

From: [Michaelson, Hana](#)
To: ["Erica Bergere"](#)
Subject: RE: [EXTERNAL] Public Meeting for "Our Home Residential Senior care"
Date: Monday, August 10, 2026 2:02:00 PM
Attachments: [image003.png](#)

Hello Erica,

Thank you for your email. Your correspondence has been included in the public record and shared with the applicant.

Consistent with State law, the General Plan, and Zoning Code regulations, Residential Care Facilities are considered residential uses. Pursuant to Zoning Code Section 20-22.030, Residential Care Facilities with six or fewer residents are permitted (by-right) in all residential zoning districts, while facilities with seven or more residents, such as the proposed nine-bed facility at 2364 Melbrook Way, require approval of a Minor Conditional Use Permit (MUP).

Please see additional information regarding parking, traffic, project size, smoking policy, and sewer concerns.

Parking: The proposed nine-bed facility provides three parking spaces, meeting the parking requirements of Chapter 20-36, Parking and Loading Standards:

TABLE 3-4—AUTOMOBILE AND BICYCLE PARKING REQUIREMENTS BY LAND USE TYPE		
Land Use Type:	Number of Parking Spaces Required	
	Vehicle	Bicycle
Community care facility—7 or more clients	1 space for each 3 beds	As determined by MUP or CUP.

Staff & Visitor Parking: The facility will have 1 to 2 staff members per shift, with a maximum of 3 staff per day. According to the applicant, only one staff member typically parks on-site during a shift, while other staff use rides from family members or alternative transportation. Residents generally receive visitors once or twice per week, resulting in limited visitor traffic. Visitors may park on-site or in available on-street parking spaces.

Healthcare Visits: According to the applicant, all home health and hospice visits are reviewed and approved by the facility administrator and scheduled to avoid overlapping provider visits whenever possible. Residents receiving hospice care typically receive approximately two visits per week, while residents admitted following rehabilitation may receive home health services approximately twice per week for two to three months, depending on individual care needs. As a result, healthcare-related vehicle trips are expected to be limited and occur on a scheduled basis.

Emergency Services: The applicant has confirmed that emergency calls are infrequent, with approximately 10 to 15 calls to 911 over the past five years.

Development Standards: The project proposes adding 3-bedrooms to an existing single-family residence located in the R-1-6 (Single Family Residential) zoning district. Residential Care Facilities are recognized as residential uses subject to applicable local review requirements. The project has been reviewed by the Planning, Engineering, Traffic and Building Divisions, along with the Fire Department and meets applicable development standards.

Smoking Policy: The applicant has stated that smoking is strictly prohibited at the Residential Care Facility, and both staff and residents are required to comply with the facility's non-smoking policy.

Sewer: The applicant has confirmed that there are no sewer issues that are affecting the project site. The applicant also noted that the image included in the email is of the neighboring property and stated that, to their understanding, the sewer issue at that property has been resolved.

Thank you,
Hana Michaelson, AICP | Senior Planner
Planning and Economic Development Department
100 Santa Rosa Ave, Room 3 | Santa Rosa, CA 95404
Tel. (707) 543-4665 | HMichaelson@srcity.org

The Planning and Economic Development Department is closed for services every other Friday. Below

is the 2026 Holiday and Office Closure schedule.

[2026 Holiday and Office Closure Schedule](#)



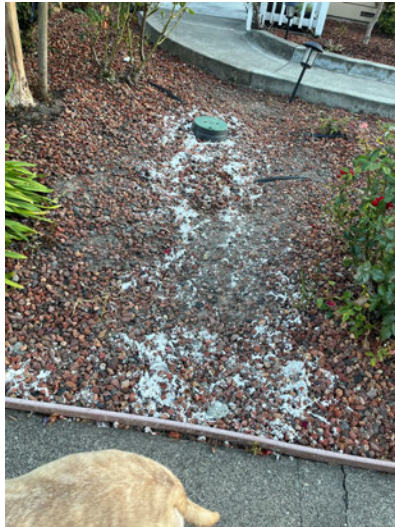
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From: Erica Bergere <sabigreens@gmail.com>

Sent: Friday, August 7, 2026 1:43 PM

To: Michaelson, Hana <HMichaelson@srcity.org>

Subject: [EXTERNAL] Public Meeting for "Our Home Residential Senior care"



Hi Hana,
How are you?

I'm not sure if this is a good place to voice our concerns about this expansion but I will try. I'm not sure I will be able to attend as I have small children and my husband comes home late.

