

RECEIVED

DEC 22 2023

FILE # PA 23-0015

EL DORADO COUNTY PLANNING AND BUILDING DEPARTMENT  
EL DORADO COUNTY PLANNING SERVICES

2023 DEC 22



RECEIVED  
PLANNING DEPARTMENT  
PRE-APPLICATION AND CONCEPTUAL REVIEW PROCESS

ASSESSOR'S PARCEL NUMBER(s) Please see attached APN map.

PROJECT NAME/REQUEST (Describe proposed use and use separate sheet if necessary):

Please see attached Project Narrative.

IF SUBDIVISION/PARCEL MAP: Create \_\_\_\_\_ lots, ranging in size from \_\_\_\_\_ to \_\_\_\_\_ acre(s)/square feet

IF ZONE CHANGE: From \_\_\_\_\_ to \_\_\_\_\_

IF GENERAL PLAN AMENDMENT: From Agricultural Lands/Rural Residential to Adopted Plan

APPLICANT/AGENT Epidauros Management Company

Mailing Address 7919 Folsom Boulevard, Suite 300 Sacramento CA 95826  
P.O. Box or Street City State ZIP

Phone 916-212-1446 FAX \_\_\_\_\_

PROPERTY OWNER AKT/Kloss Regas Ranch 50 & Investors, LP; Arcadian South, LLC; Regas Ranch Investors, LLC; AKT Dunlap Ranch Investors, LLC

Mailing Address Same as above  
P.O. Box or Street City State ZIP

Phone 916-212-1446 FAX \_\_\_\_\_

LIST ADDITIONAL PROPERTY OWNERS ON SEPARATE SHEET IF APPLICABLE

ENGINEER/ARCHITECT Mackay & Somps

Mailing Address 1025 Creekside Ridge Drive, Suite 150 Roseville CA 95678  
P.O. Box or Street City State ZIP

Phone 916-773-1189 FAX \_\_\_\_\_

LOCATION: The property is located on the \_\_\_\_\_ side of Please see attached Project Narrative.  
N/E/W/S Street or Road

\_\_\_\_\_ feet/miles \_\_\_\_\_ of the intersection with \_\_\_\_\_  
N/E/W/S Major Street or Road

in the El Dorado Hills area. PROPERTY SIZE 1459.9 acres  
Acre(s) / Square Feet

X \_\_\_\_\_ Date 12/22/23  
Signature of property owner or authorized agent

FOR OFFICE USE ONLY

Date 12-22-23 Fee \$ 5668 Receipt # R50952 Rec'd by HJP Census \_\_\_\_\_

Zoning \_\_\_\_\_ Supervisor District \_\_\_\_\_ Sec \_\_\_\_\_ Twn \_\_\_\_\_ Rng \_\_\_\_\_

Pre-application completed by: \_\_\_\_\_ Date completed: \_\_\_\_\_

COUNTY OF EL DORADO  
CAMPAIGN CONTRIBUTION DISCLOSURE FORM

2023 DEC 22 PM 3: 19  
RECEIVED  
PLANNING DEPARTMENT

Application or Solicitation Number: \_\_\_\_\_  
Application or Solicitation Title: \_\_\_\_\_

Was a campaign contribution, regardless of the dollar amount, made to any member of the El Dorado County Board of Supervisors or to any County Agency Officer on or after January 1, 2023, by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist?

Yes \_\_\_\_\_ No X

If no, please sign and date below.

If yes, please provide the following information:

Applicant's Name: \_\_\_\_\_

Contributor or Contributor Firm's Name: \_\_\_\_\_

Contributor or Contributor Firm's Address: \_\_\_\_\_

Is the Contributor:

- The Applicant Yes \_\_\_\_\_ No \_\_\_\_\_
- Subcontractor Yes \_\_\_\_\_ No \_\_\_\_\_
- The Applicant's agent/ or lobbyist Yes \_\_\_\_\_ No \_\_\_\_\_

**Note:** Under California law as implemented by the Fair Political Practices Commission, campaign contributions made by the Applicant and the Applicant's agent/lobbyist who is representing the Applicant in this application or solicitation must be aggregated together to determine the total campaign contribution made by the Applicant.

Identify the Board of Supervisors Member(s) and County Agency Officer(s) to whom you, your subcontractors, and/or agent/lobbyist made campaign contributions on or after January 1, 2023, the name of the contributor, the dates of contribution(s) and dollar amount of the contribution. Each date must include the exact month, day, and year of the contribution.

Name of Board of Supervisors Member or County Agency Officer: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

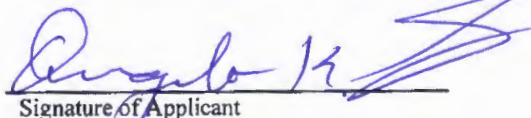
Date(s) of Contribution(s): \_\_\_\_\_

Amount(s): \_\_\_\_\_

(Please add an additional sheet(s) to identify additional Board Members or County Agency Officer to whom you, your subconsultants, and/or agent/lobbyist made campaign contributions)

By signing below, I certify that the statements made herein are true and correct. I also agree to disclose to the County any future contributions made to Board Members or County Agency Officers by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist after the date of signing this disclosure form, and within 12 months following the approval, renewal, or extension of the requested license, permit, or entitlement to use.

12/22/2023  
Date

  
Signature of Applicant

\_\_\_\_\_  
Print Firm Name if applicable

Angelos K. Tsakopoulos  
Print Name of Applicant

PA23-0015



EL DORADO COUNTY PLANNING SERVICES

2023 DEC 22 PM 3: 19

RECEIVED
PLANNING DEPARTMENT

SUBMITTAL INFORMATION

for

PRE-APPLICATION/CONCEPTUAL REVIEW

There are no minimum submittal requirements for the Pre-Application meeting. However, the following is a list of desirable information that should be available, to the extent practical, for staff to maximize the productivity of the Pre-Application meeting. All plans and maps MUST be folded to 8 1/2" x11". The items with an asterisk (\*) below must be submitted for a Conceptual Review Workshop.

Choose at least one:

- I request a Pre-Application Meeting
I request a Conceptual Review Workshop with the Planning Commission
I request a Conceptual Review Workshop with the Board of Supervisors

Check (v)

Table with columns Applicant, County, and list of requirements (1-4) with checkboxes.

Like all other programs, this service is intended to meet your needs in a timely and inexpensive manner. If after the review, you have comments and suggestions on the value of the service or how it can be improved, please let us know.

**COUNTY OF EL DORADO  
CAMPAIGN CONTRIBUTION DISCLOSURE INFORMATION**

RECEIVED  
PLANNING DEPARTMENT

The attached Campaign Contribution Disclosure Form must be completed by applicants for, or persons who are the subject of, any proceeding involving a license, permit, or other entitlement for use, including most contracts and franchises, pending before the Board of Supervisors ("Board") of the County of El Dorado or any of its affiliated agencies.

**IMPORTANT NOTICE**

Government Code section 84308 (also known as the "Levine Act") contains requirements that are summarized generally as follows:

- A. If you are an applicant for, or the subject of, any proceeding involving a license, permit, or other entitlement for use, you are prohibited from making a campaign contribution of more than \$250 to any member of the Board of Supervisors or other County official who may participate in your proceeding. This prohibition begins on the date your application is filed or the proceeding is otherwise initiated, and the prohibition ends 12 months after a final decision is rendered by the Board of Supervisors or other County officer. In addition, no Board member or other County official who may participate in your proceeding alternate may solicit or accept a campaign contribution of more than \$250 from you during this period.
- B. These prohibitions also apply to your agents, and, if you are a closely held corporation, to your majority shareholder as well. These prohibitions also apply to your subcontractor(s), joint venturer(s), and partner(s) in this proceeding. Also included are parent companies and subsidiary companies directed and controlled by you, and political action committees directed and controlled by you.
- C. You must file the attached disclosure form and disclose whether you or your agent(s) have in the aggregate contributed more than \$250 to any Board member or other County officer who may participate in your proceeding during the 12-month period preceding the filing of the application or the initiation of the proceeding.
- D. If you or your agent have in the aggregate contributed more than \$250 to any individual Board member or other County officer who may participate in your proceeding during the 12 months preceding the decision on the application or proceeding, that Board member or other County officer must disqualify himself or herself from the decision. However, disqualification is not required if the Board member or other County official returns the campaign contribution within 30 days from the time the member or official knows, or should have known, about both the contribution and the fact that you are a party in the proceeding. The Campaign Contribution Disclosure Form should be completed and filed with your application or proposal, or with the first written document you file or submit after the proceeding commences.

1. A proceeding involving “a license, permit, or other entitlement for use” includes all business, professional, trade and land use licenses and permits, and all other entitlements for use, including all entitlements for land use, all contracts (other than competitively bid, labor or personal employment contracts), and all franchises.
2. Your “agent” is someone who represents you in connection with a proceeding involving a license, permit or other entitlement for use. If an individual acting as an agent is also acting in his or her capacity as an employee or member of a law, architectural, engineering, consulting firm, or similar business entity, both the business entity and the individual are “agents.”
3. To determine whether a campaign contribution of more than \$250 has been made by you, campaign contributions made by you within the preceding 12 months must be aggregated with those made by your agent within the preceding 12 months or the period of the agency relationship, whichever is shorter. Contributions made by your majority shareholder (if a closely held corporation), your subcontractor(s), your joint venturer(s), and your partner(s) in this proceeding must also be included as part of the aggregation. Campaign contributions made to different Board of Supervisors members or other County officer who may participate in your proceeding are not aggregated.
4. A list of the Board of Supervisors members and other County officials is attached.

This notice summarizes the major requirements of Government Code section 84308 of the Political Reform Act and California Code of Regulations, Title 2 sections 18438.1-18438.8.

2023 DEC 22 PM 3: 23  
RECEIVED  
PLANNING DEPARTMENT

# COMMUNITY for HEALTH and INDEPENDENCE



12|22|23

PROJECT NARRATIVE

**PA23-0015**



***“Humans now live longer than at any time in history. But adding more years to life can be a mixed blessing if it is not accompanied by adding more life to years.”***

*- Dr. Tedros Adhanom Ghebreyesus, WHO Director-General*

**FOREWORD** | The proportion of the U.S. aged population is growing significantly; between 2021 and 2050 the number of Californians aged 55+ years is expected to increase by 70%. Californians in this age cohort will experience increasing rates of age-related disabilities and chronic health conditions that are associated with their longer lifespans.

Adults overwhelmingly express interest in aging in place, which has strong implications for supply and demand in relation to California's housing shortage. There is also increasing interest in and demand among adults with disabilities and special needs and their families for more affordable independent living and supportive housing choices.

These trends represent major opportunities for innovative design and development of community projects that encourage disease/disability prevention, support healthy aging, and prolong independent living. *(UC Davis Community For Health and Independence Report, 2018)*

## TABLE OF CONTENTS

This Project Narrative is organized into various PARTS based on focused topic areas. All PARTS will discuss the project as a whole, except for PART FIVE where the jurisdiction-specific land use details are discussed separately for the WEST and EAST Plan Areas.

PART ONE   EXECUTIVE SUMMARY	page 2
PART TWO   THE GRAND VISION	page 8
PART THREE   PROJECT POSITIONING	page 32
PART FOUR   LAND USE MASTER PLAN	page 36
PART FIVE   MOBILITY PLAN	page 43
PART SIX   UTILITY PLAN	page 50
PART SEVEN   IMPLEMENTATION DETAILS	page 54
WEST PLAN AREA	
EAST PLAN AREA	

*The exhibits contained herein are conceptual and subject to change as the Plan's attributes are studied and refined.*

*The photographs contained herein(not listed above) are conceptual only, and are borrowed from sources of publicly published information to convey ideas.*

| PART ONE |  
EXECUTIVE SUMMARY





## Welcome to the **COMMUNITY FOR HEALTH AND INDEPENDENCE**.

**THE PROJECT NAME** | Like the vision for the project itself, the project name is straightforwardly unique: it is the "COMMUNITY FOR HEALTH AND INDEPENDENCE". Interchangeably, throughout this document, the project is also referred to as simply "THE COMMUNITY".

**THE PROJECT PURPOSE** | Epidaurus Management Company (an AKT Investment managed company) as the "Project Proponent" is proposing a new, uniquely-designed master planned Community for Health and Independence designed in collaboration with UC Davis Health.



The **COMMUNITY FOR HEALTH AND INDEPENDENCE** embodies the vision of offering people the opportunity to live longer and healthier lives in their own homes and communities. Through meaningful and informed land use planning, THE COMMUNITY aims to become a hub of wellness, incorporating evidence-based design features and cutting-edge health technology to enhance the well-being of older adults and individuals with disabilities in a sustainable and independent living environment.

Drawing upon its understanding of technology and policy, as well as continuous research into factors influencing health and wellness, UC Davis is ideally positioned to collaborate with the Project Proponent to help inform this unique land use plan.

The proposed integrated master planned community includes various types of housing, such as age-restricted housing, multigenerational housing, multifamily housing, and affordable housing. Neighborhood-serving land uses like parks, open spaces, retail, and research/commercial areas are also incorporated into the land use plan.

The proposal also provides for a 200-acre research complex. As part of its commitment to creating healthy aging communities, if the project is ultimately approved, the Project Proponent will contribute 200 acres to UC Davis for health research and education facilities. This 200-acre site/complex is in the heart of THE COMMUNITY and is envisioned to include:

- 1) A world-class center for the study of healthy aging.
- 2) Research and learning facilities.
- 3) On-site healthcare facilities and clinical space.
- 4) Community outreach, education and support services including at-home caregiver training and education for family members supporting aging relatives and people with disabilities.
- 5) Opportunities for collaboration with other educational and health institutions.
- 6) Facilities for community engagement including community gathering spaces and performing arts events.

The exact uses, phasing, and timing of the above, will be determined based on future community needs and funding opportunities.

Guided by UC Davis's Big Idea of "Healthy Aging in a Digital World," and combined with research on the world's healthiest aging communities, THE COMMUNITY presents an opportunity to establish a model community where real-time research fosters higher quality aging and longer lives.

COMMUNITY for HEALTH and INDEPENDENCE

**INSPIRED BY NEED, INFORMED BY SCIENCE** | The Sacramento Region's population is rapidly aging, with the number of people over 55 expected to double to 1.04 million by 2030, according to US census data. This aging population will require significant additional resources for housing, healthcare, and services.

Most adults want to be independent and remain in their own homes as they age. However, age-related chronic diseases and disabilities become obstacles to this choice. The COMMUNITY FOR HEALTH AND INDEPENDENCE is conceived to overcome these barriers and meet the increasing demand for supportive living arrangements through thoughtful planning and integrated technologies.

Additionally, there is an increasing population of adults with intellectual and/or developmental disabilities in the Sacramento Region, with many desiring to live independently. THE COMMUNITY seeks to accommodate opportunities for this population as well.

The vision for the COMMUNITY FOR HEALTH AND INDEPENDENCE is grounded in extensive research, conducted by the UC Davis Center for Healthcare Policy and Research (CHPR), which includes the 2018 report "Community for Health and Independence," and the 2021 report "Planning Healthy Aging Communities". In addition, other resources such as Dan Buettner's 2018 book "Blue Zones," supported by National Geographic, AARP's Eight Domains of Livability, and the Master Plan for Aging, released in 2021 by the California Department of Aging, provided further evidence-based goals and strategies for the planning of this unique community.

CHPR's landmark report "Planning Healthy Aging Communities" investigated supportive aging communities worldwide, inspiring The COMMUNITY FOR HEALTH AND INDEPENDENCE to integrate several core elements as described below.

- **ENCOURAGE SOCIALIZATION** | THE COMMUNITY fosters socialization both within and outside its borders, promoting interaction across generations by housing older individuals, young families, and professionals in the same vicinity, connected by pathways and gathering places.
- **ENCOURAGE PHYSICAL ACTIVITY** | Green spaces, recreation centers, integrated walking paths, and bike lanes linked to essential services encourage an active lifestyle in THE COMMUNITY.
- **PROMOTE HEALTHY DIETS AND EATING HABITS** | THE COMMUNITY plans to provide easy access to community gardens, grocery stores, and farmers markets, encouraging healthy eating habits.
- **PROMOTE WALKABLE NEIGHBORHOODS** | Multiple travel routes, interconnected walking paths, and essential services in proximity support walkability in THE COMMUNITY.

