that I described that's most proximate of a little over 700 feet I believe sits on 39 acres, which would be double the maximum lot size provided in the study. So that, again, is significantly double outside the range.
- Q So drawing your attention, again, to page 89, it says at the top, "Consistent with other real estate studies, we pulled outliers from the data set, confining our data to a typical range of homes listed at less than 1 million, fewer than 10 bedrooms, and fewer than 16 acres." In this instance are you aware of any property within the 1/8th of a mile radius that's less than 16 acres?
- 20 A No.
  - Q So what are your conclusions with regard to your review of this report? Do you believe it changes any of your prior testimony that in this case the applicant's proposed alcoholism and substance abuse

treatment facilities will not substantially diminish property values in the area and the applicant is able to satisfy the standard for the special use?

A Absolutely not. It's a broader article and it appears to be more specific with a data set in a more urban, dense situation and has, again, half as meth clinics. So it's really not comparable.

Even more interesting, it's not in any of the recognized consulting or valuation journals. It's basically in what is an up-and-coming green journal that's sustainable real estate. But it's considered a green journal that's kind of misplaced. When things are considered for value impact, they usually go to the Appraisal Journal under The Appraisal Institute or the Counselors of Real Estate Real Estate Issues. Those are really the two main journals for value impact.

- Q So this report was not accepted in one of the main journals for value impact; is that correct?
  - A No, it was not.

- Q And do you know anything about the qualifications of the author of this report?
- A Based on the request to do a more finite review, I delved into Mr. Benny Waller's

qualifications, and it appears -- and, again, value impact, value diminution by Uniform Standards of Professional Appraisal Practice, which is basically the appraisal rules nationwide, you're providing a value opinion.

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Mr. Waller was a licensed appraiser 12 or 13 years ago, and it appeared last in the state of Mississippi. To continue with your state license and I think in every license in the U.S. -- I've got them I think in five states -- you have to retake every two years this update of the standards class.

So it would mean that the last time that he obtained the license, it may have been six or seven classes that he's actually missed on the rules. I couldn't tell from looking at his -- we call it CFE or qualifications -- any valuation experience recently, couldn't tell if there's any experience in the state of Illinois, if he was licensed in the state of Illinois, and really looking at any specificity to impact or specific study on the subject property.

Q So as you sit here today, can you continue to safely say to the general public that this proposed facility will not diminish substantially

730 1 property values in the surrounding area assuming the 2 applicant's petition is approved and construction 3 and opening commences? 4 Based on my testimony and, again, the 5 assumptions of the issues with the operation and 6 management, security, and all the other testimony as 7 part of the application, this article does not change my opinion, and my opinion continues that 8 9 this proposed project, if approved and implemented, will not have a negative impact on properties. 10 11 MR. KOLB: Thank you. 12 CHAIRMAN WHITE: Board members have any questions? 13 14 (No response.) 15 CHAIRMAN WHITE: County have any questions? 16 MR. KINNALLY: Thank you, Mr. Chairman. 17 Just for the record this exhibit is J21 as I understand it. 18 19 CROSS-EXAMINATION BY COUNSEL FOR THE COUNTY 2.0 BY MR. KINNALLY: 21 Mr. MaRous, this is a different kind of 22 study than the one you did, is it not? 23 Α Yes. 2.4 And the methodology that is employed is, is

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1	it fair to say, a vector analysis?	
2	A Yes.	
3	Q And a vector analysis uses different data	
4	than you used in your study; is that true?	
5	A Yes.	
6	Q And it's based on different externalities	
7	than what you used in your studies; is that true?	
8	A My studies considered them but this is more	
9	specific to those different areas.	
10	Q This is a quantitative analysis, is it not?	
11	A Correct.	
12	Q And it's based on these vectors that are	
13	ascribed to certain things, such as days on the	
14	market, location, things of that nature?	
15	A Correct.	
16	Q So what you undertook was based on your	
17	training and experience as an appraiser and	
18	consistent with the Appraisal Institute that you're	
19	a member of?	
20	A That's correct.	
21	Q This is a different animal altogether?	
22	A It is but it's still providing opinions on	
23	value which then becomes an appraisal.	
24	Q But isn't this appraisal basically or	

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1	this study by Dr. Waller, isn't this focused on	
2	diminution of real estate values?	
3	A That's his conclusion, yes.	
4	Q And your focus is on the impact on valuation	
5	based on comparable sales?	
6	A Correct.	
7	Q So his method is hedonic; is that right?	
8	A Yes.	
9	Q You didn't use that?	
10	A No.	
11	Q Reasonable people can disagree with respect	
12	to methodologies used to appraise real estate; is	
13	that correct?	
14	A Yes.	
15	Q You mentioned that Dr. Waller have you	
16	seen his curriculum vitae?	
17	A I have.	
18	Q You have not?	
19	A No, I have. I have it up here with me.	
20	Q And you know that he is a real estate	
21	appraiser in education in Virginia; is that right?	
22	A That is correct.	
23	Q Do you know what that means? Can you help	
24	us with that?	

733 1 It appears under the Virginia licensure it's 2 provided for people that teach classes. 3 Q Okay. And would you say -- is it fair to 4 say with respect to Dr. Waller's current credentials that he's academic? 5 6 A Absolutely. 7 Thank you. MR. KINNALLY: I have no further questions. Thank you, 8 9 Mr. Chairman. 10 CHAIRMAN WHITE: Mr. Carrara. 11 MR. CARRARA: Thank you, Mr. Chairman. CROSS-EXAMINATION BY COUNSEL FOR THE APPELLANT 12 BY MR. CARRARA: 13 Mr. MaRous, at the beginning of your 14 15 testimony you opined on the Fair Housing Act; is that correct? 16 17 I provided a conclusion based on the statement 18 in Mr. Waller's report and provided a conclusion, yes. 19 Do you remember what page you were directed to look at to give your opinion or conclusion? 20 21 Pages 66 and 67. 22 Okay. And you said that you believe it's 23 your opinion the Fair Housing Act applies to the

Maxxam facility; correct?

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1 MR. KOLB: Objection. He said he had no 2 indication that those statements were untrue, any 3 reason to challenge them. 4 Let me give you this statement: 5 paragraph goes on to say, "The Act does permit 6 reasonable local, State, or Federal restrictions 7 regarding the maximum number of occupants permitted 8 to occupy a dwelling, exceptions from living space" 9 and the like. Do you believe the Act forces the Zoning Board or Kane County to relinquish all its 10 zoning control? 11 12 MR. KOLB: Objection; calls for a legal opinion. 13 14 MR. CARRARA: He gave his legal opinion 15 earlier when he was agreeing with the conclusion that was a legal conclusion. 16 17 MR. KOLB: That was not a conclusion. 18 asked him if he had reason to disagree or any 19 information to the contrary. I did not ask him for 2.0 a legal opinion. 21 CHAIRMAN WHITE: Move on, Kevin. I would 22 agree with the objection. 23 BY MR. CARRARA: 2.4 Do you have any reason to disagree with the

conclusion that the Fair Housing Act doesn't force 1 Kane County to relinquish all its zoning control? 2 3 I do not have the opinion that County is 4 forced to relinquish all their zoning control. 5 Thank you. 6 Earlier in your testimony you suggested you 7 disagreed with the math behind the results in this study. Correct? I think that was your first flaw 8 9 you may have mentioned. I would --10 Well, I'd like you to tell me what the flaw 11 12 is. Mr. Kolb testified earlier; you testify now, please. What's your first flaw in this report? 13 A I always let counsel object and let the 14 15 chair make the ruling. If there's not an objection, I'll move on. 16 17 So can you repeat the question, please? 18 Sure. What was the first flaw, in your 19 estimation, in this report? 20 A Basically, simple math that there were 21 36 facilities. Half were meth clinics, and going to 22 his math, I believe it reflected about a 17 percent 23 diminution in value, while the overall diminution 2.4 was 8 percent.

736 1 With simple math, if we go through the 2 formula --3 Take me through that formula. Let's do the 4 simple math. 5 I'd be happy to. 6 CHAIRMAN WHITE: What page is that chart on? 7 Page 80, is that the one you're referring to? 8 MR. KOLB: I believe it is. 9 MR. CARRARA: I'm not sure what he's referring 10 I guess we'll get to that, Mr. Chairman. Do you need a blank piece of paper to do 11 12 your formula on so we can enter that into the record, sir? 13 14 CHAIRMAN WHITE: That's not necessary. 15 MR. KINNALLY: Page 80. (Continuing.) Yes. If you look at page 80 of 16 17 his report, but, basically, if you look at the whole neighborhood as 1, and the whole neighborhood is 18 19 8 percent less, we would have .92. We'll use a Y factor for that. 2.0 21 So then we would have .92 Y equals X, which 22 is -- X is the other half of the houses, plus .83 Y 23 divided by 2. If we then move down with our algebra, 2.4 we solve for X, and it equals 1 percent positive.