The expansion of 2364 Melbrook way seems like a bad idea for this neighborhood. We are a very quiet neighborhood with kids playing in the street. The houses that give the most traffic to this street are the two care homes. While I am not the type of person to be like, "Not in my backyard", I feel like there are a lot of reasons this doesn't make sense.

One, being the quiet street, the amount of traffic will increase, pushing families out of the area, two care homes on this street seem like enough, as this is also taking homes away from people who want to buy them. The other concern regarding the streets integrity is what about parking? We will now have 3 more residents, more visitors, more ambulances, more caretakers, more medical personnel, more of everything, on a street that doesn't have high traffic. I feel this street is not equipped for this kind of business, let alone, an expansion. I have a business, so does that mean I can start running delivery trucks out of my house on this tiny street to get my product to where it needs to go? I'm just wondering where the line is drawn.

The second concern is for the residents. How in the heck are they going to put 3 more bedrooms in that house! Do these elderly people have windows, are they just as big as a closet! 9 bedrooms in a 1800 sq ft house is VERY concerning. Making \$30,000 more a month to cram more people into their homes seems cruel and unimaginable. Where does it stop? 10-12 bedrooms, are they going to expand the one next door and put 3 more in there? Are they going to buy more homes...It just makes me sad. Is there compliance when it comes to how this is configured and how the residents will be treated. Is this just a public notice for remodeling or are they following guidelines for the residents.

The third concern is the lack of care for this street. Multiple times we've had people that work at that house throw cigarettes onto our street. I used to have to collect cigarette butts down our road and this is where my children play. There is a sewer line that has been leaking toilet paper for months out front on the sidewalk. People speed down the road that are connected to that house. We have a new family with three small boys

that moved in just recently on our street, we have another family with two little boys on the street and my two small children as well. We are a street that is vibrant, connected, helpful, considerate and loving. I have met everyone on this street and I have never met them...I have met their care assistants and the residents, but I have no idea who the people are who own those houses.

Thank you! I appreciate your time, any advice on this would be greatly appreciated.

Erica

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(707)318-9961

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Facebook: Sabi Greens



From: Michaelson, Hana
To: Tess McDonald-Rodriguez
Subject: RE: [EXTERNAL] Project Name Our Home Residential Senior Care
Date: Monday, August 10, 2026 4:52:00 PM
Attachments: image002.png

Hello Tess,

Thank you for the follow up email, which has been entered into the public record and will also be included in this week’s 8/13 Zoning Administrator packet.

Best,
Hana Michaelson, AICP | Senior Planner

From: Tess McDonald-Rodriguez <tessmacrod@yahoo.com>
Sent: Monday, August 10, 2026 4:21 PM
To: Michaelson, Hana <HMichaelson@srcity.org>
Subject: Re: [EXTERNAL] Project Name Our Home Residential Senior Care

Hanna, thank you for the information. I feel like there is a lack of transparency. My experience is a little different than what the owner is stating. I walk the neighborhood once, and sometimes twice a day. I notice a lot of things. Adding three more beds will increase the traffic and parked cars. There are some things she can not control. Just from my own experience hospice and health care providers so up more than twice per week. So things are going to get busy in our neighborhood. I notice fast food cups and bags tossed on the side of the road, cigarette butts, and on some occasions empty cans and bottles of alcohol. This is not in front of the care facility, no it's across the street. This is where the workers park. I also have seen transport vans, besides the emergency vehicles and visiting families. My experience with home care living was much more active with visitors than her claim. Again thank you, I think we should look at facts.

Warm regards,
Theresa Rodriguez

On Monday, August 10, 2026, 03:05:17 PM PDT, Michaelson, Hana <hmichaelson@srcity.org> wrote:

Hello Tess,
Thank you for your email. Your correspondence has been included in the public record and shared with the applicant. Pursuant to Zoning Code Section 20-22.030, Residential Care Facilities with six or fewer residents are permitted by-right (allowed) in all residential zoning districts, while facilities with seven or more residents require approval of a Minor Conditional Use Permit (MUP). As proposed, this project would increase the existing facility from six to nine residents and include the construction of 3 new bedrooms to the existing single-family dwelling. Consistent with State law, the General Plan, and Zoning Code regulations, Residential Care Facilities are considered residential uses. Please see additional information regarding traffic, visitors, and emergency services.

Staff & Visitor Parking: The facility will have 1 to 2 staff members per shift, with a maximum of 3 staff per day. According to the applicant, only one staff member typically parks on-site during a shift, while other staff use rides from family members or alternative transportation. Residents generally receive visitors once or twice per week, resulting in limited visitor traffic. Visitors may park on-site or in available on-street parking spaces.