---

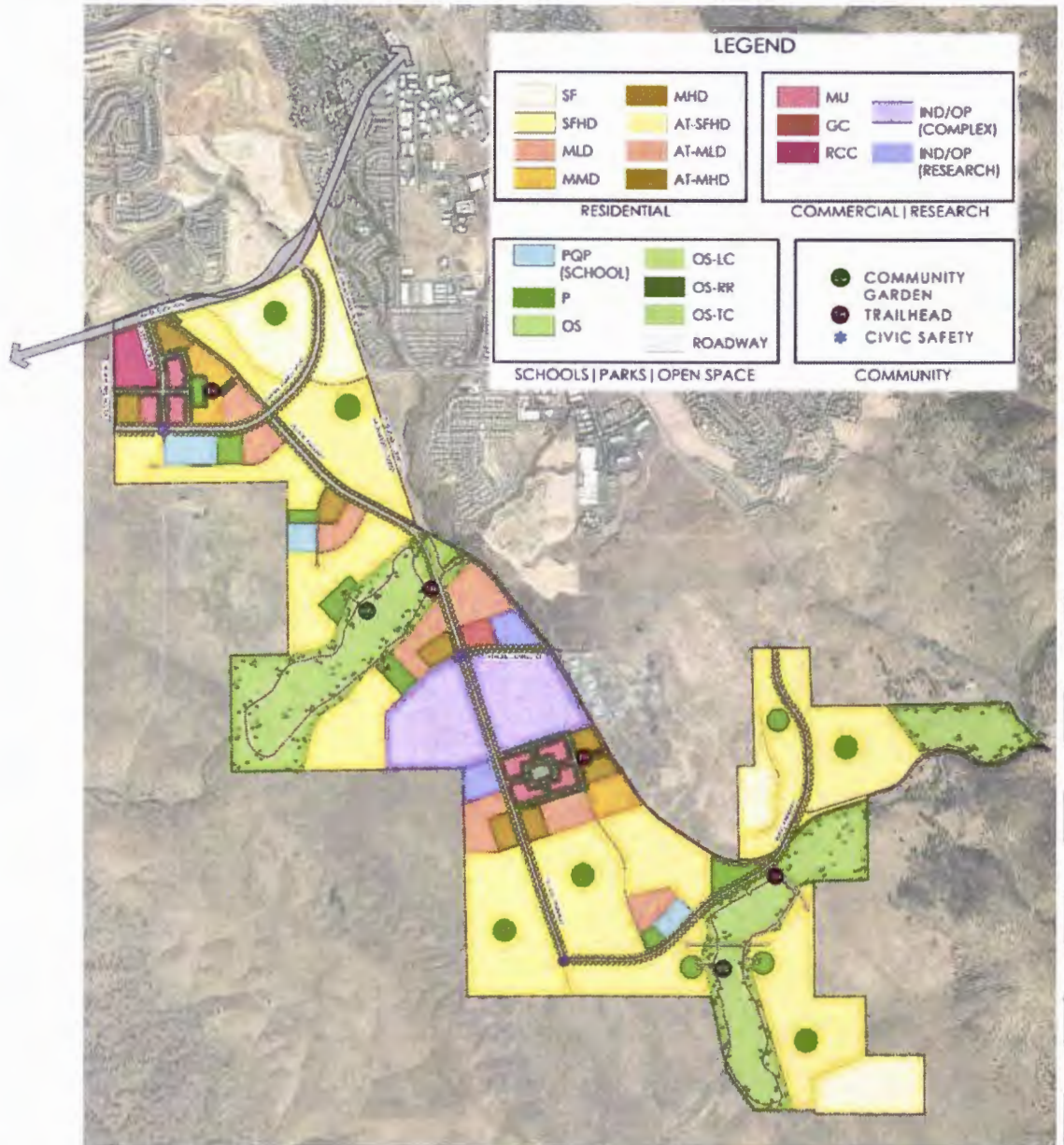
*"Simply put, these opportunities can not only add years to life, but also add life to years."*

*Thomas Nesbitt M.D., M.PH.*

**A COMMUNITY FOR HEALTH AND INDEPENDENCE** | Inspired by an ancient Greek city and healing center called Epidauros, the COMMUNITY FOR HEALTH AND INDEPENDENCE is an ongoing collaboration with UC Davis and its specialized team of affiliates, which has helped inform the land use plans through research efforts, published papers, visiting lecturer presentations, and collaborative design charrettes.

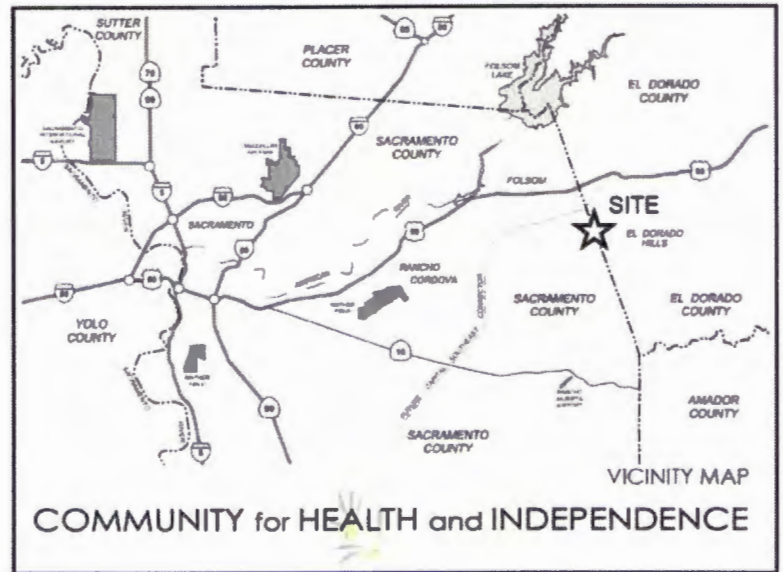
Guided by this expertise and UC Davis research, THE COMMUNITY aims to promote healthy living through its design and inclusive opportunities, focusing on a better and healthier way of life. Collaboration with UC Davis and the community will continue to shape this vision through the formal approval process.

By integrating UC Davis research, the COMMUNITY FOR HEALTH AND INDEPENDENCE includes multi-generational housing to attract young professionals and families across various income levels. Additionally, technology-enabled homes for older adults and individuals with disabilities enable patients, families, and caregivers to stay connected and engage in daily healthcare monitoring and management. Residents retain control of their lives and privacy while conveniently and efficiently accessing the healthcare services and university clinical experts they need.



**LOCATION** | The COMMUNITY FOR HEALTH AND INDEPENDENCE is strategically located adjacent to two highly recommended places to live in California: the City of Folsom and the community of El Dorado Hills. Both areas offer a high quality of life, robust community services, safety, and effective governance.

Situated on the Sacramento County/El Dorado County line south of Folsom and El Dorado Hills, the property poses no significant risks from earthquakes, flooding, or wildfires, and it does not encroach upon prime farmland in the region.



**PURPOSE OF THIS DOCUMENT** | This PROJECT NARRATIVE provides a high-level overview of the project's intent to prepare documents and studies guiding future Specific Plans.

This initial project narrative is intended to outline the GRAND VISION and opportunities that this one-of-its-kind community can offer the region. This is being provided to the City of Folsom and El Dorado County, to introduce the proposed project and seek early feedback before initiating formal project applications.

The COMMUNITY FOR HEALTH AND INDEPENDENCE is a visionary mixed-use project with land area in multiple regulatory jurisdictions. Specific Plans are anticipated to be prepared and processed within their respective areas of jurisdiction. The land area within Sacramento County (WEST PLAN AREA) is proposed to be processed through the City of Folsom (annexed to Folsom) and will comply with City of Folsom requirements and related LAFCo process. The land area within El Dorado County (EAST PLAN AREA) will be processed by El Dorado County and will comply with El Dorado County requirements.

With a balanced and unique land plan, the project proponent is committed to ensuring that the project provides a net fiscal benefit to the City of Folsom and El Dorado County. In addition, the project will include community outreach plans to ensure early, meaningful, and transparent public outreach in collaboration with each jurisdiction.

## ***This is the COMMUNITY FOR HEALTH AND INDEPENDENCE.***

*"We know the key to healthy aging for people starts in their homes. We believe a reimagined community that leverages technology for human-made spaces where people live, recreate and work will promote better management of chronic disease and increase independence for valuable members of this population."*

*David Lubarsky, M.D., M.B.A., F.A.S.A.*

# COMMUNITY for HEALTH and INDEPENDENCE



| PART TWO |  
THE GRAND VISION



**THE NEED** | Society is confronted with an aging population that is set to accelerate in coming years. More than 35% of California's population will be 55 years of age or older by 2050, and with advances in healthcare, people aged 85 years and older are estimated to number nearly 1,000,000 people. As this population segment continues to grow and age, society must address care for this population, while allowing older adults to live in their own homes healthier, for longer, and more productively. Additionally, community development can further assist and augment the lives of people with neurological disabilities. Although neurological disorders encompass a broad range of conditions, many people with intellectual disabilities can be independent and productive citizens with slight assistance and community support. Hence the need to provide housing and living for all, a truly inclusive community.

**THE VISION - A COMMUNITY FOR HEALTH & INDEPENDENCE** | The Vision for THE COMMUNITY promotes opportunities for participation, security, and health to enhance quality of life throughout one's lifetime. *Simply put, these opportunities can not only add years to life, but also add life to years.*

**COMMUNITY COLLABORATION** | Guided by UC Davis research, The COMMUNITY FOR HEALTH AND INDEPENDENCE is designed to promote healthy living through Project design and inclusive opportunities that allow for interaction with fellow community members for a better way of life. In turn, a better way of life promotes better health and longevity. This Vision is optimized through extensive collaboration with UC Davis Health and community partners.



It is through the UC Davis collaboration process, and the development of the UC Davis Health **Community for Health and Independence** and **Planning Healthy Aging Communities** reports, that the Vision for THE COMMUNITY was developed; this Vision incorporates the overarching CONCEPTS OF THE PLAN.

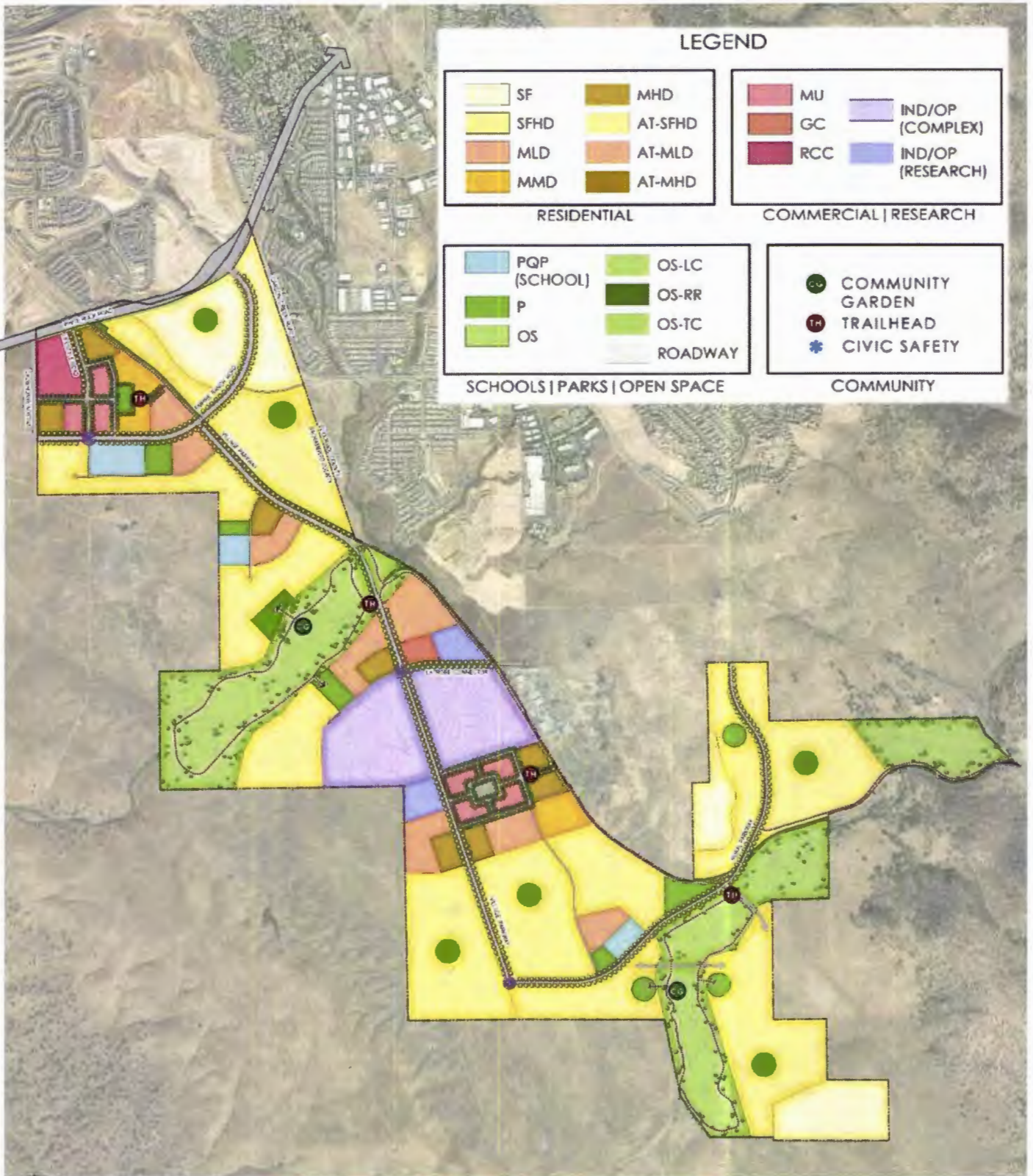
*The overarching Concepts of the Plan are described on the following pages.*



***"We know that technology by itself does not solve problems. It's imperative that we work with individuals, families, and communities to identify what technology provides the best value, and the most meaningful solutions, in the context of daily life."***

*Heather M. Young, Ph.D., R.N., F.A.A.N.*

**ILLUSTRATIVE MASTER PLAN** | The COMMUNITY FOR HEALTH AND INDEPENDENCE ILLUSTRATIVE MASTER PLAN is shown on the following page.



COMMUNITY for HEALTH and INDEPENDENCE



**THE PROJECT RESEARCH GUIDANCE** | Research Guidance has informed the need, applicability, location, and design of the Project. The primary sources of Research Guidance are described below.

**COMMUNITY FOR HEALTH AND INDEPENDENCE** | In 2018, the UC Davis Center for Healthcare Policy and Research (CHPR) prepared *Community for Health and Independence*.

"This report provides a broad overview of how such a partnership relates to the UC Davis mission and factors important to UC Davis leadership decision-making. It includes a description of regional demographics, existing resources for older and vulnerable adults, examples of model communities, and an overview of research on use of technology, the built environment, and community-based interventions to facilitate aging in place. Finally, opportunities and challenges for research, education, and community partnership are discussed based on conversations with selected UC Davis faculty." (*Community for Health and Independence*, 2018)



According to this study, evidence on effective methods and technologies to support community-based, healthy aging is minimal. With significant resource investment, UC Davis has a unique opportunity to study cross-disciplinary, aging-in-place technologies and strategies through collaborations with industry, government agencies, foundations, and sister academic institutions.

**Population Projection for California Adults Aged 55+ Years (2021-2050)**



Source: California Department of Finance

**"THE COMMUNITY is an opportunity for an innovative, unique community, designed based on evidence of what works to support healthy aging"**  
 Tod Stoltz, MBA.

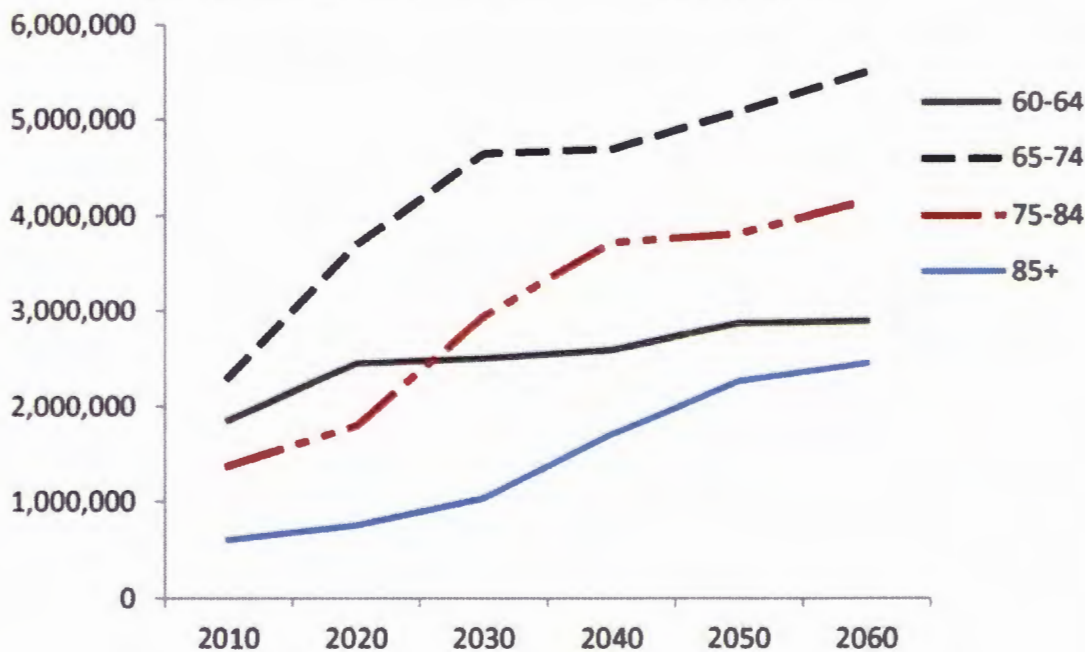
PLANNING HEALTHY AGING COMMUNITIES | In 2021, the UC Davis Center for Healthcare Policy and Research prepared *Planning Healthy Aging Communities*.