Q Was the report that you prepared earlier 1 2 that you testified to, was that reviewed by any 3 outside independent peers to check your math? 4 I'm smiling. I assume you might have, but 5 it was not sent to any professional organizations, no. 6 Is it your understanding that prior to 7 publication in journals that historically those articles are submitted to outside, independent, 8 9 peer-reviewed to verify the underlying math of the articles? 10 I was chairman for three years worldwide of 11 12 The Appraisal Institute's publication committee where all the journals, all the magazines, everything came 13 under us. And that organization -- their publications 14 15 have generally been in existence over 50 years. That's what we did. 16 17 I also have sat on the board of Real Estate 18 Issues, which is the Counselors of Real Estate. 19 Similar situation, worldwide organization. 2.0 This publication has only been in existence 21 five years. I actually reached out to editors of 22 The Appraisal Institute or their directors to see 23 what they knew about this magazine. It's a new 2.4 magazine and we couldn't tell what the peer review

738 1 process was. 2 I would assume that there was peer review, 3 but, again, this is focus of basically sustainable 4 or a green, not value, and having to do with the 5 impacts as provided in this article. 6 CHAIRMAN WHITE: And are you referring to 7 the Journal of Sustainable Real Estate? Is that 8 what you're referring to? 9 THE WITNESS: Yes. 10 CHAIRMAN WHITE: Thank you. Q And -- I'm sorry, I apologize -- the last 11 12 bit your testimony I didn't hear. Was it your suggestion that the Journal of 13 Sustainable Real Estate only deals in green 14 15 publications or green articles? Their focus is green. That's basically 16 17 their direction; that's their specialty. So this article seems to be a little outside of the focus of 18 19 the magazine. Why they accepted it I don't know. 20 So if -- again, I guess we'll give you the 21 hypothetical, and I'll ask you to agree or disagree. 22 Do you have any reason to believe that there 23 was not peer review done of this article prior to

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its being published?

A I can't provide a full answer yes or no. I think it clearly was peer reviewed, but this falls in the direction of ARES, which is another group that I have involvement with that's basically professors, college educators that simply — part of keeping their academic accreditation and keeping their jobs is to publish. And I think it appears that that was the group of the peer review.

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So were these experts in real estate valuation in the peer review? I don't know. The Appraisal Institute, every article has a peer review by a real estate appraiser that's been in the business for over 10 years and has the MAI designation. So I don't know the qualifications, but I'm sure it was peer reviewed.

Q So if -- a peer review, does it focus more on the math or the ultimate conclusion?

A Not being on the publication committee of this magazine, I don't know their focus. I looked to see their mission statement, and it, again, appeared to be more in the sustainable and didn't go into the specifics that you asked me. I don't know. They're not clear.

Q Let me ask you, then, in your experience as

1 the reviewer or the peer person -- I think you 2 mentioned you were on a committee and did a bunch of 3 things. Would your peer review focus on the math to 4 make sure the underlying math behind the article was 5 appropriate? 6 A My focus -- and I've reviewed and cited in 7 about 15 books; I've probably done about 20 articles, 8 and the focus was on the reasonableness and 9 credibility of the article. And once it got past 10 that, then I would look to the review. We have professional editors to clean up the 11 12 language, to clean up the typos and everything else. Q So I guess your answer is yes, you would 13 look first to the math, and then would you worry 14 15 about cleaning up the grammar? I would look to the credibility, and 16 A No. 17 reasonableness, and support of the article and then 18 look to the math. 19 Q Okay. So was there ever a time when math, 20 if it didn't work out, that the article would be 21 published? 22 A Generally, there's three phases. It's reject, 23 which means it's gone; one means it's accept, and 2.4 the third is generally make some modifications,

1 which is generally what happens. And at that time 2 if there's some mistakes -- again, if it's a 3 credible article, fix the mistakes. If it's not 4 credible, it doesn't make The Appraisal Journal, 5 which is the appraisal institute's professional 6 journal. 7 But would you agree one of the bases for acceptance would be verification of the underlying 8 9 math in the article? You wouldn't publish something 10 if the math wasn't right, would you, sir? CHAIRMAN WHITE: Are you disputing the math 11 12 that's in here, or are you just disputing how it's applied to this petition? 13 That's the answer. It's the application to 14 15 the petition when compared to the subject. Because I'm saying to compare apples to apples and you take 16 17 out the meth clinics, then the math reflects 18 basically no diminution. 19 So his was a broader sample that included 20 the apples to oranges comparison. So I'm not 21 disputing that he did his math wrong, but when it's 22 compared to what is brought forth here, that's the 23 issue. 2.4 MR. CARRARA: Thank you for the

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1	clarification, Mr. Chairman.	
2	Q Mr. MaRous, in your report what drug facility	
3	did you review?	
4	A Drug facility?	
5	Q Drug treatment facility was the basis of	
6	your expert report.	
7	A Just the subject.	
8	Q So	
9	A The proposed subject.	
10	Q So your matched pairs that you did in your	
11	analysis were not based on a drug treatment facility;	
12	correct?	
13	A They were based on a youth campus for troubled	
14	adolescents.	
15	Q Closed in 2010 or '11?	
16	A It was closed after my comps were utilized.	
17	So the comps, the analysis all happened before the	
18	facility was even planned to be closed.	
19	Q And then you did one matched pair for the	
20	current area; is that your testimony?	
21	A That's correct.	
22	Q If the facility is not there, how were you	
23	able to judge the negative externalities of the	
24	Maxxam facility if it's not in existence?	

A That's a real interesting site. And what happens, whether it be windmill sitings or a lot of other sitings, when these types of zoning become very public, very broadcast, and there's really some concern and some scare, that's usually the lowest point, the biggest negative impact on value. That clearly was impacting if there was going to be an impact on this property, and it subsequently sold right in between the relative range of value that I estimated for.

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So my first estimate was assuming there was no planned facility. The other was assuming there's a potential for a facility that's out there, and that's the way that I looked at it.

Q And how did you determine that time period of when you thought this facility would have been the most impacted, the proposed facility?

A My experience with heavily contested zoning cases, of which I've probably been involved with 30-plus, is usually the problem -- when it creates the economic uncertainty and has the biggest impact on value. In my opinion, uncertainty and fear are a very significant potential impact, and it happens many times during these siting hearings.

1 Q Okay. But in your report what time period 2 did you use for your comparison? 3 The date of value. I would have to pull out 4 my report, but I think it was August of 2015 when I 5 completed my report. 6 Q At that point in time in August of 2015, was 7 this application going through the public hearing 8 process? 9 That's another interesting question because 10 it appeared that it might have been while I was doing it but, no, it had not started. But it was 11 12 out there; the information was out there, and it was known in the community. 13 What public notices were issued to the 14 15 surrounding property owners at the time you did your 16 report to put them on notice? 17 MR. BROWN: I'm going to object as beyond 18 the scope. We've already presented this witness for 19 direct. It's not within the scope of the examination 20 that was brought up earlier. 21 CHAIRMAN WHITE: What was your question 22 again, Kevin? 23 MR. CARRARA: I'm just trying to figure out 2.4 what -- he said there was information out there in

1 the public when he did his value in August 2015 that 2 this facility would have no impact on the one sale 3 he chose. And I'm just asking him what that 4 information was because the public hearing process 5 had not started yet. 6 MR. BROWN: My point is, one, he testified 7 about this earlier. Secondly, it's beyond the scope 8 of our examination and the purpose of this. 9 What we're doing is going over the entire testimony again. I've been quiet and actually been 10 stopping many of the objections just to get a fair 11 12 reading here, but we're opening up a whole other can of worms, and we've already gone through this. 13 It's not within the scope of the examination 14 15 that was brought here on direct. That's my objection. 16 17 MR. KINNALLY: Mr. Chairman, for the record, 18 the application was submitted as Exhibit No. 20 on 19 August 27th, 2015. 20 CHAIRMAN WHITE: Thank you. Does that 21 change your question? 22 MR. CARRARA: No. The application was 23 submitted but he said the public was aware of it. 2.4 I'm trying to figure out what information he saw out

there in the public after the filing of this application before the public hearing process was noticed.

THE WITNESS: In our investigation -- and particularly going back to the Kiva submission of approximately three years ago -- there was awareness in the community in the immediate neighborhood of the pending application.

#### BY MR. CARRARA:

- Q And you have firsthand knowledge of that, sir?
- 11 A Yes.

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Q In this case -- what is the information you reviewed in this specific case, not the Kiva case, that allowed to you make the determination that there was public knowledge in August 2015? Did you review anything specifically?

A I reviewed the pending application. I began work on this -- I'd have to go back through my notes, but probably May, Juneish, no later than early July of 2015.

I was aware that there had been public knowledge of this through the developer, through our investigation of the real estate market. I don't remember exactly what I did. I could probably go

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1	back and reconstruct the timeline. It would take me	
2	a while.	
3	But it was known but the hearings had not	
4	started.	
5	MR. CARRARA: That's all I have, Mr. Chairman.	
6	Thank you.	
7	CHAIRMAN WHITE: Thank you.	
8	Board members have any questions of this	
9	witness?	
10	(No response.)	
11	CHAIRMAN WHITE: County have any redirect?	
12	MR. KINNALLY: No, thank you.	
13	CHAIRMAN WHITE: Any unit of government wish	
14	to address this witness?	
15	Please keep it brief, Mr. Blecker.	
16	MR. BLECKER: I will try.	
17	CROSS-EXAMINATION BY AUDIENCE MEMBER	
18	BY MR. BLECKER:	
19	Q You were testifying about the FHA. Are you	
20	familiar with all the regulations and rules that go	
21	with the Fair Housing Act?	
22	MR. KOLB: Objection; calls for legal	
23	opinion.	
24	Q Do you agree or disagree with the statement	

1 I'm going to read: "The County has no obligation 2 under the FHA or other law to grant Maxxam specific 3 application for a special use for this facility on 4 this property. Denial of Maxxam's application for 5 special use permit is not an automatic violation of 6 the FHA if the County's decision is made based on 7 zoning standards contained in the county zoning 8 ordinance and not based on the disabilities of the 9 proposed facility"? CHAIRMAN WHITE: Can you reference that 10 document? 11 This is a memorandum MR. BLECKER: Yes. 12 which I would be willing to put into evidence 13 14 written by Attorney Julie Tappendorf of Ancel Glink 15 on behalf of the Village of Campton Hills. 16 CHAIRMAN WHITE: Is that part of your 17 Village resolution? 18 MR. BLECKER: No. That was a separate 19 memorandum which I understood was put in the Board 20 packet at one time or another. 21 MR. KOLB: Objection; hearsay. 22 MR. BLECKER: This is not hearsay. It's a 23 memorandum written by our attorneys. It's a legal 2.4 document.