Health Care Visitors: According to the applicant, all home health and hospice visits are reviewed and approved by the facility administrator and scheduled to avoid overlapping provider visits whenever possible. Residents receiving hospice care typically receive approximately two visits per week, while residents admitted following rehabilitation may receive home health services approximately twice per week for two to three months, depending on individual care needs. As a result, healthcare-related vehicle trips are expected to be limited and occur on a scheduled basis.

Emergency Services: The applicant states that emergency calls are infrequent, with approximately 10 to 15 calls to 911 over the past five years.

Parking: The proposed nine-bed facility provides three parking spaces, meeting the City’s parking requirements outlined in Zoning Code Chapter 20-36, Parking and Loading Standards:

TABLE 3-4—AUTOMOBILE AND BICYCLE PARKING REQUIREMENTS BY LAND USE TYPE		
Land Use Type:	Number of Parking Spaces Required	
	Vehicle	Bicycle
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Thank you,

Hana Michaelson, AICP | Senior Planner
Planning and Economic Development Department
100 Santa Rosa Ave, Room 3 | Santa Rosa, CA 95404
Tel. (707) 543-4665 | HMichaelson@srcity.org

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From: Tess McDonald-Rodriguez <lessmacrod@yahoo.com>
Sent: Sunday, August 9, 2026 4:19 PM
To: Michaelson, Hana <HMichaelson@srcity.org>
Subject: [EXTERNAL] Project Name Our Home Residential Senior Care

Hello Ms. Michaelson,

We are David and Theresa Rodriguez at 2433 Melbrook Way Santa Rosa. We moved to Melbrook four years ago. We were new to the area and the neighborhood seemed quiet and charming. We later found out the reason for the firetrucks and ambulance visits was due to a residential care center. The Residential home is quiet for the most part, my concern is the increase in automobile traffic. With each new resident comes more health care personal. I have some recent experience with senior care and what is available in the area. I was a caretaker to my father in his eighties. He had a team of people visiting him three to four times a day. Parking was always a problem and he lived in three different places. The last place where he passed was a home of six people. At night they only had one person to take care of these gentle souls, an emergency would not have turned out very good for any of them. I know we have a need for senior care, I don't think this is in the best interest for the seniors, their families, and the families that live on Melbrook and Vallejo ST.

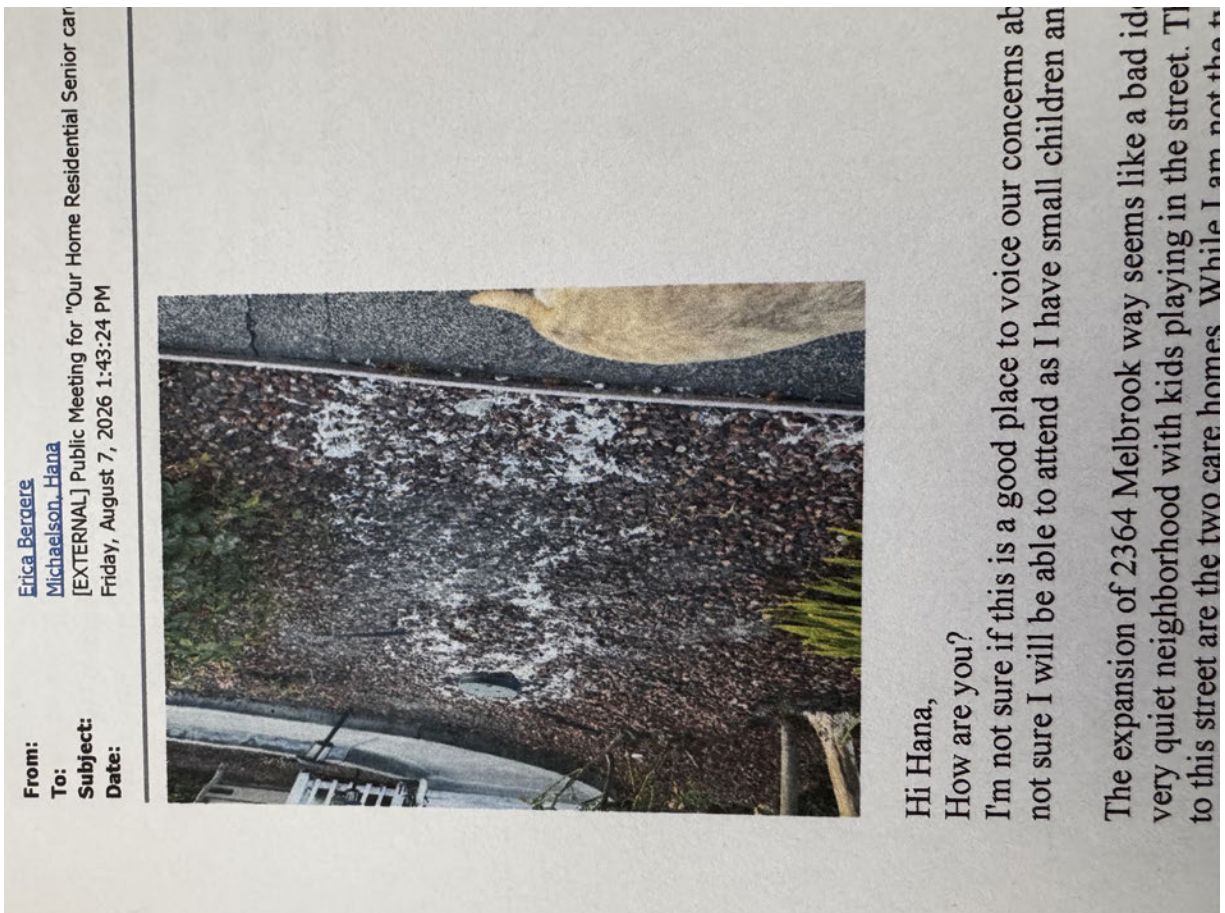
Thank you for listening to my concerns.