California's population aged 55 years and older is projected to increase from 28% (11.3 million residents) in 2021 to 35% (15.4 million residents) in 2050. Although 80% of older adults want to remain independent in their own homes as they age, increasing rates of age-related chronic disease and disability create barriers to achieving this. The growing population of adults with intellectual and developmental disabilities is aging as well. When taken in context with the existing housing shortage in California, there is a compelling need for innovative, inclusive communities purposefully designed to support health and independence throughout the life span. Land use planning and community design are often overlooked elements that can help to prevent or mitigate many age-related barriers to independent living for an aging population, including those who are intellectually or developmentally disabled.

Through an innovative synthesis of evidence from peer-reviewed literature, current guidelines and toolkits, interviews with key informants, and examples of model communities, this report describes the role of land use planning and design in fostering healthy aging for all. The goal is to inform and inspire developers, planners, home builders and other key stakeholders responsible for creating innovative healthy aging communities.

Figure 2. California Age Growth Projections, 2010-2060



Source: California State Plan on Aging 2017-2021, California Department on Aging



**BLUE ZONE COMMUNITIES** | UC Davis Center for Healthcare Policy and Research (CHPR) conducted research in 2022 to examine naturally-occurring communities with older populations with a focus on "Blue Zones" (regions where people live longer than average) to understand elements of these communities and their impact on aging, especially where

communities had a concentration of centenarians (people living to age 100+). The elements of these communities referred to as "POWER 9" (shown at right).

Dan Buettner (*The Blue Zones*), with support from National Geographic, identified six unique communities whose residents include an unusually high number of centenarians with low levels of chronic disease.

**Okinawa, Japan** | Women over age 70 years comprise the longest-lived population in the world.

**Loma Linda, California** | Seventh Day Adventists live 10 years longer than other North Americans.

**Ikaria, Greece** | One of the lowest rates of middle-age mortality; lowest documented rate of dementia in the world.

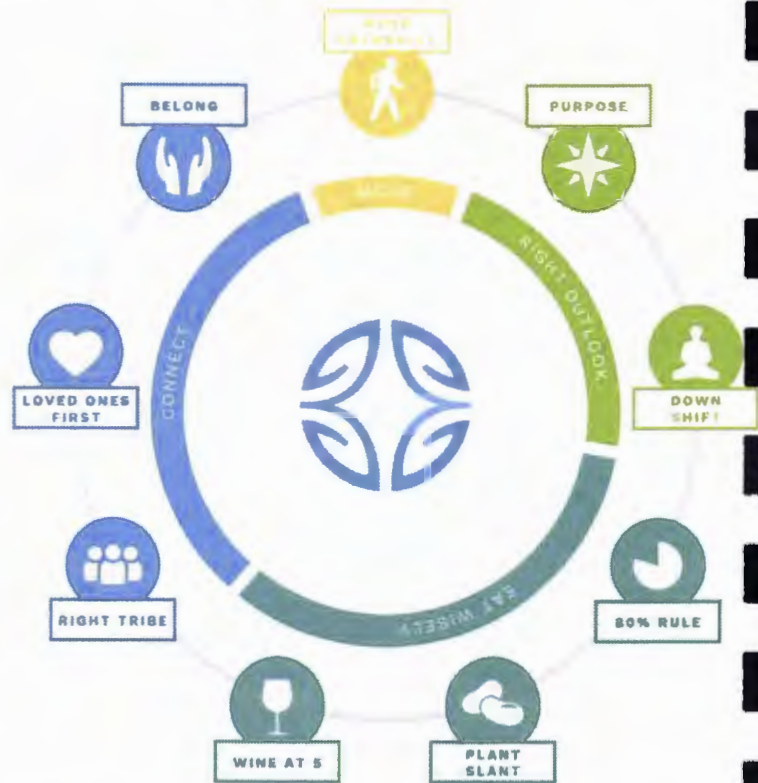
**Sardinia, Italy** | Largest concentration of male centenarians in the world.

**Nicoya, Costa Rica** | Residents are twice as likely as U.S. residents to reach 90 years old in good health.

**Singapore** | Singaporeans rank number one in healthy life expectancy and have the best health care system.

**CALIFORNIA MASTER PLAN FOR AGING** | In 2021, the State of California Department of Aging prepared the *Master Plan For Aging* report that identified 5 Bold Goals (at right) and 23 strategies to build a California for all ages by 2030.

This report also includes a Data Dashboard for Aging to measure progress and a Local Playbook to drive partnerships that help meet these goals.



	<b>GOAL ONE: Housing for All Stages &amp; Ages</b> We will live where we choose as we age in communities that are age, disability, and dementia-friendly and climate and disaster ready. <b>Target:</b> Millions of new housing options to age well
	<b>GOAL TWO: Health Reimagined</b> We will have access to the services we need to live at home in our communities and to optimize our health and quality of life. <b>Target:</b> Close the equity gap and increase life expectancy
	<b>GOAL THREE: Inclusion &amp; Equity, Not Isolation</b> We will have lifelong opportunities for work, volunteering, engagement, and leadership and will be protected from isolation, discrimination, abuse, neglect, and exploitation. <b>Target:</b> Life satisfaction as we age
	<b>GOAL FOUR: Caregiving That Works</b> We will be prepared for and supported through the rewards and challenges of caring for aging loved ones. <b>Target:</b> One million high-quality caregiving jobs
	<b>GOAL FIVE: Affording Aging</b> We will have economic security for as long as we live. <b>Target:</b> Close the equity gap and increase elder economic security

**INSPIRATION MODEL COMMUNITIES** | UC Davis *Planning Healthy Aging Communities* report cited 35 model communities and highlighted several of the 35 for implementing innovative planning and design characteristics identified by the Urban Land Institute guidelines as contributing to healthy communities.

**Serenbe** | Chattanooga Hills, GA. | Master Planned Community

**Share Kanazawa** | Kanazawa, Ishikawa Prefecture, JAPAN | Village Housing Development

**New Ground Cohousing** | High Barnett, UK | Co-Housing

**Grow Community** | Bainbridge Island, WA | Village Community

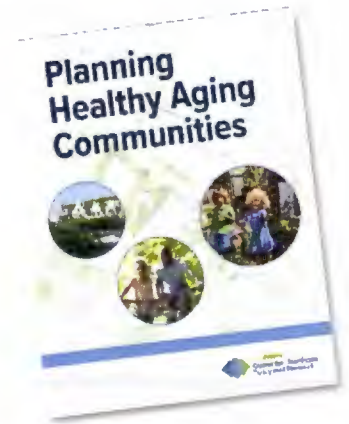
**Culdesac** | Tempe, AZ | Master Planned Community

**First Place Phoenix** | Phoenix, AZ | Supportive Housing for Neurodiverse Adults

**Panasonic Pena Station Next** | Denver, CO | Master Planned Community

**Village Landais Alzheimer** | Dax, FRANCE | Dementia Village

**Village Of Hope** | Clearfield County, PA | Village Housing Community



Unique models cater to specific populations, such as those with dementia, by enhancing safety and wayfinding while ensuring residents remain connected with the greater community. Some models incorporate advanced technologies to promote, assess, and maintain healthy living. The most unique features among these models were those that included the following.



**Encourage Socialization** | Socialization both within and outside the community, as well as socialization across generations, using connected pathways, permeable borders, and interior and exterior THIRD PLACES. (discussed in detail later in this narrative.)



**Promote Healthy Diets** | Providing easy access to community gardens, grocery stores, and farmers markets within neighborhoods and near activity centers.

**Encourage Physical Activity** | Providing green spaces, recreation centers, well-integrated and networked walking paths, and bike lanes that connect to essential services.

**Promote Walkable Neighborhoods** | Providing multiple travel routes, networks of walking paths, and essential services within easy access.

**A COMMUNITY FOR HOLISTIC LIVING** | The design of the COMMUNITY FOR HEALTH AND INDEPENDENCE integrates health and wellness attributes and services through thoughtful early planning. The community design focuses on the community as a whole by promoting inclusion and understanding and by creating places for everyone such that aging in one's home, living with mental and physical disabilities, and contributing to the community can be easily achieved.



This community for holistic living will contain Places that promote active lifestyles and employment, and facilitate access to food, education, recreation, exercise, and research.

**A COLLECTION OF PLACES** | The Plan is conceived as a well-connected collection of PLACES. These Places, together, account for the locations that support the social and economic habits of the diverse residents within the community at large. The COMMUNITY FOR HEALTH AND INDEPENDENCE is designed to include FIRST PLACES, SECOND PLACES, and THIRD PLACES which together form a complete community. Additionally, and unique to THE COMMUNITY, the Plan includes EXCEPTIONAL PLACES:

**EXCEPTIONAL PLACES | Places We Research, Discover, Cultivate, Adapt, Support**

Exceptional Places refers to the 200-acre UC Davis Teaching, Research, and Health Complex located at the heart of the MASTER PLAN. The UC Davis Site/Complex is proposed to facilitate learning (for researchers, students, and residents) and provide opportunities to conduct lifestyle and health research to expand knowledge about effective community design and promote healthy aging and longevity.

Details on the facilities and services to be provided opportunities at the UC Davis Site/Complex are in the early stages of planning and yet to be decided by the University. The complex is anticipated to include many components, which may include but are not limited to the following:



- Research/Learning Facilities
- Healthcare Facilities
- Clinical Space
- Performing Arts Opportunities
- Specialty Care Housing & Skilled Nursing Care
- Mobile Laboratory/Urgent Care Services
- Community Outreach, Education, & Support Services (including At-Home Care-Giver Training)
- Research Gardens/Community Gardens
- Community Center
- Innovative Transit Options

**FIRST PLACES | Places We Thrive, Live, Grow**

FIRST PLACES refers to our homes; this is where we begin and end each day, our 'home base'. First Places are the residential areas of the Plan that provide safe refuge and spaces in which to nurture, care for, and grow us and our families.

FIRST PLACES include traditional street-accessed single family detached and attached homes, multi-generational homes, accessory dwelling units, alley- and court-loaded homes, cottage homes with shared open areas and gardens, assisted living homes, residential care facilities, specialty group homes geared for targeted-needs care, and apartment homes.



**SECOND PLACES | Places We Work, Do Business, Shop**

SECOND PLACES refers to our workplaces and places of commerce; this is where we go when we leave our homes to earn a living and provide for ourselves and our families. Second Places are the employment and shopping areas of the Plan that provide the economic engine of the community which, in turn, provides the financial means to promote living.

Included in the SECOND PLACES are the neighborhood and lifestyle commercial sites, research sites, civic sites such as law enforcement and fire departments, and the UC Davis Site/Complex.

THE COMMUNITY'S' employment-generating land uses are anticipated to provide jobs/housing balance within the community.



**THIRD PLACES | Places We Play, Learn, Explore**

THIRD PLACES refers to our places of recreation, education, and social interaction; this is where we go when we leave our homes and workplaces to gain enrichment of our minds, bodies, and souls. Third Places are the parks, open spaces, commercial plazas, schools, and community gathering areas of the Plan that provide the health, well-being, and educational means to promote respect and inclusion in the community.

THIRD PLACES also includes the many opportunities for smaller, more intimate public spaces, within larger land use areas but outside of the public parks. Due to the scale of community, these sites are not shown on the Land Use Master Plan but will be implemented at the future Tentative Map and/or Design Review stage of planning entitlements. These important community spaces may include, but are not limited to, the following.

- Pocket Parks
- Commercial Plazas
- Trails/Trail Heads/Nature Areas
- Community Gardens
- Outdoor Fitness Equipment Areas
- Outdoor Pavilions
- Picnic Areas/Informal Seating Areas
- Recreation/Community Centers
- Wayfinding/Information/Technology Kiosks
- Respite/Recharge/Comfort Stations





**GREENING AND HEALTH** | Overall Plan Area "greening" and the inclusion of a variety of green spaces are key to bringing the Vision for the COMMUNITY FOR HEALTH AND INDEPENDENCE to life. Green spaces refer to the variety of open spaces, parks, and plazas within THE COMMUNITY. Greening refers to the landscape plantings in landscape corridors along roadways, at project entries, at site developments, and in the front yards of individual home sites throughout THE COMMUNITY.

**GREEN INFRASTRUCTURE** | Green spaces and greening make up the green infrastructure system of the Plan Area which is prioritized throughout THE COMMUNITY.

The inclusion of varied and interconnected green spaces and greening contribute to a wide variety of beneficial health outcomes, including increased physical activity, reduced obesity, reduced stress, enhanced social interaction and community engagement, and improved mental health.

**GREENING STRATEGIES** |

- Significant tree canopy with large and diverse tree species to enhance shade in yards, parks, and plazas and along streets and trails.
- Incorporating layers of trees and understory vegetation along sidewalks and trails to make these routes more attractive, ecologically sustainable, and comfortable.
- Allotting spaces for community gardens that have good access to sunlight and fit the natural terrain and setting within walkable distance to neighbors.
- Identifying natural areas for conservation which preserve habitat and support biodiversity.

The primary green spaces (parks, open spaces, and landscape corridors) are shown on the exhibit above. Additional green spaces and greening areas will be located throughout THE COMMUNITY in the commercial and employment centers, residential areas, neighborhood streets and entries, and other areas and are not specifically shown here due to the scale of the exhibit. Details of these design elements will be developed in the future with site-specific development.



**GREENING AS BRAND** | Green infrastructure at the COMMUNITY FOR HEALTH AND INDEPENDENCE will reinforce the notion that landscape is a primary component of the branding for THE COMMUNITY. Greening (hardscape and landscape materials) will provide project continuity and diversity in the spaces they enhance.

**SENSIBILITY + SOPHISTICATION** | Greening elements often express the local context and the patina of time and reflect the values of the people living there. Characteristic landscape and hardscape features are typically rooted in a community's response to place and represent the natural simple materials with authentic expression in green spaces defined by the natural environment.

**TEXTURE, PATTERN + COLOR** | Green spaces should include texture and pattern through the use of diverse and vibrant living and static materials in the landscape and built environments. These elements should be repeated to emphasize a sense of place and may be highlighted by singular opposing vertical or horizontal elements that stand out and attract attention.

**DELIGHT + PLAY** | Green spaces should create memorable moments, shared experiences, and unexpected experiences. Green spaces should include whimsy and art, and be interactive, iconic, and playful. Play is essential and can be thought-provoking, laugh-inducing, and inspiring. Exploration should be encouraged and a natural effect of experiencing the Place.

**HUMAN CONNECTION + INTERACTION** | Green spaces should encourage community gatherings of all types and sizes and promote social interaction and inclusion. Gathering places should be indoor, outdoor, and all-weather to offer variety and engagement opportunities year-round. Gathering places should promote flex-spaces and people watching and should allow for interaction with shared resources.

**HEALTH, MOBILITY + TECHNOLOGY** | Health can be enhanced through daily mobility. Greening should provide shady walkable environments that are accessible to all, including physical- and neuro-diverse people. Protected bikeways allow for safer passage and active lifestyles. Micro-transit opportunities remove barriers to mobility and allow for full immersion into community events. Graphic and technological wayfinding strategies allow for ease of movement within the community.





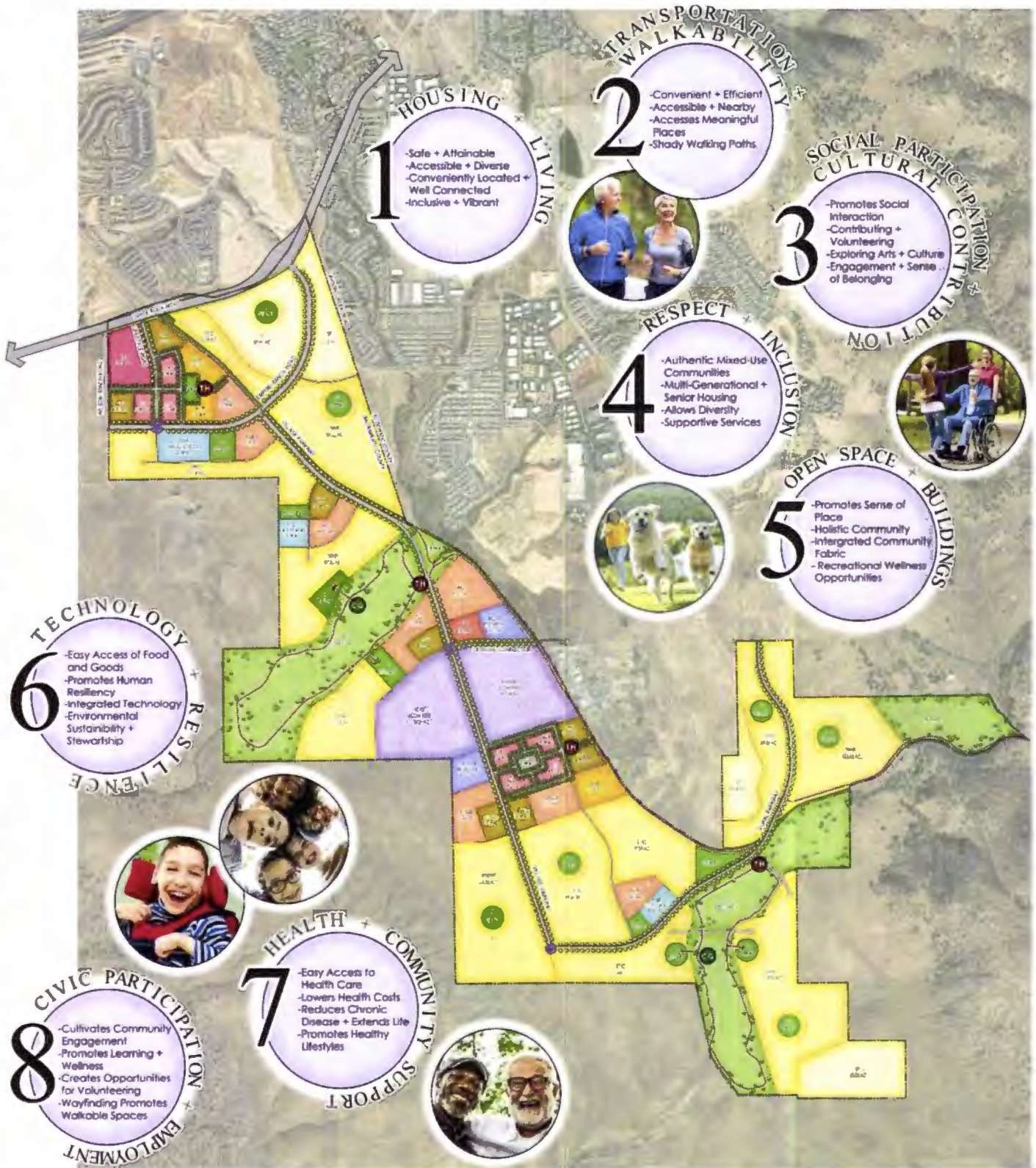
**EIGHT DOMAINS OF LIVABILITY** | The evidenced-based Domains of AARPs "Eight Domains of Livability" are described in the UC Davis Center for Healthcare Policy and Research's publications *Community for Health and Independence* and *Planning Healthy Aging Communities*.