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1	MR. BROWN: Actually, that's exactly our	
2	point earlier that he's asking to make a legal	
3	opinion. I mean, he did testify to that. That was	
4	a reference to the report that was permitted that's	
5	going to be the expert for the opposition here, and	
6	he just made that reference. He's not here to give	
7	a legal opinion, and his question is asking him to	
8	give one.	
9	CHAIRMAN WHITE: I would agree with the	
10	petitioner.	
11	MR. BLECKER: I would like to submit this	
12	into evidence if that's possible at this point.	
13	CHAIRMAN WHITE: Do you have copies?	
14	MR. BLECKER: Yes.	
15	MR. KOLB: Objection, foundation.	
16	CHAIRMAN WHITE: What's your basis for	
17	submitting this? I'm not saying I won't take it.	
18	Go ahead and distribute it, and we'll take a	
19	look at it, and maybe at a later date we'll ask for	
20	a motion to accept it.	
21	MR. BLECKER: Okay.	
22	CHAIRMAN WHITE: Thank you.	
23	MR. BLECKER: May I approach?	
24	CHAIRMAN WHITE: You may.	

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1	MR. KINNALLY: Mr. Chairman, can we mark	
2	that as Exhibit P2, with your permission?	
3	CHAIRMAN WHITE: Yes.	
4	(Exhibit P2 marked for identification and	
5	retained by the Board.)	
6	CHAIRMAN WHITE: Is there a motion by Board	
7	members to accept this into evidence?	
8	MEMBER BOWEN: So moved, Mr. Chairman.	
9	MEMBER HEINRICH: Second.	
10	CHAIRMAN WHITE: Moved by Mr. Bowen,	
11	seconded by Mr. Heinrich. Any discussion?	
12	MR. KINNALLY: Just so we're clear,	
13	Mr. Chairperson, this is a memorandum dated	
14	December 29th, 2015, apparently authored by someone	
15	named Julie Tappendorf addressed to President	
16	Blecker and Board of Trustees.	
17	Thank you.	
18	CHAIRMAN WHITE: Any other discussion? All	
19	in favor say aye.	
20	(Ayes heard.)	
21	CHAIRMAN WHITE: Opposed, same sign.	
22	(No response.)	
23	CHAIRMAN WHITE: Motion carries.	
24	Anyone else wishing the podium at this time?	

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1	(No response.)	
2	CHAIRMAN WHITE: Any redirect?	
3	MR. KOLB: None.	
4	CHAIRMAN WHITE: The witness is excused.	
5	THE WITNESS: Thank you.	
6	(Witness excused.)	
7	CHAIRMAN WHITE: Do you have anyone else	
8	you'd like to call at this time?	
9	MR. BROWN: We rest at this time with the	
10	exception of in case we go over some of our exhibits	
11	that are not admitted we have an opportunity to make	
12	sure they're all admitted. But I think Mr. Kinnally	
13	has taken care of that for us, but I think we'd like	
14	to check that.	
15	CHAIRMAN WHITE: I agree. We are going to	
16	go through that to make sure everything that's been	
17	submitted has been accepted in one way, shape, or	
18	form, been moved on.	
19	At this time, Mr. Carrara, do you have	
20	anyone to bring forward?	
21	MR. CARRARA: I guess for clarification,	
22	then, there were a number of questions you compelled	
23	to testify, and those individuals have not testified	
24	as of yet. So if they are disagreeing with your	

notice to compel, I'd ask that their expert reports 1 2 be stricken from the record and the ZBA and County can't use them as a basis for their decisions. I've 3 4 not had a chance to cross-examine these experts. MR. BROWN: There is a difference between 5 what we call and what -- if the Board wishes to call 6 7 someone on their own, that's something different. We've rested our case and we've never said -- we've 8 9 had our witnesses here in accordance with that. 10 If there's someone that's not here, it's only because they've been here every other day and 11 12 have had a conflict. When I say this, we've rested our case, and it's not up to Mr. Carrara to tell us 13 how we need to prove our case. But we have complied 14 15 with the requests of the Board. 16 MR. KOLB: The order to compel was to appear 17 as opposed to testify. CHAIRMAN WHITE: Does the Board wish to call 18 19 any of the witnesses that have -- that were compelled 2.0 that have not yet testified? 21 I'm going to through -- you correct me if 22 I'm wrong -- Dr. Peter Poletti --23 MR. BROWN: I don't have your list in front 2.4 of me. One second.

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1	CHAIRMAN WHITE: I'm not sure I have a	
2	complete list myself.	
3	MR. KOLB: Mr. Poletti has not testified.	
4	MR. KINNALLY: We have one, Mr. Chairman.	
5	I'll give you one if you want. We have the list.	
6	We can distribute one to you, and the Board, as well	
7	as the petitioner, as well as Mr. Carrara.	
8	CHAIRMAN WHITE: I don't have it at my	
9	fingertips.	
10	MR. BROWN: I will say Mr. Poletti has been,	
11	I believe here at every proceeding until today. He	
12	has another client; he's not available either today	
13	or on Thursday, but he was here last Thursday and	
14	the previous Tuesday.	
15	As you know, we've been providing people,	
16	and they've been here at a great expense to our	
17	client, but he's just not available today due to	
18	other conflicts.	
19	CHAIRMAN WHITE: I understand. Steven Marco	
20	is the other individual that we have not heard from.	
21	MR. BROWN: He is present.	
22	CHAIRMAN WHITE: And Ryan Bailey.	
23	MR. KOLB: He is not present tonight but has	
24	been here the first four hearings.	

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1	CHAIRMAN WHITE: All right. And do you have	
2	additional names that I haven't mentioned?	
3	MR. VAN KERKHOFF: I'm sorry. Did you	
4	mention Mr. Bailey?	
5	CHAIRMAN WHITE: I did.	
6	MR. VAN KERKHOFF: Okay. And Mr. Marco.	
7	CHAIRMAN WHITE: I did.	
8	MR. VAN KERKHOFF: Mr. Poletti.	
9	CHAIRMAN WHITE: Yes.	
10	MR. VAN KERKHOFF: Mr. Woodward.	
11	CHAIRMAN WHITE: Mr. Woodward has already	
12	testified.	
13	MR. VAN KERKHOFF: Mr. Passman.	
14	MR. BROWN: Mr. Passman is what we discussed	
15	earlier. He's an attorney.	
16	CHAIRMAN WHITE: Does the Board wish to	
17	bring any of these, Mr. Marco, Mr. Bailey,	
18	Mr. Poletti Mr. Poletti is not present this	
19	evening. Mr. Marco is.	
20	Mr. Carrara?	
21	MR. CARRARA: I'm sorry, Mr. Chairman. I	
22	guess I'll reassert my objection that and I'll	
23	defer to Mr. Kinnally for his advice to you. But	
24	the purpose of cross-examination of expert witnesses	

755 1 is if they are going to provide a report that is a 2 basis, I, the ZBA, and the general public have the 3 ability to do reasonable cross-examination. 4 If they are not available, the in person. 5 foundation of the report cannot be used as evidence 6 to sustain a petition in the zoning matter. 7 So I would ask that Mr. Poletti's valuation report be stricken from the record. I'd ask that 8 Mr. Murer's report based on this being similar to a 9 10 hospital be stricken from the record, and I'd ask 11 that Mr. Marco be compelled to testify as to the 12 operations. He's the one that's going to be running 13 this. I think there's a number of ZBA members here 14 15 who have asked repeatedly here about the man that's going to be running this place, and we should bring 16 17 him up and hear that. 18 MR. BROWN: Well, we've had these people 19 available, and we've actually complied with the 20 dates. I've never heard a continuance -- maybe I 21 might be mistaken. Was the motion to compel renewed 22 for today? 23 MR. KOLB: No. 2.4 The motion to compel was never MR. BROWN:

renewed. It was for a certain date which was the beginning of this hearing. So technically he's wrong on that aspect of it.

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Despite that, we've had these people here, and they are just not available. Mr. Marco is present, and I guess to a certain extent to accommodate, if he wishes to ask some written questions that we can answer in writing, we'd be glad to respond to that as an accommodation.

But I also recognize that we've complied with this, but this has been a unique hearing.

Because the experiences what I've heard from other people who are in this field -- and I'm not going to say that I'm an expert attorney in this area -- is that it's not the normal process to compel witnesses by the Board, but we've brought people in.

You hear these all the time. We brought a large number of witnesses who have been paid by the hour to be here. The conflicts which aren't available here tonight are just personal conflicts that they had, and it's not anything that we're trying to impede this process.

I feel the fact that we made them available, we've been in compliance with your motion.

CHAIRMAN WHITE: Mr. Kinnally.

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MR. KINNALLY: A couple things. Thank you, Mr. Chairman.

Number one, the report of Mr. Poletti is already in evidence. The weight that is going to be given that report is up to the Board. Obviously, if the petitioner chooses not to have him testify, that's their choice.

Generally, in these kinds of hearings most of the lawyers agree to take people out of order. I've done a lot of these, and that's pretty much the way it goes. So I don't know if Mr. Poletti can be here at another time. That's a decision that Mr. Brown and Mr. Kolb have to make.

But in terms of the report, it's already in evidence. If he doesn't testify to support it, I don't know what weight you're going to give it.

That's not my decision to make. Obviously, you can't cross-examine somebody who is not here.