Warm regards.
Theresa Rodriguez
408 375-8309

From: [Our Home](#)
To: [Michaelson, Hana](#)
Cc: [Drafter: Dean Villanueva](#)
Subject: [EXTERNAL] Parking Impact Statement
Date: Monday, August 10, 2026 12:16:55 PM

Hi Hana,

This photo is the house next door, not us. I believed, it has been addressed



OurHome Assisted Living – Traffic and Parking Impact Statement

In response to questions regarding the potential traffic and parking impacts associated with the proposed expansion of OurHome Assisted Living, we would like to provide the following information based on our current operations and experience.

Staff Traffic and Parking

Our staffing pattern generates very limited vehicle traffic. Only three staff members can drive. During most weekdays, 2 staff member assigned to work and both of staff do not park on-site; they use Uber or are dropped off and picked up by family members. On weekends, typically only one staff member parks on-site. At night, 1 staff member park all night.

As a result, staff parking demand and vehicle trips to and from the property are minimal.

Emergency Services

Emergency 911 calls are rare. Based on our experience over the past five years, we estimate that there have been approximately 10–15 emergency 911 calls in total. These occasional emergency responses do not represent a regular or significant source of traffic.

Family Visits

Family visitation is also limited and occurs throughout the week rather than simultaneously. The majority of residents' families visit approximately one to two times per week. Some residents have family members who live out of state and therefore visit infrequently.

Because visits are dispersed throughout the week and are not daily for most residents, family-related vehicle traffic is limited.

Hospice Services

Residents receiving hospice care, generally near the end of life, typically receive approximately two visits per week from the hospice care team. These visits are scheduled and coordinated with the facility's operations.

Home Health Services

Residents who are admitted following a rehabilitation stay may receive home health services, generally approximately twice per week for up to two to three months, depending on the resident's individual care needs.

Coordination of Healthcare Visits

All home health and hospice visits are reviewed and approved by the administrator. We coordinate these visits to avoid having multiple outside healthcare providers arrive at the same time whenever possible. This scheduling practice helps maintain orderly operations, minimizes vehicle activity at the property, and ensures that staff have adequate time to assist residents and coordinate with visiting providers.

Conclusion

Based on our current operations, traffic associated with staff, family members, emergency services, hospice providers, and home health providers is relatively low, infrequent, and dispersed throughout the week.

The nature of assisted living operations does not generate the same level of daily vehicle traffic as many other uses of a comparable size. Staff generally do not drive or park on-site, family visits are limited and distributed throughout the week, emergency responses are rare, and healthcare provider visits are scheduled and coordinated by the administrator.

For these reasons, we believe the proposed expansion of OurHome Assisted Living will **not**

result in a significant increase in traffic, parking demand, or congestion in the surrounding area. We respectfully request that these operational factors be considered as part of the review and approval of the proposed expansion.

Thanks,

Kathleen Albano
Licensee and Administrator
OurHome
Assisted Living and Memory Care
2364 Melbrook Way
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(707) 527-9390 (facility)
(707) 623-5543 (mobile)
(707) 360-4576 (fax)
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