The COMMUNITY FOR HEALTH AND INDEPENDENCE incorporates the notion of these EIGHT DOMAINS and includes an adapted version (below) that guides the design of a new community paradigm. Tailored for the Project and referred to herein as **THE COMMUNITY'S EIGHT DOMAINS OF LIVABLE COMMUNITIES**, mindful incorporation of these Domains early in the planning process will guide the future built environment to **create Places For Everyone in a Community for Health + Independence.**



**THE COMMUNITY'S EIGHT DOMAINS OF LIVABLE COMMUNITIES EXHIBIT** is shown on the opposing page.

The key concepts of each of these Domains are illustrated and described on the following pages and are the **GUIDING PRINCIPLES FOR THE COMMUNITY FOR HEALTH AND INDEPENDENCE.**



COMMUNITY for HEALTH and INDEPENDENCE

**DOMAIN ONE | Housing + Living**

*Better Living Through Community Diversity + Opportunity*

**GUIDING PRINCIPLES**

**D1.1** | Housing should be safe, attainable, diverse, and accessible. Multi-generational housing types and accessory dwelling units are encouraged and allow for families to remain together to care for physical, mental, and aging challenges.

**D1.2** | Neighborhoods should be designed to welcome all people, including all ages, family unit types & sizes, and physical & neurological diversities.

**D1.3** | Neighborhoods should be conveniently located, well-connected, vibrant, and inclusive and should contain a variety of lot types & sizes.

**D1.4** | Neighborhoods should be designed to promote active lifestyles wherein residences are in close proximity to SECOND and THIRD PLACES.

**D1.5** | Neighborhoods should be designed to promote neighbor interaction by incorporating architectural design features such as accessible porches and front-facing windows to promote social interaction.

**D1.6** | Neighborhoods should contain a variety of FIRST PLACES opportunities in a unified setting. Homes for affordable housing may be vertically or horizontally mixed in neighborhoods and may be grouped or dispersed throughout neighborhoods.



***"Diverse, inclusive communities that support healthy aging will require a variety of housing types, designed with accessibility in mind, and inviting to a range of household sizes, individual needs, and income levels. Walkability and proximity to retail spaces and recreation are a key design element of communities to support healthy aging."***

*Joy Melnikow, M.D., M.P.H.*

**DOMAIN TWO | Transportation + Walkability**  
*Better Mobility + Wayfinding Through Spaces*

**GUIDING PRINCIPLES**

**D2.1** | Transportation systems should be comprehensively-planned to provide direct, efficient, and safe access accommodating a variety of modes of transportation.

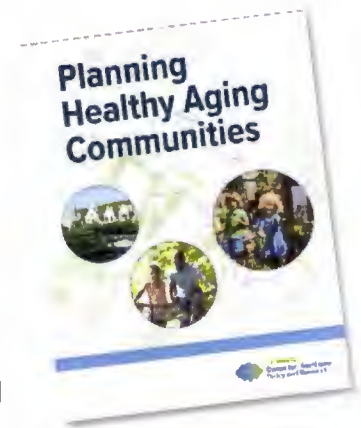
**D2.2** | Trails and sidewalks should be user-friendly, and to promote walking, bicycling, and dog walking for daily needs and exercise.

**D2.3** | Public transportation should be integrated, convenient, and accessible, and should provide opportunity for access to healthy food and community services.

**D2.4** | Roadway networks should utilize grid, modified grid, and/or circular patterns to promote wayfinding and disperse traffic concentrations.

**D2.5** | Roadways should be tree-lined to provide shady walking paths and designed to facilitate auto traffic while promoting pedestrian and bicycle safety and convenience.

**D2.6** | Wayfinding should be planned along primary transportation corridors and road crossings should be designed to protect pedestrians and minimize crossing distances.



***"Mobility and Transportation play a fundamental role in helping people maintain many of the important factors in healthy living, including civic and social participation, accessing health services, employment, etc."***

*Bahram Ravani, Ph.D.*

**DOMAIN THREE | Social Participation and Cultural Contribution**  
*Better Living Through Meaningful Engagement*

**GUIDING PRINCIPLES**

**D3.1** | Land uses should be sited to invite engagement, connection, and a sense of belonging.

**D3.2** | Open areas and front yards of FIRST PLACES should be designed to promote opportunities to be neighborly and encourage socialization.

**D3.3** | Opportunity for THIRD PLACES should be located in the community to promote Arts and Culture in the community.

**D3.4** | Public and semi-public spaces should be designed to promote social interaction, information gathering, and cultural awareness.

**D3.5** | Land use adjacency should consider opportunities to contribute to the community through volunteering.

**D3.6** | District and neighborhood design should employ artistic and cultural expressions in landscape and architectural design, wayfinding and place making.



***"Social connection is vital to healthy aging and is enriched by the meaning associated with cultural relevance - people who come together with common interests and pursue creative outlets have greater well-being across the lifespan."***

*Heather M. Young, Ph.D., R.N., F.A.A.N.*

**DOMAIN FOUR | Respect + Inclusion**  
*Living Better for an Ability-Diverse Population*

**GUIDING PRINCIPLES**

**D4.1** | Housing should be designed to accommodate opportunities for secondary units to house multi-generational families, special needs adult children, and lower-income families.

**D4.2** | Housing should be designed to promote accessibility, maximize safety, and allow healthy aging in the home.

**D4.3** | Neighborhoods should include opportunities for supportive care, goods, and services.

**D4.4** | Neighborhoods should include integrated housing and support services that promote interaction, helpfulness, understanding, and tolerance.

**D4.5** | Neighborhoods should include spaces that are accessible to a diverse population and designed in ways that promote a neuro-diverse community.

**D4.6** | Neighborhoods should be designed to support mixed-use neighborhoods which allow for a person's needs to be met conveniently.



*"We stand at a societal frontier where people are living longer than ever before in contexts that are increasingly influenced through digital means. Through respectful human-centered design, we can create inclusive communities that are both socially and digitally innovative to promote optimal livability."*

*Veronica Ahumada, Ph.D.*



**DOMAIN FIVE | Open Space + Buildings**

*Better Sense of Community Through Design of Spaces*

**GUIDING PRINCIPLES**

**D5.1** | Neighborhoods should include distinctive THIRD PLACES that will promote a sense of place, foster a sense of community, bolster mental and physical wellness, and allow for community bonding.

**D5.2** | Neighborhoods should include both natural and developed open spaces and parks to promote a variety of passive and active uses that support a healthy community.

**D5.3** | Neighborhoods should be designed to embrace the natural and built environment equally to promote a holistic community.

**D5.4** | Neighborhoods should include THIRD PLACES of varying sizes and development intensities like pocket parks, plazas, and comfort stations to bolster the community fabric.

**D5.5** | Public areas should be designed to be easily identifiable and navigable, promote wayfinding and safety, and encourage programmed and unprogrammed community gathering.

**D5.6** | Neighborhoods should be designed to offer safe routes to school, and schools should be located to support community meetings and volunteering synergies.



***“Inclusive communities that support healthy aging will require a variety of housing types, designed with accessibility in mind, and invite a range of household sizes, individual needs, and income levels. Key design elements of communities that promote healthy aging include walkable streets, including protective shade canopies, and proximity to retail spaces and recreation areas.”***

*Desiree Backman, Dr.PH, M.S., R.D.*

**DOMAIN SIX | Technology + Resilience**  
*Better Intelligence + Environmental Sustainability*

**GUIDING PRINCIPLES**

**D6.1** | Neighborhoods should be designed to promote human resiliency by providing the opportunity for integrating technology and communications infrastructure.

**D6.2** | Neighborhoods should be designed to promote Environmental Sustainability through use of energy- and water-efficient practices.

**D6.3** | Neighborhoods should be designed to promote Climate Resiliency by optimizing the opportunities to plan for climate change within the community.

**D6.4** | Neighborhoods should provide the opportunity to accommodate technology and communications infrastructure to help people remain engaged in their community.

**D6.5** | Neighborhoods should be designed to accommodate modern technological services, like community-based goods delivery, which will help support independence.

**D6.6** | Neighborhoods should be designed to include a variety of SECOND and THIRD PLACES that provide access and allow for active and passive participation in Places such as community gardens .



***"Technology will play an increasingly important role in helping people manage their health and wellness as they (and their loved ones) age in the community. Creating an environment where technology is easily accessible and resilient to disruption will be a key feature of future healthy communities."***

*David Lindeman, Ph.D.*

**DOMAIN SEVEN | Health + Community Support**  
*Better Access, Affordability + Equality*

**GUIDING PRINCIPLES**

**D7.1** | Neighborhoods should be designed to encourage healthy living which can prevent chronic disease, lower health costs, and promote community contribution.

**D7.2** | Neighborhoods should be designed to offer land use synergies and place healthcare services in proximity to neighborhoods to provide better access to healthcare.

**D7.3** | Neighborhoods should be designed to incorporate mixed-use with flexible development regulations to allow for emerging healthcare and housing trends and maximize equality in access to care systems including accommodating residential care facilities and skilled nursing care.

**D7.4** | Neighborhoods should be designed to be integrated and promote a sense of inclusion, cooperation, equality, and support.

**D7.5** | Areas within neighborhoods, open spaces, and trail/landscape corridors should provide opportunities, where appropriate, to have community gardens to grow and access healthy and inexpensive food sources.

**D7.6** | Parks and open spaces should provide opportunities to exercise, read, meditate, pray, etc. to promote holistic wellness and synergy between physical and mental well-being.



and



*The setting in which one lives has a clear impact on health and mental well-being. Intentionally planning a community and architecting the living spaces in such a way that it incorporates evidence-based best practices, that also includes the facilitation of assistive technologies, can optimize health and independence, and add "life to ones later years".*

*Thomas Nesbitt M.D., M.P.H.*

**DOMAIN EIGHT | Civic Participation + Employment**  
*Better Service + Work Opportunities*

**GUIDING PRINCIPLES**

**D8.1** | Neighborhoods should offer employment opportunities such that residents can live and work in the same community and cultivate community engagement.

**D8.2** | Neighborhoods should be designed to optimize land use synergies that promote opportunities to volunteer in the community and contribute to the community at large.

**D8.3** | SECOND PLACES should offer employment opportunities attractive to a range of skill and education levels offering a range of incomes.

**D8.4** | THIRD PLACES should offer a variety of recreation, education, volunteerism, and stewardship opportunities to promote learning, wellness, and sustainability.

**D8.5** | Civic and employment environments should include walkable spaces with proximity to commercial services, business, and transportation; green spaces and shade; and THIRD PLACES associated with positive health attributes.

**D8.6** | Civic and employment environments should promote community inclusion by including wayfinding and information gathering methods to guide and inform residents and visitors.



*For people with disabilities, employment opportunities are often limited in number and poorly matched to their individual interests and talents. Designing a community to ensure it provides a range of employment, volunteer, and learning opportunities is critical to addressing this problem, and allowing people with disabilities to live their best lives.*

*Leonard Abbeduto, Ph.D.*



| PART THREE |  
PROJECT POSITIONING



**LOCATION** | The COMMUNITY FOR HEALTH AND INDEPENDENCE is strategically located adjacent to two highly recommended places to live in California. Both the City of Folsom and the community of El Dorado Hills have matured into destinations for high quality of life, tremendous community services, safety, and sound governance.

THE COMMUNITY straddles the Sacramento County/El Dorado County line just south of the City of Folsom and El Dorado Hills. Regional access to the Plan Area is from Highway 50, and primary local access to the Plan Area is from White Rock Road. THE COMMUNITY is located adjacent to existing and planned development to the north (Folsom Plan Area Specific Plan) and to the east (Carson Creek Specific Plan).

The physical aspects of the site provide no significant risks from earthquakes, flooding, or wildfire, and provide no loss of prime farmland to the region. The site has rolling terrain allowing for local vistas, interesting road and multi-use trail design, and creeks that provide recreational opportunities.

**COMMUNITY LOCATION AND REGIONAL DEMOGRAPHICS** | The Project anticipates a variety of homes and residences (including units in mixed-use designations) as well as retail and service uses. Ambulatory healthcare, parks, open space, transit, and community support services will be embedded in the development.

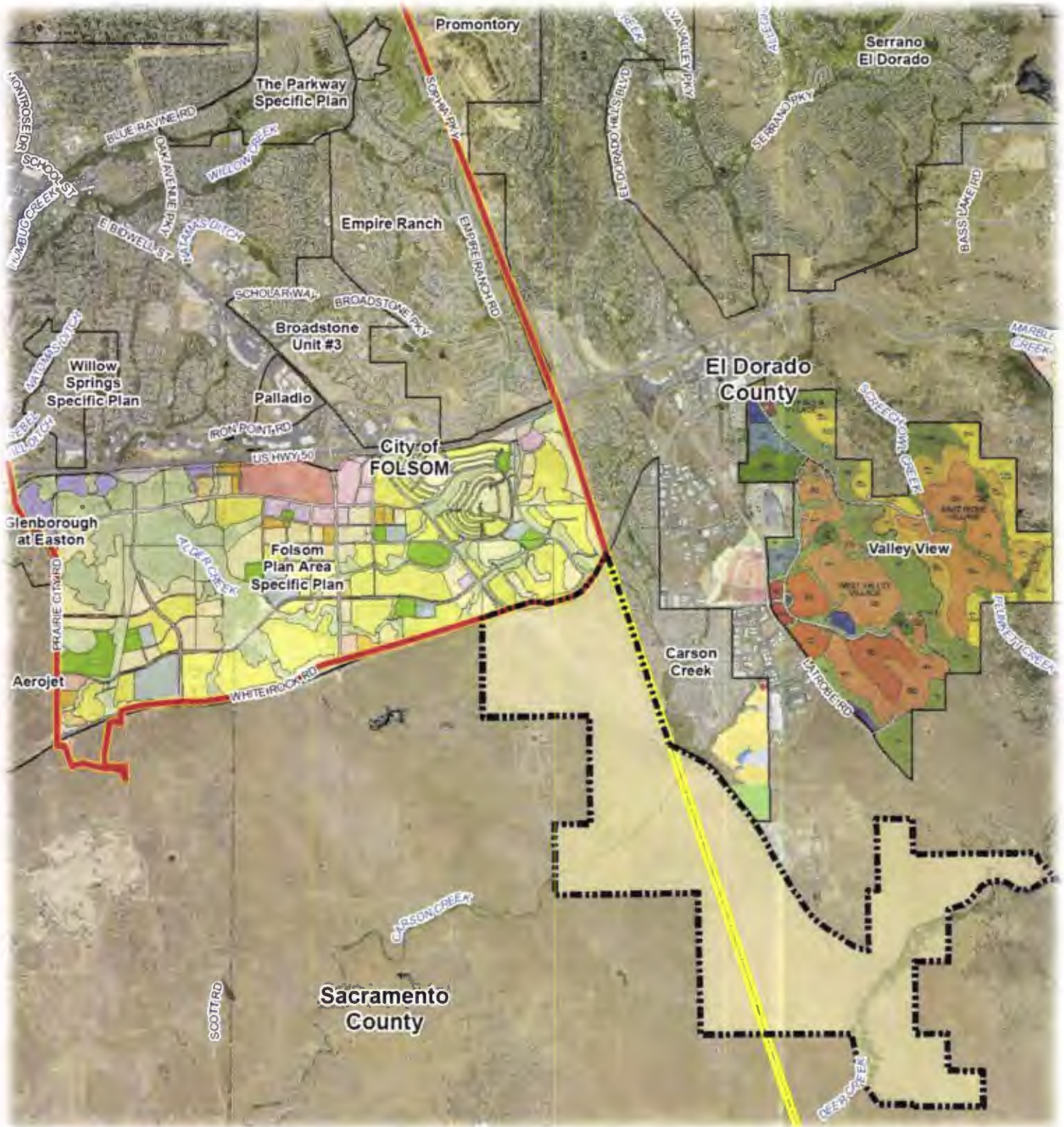
Our population continues to age in California and the Sacramento region. The adult population aged 60 years and older in the Sacramento region is projected to increase 78% by 2030 (588,000 to 1,045,000). Those turning 65 years between 2015 and 2019 are expected to live an average of 23.6 years with 4.5 years spent with one or more limitations. There are thousands of adults with intellectual and/or developmental disabilities that live in Sacramento County of which 56% have an intellectual disability and 35% have an Autism spectrum disorder. Seventy-three percent of adults with intellectual/ developmental disabilities have mild or moderate intellectual deficits and may be able to live independently. About 75% of young adults with intellectual/developmental disabilities live with their parent/guardian, however, as they and their parent's age, only 25% (aged 51-62 years) remain in their parent/guardian home. The proportion of the U.S. aged population is growing significantly; between 2021 and 2050 the number of Californians aged 55+ years is expected to increase by 70%. Californians in this age group will experience increasing rates of age-related disabilities and chronic health conditions that are associated with longer lifespans.