If the petitioner is resting their case and they don't want to put other witnesses on, that's a decision they're making. I don't know what effect it will have, but that's not my job. My job is to try to tell you how to run this thing, and I'm

758 1 probably not doing a great a job, but I'm doing 2 my best. 3 So at this particular time, if they're 4 resting, then it's my understanding that the rules 5 that you wanted to utilize at the beginning, we go 6 to the objectors. 7 I know Mr. Carrara is an objector. I don't know if Ken Shepro is an objector. He indicated 8 9 previously that he might be. If he is, then he 10 would go next. 11 And, also, I know you want to hear from the 12 public and give them sufficient time to state their 13 testimony or introduce whatever documents they want 14 to introduce. 15 That's my understanding of the way this 16 works. If they're resting their case, they're 17 resting their case. 18 MR. BROWN: Can I have one moment so I can 19 talk to my client? 20 CHAIRMAN WHITE: Yes, you can. We'll take a 21 very brief recess. 22 (Recess taken, 9:40 p.m. to 9:44 p.m.) 23 CHAIRMAN WHITE: Do you have a decision?

MR. BROWN: Yes, we made a decision.

2.4

1 Once again, we rest. We feel we've been in 2 compliance with your orders to compel by having our 3 witnesses here on previous occasions, and those 4 witnesses that could be here today are present. So 5 we rest. 6 CHAIRMAN WHITE: Okay. Thank you. 7 Then I'll open the floor for the public to come forward and present testimony to the Board. 8 9 And as I indicated, everyone will have to be sworn 10 in unless you already have been. I would ask any unit of government who 11 12 wishes to speak at this time to come forward. MR. KINNALLY: Mr. Chairman, I talked to 13 Mr. Shepro during the break, and he indicated that 14 15 he would have the fire chief here at the next hearing and that he may have one or two other witnesses at 16 17 most. But he would have the fire chief here, with 18 your permission, if that's okay the Board. 19 CHAIRMAN WHITE: I'm not saying we're going to close the public hearing this evening. 20 21 MR. KINNALLY: I just wanted to inform you 22 of that, Mr. Chairman. 23 MR. CARRARA: Mr. Chairman, I have my two 2.4 experts here, but with the time I suspect it would

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760 1 be better if we start with them fresh on Thursday 2 and we go from there. 3 Thank you. 4 CHAIRMAN WHITE: Here again, I'm opening the 5 podium to anybody from the public. I haven't seen 6 anyone from a unit of government approach yet, so 7 I'll take whoever -- Mr. Blecker is coming forward. MR. BROWN: Can I just ask for a point of 8 9 order? Are you going to have a limitation as to how 10 many times the same witness can come up now that we're taking testimony? That's my point and with all 11 12 due respect just wouldn't want the same witnesses to come back every meeting that we have in the future. 13 CHAIRMAN WHITE: And we will try to limit 14 15 that. I'm not going to put a specific number on it 16 at this point, but I do keep track of that and try 17 to -- try to keep them to one or two appearances. 18 It's not always just one. 19 MR. BROWN: Thank you. 20 MR. BLECKER: As yet I have not made a 21 statement. The only thing I've come up to the 22 podium for was to ask questions. 23 MR. BROWN: I wasn't accusing that and I 2.4 have no objection to him saying anything or

761 1 testifying at this time. It wasn't directed to him 2 directly. I'm sorry. 3 CHAIRMAN WHITE: Are these your questions to 4 this Board on procedures or what? 5 MR. BLECKER: Right now this will be my 6 statement. 7 CHAIRMAN WHITE: And you have been sworn in. MR. BLECKER: Yes, I have. 8 9 CHAIRMAN WHITE: So please state your name. 10 MR. BLECKER: Harry Blecker, B-l-e-c-k-e-r. CHAIRMAN WHITE: And your address, please. 11 12 MR. BLECKER: 8N105 Ickenham Lane, Campton Hills. I'm president of the Village of Campton Hills. 13 Firstly, I'd like to start by reiterating 14 15 the Village's support for our initial resolution objecting to the process that brought us to this 16 17 point tonight. That being said, I'll move on. 18 There has been reference to an October 12, 19 2012, Campton Hills police report. I would like to 20 challenge the validity of that memorandum as in 21 reference to this facility on the following grounds: 22 This police report addresses a completely 23 different project with no intensive detox. 2.4 Village has a new report with more recent, relevant

data as to rehab facilities that provide intensive detox, copies of which I would like to put into evidence and be part of the record of this hearing.

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I would also like to bring into question Mr. MaRous' report. When I asked who should pay for the additional expenses of increased police calls, Mr. MaRous responded the Village could increase the levy. Mr. MaRous missed an extremely important fact that the Village is not home rule, and as such cannot increase the levy without a referendum. It is common knowledge that tax increase referendums all across the state are being turned down by the voters. He missed this well-known fact. What other facts did he miss that might have a negative impact on the community?

This begs the question, why should the residents of Campton Hills pay for additional police protection for a facility that is not within the village limits or jurisdiction while not receiving any compensation, tax or otherwise?

Of the estimated \$336,000 the County will receive in property taxes, the Village will receive nothing. Yet we'll be required to provide services. The additional cost of these services would put

unacceptable strain on the Village's already limited resources.

2.4

At a previous meeting the attorney for

Maxxam Partners brought up the requirements of the

Fair Housing Act. Campton Hills Village Attorney

Julie Tappendorf of Ancel & Glink has submitted a

memorandum a copy of which I've just submitted into

evidence addressing this issue.

In an effort to be brief, while keeping the public informed, I will only read an analysis and conclusion submitted for the entire memorandum for the record.

Analysis of FHA Maxxam's application:

"After reading through the various legal opinions and reviewing FHA relevant cases, it is my opinion" -it's Ms. Tappendorf's opinion -- "that Kane County is not obligated under the FHA to approve Maxxam's application for special use permit to operate the facility on the property. The FHA does not mandate a zoning approval as a reasonable accommodation and certainly does not mandate approval of a particular application for zoning relief. It also does not preempt local zoning procedures or standards.

"In short, there is no obligation of the

counter under the FHA or any other Federal law to approve Maxxam's special use application."

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I'll skip over a lot of the other legalese and go right to the summary.

"In summary, the County has no obligation under the FHA or other law to grant Maxxam's specific application for specific use for this facility on this property. Denial of Maxxam's application for a special use permit is not an automatic violation of the FHA if the County's decision is made based on the zoning standards contained in the County zoning ordinance and not based on the disabilities of the residents of the proposed facilities. Even Holland & Knight's, attorneys for Maxxam, opinion acknowledges the importance of Maxxam satisfying all the zoning criteria.

"It is important that the County review and consider Maxxam's application for a special use permit by following the proper zoning process and applying each of the special use standards in the zoning ordinance. Nothing in the FHA preempts the local zoning process or zoning standards. It is within this context that the County should make its decision and not based on incorrect allegations made

by law firms hired by Maxxam that the County must approve zoning relief for Maxxam or to be in violation of the FHA."

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On January 5th, 2016, the Village of Campton Hills unanimously passed a resolution opposing a special use permit to Maxxam Partners, LLC. Again, in the interest of being brief while still keeping the public informed, I will read the highlights and submit the entire resolution for the record.

"Maxxam Partners, LLC, does not meet all standards set forth in Section 25-4-8-2 of the County Zoning Ordinance. In section 2 of our" -- again, I'll be brief; I won't read the whole thing, just selected areas. Section 2 of our resolution, "The Village board opposes the Maxxam petition because the petition for the proposed facility does not meet the special use permit standards set forth in Section 25-4-8-2 of the County Zoning Ordinance. Pursuant to that section the ZBA should not recommend a special use."

Item A under that section, the establishment, maintenance, and operation of the special use will not be unreasonably determined to endanger the public safety, morals, comfort, or general welfare.

One of the most significant concerns of the Village of Campton Hills is the detrimental impact this facility in the proposed use of the property will have on the ability of the police department and as a result will negatively affect the ability of the police department to serve the village residents and property owners. The Village of Campton Hills has no property tax and will not benefit in any way from the \$336,878 in estimated tax revenues that will result from the Maxxam facility as asserted by the Maxxam petition.

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Nevertheless, the Village as the closest responder will likely be the most impacted by police calls generated by the facility, but without receiving any tax or other revenues to offset the additional call volume that is certain to result.

Nowhere in the Maxxam petition does it address the impact of the proposed use on the public safety resources of the county, the fire district, or the Village of Campton Hills.

Although the facility will not be located within the village boundaries, as the closest jurisdiction to the property, the village will certainly be called upon to respond to police and

other emergency calls to the property. That is confirmed in the Village's review of call data from other police departments of similar facilities in their jurisdiction.

2.4

The recent resolution submitted to the ZBA

Campton Township board acknowledged emergency

response times to the facility will be significantly

longer than any of the comparatives provided by

Maxxam's consultants, none of which were addressed

by Maxxam in its application.

There can be no dispute that the Maxxam facility will, in fact, call for services to the County Sheriff's office, as well as the Village of Campton Hills Police Department as the closest responder. The Village simply does not have the resources available to increase the number of officers, shifts, or other resources in the area. As a result, the Maxxam facility will have an unreasonably detrimental impact to the public health, safety, comfort, general welfare of Campton Hills residents and property owners by requiring the police department to shift its very limited resources from duties to respond to calls at the Maxxam facility.

This unreasonable detrimental impact to the Campton Hills police department and village residents has not been acknowledged in any manner by Maxxam in its application or by Kane County. It is clear that Maxxam cannot and has not met the special use standard.

2.4

Section B, "The special use will not be injurious to the use and enjoyment of the property in the immediate vicinity for the purposes already permitted nor substantially diminish and impair property values within the neighborhood."