Adults overwhelmingly express interest in aging in place, which has strong implications for supply and demand in relation to California's housing shortage. There is also increasing interest in and demand among adults with intellectual/developmental disabilities and their families for more affordable independent living and supportive housing choices.

These trends represent major opportunities for innovative design and development of community projects that encourage healthy aging and prolong independent living.



**LOCAL LAND USE CONTEXT** | The COMMUNITY FOR HEALTH AND INDEPENDENCE is located adjacent to the existing and planned communities of Folsom and El Dorado Hills.







| PART FOUR |

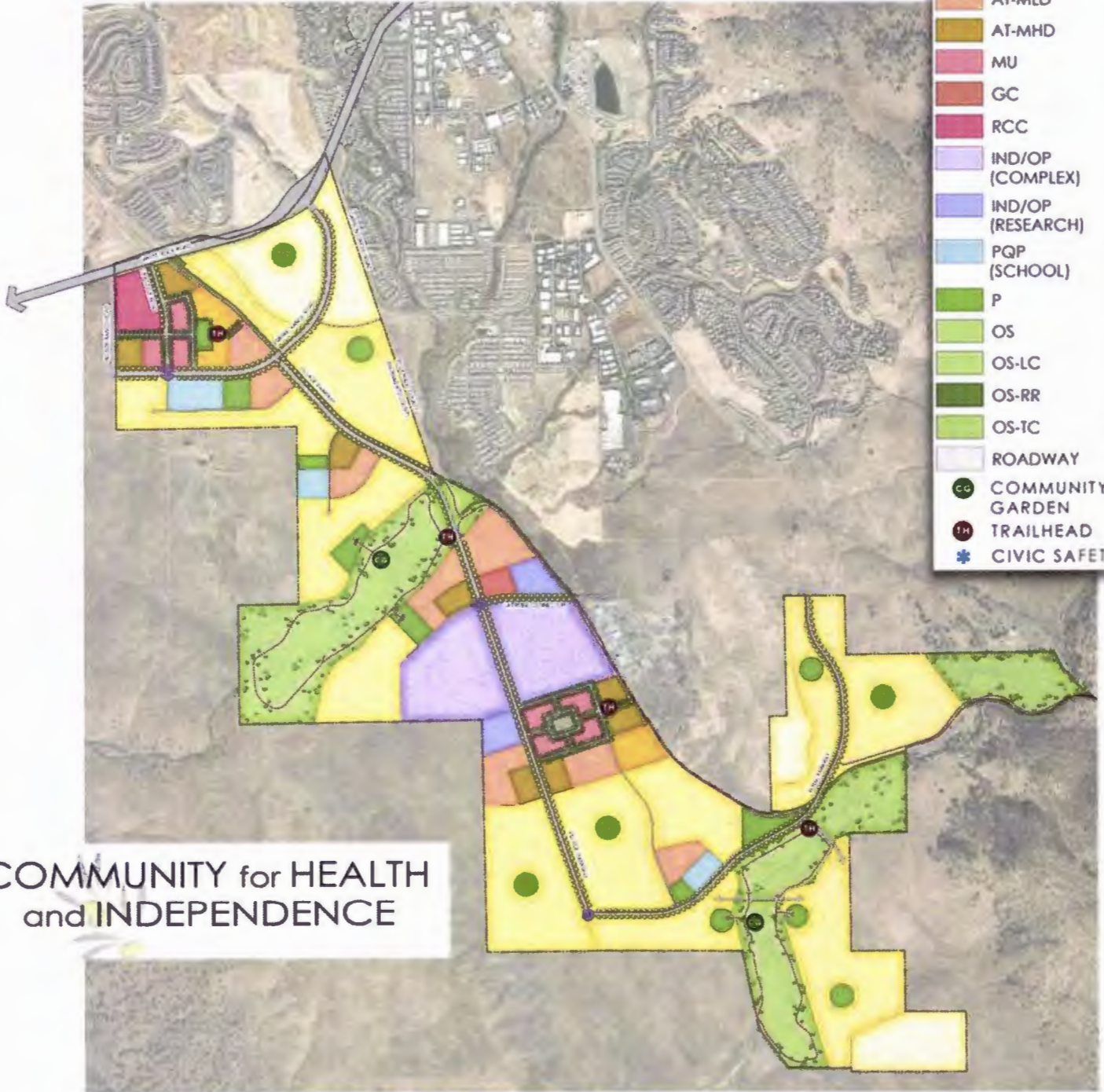
LAND USE MASTER PLAN



**LAND USE REGULATION** | Discussed here is the COMMUNITY FOR HEALTH AND INDEPENDENCE MASTER PLAN for the entire planned community. For land use details specific to the Folsom and El Dorado County portions of the MASTER PLAN, please refer to PART SEVEN of this document.

The MASTER PLAN land use designations mirror those used in the Folsom Plan Area Specific Plan and are described herein.

**THE COMMUNITY FOR HEALTH AND INDEPENDENCE MASTER PLAN**



COMMUNITY for HEALTH and INDEPENDENCE

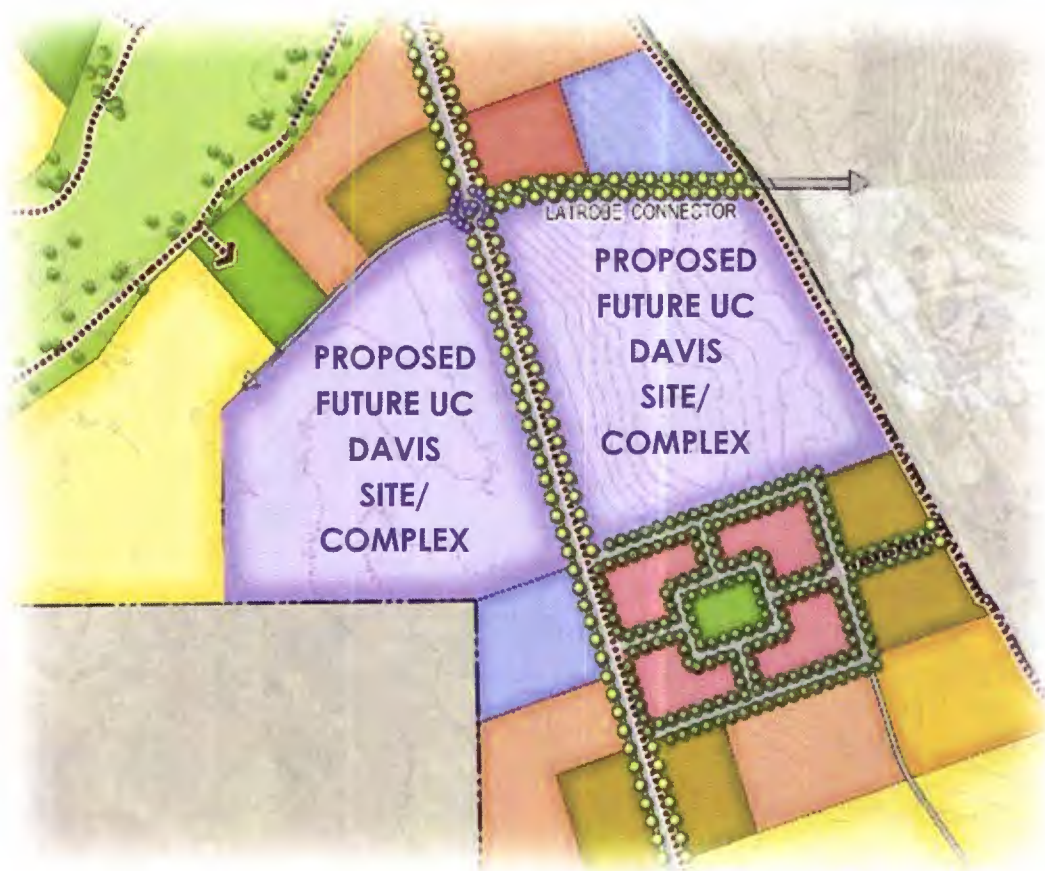
**A COLLECTION OF PLACES** | As introduced in the Plan's Vision, the Plan is conceived as a well-connected collection of PLACES. These Places, together, account for the locations that support the social and economic habits of the diverse residents within the community at large. The COMMUNITY FOR HEALTH AND INDEPENDENCE is designed to include FIRST PLACES, SECOND PLACES, and THIRD PLACES which together form a complete community. Additionally, and unique to THE COMMUNITY, the Plan includes EXCEPTIONAL PLACES,

**EXCEPTIONAL PLACES** | *Places We Research, Discover, Cultivate, Adapt, Support*

Exceptional Places refers to the 200-acre UC Davis Teaching, Research, and Health Complex located at the heart of the MASTER PLAN. The UC Davis Site/Complex is proposed to facilitate learning (for researchers, students, and residents) and provide opportunities to conduct lifestyle and health research that will expand knowledge about effective community design and promote healthy aging and longevity.

The UC Davis Site/Complex is anticipated to include many components, which may include but are not limited to the following. Details on the facilities and services to be provided are in the early stages of planning and yet to be determined by the University.

- Research/Learning Facilities
- Healthcare Facilities
- Clinical Space
- Performing Arts Opportunities
- Specialty Care Housing & Skilled Nursing Care
- Mobile Laboratory/Urgent Care Services
- Community Outreach, Education, & Support Services (including At-Home Care-Giver Training)
- Research Gardens/Community Gardens
- Community Center
- Innovative Transit Options



**FIRST PLACES | Places We Live, Thrive, Grow** | FIRST PLACES refers to our homes; this is where we begin and end each day, our 'home base'. FIRST PLACES are the residential areas of the Plan that provide safe refuge and spaces in which to nurture, care for, and grow us and our families. Multi-generational, age-targeted and neuro-diverse development are allowed in all residential land uses. "AT" labeled sites are specifically-designated for Age-Targeted development.

**Low Density**

**Residential** | Low density residential includes designations for Single Family (**SF 1-4du/ac**) and Single-Family High Density (**SFHD 4-7du/ac**).

**Medium Density**

**Residential** | Medium density residential includes designations for Multi-Family Low Density (**MLD 7-12du/ac**) and Multi-Family Medium Density Residential (**MMD 12-20du/ac**).

**High Density**

**Residential** | High density residential includes a designation for Multi Family High Density (**MHD 20-**

**30du/ac**). High density residential is intended for multi-family attached units offered as market-rate or affordable housing.

**Village Mixed Use**

| Mixed-use (**MU**) designated sites include retail, office, services (**0.5 FAR**), and residential uses (**9-30du/ac**) in a supportive urban setting to promote walkability and independence. Block lengths are short, and sites are laid out in a grid pattern to promote walkability and wayfinding. Age-targeted and physical/neuro-diverse development are allowed in mixed-use areas.



**SECOND PLACES | Places We Work, Do Business, Shop |** SECOND PLACES refers to our workplaces and places of commerce; this is where we go when we leave our homes to earn a living and provide for ourselves and our families. Second Places are the employment, shopping, and service areas of the Plan that provide the economic engine of the community which, in turn, provides the financial means to promote living.

**Village Mixed Use |** Mixed-use (**MU**) designated sites include retail, office, services (**0.5 FAR**), and residential uses (**9-30du/ac**) in a supportive urban setting to promote walkability and independence. Block lengths are short, and sites are laid out in a grid pattern to promote walkability and wayfinding. Village core areas with adjacent parks will be designed to create synergies between land uses, such as locating coffee shops with outdoor seating near parks.

**Commercial + Research |** The Plan includes General Commercial (**GC**) and Regional Commercial (**RC**) areas for neighborhood retail and a Lifestyle Center, as well as Industrial/Office Park (**IND/OP**) areas intended for Research and Development.

**UC Davis Site/Complex |** The Plan includes a large complex for UC Davis (**IND/OP**) that is proposed to serve as a center for the study of aging and longevity. This complex may also provide outreach and support services to the community.

**Schools |** Elementary schools and a middle school (**PQP**) are sited within neighborhoods and will provide an employment opportunity within the community.

**Civic Safety |** Law enforcement and fire protection services are planned in the MU Village area and provide additional employment opportunities in the Plan Area.



**THIRD PLACES | Places We Play, Explore, Learn** | THIRD PLACES refers to our places of recreation, education, and social interaction; this is where we go when we leave our homes and workplaces to gain enrichment of our minds, bodies, and souls. Third Places are the parks, open spaces, schools, and community gathering areas of the Plan that provide the health, well-being, and education means to promote respect and inclusion in the community.

**Parks + Open Space** | Parks (**P**) are located throughout the Plan Area and provide places for passive activity and active programming. Open space (**OS**) areas are provided to preserve natural areas for flood control and species conservation, as well as for detention and retention basins. Note: parks that are shown as 'circles' are placeholders in the MASTER PLAN; actual park size and shape will be determined at time of small lot tentative map for the surrounding neighborhood. Park features and playgrounds will be designed to meet the universal needs of an age, physically, and neurologically diverse population. Parks, open spaces, and landscape corridors should provide opportunities, where appropriate, for inclusion of edible landscape plants to offer easy accessibility to healthy foods.

**Schools** | Elementary schools and a middle school (**PQP**) are sited within neighborhoods to serve the educational needs of K-8 students. High school students are envisioned to attend existing and planned high schools in the local school districts. Further coordination with the school districts is necessary to address the needs of the community.

**Places of Worship** | Places of worship are proposed to be permitted throughout the Plan Area in residential and commercial uses with a Conditional Use Permit.







| PART FIVE |  
MOBILITY PLAN



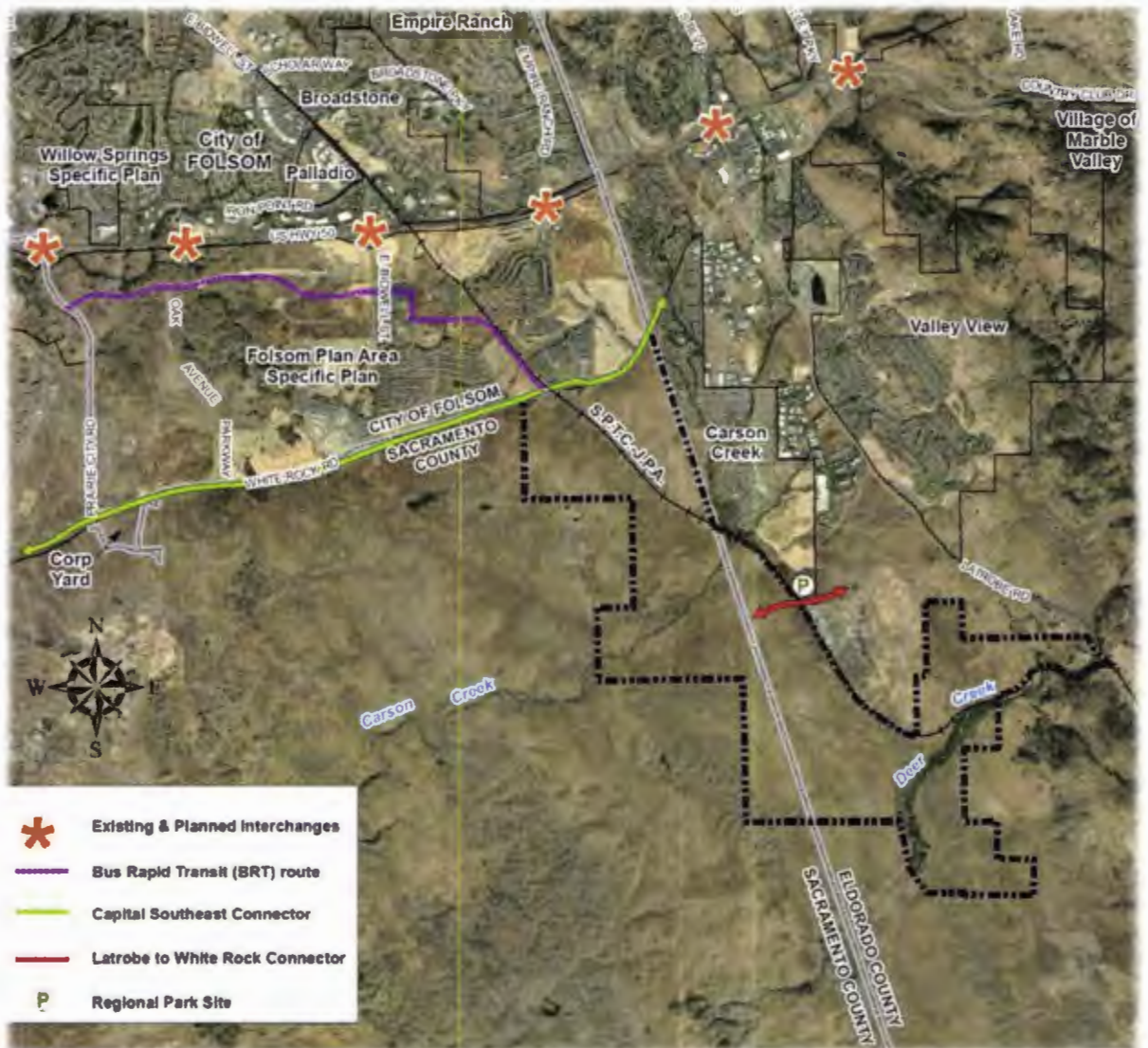
**TRANSPORTATION SETTING** | Key to the Plan is the development of an integrated approach to mobility and circulation such that provided transportation routes are direct, efficient, logical, and practical. Healthy mobility offers alternatives to driving for daily goods and services and promotes walking and biking as a way of life.

**HIGHWAY 50 INTERCHANGE ACCESS** | Access to the COMMUNITY FOR HEALTH AND INDEPENDENCE from Highway 50 is provided from multiple highway interchanges including Prairie City Road, Oak Avenue Parkway (planned), Bidwell Street, Empire Ranch Road (planned), Latrobe Road, and Silva Valley Parkway.

**CAPITAL SOUTHEAST CONNECTOR** | White Rock Road is located along the northern boundary of THE COMMUNITY.

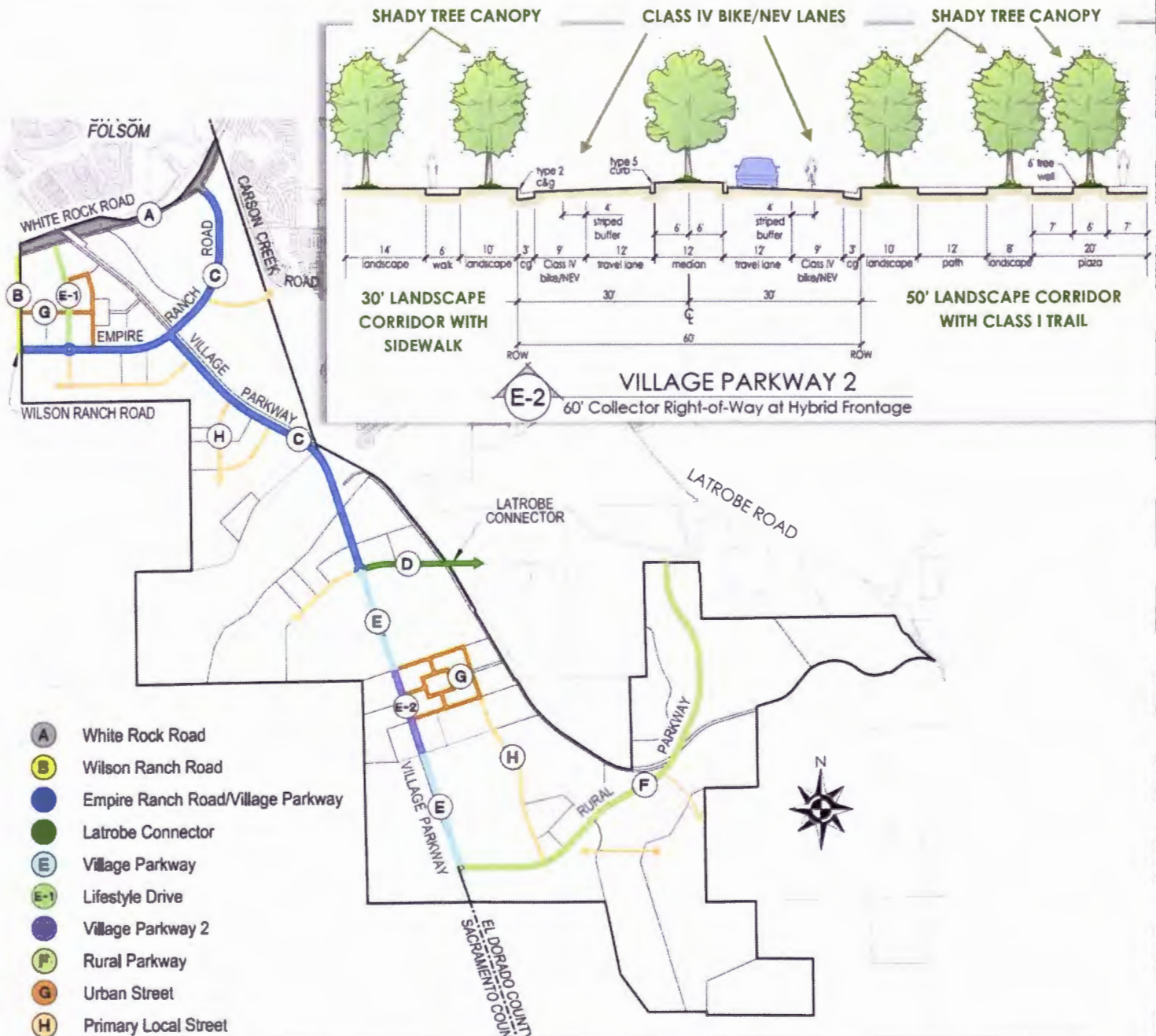
The Capital Southeast Connector is planned to extend from Highway 99 in Elk Grove to Latrobe Road in El Dorado County. This expressway features traditional signal-controlled intersections and grade-separated urban interchanges intended to facilitate efficient traffic movements.

The Project Proponent is coordinating with the SE Connector JPA and local agencies regarding project access details.



**LATROBE ROAD TO WHITE ROCK ROAD CONNECTOR** | Regional transportation planning efforts identified the potential for a Latrobe Road to White Rock Road connector that would facilitate east-west access and ultimately improve access to Highway 50, through THE COMMUNITY. Design of the Plan Area accommodates the Latrobe Road to White Rock Road connector by linking Plan Area roadways at the heart of the Plan Area to an approved off-site irrevocable offer of dedication (IOD) for a roadway at the south side of the proposed regional park site in the approved Carson Creek project.

**BUS RAPID TRANSIT (BRT)** | A Bus Rapid Transit (BRT) route is provided in the Folsom Plan Area Specific Plan that extends from Prairie City Road to White Rock Road. This BRT route is also shown extending south of White Rock Road in THE COMMUNITY along the Sacramento Placerville Transportation Corridor (SPTC rail corridor) to an undetermined location within the Plan Area. Details of a potential future extension of BRT will be defined in the future.



**PLANNED MOBILITY SYSTEM** | The mobility plan for the COMMUNITY FOR HEALTH AND INDEPENDENCE incorporates multiple opportunities for travel routes for autos, pedestrians, bicyclists, and other motorized personal vehicles.

**COMMUNITY MICRO-TRANSIT** | An on-demand ride system is anticipated in THE COMMUNITY which will provide transportation options that allow residents to continue to be mobile and active in the community which will help to prevent isolation and help allow residents to remain independently in their homes longer.

**ROADWAYS** | Primary access to THE COMMUNITY is from White Rock Road on the north, and Latrobe Road on the East. The Empire Ranch Road intersection at White Rock Road will be initially constructed as a signalized at-grade intersection; however, it is planned to accommodate a future grade-separated urban interchange. Additional access to the Plan Area is planned at White Rock Road between Wilson Ranch Road and the SPTC railroad crossing as well as via a future Latrobe Road Connector.

**Autonomous Vehicles** | Autonomous vehicle technology will continue to be developed and may be accommodated within the Plan Area roadway network.

**On-Street Bike Lanes** | Class IV buffered on-street bike lanes are provided on major arterial and collector roads. Additionally, Class II bike lanes are provided on minor collector and primary residential streets. Class III bike routes are provided on all local residential and urban streets.

**NEV Lanes** | Neighborhood Electric Vehicles (NEVs) may be part of the Plan Area and may be allowed on all Plan Area roadways. Where roadway speeds are 35mph or greater, the Class IV buffered bike lanes will also serve as shared neighborhood electric vehicle (NEV) lanes. Where travel speeds are less than 35mph, NEVs will share the travel lanes with auto traffic.



**TRAILS + BIKEWAYS** | Trails and bikeways play a major role in the health of the COMMUNITY FOR HEALTH AND INDEPENDENCE and they are proposed to be located within the Open Spaces found in this plan. Walking is reported as the number one form of exercise in the United States and promotes both physical and mental wellness. Creating places in which to walk and ensuring comfortable and efficient travel encourages people to walk or bike to work and to get their daily goods and services.

Benefits from daily walking include improved cardiovascular fitness, lower blood pressure, stronger muscles, and bones (built up by walking regularly), decreased stress, improved social connectivity, and increased community involvement.



**Landscape Corridors with Class 1 Trails** | A 30'-50' landscape corridor is provided along the major roadways and will incorporate a wide sidewalk on one side (within the 30' landscape corridor) and a Class I trail on the other side (within the 50' landscape corridor). The Class I trails are an extension of the Class I trails provided in the Folsom Plan Area on Savannah Parkway, Empire Ranch Road, and White Rock Road.



**Railroad Trail Corridor** | A 30'-50' Class I trail corridor is provided along one side of the majority of the Sacramento Placerville Transportation Corridor (SPTC) railroad corridor. This trail corridor will offer opportunities for recreation and social gathering, as well as community gardens.



**Mixed-Use Village Sidewalk Plazas** | Within mixed-use areas, traditional streetside sidewalks will give way to wide 'sidewalk plazas' with tree wells which will create spaces for outdoor dining and informal gathering with bench seating and other outdoor furniture. Village streets are intended to activate lively storefronts and create passive gathering spaces for walkers, shoppers, and residents.



**Urban Street Sidewalks** | Urban streets are in the MU Village areas where block lengths are short, and streets are narrow and walkable. These streets feature attached wide sidewalks with tree wells, planters, and fixed seating.



**Safe Routes to School** | The Plan provides street-adjacent sidewalks and neighborhoods will be designed to create street layouts that lead to schools and parks. Additionally, Class III shared bike routes will be provided on all residential streets where Class II and Class IV on-street bike lanes are not designated.





| PART SIX |  
UTILITY PLAN





**UTILITIES + SERVICES SETTING** | Key to the Plan is the development of an integrated approach to utility infrastructure and public services such that buildout of the COMMUNITY FOR HEALTH AND INDEPENDENCE may be accomplished sustainably.

**WATER** | With the proposed annexation of the Sacramento County portion of THE COMMUNITY to the City of Folsom, the Project Proponent will work closely with the City to provide water for its portion of the Plan Area (WEST PLAN AREA). Water demands needed to serve the West Plan Area will have no adverse impact to The City's existing surface water rights.

To serve water to the El Dorado County portion of THE COMMUNITY, the eastern portion of the project (EAST PLAN AREA) is proposed to annex to EID through a LAFCO process and approval of the EID Board.



Additional water service options for THE COMMUNITY are also being investigated, including utilizing the region's larger water supply system through one or more cooperative programs by and between the local water purveyors. If feasible, a cooperative water service program could allow for more creative and efficient provision of water service to the Plan Area.

To reduce potable water demands within the Plan Area, it is envisioned that THE COMMUNITY would include facilities to allow recycled water use within the Plan Area. A "purple pipe" system could be installed in the Plan Area to deliver recycled water to irrigated areas within the project.

**WASTEWATER** | Wastewater and recycled water service options for THE COMMUNITY are being studied. Adjacent wastewater purveyors (including City of Folsom, Sacramento Regional Sanitation District, and El Dorado Irrigation District) are potential service providers that will be appropriately analyzed. In addition, a cooperative wastewater and recycled water service program, by and between the local wastewater purveyors, could allow for more creative and efficient provision of wastewater service to the Plan Area.



**ELECTRICITY** | SMUD is the electricity provider for the Sacramento County/City of Folsom portion of THE COMMUNITY and PG&E is the electricity provider for the El Dorado County portion of the Plan Area. The Project Proponent will coordinate with SMUD and PG&E on innovative ways to serve the Plan Area.

**NATURAL GAS** | Natural gas services, if provided to the Plan Area, would be provided by PG&E. Provision of natural gas services to the Plan Area is to be determined.

**PHONE, CABLE, BROADBAND, + INTERNET** | In addition to providing high-speed internet, traditional phone, cable, and broadband services will be provided to THE COMMUNITY. Easy and accessible access to the internet, and other technologies, are key to the success of THE COMMUNITY daily way of life. The Project Proponent is working with UC Davis and their Partners, in collaboration with local internet service providers, to identify reliable and redundant sources for internet and technology services.

**CIVIC SAFETY** | Law enforcement, fire, and ambulance emergency response services will be provided to the Plan Area. Opportunities exist for collaboration with and between various law enforcement agencies, fire districts, and other urgent responders. Conceptual locations for safety service response are shown on the LAND USE MASTER PLAN in the Mixed-Use areas of the Plan in both the West and East areas of the Plan; details of which will be determined during the development of the Plan through coordination with the appropriate agencies.

**DRAINAGE** | Drainage will generally be managed through a series of onsite drainage infrastructure (e.g., drainpipes, water quality basins, detention, and retention basins, etc.) such that the Project adheres to federal, state, and local regulations. Locations and size needs of drainage facilities are being studied and are not yet shown on the LAND USE Master Plan.





# | PART SEVEN |

## IMPLEMENTATION DETAILS



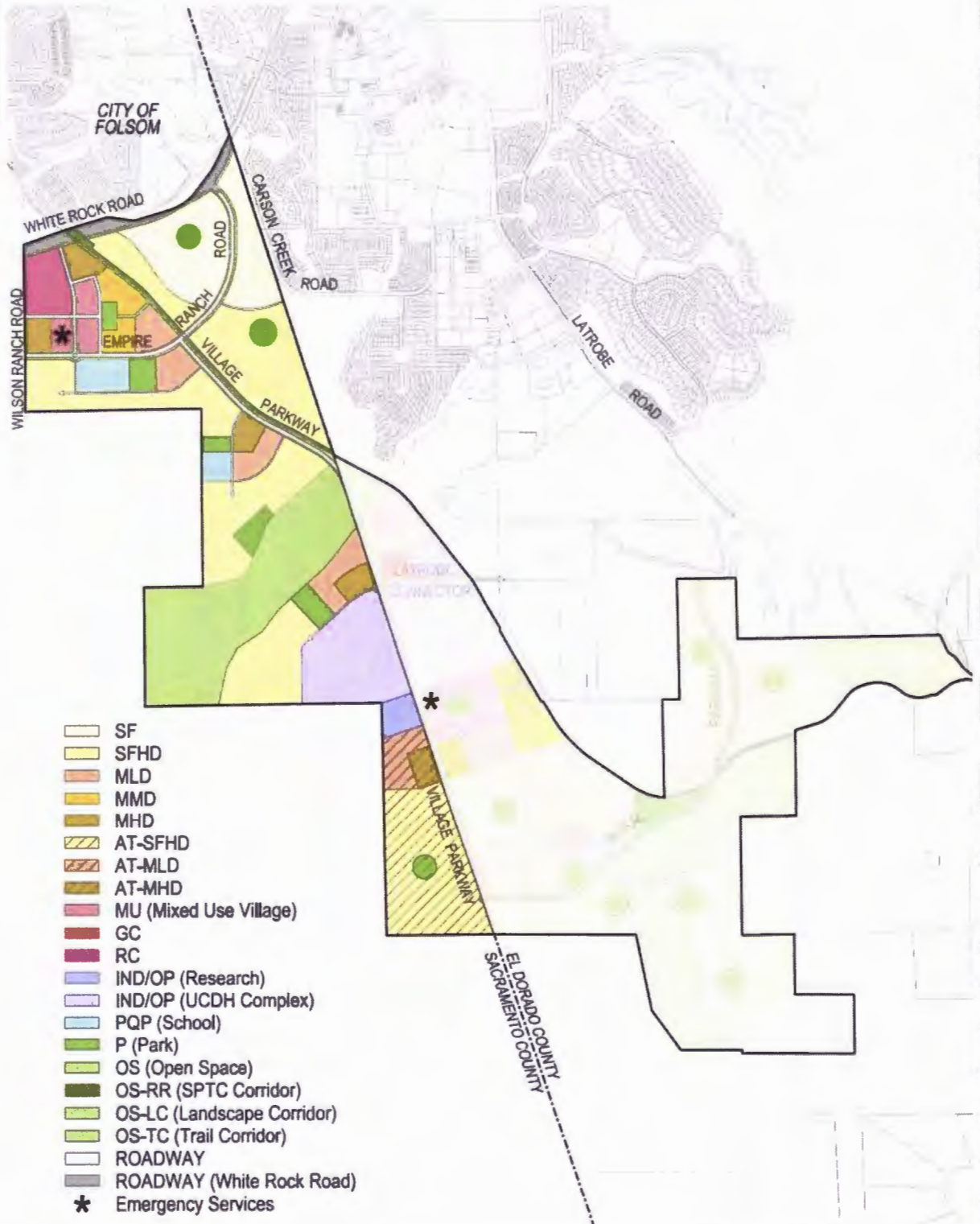
The lands of the COMMUNITY FOR HEALTH AND INDEPENDENCE are in both the County of Sacramento (WEST PLAN AREA) and El Dorado County (EAST PLAN AREA), described separately below.