Maxxam asserts in their petition the facility will not diminish the impact or impair property values within the surrounding area.

However, the market impact studies performed by Maxxam's consultants are faulty.

Firstly, the MaRous study compares the proposed facility use to previous uses of the property, neither of which is allowed use in the F Farming District. A more appropriate analysis would compare the proposed facility use to one of the enumerated uses in F Farming District.

Second, the MaRous study does not take into account the various options for redevelopment of the

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property, simply concluding that demand for the property is minimal as it is currently developed as former school buildings.

2.4

The Poletti study is also faulty because its comparison of the facility to the surrounding areas are not similar to the proposed facility in the surrounding area nor are the sizes of the compared facilities to the Maxxam proposed facility.

Poletti's study also did not take into account the proximity of the closest residential property, instead focusing its analysis on the nearby residential subdivision.

Maxxam's proposed facility does not meet the special use standard, and Maxxam has not sufficiently established that its facility will not be injurious to neighboring properties or property values.

Section C, the establishment of the special use will not impede the normal and orderly development of improvements of surrounding properties for uses permitted in the district:

Maxxam asserts in its application that the facility will be surrounded by property owned by the forest preserve district, a clear misstatement that ignores the fact the facility is proposed to be

located on property immediately adjacent to residential use property owned by Mr. Andrzejewski and the residential subdivision on Silver Glen.

2.4

Skipping down to Section F, "Special use shall in all other respects conform to the application regulations of the district in which it is located except as the regulations made in each instance be modified by the County Board pursuant to the recommendations of the Zoning Board of Appeals."

It is the Village Board's position as described in Resolution 15-18 which I will submit into evidence that the County's procedures for granting of such a modification/similar-use determination was not properly followed nor was it the appropriate process. Instead Maxxam should have been required to appeal for a text amendment or map amendment to conform to the requirements of the zoning ordinance. As a result Maxxam cannot and has not established that it meets these standards.

It is Maxxam's burden to establish that its petition for special use permit for this facility meets each and every one of the special use standards set forth in 25-4-8-2 of the Kane County Zoning Ordinance. Because Maxxam has not and cannot

771 establish that its petition meets all of these 1 2 standards, the Kane County ZBA must recommend that 3 the County Board deny requested special use, and the 4 County Board should accept the ZBA's recommendation 5 to deny Maxxam's application for special use permit 6 for this facility. 7 And now I would like to submit copies of this resolution to the Board as to be part of the 8 9 record of this meeting. 10 CHAIRMAN WHITE: And is your resolution -- I 11 have a copy, I believe -- Resolution No. 16-C2? MR. BLECKER: Correct. 12 CHAIRMAN WHITE: Thank you. You may. 13 MR. KINNALLY: So would that be Exhibit P3, 14 15 Mr. Chairman? That's what my notes show. 16 CHAIRMAN WHITE: Yes. I would agree. 17 (Exhibit P3 marked for identification and 18 retained by the Board.) 19 CHAIRMAN WHITE: Does that conclude your testimony, Mr. Blecker? Mr. Blecker, does that 20 21 conclude your testimony? 22 MR. BLECKER: Yes, it does. 23 MR. BROWN: Do you mind if we ask

Mr. Blecker a couple questions very briefly since he

2.4

772 1 testified? 2 CHAIRMAN WHITE: You may. 3 MR. BROWN: Mr. Blecker, as you stated, the 4 Kane County sheriff would have primary responsibility 5 for calls; is that true? 6 MR. BLECKER: Yes. 7 MR. BROWN: And, also, you are aware that 8 when ambulances are called to the premises that 9 there is a reimbursement and a fee that could be 10 paid for that. Are you aware of that? 11 MR. BLECKER: We do not -- Village of 12 Campton Hills does not have any responsibility for 13 ambulance services. MR. BROWN: So, in other words, when you 14 15 talk about the impact of ambulance and fire protection, that is not something that's under your 16 17 jurisdiction personally as president of Campton Hills? MR. BLECKER: Correct. 18 19 MR. BROWN: So you really don't have an 20 opinion on that personally, and it would not affect 21 Campton Hills; is that correct? 22 MR. BLECKER: The fire -- correct. 23 district and ambulance service does not affect the 2.4 Village.

773 1 MR. BROWN: No further questions. 2 MR. SHEPRO: Mr. Chairman, I would like to cross-examine the witness. 3 4 MR. BROWN: I would object because then we 5 would have everyone in the audience. 6 CHAIRMAN WHITE: Ken -- I'll allow you to 7 present your case, Ken. I understand where you may 8 be going with this, but I think at this time we're 9 trying to get testimony from the public, and I'd like to continue with that. I'll certainly give you 10 the podium at the appropriate time. 11 12 MR. SHEPRO: Thank you. CHAIRMAN WHITE: You're excused, Mr. Blecker. 13 Are there any other units of government that 14 15 are here that wish to present testimony. 16 (No response.) 17 CHAIRMAN WHITE: Is there anyone here that 18 represents a larger group of citizens, say a 19 homeowners association or just a coffee club or 20 something of that nature where you are speaking on 21 behalf of a group of people? I would allow you to 22 come forward. 23 (No response.) 2.4 CHAIRMAN WHITE: Then I'll open it up to

1 individuals. You may come forward. I will need to 2 swear you in when you come forward. I see one hand here. You've been sworn but 3 4 I will ask you to restate your name and address and 5 go ahead and begin your testimony and we'll see how 6 it goes. 7 MR. PALACIOS: Elias Palacios, 40W812 Long Shadow Lane, St. Charles 60175. 8 9 CHAIRMAN WHITE: And approximately how close 10 to this facility are you located? MR. PALACIOS: I don't know. 11 12 CHAIRMAN WHITE: Are you within a mile? are you 10 miles? Are you in the village of 13 14 Campton Hills. 15 MR. PALACIOS: Yes. Yes, correct. CHAIRMAN WHITE: Okay. Go ahead. 16 17 MR. PALACIOS: I come as a resident of the 18 area, Campton Hills individually. Before I already 19 disclosed but I already got more than 20 years of 20 experience in substance abuse field, mental illness, 21 especially substance abuse is my expertise. 22 did an independent study in 1995 in Peru, South 23 America, for Adler University regarding treatment 2.4 facilities, inpatient treatment facilities, and,

also, I do work in forensic program in the last

10 years. And with that being said, my comment is -or my statement is going to be the following:

2.4

What I did hear several times here regarding admission, the proposed facility was telling us, the residents, also, that they are going to admit only substance abuse patients or not mentally ill with other problems.

But then when I was seeing -- hearing the the witness articulating how well is going to be the screening process. But according to my experience, over 60 percent -- in my experience, it's not research -- in the last 20 years is substance abuse patients, like more than 60 percent, they do have personality -- distortion personality disorder, narcissistic personality disorder, and other mental illness.

And then, it's difficult to screen, to come and say, okay, this is going to be substance abuse patients only. It's kind of they need to articulate further how it's going to be dealt with for a dual diagnosis, mentally ill substance abuse or mentally ill and personality disorders.

And then, after that, when they're going to

be discharged, people didn't establish any experience if they did a follow-up after they are going to be discharged. Like there are some studies they found, but I'm not going to call them one. My experience is when you do follow-up in three months, six months, one year, and they will need to say that if this is — if they are going to rule out — most of the time they committed a violation or a crime, and then the proposed facility was not able to articulate that for the public like me as a resident, and I do know the field regarding how it's going to be done.

2.4

When they were talking about policies and procedures, they didn't have a policy and procedure. If this company or proposed is like very — like knowledgeable or got many people with the same knowledge and experience, then they needed to prepare policy and procedure ahead of time. They're not going to wait at the last minute and going to present 2060 policies and procedures like at the end.

They were presenting only just staffing ratio, but they didn't articulate further if they finish the policy and procedure. They said they don't have a policy and procedure. My question as a resident, if they are going to be a high-end facility,

777 1 they needed to be prepared in that. It raises more 2 questions than answers. Therefore, as a resident, I wouldn't agree 3 4 with that because if they failed to articulate further, it leaves doubts of the residents like me 5 6 and others. 7 CHAIRMAN WHITE: Okay. Thank you. 8 Anyone else wishing the podium? I would 9 also ask when you do come forward --MR. BROWN: Could I just ask that witness 10 two questions, if you don't mind? 11 12 CHAIRMAN WHITE: Would you like to come back 13 to the podium, sir. 14 MR. BROWN: Have you ever been involved in any licensing procedures for the State of Illinois? 15 MR. PALACIOS: Yes. 16 17 MR. BROWN: And how were you involved? MR. PALACIOS: I did develop a 2060 for a 18 19 company. 20 MR. BROWN: And what was the name of the 21 company? 22 MR. PALACIOS: Should I say the name of the 23 company? 2.4 MR. BROWN: Actually, if you're saying that

778 1 you've done this, I just want to make sure that 2 you've done it. So what was the name of the company 3 that you worked for that you were involved in this 4 licensing procedure? And, also, did you sign the 5 application? 6 MR. PALACIOS: Renacer Latino, Inc., in 7 Lake County. 8 What year did you do that? MR. BROWN: 9 MR. PALACIOS: If I recall, I think it was 10 2000-something. MR. BROWN: 2,000-something? You don't 11 remember the exact date? 12 MR. PALACIOS: No, I don't. 13 MR. BROWN: In what capacity did you work 14 15 for that company? I only ask you this because you've been giving expert opinions. 16 17 MR. PALACIOS: I was the director of a small 18 company. 19 MR. BROWN: So you were the director of a 20 company that you don't remember the date. And what 21 was the address of that company? 22 MR. PALACIOS: I don't remember. It is in 23 Waukegan but I don't know the exact address. 2.4 MR. BROWN: And could you tell me the exact

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1	name again? I didn't quite catch it. Could you say
2	it slowly?
3	MR. PALACIOS: Renacer Latino, Inc.
4	MR. BROWN: Latino, Inc.?
5	MR. PALACIOS: Yes, Renacer.
6	MR. BROWN: And how many people were in that
7	facility?
8	MR. PALACIOS: When we founded it, it was
9	three people.
10	MR. BROWN: And did you ever lose your
11	license for any reason?
12	MR. PALACIOS: Never.
13	MR. BROWN: And is that facility still in
14	operation?
15	MR. PALACIOS: Yes.
16	MR. BROWN: And do you have any affiliation
17	with that facility?
18	MR. PALACIOS: Not anymore.
19	MR. BROWN: So are you saying that you had
20	three employees or that you had three people that
21	you were treating?
22	MR. PALACIOS: No, three employees.
23	MR. BROWN: And was it an inpatient facility?
24	MR. PALACIOS: Outpatient facility.

1 MR. BROWN: It was an outpatient facility. 2 Also, you did testify about the violations and you 3 said the importance of follow-up. Do you recognize 4 the fact that the follow-up that you're talking 5 about that this is not an outpatient facility just 6 like the one that you were operating? You recognize 7 that; correct? MR. PALACIOS: Yes, I do. 8 9 MR. BROWN: And the follow-up is that people will not be coming back to this facility for outside 10 of the fact I guess there's a potential for people --11 12 we know with these type of problems sometimes there may be a relapse, but if they relapse they'll be 13 coming back inpatient, not like the facility that 14 15 you were involved in; is that true? The facility that you can't even remember the date that you were 16 17 working there. Is that true, sir? MR. PALACIOS: Which one? 18 19 MR. BROWN: Is it true that these people -it's not an outpatient facility, so there's not 20 21 going to be a need for follow-up such as the 22 facility that you were involved in, sir. 23 the same type of facility; is that true? 2.4 MR. SHEPRO: Excuse me, Mr. Chairman.

781 1 MR. KINNALLY: Excuse me. Can we have one 2 question at a time? 3 MR. SHEPRO: This is not a question. 4 is an objection. This is not a witness represented 5 by counsel. He's not an attorney. He has a right 6 to be cross-examined, yes. I don't think the tone 7 and the way he is being treated by counsel is at all appropriate, and if nobody else is going to raise 8 9 that, I will. 10 (Applause.) 11 CHAIRMAN WHITE: Mr. Kinnally. 12 MR. KINNALLY: The point being here is that the cross-examination is somewhat contentious. If 13 he could just ask one question. The man has come up 14 15 and given testimony, and one question at a time would be the way this should be done, in my opinion, 16 17 Mr. Chairman. 18 CHAIRMAN WHITE: I agree, Mr. Brown. 19 MR. BROWN: I'll ask one question at a 20 time -- actually, I've gotten enough answers. 21 Thank you. 22 MR. PALACIOS: I would like to make a final 23 comment. 2.4 CHAIRMAN WHITE: You may.

782 1 MR. PALACIOS: Just for the knowledge of 2 everybody, I do have experience in these patients, 3 also, but I'm not going to continue further. 4 Thank you. 5 CHAIRMAN WHITE: Thank you. 6 (Applause.) 7 CHAIRMAN WHITE: Sir, come forward. MR. TYRRELL: My name again is Mike Tyrrell. 8 9 CHAIRMAN WHITE: And your address, Mike? MR. TYRRELL: 5N042 Forest Trails, 10 Campton Hills. 11 CHAIRMAN WHITE: And approximately how close 12 to this facility are you living? 13 14 MR. TYRRELL: Probably about 3 miles. 15 CHAIRMAN WHITE: Thank you. And are you in 16 favor of or opposed to the petition? 17 MR. TYRRELL: I'm opposed to the petition. 18 CHAIRMAN WHITE: Thank you. 19 (Member Moga left the proceedings.) 20 MR. TYRRELL: I do have a request. One of 21 the key foundations of this hearing falls on the 22 topic of similarity to hospitals and nursing homes, and one of the key individuals who has offered an 23 2.4 opinion, who I guess was supposed to appear for

783 1 either last session or this session are not here is 2 Mr. Moore [sic], and I would like the opportunity to 3 cross-examine him. 4 MR. BROWN: I'm sorry. Mr. Moore? CHAIRMAN WHITE: I don't recall the witness. 5 6 MR. CARRARA: I believe he's referring to 7 the Murer consultant. MR. TYRRELL: I'm sorry for the 8 9 mispronunciation. Anyway, the relevance and key component is 10 the similarity of a hospital to this facility, and I 11 12 do have several questions. I'd like to have that opportunity. If it's possible at the next session 13 Mr. Murer could be here, I would greatly appreciate 14 15 it. I make that request. 16 CHAIRMAN WHITE: I'm not going to say one 17 way or another that he will be present or not. You 18 are aware that there was an appeal of the process 19 that the County filed in going forward with this 20 petition? MR. TYRRELL: 21 If you would enlighten me. 22 CHAIRMAN WHITE: I don't want to get into a 23 lot of details, but we have discussed the similarity

issue at an appeal hearing and the Board had made a

1 ruling on that. 2 MR. TYRRELL: Correct. Okay. I understand 3 that. But regarding the issue with the hospital, it 4 was understood that he would be a witness. I would 5 like that opportunity to cross-examine or present 6 some questions. Thank you. 7 MR. KINNALLY: Mr. Chairman, if they don't want to bring him in here, then whatever his report 8 9 is, as I indicated before, is in the record, and you give it whatever weight, if any, or how much, 10 whatever you want to do, it's up to the Zoning 11 Board. So we can't -- if they don't want to bring 12 him in here to testify, that's their choice. 13 CHAIRMAN WHITE: Mr. Tyrrell, you are 14 15 referring to documents that the Board has received in the petitioner's packet if I understand you 16 17 correctly. 18 MR. TYRRELL: Correct. But I do have 19 questions of him. 20 CHAIRMAN WHITE: And I'll just reiterate 21 what Mr. Kinnally has said, that we have to take 22 everything with a grain of salt. So. 23 MR. CARRARA: Mr. Chairman, a point of

clarification. Are you saying the ZBA has ruled on

1 the similarity of this application to a hospital? 2 CHAIRMAN WHITE: It was a topic that the Board has been aware of. 3 4 That's a completely MR. CARRARA: Right. 5 unrelated incident where no evidence or testimony 6 was brought as to the similarity of a hospital. 7 That was specifically on the zoning -- or the application of Section 5.15 to the process. 8 9 CHAIRMAN WHITE: That's true but it was based on the paragraph dd that speaks towards the 10 11 similarity. 12 MS. GAEKE: Mr. Chairman, I believe the appeal related to the procedure that was used and 13 the methods for clarifying the process not 14 15 necessarily whether or not --MR. KOLB: We would like to hear -- sorry --16 17 we would like to hear the questions that the 18 gentleman has, and then we reserve the right to call 19 him as a rebuttal witness if the questions raise an 2.0 issue that we think should be addressed, cross 21 issues. We'd like to hear what he has as far as 22 questions. 23 CHAIRMAN WHITE: If you have questions, you 2.4 can present them to the petitioner, and we can go

1 forward from there, Mr. Tyrrell, if you'd like to 2 come back up and pose your questions. 3 MR. TYRRELL: If I can, I'll pose those at 4 the next session. 5 MR. KOLB: We just want the record to reflect 6 that he was given the opportunity to ask questions. 7 MR. CARRARA: But not of the actual witness, just posing hypothetical questions. 8 9 CHAIRMAN WHITE: Questions of the petitioner. 10 Mr. Tyrrell. MR. TYRRELL: If I may say, the questions 11 12 would be ongoing based on the responses given. CHAIRMAN WHITE: Yes. I understand. 13 MR. TYRRELL: Okay. 14 15 CHAIRMAN WHITE: Mr. VanKerkhoff. MR. VAN KERKHOFF: Mr. Chairman, just for 16 17 clarification for the public who has been very 18 patient waiting to get to this part of the hearings, 19 at this part they can most certainly come up and 20 make statements, propose evidence that refute things 21 in the petition, and make comments regarding their 22 opinions on the petition and its impacts. 23 So we've gone through a lot of process which 2.4 isn't normally the part of our zoning petitions and

1 calling of expert witnesses and cross-examinations 2 where the public was limited to questioning specific 3 people. 4 So I just want to make sure that the public 5 isn't under the impression that the only way they 6 can get their opinions across now is to question 7 people, but this is their time to make comments about how they feel, what they think, and what they 8 9 may know about the petition. 10 So thank you, Mr. Chairman. 11 CHAIRMAN WHITE: Yes. I hope you all understood that. You're welcome to come to the 12 podium and present your testimony wherever that goes. 13 14 Anyone else seeking the podium at this time? MR. CARRARA: Mr. Chairman, also, can we make 15 a note of the record? I had 10:09 when Mr. Moga 16 17 left this hearing this evening. CHAIRMAN WHITE: That's fine. Have the 18 19 secretary record that, please. 20 I see someone approaching the podium. 21 Please come forward. 22 I will say with Mr. Moga, he has medical 23 issues is why he does not like to stay out as late 2.4 as some of us other Board members do just for your