THE WEST PLAN AREA

THE COMMUNITY FOR HEALTH AND INDEPENDENCE

WEST PLAN AREA | THE WEST PLAN AREA is proposed in the City of Folsom.

THE WEST PLAN AREA Land Use Plan



**THE WEST PLAN AREA**

**ENTITLEMENTS + ENVIRONMENTAL REVIEW**

Project entitlements will be sought in the City of Folsom and are

anticipated to include the following.

- General Plan Amendments
- Prezone/Rezone
- Specific Plan
- Project-Level Environmental Impact Report
- Annexation /Sphere of Influence Amendment (Lands)
- Annexations/Detachments from Special District

**GENERAL PLAN** | At the time of initial project application, the portion of the Plan Area in Sacramento County was designated General Agriculture (80ac.) as shown on the County Assessors records. This area is proposed to be annexed to the City of Folsom and receive land use designations as determined by the City.

**ZONING** | At the time of initial narrative submittal, the portion of the Plan Area in the County of Sacramento was zoned General Agriculture (80ac.) as shown on the County Assessors records. This area is proposed to be annexed to the City of Folsom and receive zoning designations consistent with the City of Folsom Municipal Code, Specific Plan District.

**LAFCo** | LAFCo actions will be required to amend the County of Sacramento boundary and City of Folsom Sphere of Influence such that the lands within the County of Sacramento may be annexed into the City of Folsom. Additional LAFCo actions will also be required for attachment/detachment to/from various special districts.

**THE WEST PLAN AREA Land Use Summary Table**

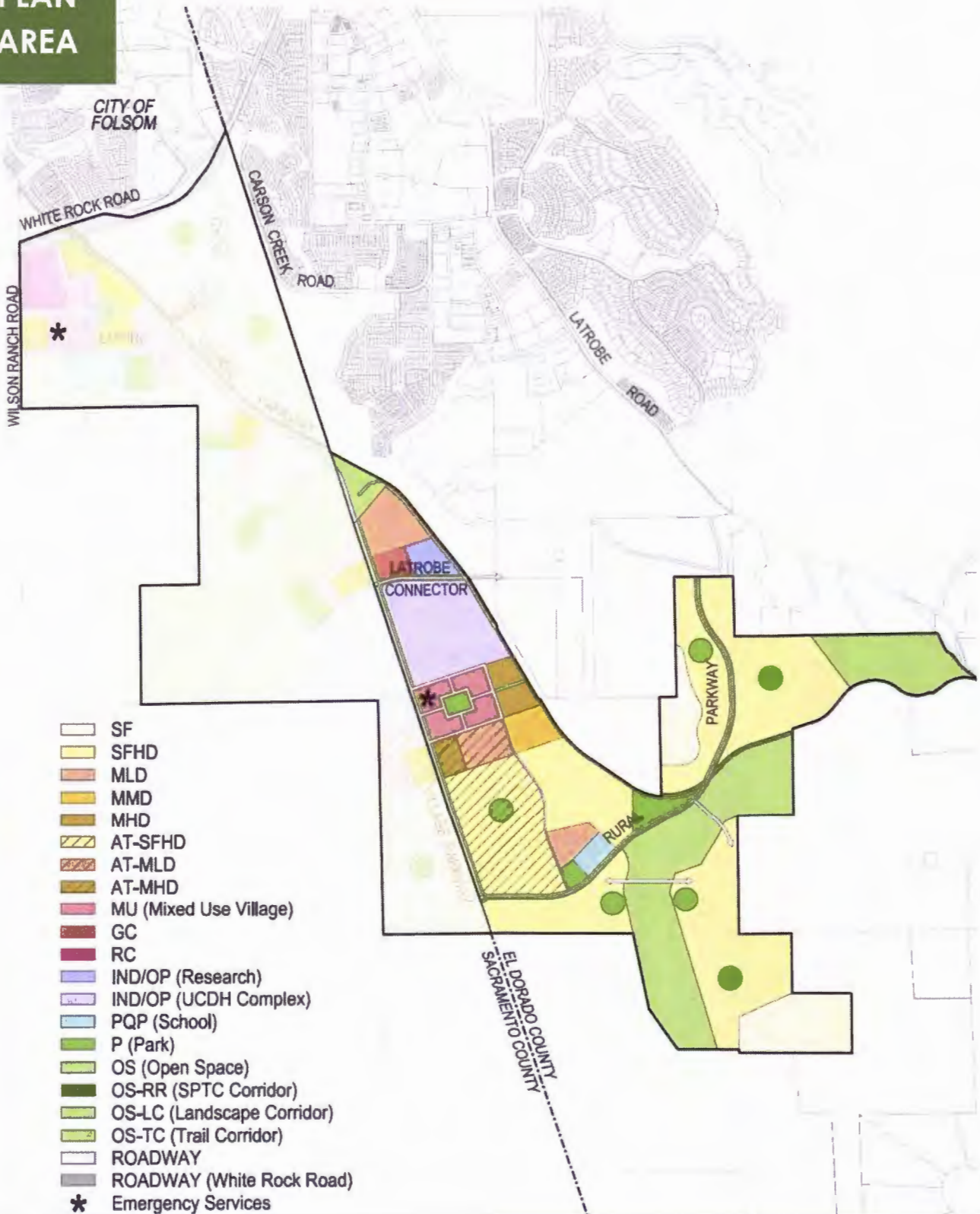
WEST PLAN AREA		
Land Use	Gross Area (Acres)	Dwelling Units
<b>Residential</b>		
SF (1-4du/ac) Single Family	131.9	369
SFHD (4-7du/ac) Single Family High Density	379.3	1669
MLD (7-12du/ac) Multi-Family Low Density	66.9	481
MMD (13-20du/ac) Multi-Family Medium Density	25.9	311
MHD (20-30du/ac) Multi-Family High Density	40.7	651
<b>Subtotal Traditional Residential</b>	<b>644.7</b>	<b>3,481</b>
<b>Age-Targeted Residential</b>		
AT-SFHD (4-7du/ac) Age-Targeted Single Family High Density	136.3	600
AT-MLD (7-12 du/ac) Age-Targeted Multi-Family Low Density	22.4	161
AT-MHD (20-30du/ac) Age-Targeted Multi-Family High Density	10.0	160
<b>Subtotal Age-Targeted Residential</b>	<b>168.7</b>	<b>921</b>
<b>Mixed-Use</b>		
MU (9-30du/ac & 0.5 FAR) Mixed-Use Village <i>(Assumes 25% Residential /75% Commercial)</i>	24.1	108
<b>Subtotal Mixed-Use Village Residential</b>	<b>24.1</b>	<b>108</b>
<b>Commercial, Employment &amp; Civic</b>		
RC (0.5 FAR) Regional Commercial Lifestyle Center	30.1	
IND/OP Complex (1.0 FAR) Industrial/Office Park UCDH Complex	100.0	
IND/OP Research (0.5 FAR) Industrial/Office Park Research	15.0	
PQP (0.5 FAR) Public/Quasi-Public Public Schools	30.0	
<b>Subtotal Commercial &amp; Employment</b>	<b>175.1</b>	
<b>Parks &amp; Open Space</b>		
P Parks	56.6	
OS Open Space	233.2	
OS-RR Open Space Rail Road Parcels	13.0	
OS Open Space Landscape/Trai Corridor	36.8	
<b>Subtotal Parks &amp; Open Space</b>	<b>339.6</b>	
<b>Circulation</b>		
Major Circulation	41.8	
SEC R.O.W. (White Rock Road)	22.5	
<b>Subtotal Circulation &amp; Misc</b>	<b>64.2</b>	
<b>WEST PLAN AREA TOTAL</b>	<b>1,416.32</b>	<b>4,511</b>
Land Use Designations and Park & Population Generation Factors are based on the Folsom Plan Area Specific Plan.		

THE EAST PLAN AREA

THE COMMUNITY FOR HEALTH AND INDEPENDENCE

EAST PLAN AREA | THE EAST PLAN AREA is proposed in El Dorado County.

THE EAST PLAN AREA Land Use Plan



**THE EAST PLAN AREA**

**ENTITLEMENTS + ENVIRONMENTAL REVIEW**

Project entitlements will be sought in El Dorado County and are

anticipated to include, but are not limited to, the following.

- General Plan Amendments
- Rezone
- Specific Plan
- Project-Level Environmental Impact Report
- Annexations/Detachments from Special Districts

**GENERAL PLAN** | The El Dorado County General Plan sets forth the general guidelines for orderly growth and development within the County of El Dorado. At the time of narrative submittal application, the portion of the Plan Area in El Dorado County was designated Agricultural Lands and Rural Residential on the El Dorado County General Plan Land Use Diagram. The Proposed General Plan designation for the Plan Area is anticipated to be "Adopted Plan" which defers land use guidance and governance to a Specific Plan regulation.

**ZONING** | The El Dorado County Zoning Ordinance (Title 130 El Dorado County Code) includes all the regulatory ordinances and certain administrative ordinances of El Dorado County and establishes the standards for the enforcement of various code articles. The El Dorado County Land Development Manual (LDM) provides design standards and information regarding the development of land in the County. At the time of narrative submittal application, the portion of the Plan Area in El Dorado County is zoned Agricultural Grazing (40ac.), Rural Land (40ac.), and Rural Land (80ac.) as shown on the County Assessors records. The Proposed zoning regulation for the Plan Area is anticipated to defer land use guidance and governance to Specific Plan regulation.

**THE EAST PLAN AREA Land Use Summary Table**

EAST PLAN AREA		
Land Use	Gross Area (Acres)	Dwelling Units
<b>Residential</b>		
SF (1-4du/ac) Single Family	105.3	295
SFHD (4-7du/ac) Single Family High Density	490.2	2157
MLD (7-12du/ac) Multi-Family Low Density	46.8	337
MMD (13-20du/ac) Multi-Family Medium Density	19.3	232
MHD (20-30du/ac) Multi-Family High Density	19.5	311
<b>Subtotal Traditional Residential</b>	<b>681.1</b>	<b>3,332</b>
<b>Age-Targeted Residential</b>		
AT-SFHD (4-7du/ac) Age-Targeted Single Family High Density	119.5	526
AT-MLD (7-12 du/ac) Age-Targeted Multi-Family Low Density	20.0	144
AT-MHD (20-30du/ac) Age-Targeted Multi-Family High Density	10.0	160
<b>Subtotal Age-Targeted Residential</b>	<b>149.5</b>	<b>830</b>
<b>Mixed-Use</b>		
MU (9-30du/ac & 0.5 FAR) Mixed-Use Village <i>(Assumes 25% Residential / 75% Commercial)</i>	32.0	144
<b>Subtotal Mixed-Use</b>	<b>32.0</b>	<b>144</b>
<b>Commercial, Employment &amp; Civic</b>		
GC (0.5 FAR) General Commercial	10.0	
IND/OP Complex (1.0 FAR) Industrial/Office Park UCDH Complex	100.0	
IND/OP Research (0.5 FAR) Industrial/Office Park Research	15.0	
PQP (0.5 FAR) Public/Quasi-Public Public Schools	10.0	
<b>Subtotal Commercial &amp; Employment</b>	<b>135.1</b>	
<b>Parks &amp; Open Space</b>		
P Parks	53.4	
OS Open Space	306.6	
OS-RR Open Space Rail Road Parcels	4.5	
OS Open Space Landscape/Trail Corridor	51.4	
<b>Subtotal Parks &amp; Open Space</b>	<b>416.0</b>	
<b>Circulation</b>		
Major Circulation	46.2	
<b>Subtotal Circulation &amp; Misc</b>	<b>46.2</b>	
<b>EAST PLAN AREA TOTAL</b>	<b>1,459.9</b>	<b>4,306</b>
<b>Land Use Designations and Park &amp; Population Generation Factors are based on the El Dorado County General Plan.</b>		



**NEXT STEPS** | The Community for Health and Independence will implement an integrated Master Plan with Specific Plans in each jurisdiction. Specific Plans are anticipated to be prepared and processed within their respective areas of jurisdiction. The land area within Sacramento County (WEST PLAN AREA) is proposed to be processed through the City of Folsom (annexed to Folsom) and will comply with City of Folsom requirements and related LAFCo process. The land area within El Dorado County (EAST PLAN AREA) will be processed by El Dorado County and will comply with El Dorado County requirements. While advancing an integrated master planned community, the West Plan Area Specific Plan and the East Plan Area Specific Plan will be designed to advance the General Plan, ordinances, and objectives of each jurisdiction. To ensure a comprehensive environmental review that considers the whole of the integrated master planned community, it is anticipated that the City of Folsom and El Dorado County will coordinate and prepare a single environmental impact report.

**PRELIMINARY REVIEW + PROJECT FEEDBACK** | The PROJECT NARRATIVE is intended to provide an overview of the project vision and the research underlying its comprehensive and innovative design and project objectives. Preliminary review applications will be submitted with each jurisdiction and include initial project exhibits and information. After incorporating feedback received from each jurisdiction and the public during the preliminary review process, subsequent applications as required by each jurisdiction will be submitted.

**PUBLIC OUTREACH PLAN + COMMUNITY INVOLVEMENT** | Agency and community feedback on the development plan will be sought throughout the application process. The preliminary application will include community outreach plans to ensure early, meaningful, and transparent public outreach throughout the application process in collaboration with the City of Folsom and El Dorado County. In addition to public hearings with the respective jurisdictions, the project will also offer informal informational meetings with surrounding communities.

**HOUSING DIVERSITY + REGIONAL HOUSING NEEDS ALLOCATION (RHNA)** | One of the project's core goals is to promote a holistically-designed community that will accommodate seniors and individuals with disabilities, empower more independent living, foster inclusivity, and integrate healthcare and services for residents. The project proposes a diverse and vibrant mix of housing and will fill critical housing needs within both jurisdictions, including housing for seniors and individuals with special needs and physical and/or developmental disabilities. The project will also address the significant need for affordable housing in each jurisdiction and is committed to including affordable housing for all income levels. Housing opportunities attractive to working families, multi-generational families, and first-time homebuyers are also planned within the project.

**FISCAL BENEFITS** | With a balanced and unique land use plan, the project applicant is committed to ensuring that the project provides a net fiscal benefit to the City of Folsom and El Dorado County. The commercial and mixed-use components of the project will provide a new, significant, diversified, and sustainable retail tax and sales tax base for the City of Folsom and El Dorado County and advance local retail development policies and objectives. In addition, strategically placed industrial/office park opportunities are planned near the 200-acre UC Davis research complex that will attract additional business integration. With design and amenities focused on wellness, the project will attract retail offerings and provide a unique experience distinct from and complimentary to the existing communities and regional retail options.

The project applicant will provide the necessary improvements and funding mechanisms to ensure that the infrastructure, facilities, and services for the project are provided without a negative fiscal impact to the City of Folsom, County of El Dorado, or their existing residents. These commitments include providing privately owned and maintained facilities within certain residential communities and establishing Community Facilities Districts and other funding mechanisms to ensure adequate maintenance and services at no cost to the City of Folsom, El Dorado County, or their residents.

**JOB OPPORTUNITIES + COMMUNITY BENEFIT |** The UC Davis research complex is envisioned to become a world-class center for the study of healthy aging that will also create diverse employment opportunities, including professional, medical, clinical, and research opportunities and supporting nursing and administrative positions, as well as employment opportunities outside the medical field with complimentary commercial uses. The employment-generating land uses are anticipated to provide an approximately 1.5:1 jobs-to-housing ratio.

Beyond revenue and job opportunities, the Community will become a center for wellness and healthy living that will allow residents throughout the City of Folsom and El Dorado County to obtain state-of-the-art medical facilities closer to home and enjoy public parks and gathering places, interconnected trails, and green spaces, farmers markets, and unique commercial and cultural offerings.