788 1 reference. 2 Please raise your hand so I can swear you in. 3 (Witness sworn.) 4 CHAIRMAN WHITE: Thank you. And then please 5 state your name and address for the record. 6 MS. HAYES: My name is Claudia Hayes, 7 7N410 Fox Bend Drive. CHAIRMAN WHITE: Approximately how close to 8 this facility are you located? 9 10 MR. BROWN: Oh, probably a block and a half. CHAIRMAN WHITE: Do you oppose? 11 12 MS. HAYES: I absolutely oppose. I have four grandchildren that live there. My question is --13 well, my concern would be, you know, everybody is 14 15 saying everything about the inpatient. First of all, we've an opportunity and 16 17 experience in drug rehabs, out of and inside patient where there has been more contact with drug dealers 18 19 and drug paraphernalia that you have ever seen in 2.0 your life, number one. 21 Number two, how do you control the visitors? 22 How do you control what they do, the traffic, what 23 they're bringing in? There's not an amount of 2.4 guards that you're going to get that are not going

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1	to be watching out for every single one of these	
2	patients.	
3	And that would be my biggest concern for my	
4	grandchildren and for all the families that live	
5	there. That's all I have to say. Something to	
6	consider I think.	
7	CHAIRMAN WHITE: Thank you.	
8	MS. HAYES: You're welcome.	
9	CHAIRMAN WHITE: Next person.	
10	(Applause.)	
11	CHAIRMAN WHITE: I'll ask you to hold your	
12	applause. Otherwise, I'll empty the room and bring	
13	you in one at a time.	
14	MR. TRIMBLE: My name is Owen Trimble,	
15	8N660 Crawford Road.	
16	CHAIRMAN WHITE: And I'll need to swear you	
17	in, sir.	
18	(Witness sworn.)	
19	CHAIRMAN WHITE: Thank you.	
20	MR. TRIMBLE: Well, part of it is end	
21	result is if the State is called or if people come	
22	in from the State to have an issue with any one of	
23	the patients or something like that, well, if it's	
24	for the patient's safety, welfare, and the public's,	

790 1 this state is so dysfunctional it could not operate 2 a wheelbarrow, much less maintain them. 3 And with a lot of privately owned health 4 care issues -- there's newspaper reports that 5 Lutheran Aid is shutting down a lot of its programs, 6 hundreds of millions of dollars are being lost, and 7 jobs, multiple agencies that are shutting down 8 because the State cannot pay for it. Who pays for the State that comes in and 9 10 monitors the situation? The young ladies that were here last week -- and they were great, but it looks 11 12 like it was off the books. It was by charter of the 13 quidelines. One lady mentioned that she actually 14 15 witnessed the State coming in in the middle of the I rather doubt it. And they sure will not 16 night. 17 show up if there's any issues. 18 This state is so screwed up, it couldn't 19 operate, like I said. 20 Thank you. 21 CHAIRMAN WHITE: Thank you. 22 Next person, please come forward. Please 23 raise your right hand. 2.4 (Witness sworn.)

791 1 CHAIRMAN WHITE: Please state your name and 2 address for the record. 3 MR. FREDA: My name is Tom Freda. I live at 4 41W670 Barberry Lane in Campton Hills. It's 5 approximately less than half a mile away. 6 CHAIRMAN WHITE: Thank you. And are you in 7 favor of or opposed to this petition? 8 MR. FREDA: I'm oppose to it. 9 CHAIRMAN WHITE: Thank you. MR. FREDA: I have a question for the Board. 10 I've been sitting here for five meetings now and 11 12 kind of observing everything. My question as a citizen to the Kane County Board is every time 13 Campton Hills brings up some evidence regarding 14 15 Kiva, a past experience we've had, you reject it. When Mr. Brown brings up his Kiva evidence, you 16 17 accept it. Why is that? CHAIRMAN WHITE: I'm not sure that I 18 19 accepted any evidence on the Kiva petition from 20 Mr. Brown or from the petitioner. I think you have. Because when 21 FREDA: 22 he brings up past reports regarding Kiva, it seems

like you guys take all the information and accept it

in the testimony, but when the public presents an

23

old Kiva 2012 testimony, you just "I don't want to hear it. I reject it."

2.4

MR. BROWN: Can I just address one thing?

We did not bring the Planning Commission's recommendation as to the Kiva project for one. And number two, many of my objections was just that it was in my case in chief and also just not having a chance to review it.

So I guess those were the bases of the objections. It wasn't that at some later point that they couldn't have brought these things in.

MR. FREDA: I have a couple issues. I've lived in my house for 23 years. I'm not a lawyer and I don't want to start a fight but you -
Mr. Brown made a statement that he has two houses and lives close by -- or two drug rehabilitation facilities are close by. If I bought my house 23 years ago and there was a drug rehabilitation facility there, I wouldn't balk.

Number two, I don't care if you call it new math or not, it's my belief that property values will go down.

Along Silver Glen Road there was a traffic analysis saying that in the last five years traffic

		793
1	has actually decreased at the present date compared	
2	to the previous five years. I don't agree with that	
3	at all.	
4	I don't think the traffic analysis was	
5	accurate because they only thought about the amount	
6	of employees leaving and coming to work, not the	
7	amount of visitors that are also going to be coming	
8	back and forth.	
9	I'm sorry I'm not a very good public	
10	speaker	
11	CHAIRMAN WHITE: You're doing fine.	
12	MR. FREDA: but those are my views.	
13	Thank you.	
14	CHAIRMAN WHITE: Thank you.	
15	Next person, please raise your right hand	
16	and be sworn.	
17	(Witness sworn.)	
18	CHAIRMAN WHITE: Please state your name and	
19	address for the record, please.	
20	MR. PARASKEVAS: Constancinos Paraskevas,	
21	6N850 Palomino Drive in Campton. It's about a half	
22	a mile away.	
23	CHAIRMAN WHITE: Thank you.	
24	MR. PARASKEVAS: Actually, what I would like	

794 1 to present -- there's another resident in Campton 2 Hills whose wife is ill and he couldn't be present, 3 so I was just wondering if you could allow me to 4 read it to you. 5 CHAIRMAN WHITE: That's fine. How long is it? 6 MR. PARASKEVAS: It's one page. 7 CHAIRMAN WHITE: That's fine. MR. PARASKEVAS: "To Whom It May Concern: 8 9 I'm writing this letter to voice my concerns about 10 the current application that the former Glenwood School on Silver Glen is being made into a drug and 11 12 alcohol rehabilitation facility. "My family has lived here since 1977. My 13 wife and I have raised five children here. We now 14 15 have 17 grandchildren and great-grandchildren in the area. We host our family at our home on many 16 17 occasions. 18 "Through all the years we have loved the 19 community and have looked forward to our grandchildren 20 and great-grandchildren growing up here and loving 21 the community the same as us. 22 "We are concerned about this rehab center 23 and how safe the community will be for our family. 2.4 The residents have already rejected a previous

795 1 proposal, and we now wonder why this is up for 2 reconsideration." I assume that he's talking about 3 Kiva. 4 "We'd like to know if any benefit of this 5 facility will be for the community. We find it 6 difficult to see any upside. 7 "Our concerns are the safety our families and the community and how this could devalue our 8 properties, not to mention the cost of additional 9 10 police and firefighters to keep our residents safe. "These are just a few concerns of ours. 11 12 Thank you for your time, Robert Marlewski, resident of Campton Township." 13 CHAIRMAN WHITE: Could you spell that, 14 15 please, and does he have his address on that letter? MR. PARASKEVAS: Yes, he does. His last 16 17 name is M-a-r-l-e-w-s-k-i, and residence is 18 6N085 Sunset Drive in Campton. 19 CHAIRMAN WHITE: Thank you. MR. PARASKEVAS: Just one more comment. 20 21 CHAIRMAN WHITE: Go ahead. 22 MR. PARASKEVAS: While we were talking about 23 the sheriff's police, there was a comment by Mr. Brown

saying that it is the sheriff's responsibility to

1 respond first. 2 Unless anything has changed in the past 3 two years, I know that Kane County is supposed to be 4 operating at 85 sworn officers, and as I checked 5 last, they were operating at 80. So something for consideration. And I would also like to add that I 6 7 have gone on a ride-along with one of the officers there, and I would like to comment on how busy it 8 9 was that night. 10 CHAIRMAN WHITE: Next person. I've got about 10:30, so we'll go a little bit longer, but we 11 need to come to a conclusion here. And we will have 12 another meeting this coming Thursday at 7:00, same 13 14 location. 15 Please raise your right hand to be sworn. 16 (Witness sworn.) 17 CHAIRMAN WHITE: Please state your name and address for the record. 18 19 MR. BENNETT: Robert Bennett. My address is 20 41W493 Silver Glen in Campton Hills. 21 CHAIRMAN WHITE: And approximately how close 22 to the facility. 23 MR. BENNETT: My proximity is from the

entrance -- or from the address is about .093 miles,

a tenth of a mile.

2.4

Okay. Several concerns. I've been a resident of Campton Hills since 1974. You can equate and do your arithmetic but it's a long time.

We've been through a lot of battles, whether it was municipal battles, zoning battles, the Federal government against us, if any of you remember that, and somehow we've survived and we've developed character.

One of the things that I've noticed lately, however, is the factor that not many people in the legal system or in the governmental system give the residents any credibility and almost deal with us contemptuously. Okay?

Now, I know what arrogance is. I'm old enough to know what a lot of things are, and I don't accept governmental arrogance, legal arrogance, whatever you want to call it. I'm really reticent -- I'm obviously not a real good public speaker, either. But I'd just like to -- I know there's a lot of people that have been here for five meetings. Frankly, I thought I was done with a lot of this challenge, let's put it that way, and I guess we never will be.

1 But I'm concerned about safety, number one. 2 The fact that Silver Glen Road -- I can't believe 3 that the traffic has gone down, either. The safety 4 at Silver Glen -- if you notice, the facility is 5 located on a curve. Well, I've had two people 6 literally pass away in front of me in inverted cars 7 that during the wintertime have crashed in my driveway. Nobody brings up the fact that there's 8 9 been a person who was killed right at the entrance 10 to the facility. You know, so there's a lot of 11 safety involved. There's a situation where Silver Glen Road 12 for many of us that live out there is not very well 13 maintained -- I won't say well maintained, but it is 14 15 a devil when weather is bad or icy because of the nature of the road. 16 17 I'm concerned about property values. 18 71 years old. I've set a goal of selling my house 19 when I'm 75. Now, the impact they say will be because 20 of the fear factor, and then it will gradually 21 diminish. Can anybody tell me if in four years I'm 22 going to be able to sell my house for the same

amount that I do now or that I can now? I sincerely

doubt that if the facility comes in.

23

1 I've taken too much of your time. I really 2 hope that you consider all of these people here and 3 their concerns, their -- I don't know -- nervousness, 4 if you want to call it that. 5 And I'd love to have guarantees, you know, 6 that say the ambulance calls would be paid for. So, 7 you know, the police calls would be able to get \$10,000 a call or something like that. Just like a 8 9 security call. Hey, if I had a security system that goes off all the time and the police have to come 10 11 out and service my security system, guess what, they 12 charge me. Why can't Campton Hills do that? \$10,000 a call. I can guarantee you that there 13 14 wouldn't be many calls or demand for service. No, I 15 am serious. I am serious, folks. How well has this been thought out? I don't 16 17 think very well. 18 I'm sorry. I've taken enough of your time. 19 Thank you for hearing me. 2.0 CHAIRMAN WHITE: Thank you. 21 Next person, please come forward. 22 (Witness sworn.) 23 CHAIRMAN WHITE: Please state your name and 2.4 address for the record.

1 MR. JAROS: My name is Ryan Jaros, 2 41W608 Foxtail Circle, Campton Hills. It's about 3 one quarter mile due south of the complex. 4 Forgive me; I'm not an eloquent public 5 speaker, either. So bear with me. 6 Let's not ignore the fact that despite all 7 of the downplay of crime-like behavior, and attitude, and choices, what landed these patients in 8 9 the facility in the first place is just that, a They procured and used illicit substances. 10 A crime has been committed. 11 You can what-if the whole thing to death. 12 Speculation here, speculation there, I understand 13 that, but once one crime has been committed, who is 14 15 to say another, and a third, and a fourth, and beyond. Please consider that. 16 17 Secondly, Mr. Marco, I feel for you. I see your vision. I think we all have family members that 18 19 are affected by this. I am not callus. I am not 2.0 hardhearted. I have an aunt in Des Plaines who 21 suffers from over-the-counter meds; my sister-in-law 22 out in southern Massachusetts, heavy-hitter drugs. 23 They would benefit by a facility like this, absolutely. 2.4 But I'm sorry, Mr. Brown, "Not in My Back Yard,"

there's truth to that.

2.4

Mr. Marco, I believe you have ties to south Florida. I moved out of there three years ago for some of these very same reasons. Miami Dade, Broward, Palm Beach counties are not Kane County. There's a lot of evil stuff that happens down there. Yes, evil is all over the world but amplified to a degree down there. And I said "Enough." No place to raise a family; no place to be around if you want to live more in a wholesome environment.

Specifically why I chose rural Chicagoland area. I grew up in Downers Grove. I could have lived closer to the city, downtown even. But no, we moved out here for a reason. Specifically moved in early 2013. When we were looking late 2012 for houses, Kiva in the process. We paid close attention to that.

Again, the unmeasured stigma of that, I think that speaks volumes. I think because had that not been shut down, we would not have bought the house. But thankfully for us and many of the residents that I hopefully speak for it was thwarted and we went ahead and moved in.

Whether you've been there 30-some years or

802 1 three years like myself, we all have the same rural 2 northern Illinois mindset. We just want safety for our families. 3 4 Thank you for your time. 5 CHAIRMAN WHITE: Thank you. 6 (Applause.) 7 CHAIRMAN WHITE: I'll take another person. 8 Please come forward. 9 And we're about quarter to, so this will probably be the last one for this evening. 10 (Witness sworn.) 11 12 CHAIRMAN WHITE: Please state your name and address for the record. 13 MS. FREDA: Ellen Freda, 41W670 Barberry 14 15 Lane, Campton Hills. I've been here for five nights. I sat 16 17 through all of Kiva. I'm very involved. But I have 18 a couple of things that I have observed sitting back 19 here that I feel weren't able to be spoken to. It's 20 obviously just my opinion but things that I saw and 21 observed. 22 One was there's a facility in Park Ridge 23 that when had been cross-examined it turned out that 2.4 it had -- the beautiful city, Village of Park Ridge

had actually gone -- and I don't know if they bought the property or whatever, but they turned it into a beautiful park. That speaks volumes to me that a city like Park Ridge, which I'm sure has an awful lot of problems with drug abuse, chose to turn it into a park. I don't know the reasons behind it. That just spoke to my heart, though. I wish we were voting on that right now.

2.4

I also happen to know -- and this may sound funny to some of you. I'm just a stay-at-home mom. I watch TV. I'm not an interventionist but what I see on TV through shows like Intervention and, don't laugh, Dr. Phil where these people are brought, and there's family interventions or interventions with a psychologist where these people have -- as the last person that spoke -- have committed crimes. And the interventionist or the psychologist tells them, "You have a choice here. We have this beautiful place for you to go, and if you would like to go, there's someone waiting for you right now, and we'll take you away for a 90-day inpatient program, or we'll call the police right now and we'll have you arrested."

They're not court mandated; they're not put

under the thumb of you have to go. They're given the option but they're given the option that they are going to go to court.

2.4

So that -- saying that there's no courtmandated people that are going to go there is kind
of disingenuous to me because I know that there's
people that's presented to them an as option,
"Either you're going to be arrested or you're going
to go to rehab."

Also, just to reiterate, a high-end community, a high-end facility is not going to help the nice people sitting here or their children or their spouses. We can't afford to go to this place. We're not high-end people. We're good people that bought nice homes, and keep them nicely, and keep the nature of our community very nice.

But they are going to bring people in from other parts of the country. Who is to say that a Lindsay Lohan isn't flown in here, or a Charlie Sheen, or say a Kennedy kid we all know have had problems with substance abuse, and what's going to stop the paparazzi from coming in? We've all seen paparazzi, what it does to people. What's going to stop them from coming into our forest preserve where we've got

kids bicycling, families, whatever, or onto people's property that abuts right up to this? What's going to stop that?

2.4

I don't think anything is, and if it happens to one family and scares one child, one grandparent, one babysitter that's watching, that's one too many incidents as far as I'm concerned. I won't even go into the fact that we've talked about drugs possibly coming in or whatever. If that happens one time, that's one time too many, also.

I don't know if you know -- and I don't have it here. I gave it to Mr. Miller last week; I think it was Thursday. It was kind of a coincidence but in the Chronicle there was an article where Campton Hills -- there was some sort of study done, and Campton Hills, my village was voted the best place to live on crime per capita statistics in the state of Illinois. The closest one to that was Geneva and they were ranked 16.

I have a feeling if you pluck one of these places out of say -- I heard Philadelphia, I heard some statistics brought up about a place in New Jersey, Palm Beach, or whatever it is. I have a feeling if you pluck them out of an area and put

them into a quiet little sleepy town where you roll up the sidewalks -- if we had them because we don't even have streetlights -- I have a feeling that the crime ratio or whatever you want to call it that was testified to would dramatically increase because we don't have any crime now.

2.4

If you put it against a place in Philadelphia where maybe there's bars and there's tattoo parlors and I heard sexual establishments — I don't know what that means; I can only imagine — and you base the crime in that area and then you put it out — you pluck that place and put it out in my back yard, I have a feeling you're going to see a great dramatic increase in crime as to where it stands today.

I thank you for your time, and I really hope that you will listen to the good people that are sitting behind me and those who have been here and are no longer coming because they kind of feel that possibly a decision has already been made. From some of the demeanor that we've seen here, it seems like big money pays off.

I hope you will listen to us and our heartfelt pleases to you to not consider this, to

		007
1	please vote it down I'm not sure what the wording	807
2	is, but I hope that you will listen to us.	
3	Thank you for your time.	
4	CHAIRMAN WHITE: Thank you.	
5	(Applause.)	
6	CHAIRMAN WHITE: And with that I think we'll	
7	put an end to this evening's meeting. So I'll ask	
8	for a motion to continue this to Thursday at 7:00 p.m.	
9	MEMBER BOWEN: So moved, Mr. Chairman.	
10	MEMBER CAMERON: Second.	
11	CHAIRMAN WHITE: Moved by Mr. Bowen,	
12	seconded by Ms. Cameron. All those in favor say aye.	
13	(Ayes heard.)	
14	CHAIRMAN WHITE: Opposed, same sign.	
15	(No response.)	
16	CHAIRMAN WHITE: Motion carries.	
17	(Off the record at 10:47 p.m.)	
18		
19		
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22		
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24		

#### CERTIFICATE OF SHORTHAND REPORTER

I, Paula M. Quetsch, Certified Shorthand
Reporter No. 084-003733, CSR, and a Notary Public in
and for the County of Kane, State of Illinois, the
officer before whom the foregoing proceedings were
taken, do certify that the foregoing transcript is a
true and correct record of the proceedings, that
said proceedings were taken by me stenographically
and thereafter reduced to typewriting under my
supervision, and that I am neither counsel for,
related to, nor employed by any of the parties to
this case and have no interest, financial or
otherwise, in its outcome.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal this 2nd day of February, 2016.

My commission expires: October 16, 2017

Notary Public in and for the

24 State of Illinois

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