**EXPERT CONTRIBUTORS** | Alphabetized by last name.

- Len Abbeduto, Ph.D.** | Professor, Department of Psychiatry & Behavioral Sciences Director, UC Davis MIND Institute.
- Veronica Ahumada-Newhart, M.A., Ph.D.** | Assistant Professor, Department of Pediatrics, UC Davis Health.
- Bernadette Austin, M.S.** | Former Executive Director UCD Center for Regional Change, UC Davis.
- Desiree Backman, Dr.PH, M.S., R.D.** | Chief of the Prevention Policy & Practice Group at the University of California, Davis, Center for Healthcare Policy & Research.
- Michele (Mike) Barbato, Ph.D., P.E.** | Professor Structural Engineering and Structural Mechanics, UC Davis. | Director, Climate Initiative, CITRIS and the Banatao Institute
- Gale Berkowitz, Ph.D.** | Associate Director of CITRIS Health, UC Berkeley.
- Catherine Brinkley, Ph.D.** | Faculty Director UCD Center for Regional Change, UC Davis.
- Carl Blumstein, Ph.D.** | Executive Director of CITRIS Climate and the California Institute for Energy & Environment (CIEE), UC Berkeley.
- Gina Dokko, Ph.D.** | Professor, Graduate School of Management, UC Davis.
- Holly Jimison, Ph.D., F.A.C.M.I.** | Professor, Bouvé College of Health Sciences | Professor, Northeastern University Consortium on Technology for Proactive Care | Visiting Professor in Public Health Sciences at UC Davis.
- Neal Kohatsu, M.D., M.P.H., FACPM** | Health Strategist in the Prevention Policy & Practice Group within the Center for Healthcare Policy & Research | Volunteer Clinical Faculty, Department of Family & Community Medicine, UC Davis.
- David Lubarsky, M.D., M.B.A., F.A.S.A.** | Vice Chancellor of Human Health Sciences and CEO for UC Davis Health
- David Lindeman, Ph.D., M.S.W.** | Director, Health Initiative, The Center for Information Technology Research in the Interest of Society, UC Berkeley.
- Sabrina Loureiro, B.S.** | Project Policy Analyst, Center for Healthcare Policy & Research, UC Davis.
- Thomas S. Nesbitt, M.D., M.P.H.** | Emeritus Associate Vice Chancellor for Strategic Technologies & Alliances | Founding Director, Center for Health & Technology.
- Joy Melnikow, M.D., M.P.H.** | Professor, Family & Community Medicine | Former Director of the Center for Healthcare Policy & Research | Professor of Family & Community Medicine, UC Davis.
- Marykate Miller, M.S.** | Health Policy Analyst, Center for Healthcare Policy & Research, UC Davis.
- Misha Pavel, Ph.D.** | Professor, Khoury College of Computer Sciences | Professor, Bouvé College of Health Sciences | Professor, Northeastern University Consortium on Technology for Proactive Care | Visiting Professor in Public Health Sciences, UC Davis.
- Therese Pepper, Ph.D.** | Associate Director at the California Institute for Energy & Environment (CIEE) within the Center for Information Technology Research in the Interest of Society (CITRIS), UC Berkeley.
- Bahram Ravani, Ph.D., B.S., M.S.** | Professor, Department of Mechanical & Aerospace Engineering, UC Davis.
- Dominique Ritley, M.P.H.** | Senior Health Policy Researcher, Health Policy Analysis & Project Management, Center for Healthcare Policy & Research, UC Davis Health.
- Heather M. Young, Ph.D., R.N., F.A.A.N.** | Professor and Dean Emerita | National Director, Betty Irene Moore Fellowship Program for Nurse Leaders and Innovators
- Tod Stoltz, MBA.** | Director of Business Development, UC Davis Health.

*"I want this Project to give people the chance to live longer and healthier lives, in their own homes, and in their own communities.*



- Angelo K. Tsakopoulos, AKT

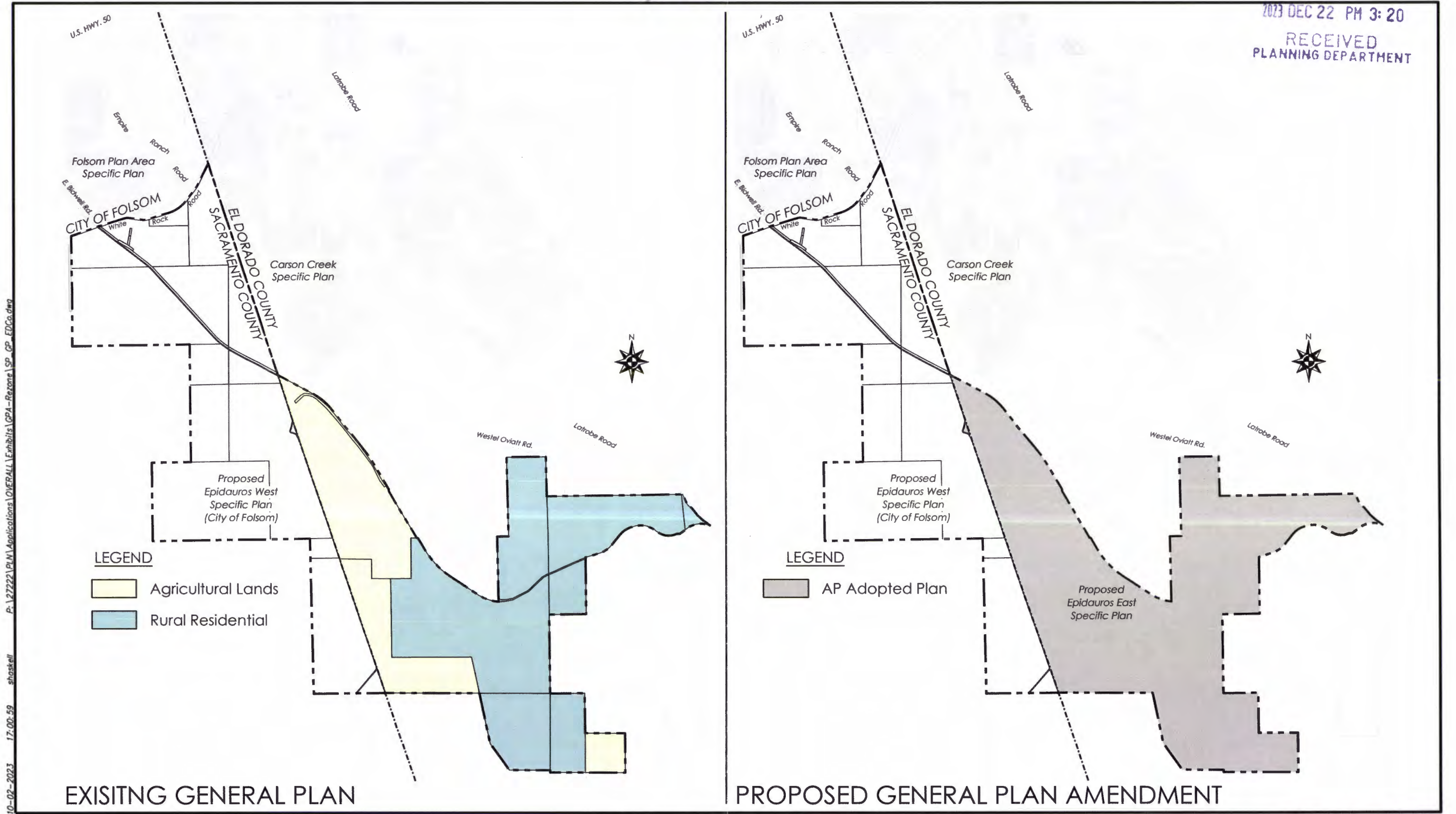
# COMMUNITY for HEALTH and INDEPENDENCE



# COMMUNITY for HEALTH and INDEPENDENCE



2023 DEC 22 PM 3:20  
RECEIVED  
PLANNING DEPARTMENT



10-02-2023 17:00:59 shaskell F:\27222\PLM Applications\OVERALL\Exhibits\GPA-Response\SP\_GP\_EDCo.dwg

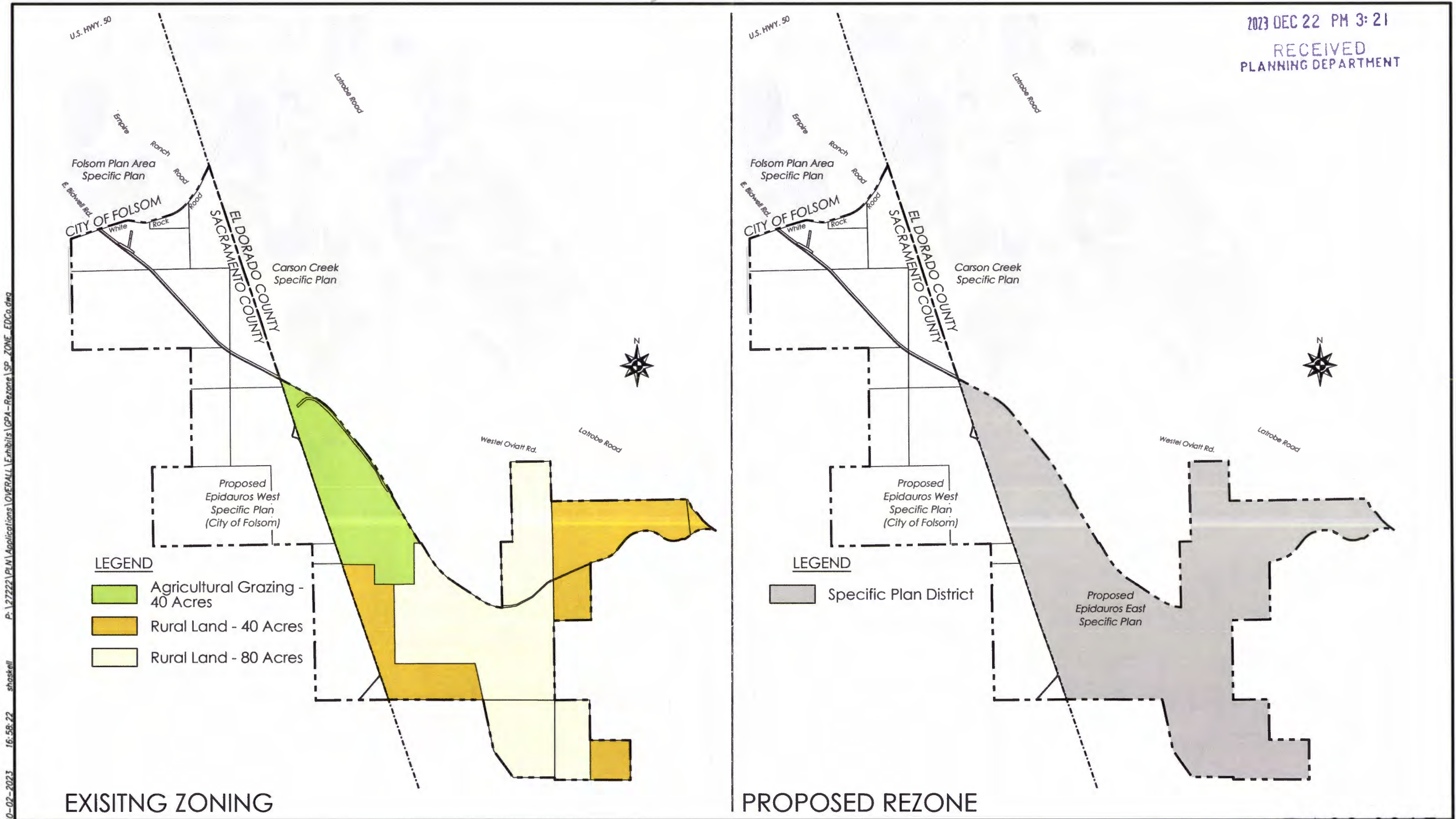
EXISTING GENERAL PLAN

PROPOSED GENERAL PLAN AMENDMENT

# COMMUNITY for HEALTH and INDEPENDENCE



2023 DEC 22 PM 3: 21  
RECEIVED  
PLANNING DEPARTMENT



10-02-2023 16:58:22 shaskell P:\27222\PLN\Applications\OVERALL\Exhibits\GPA-Reszone\SP\_ZONE\_EDCo.dwg

EXISTING ZONING

PROPOSED REZONE

EL DORADO COUNTY

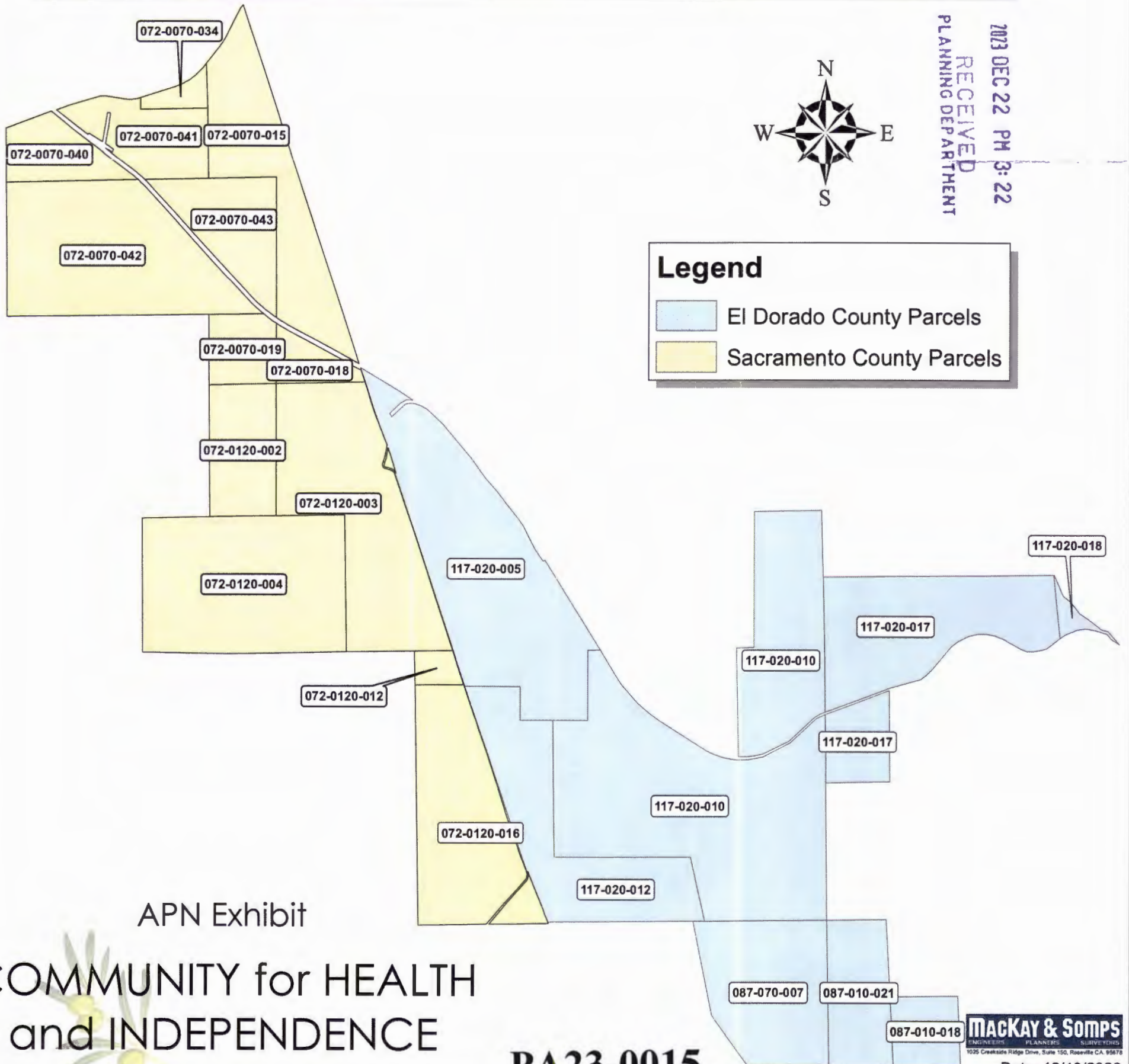
PA23-0015

EL DORADO COUNTY PARCELS

APN	OWNER_NAME	ACREAGE
087-010-018	AKT/KLOSS REGAS RANCH 50 & INVESTORS A CA LTD PRT	40.00
087-010-021	AKT DUNLAP RANCH INVESTORS, LLC	71.12
087-070-007	AKT DUNLAP RANCH INVESTORS, LLC	119.00
117-020-005	ARCADIAN SOUTH A CA LLC	286.70
117-020-010	AKT DUNLAP RANCH INVESTORS, LLC	536.00
117-020-012	REGAS RANCH INVESTORS CA LLC	168.00
117-020-017	AKT DUNLAP RANCH INVESTORS, LLC	228.75
117-020-018	AKT DUNLAP RANCH INVESTORS, LLC	12.43

SACRAMENTO COUNTY PARCELS

APN	OWNER	ACREAGE
072-0070-015	AKT MOSHER 150 INVESTORS, LLC, DAN AND SHERALYN DIRE FAMILY TRUST, JIM R. SILVA AND KAREN M.SILVA REVOCABLE TRUST	149.50
072-0070-018	ARCADIAN SOUTH LLC	24.00
072-0070-019	ARCADIAN SOUTH LLC	40.00
072-0070-034	AKT MOSHER 150 INVESTORS, LLC	13.10
072-0070-040	ARCADIAN HEIGHTS LLC	54.40
072-0070-041	ARCADIAN HEIGHTS LLC	68.80
072-0070-042	ARCADIAN HEIGHTS LLC	212.65
072-0070-043	ARCADIAN HEIGHTS LLC	76.80
072-0120-002	ARCADIAN SOUTH LLC	80.00
072-0120-003	ARCADIAN SOUTH LLC	220.00
072-0120-004	ARCADIAN SOUTH LLC	240.00
072-0120-012	ARCADIAN SOUTH LLC	16.86
072-0120-016	AKT/KLOSS REGAS RANCH INVESTORS - REGAS RANCH INVESTMENTS LLC	177.87



2023 DEC 22 PM 3:22  
RECEIVED  
PLANNING DEPARTMENT

**Legend**

- El Dorado County Parcels
- Sacramento County Parcels

APN Exhibit

COMMUNITY for HEALTH  
and INDEPENDENCE

PA23-0015

**MACKAY & SOMPS**  
ENGINEERS PLANNERS SURVEYORS  
1035 Creekside Ridge Drive, Suite 150, Roseville CA 95678  
Date: 12/19/2023