

4. NASEBY STREET - P60 PARKING RESTRICTION

General Manager responsible:	General Manager of City Environment
Officer responsible:	Transport & City Streets Manager
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PURPOSE OF REPORT

1. The purpose of this report is to seek the Board's approval for the implementation of a 60 minute parking restriction in Naseby Street outside number 5 (Plastic Surgery Clinic) (refer **attached** plan).

EXECUTIVE SUMMARY

2. The Council has received a request from the "Jesse Kenton-Smith Plastic, Reconstruction and Hand Surgery" located at 5 Naseby Street (just north of the Merivale Lane intersection), for a solution to the problem of clients having to park unreasonable distances from the clinic.
3. This request stems from surgery clients finding it difficult to find a car park in close proximity due, to the presence of parked cars associated with students attending the nearby Rangī Ruru Girls School. The surgery has very limited off street parking which is commonly used as a drop off point for clients that find walking too difficult.
4. Three options were considered including the "status quo".
5. The views of affected residents and Rangī Ruru School have been obtained.
6. The conversion of three spaces from unrestricted to P60 9am to 5pm, Monday to Friday is the most cost effective and practical solution to the problem.

FINANCIAL AND LEGAL CONSIDERATIONS

7. **Cost**
Two P60 signs and installation equates to less than \$500.
8. **Legal Considerations**

Land Transport Rule, Road User 2004, provides for the control of parking by way of restrictions of this type.

STAFF RECOMMENDATION

It is recommended that the Board agree:

That the parking of vehicles be limited to a maximum of 60 minutes, 9am to 5pm, Monday to Friday on the western side of Naseby Street from a point 18 metres north of the Merivale Lane intersection and extending 27.2 metres in a northerly direction.

CHAIRMAN'S RECOMMENDATION

That the above recommendation be adopted.

BACKGROUND ON ISSUES

9. The Council has received a request from the “Jesse Kenton-Smith Plastic, Reconstruction and Hand Surgery” located at 5 Naseby Street (just north of the Merivale Lane intersection) for more readily available kerb side parking for surgery clients. Students from the nearby Rangī Ruru Girls’ School will commonly park immediately outside the clinic for long periods during class time. This results in surgery clients having to park further along Naseby Street and walking back to the clinic. While this may be acceptable to some clients, others find the walk difficult and inconvenient.

CONSIDERATION OF OPTIONS

Three options were considered. These are outlined as follows;

- (a) Status Quo:

The problem is relatively minor and the effects are limited to a small business operating within a predominantly residential environment. There are also some effects on residential amenity and residential parking demands. However, leaving the situation as it is will continue to generate issues such as a lack of available kerbside parking for surgery clients and inconvenience issues for residents; the former will ultimately affect the viability of the business.

- (b) Stringent Controls by Rangī Ruru Staff:

This option would involve more stringent control of where students associated with the school can park. This in fact occurs at the moment. Discussions with the school reveal that girls are reminded to avoid parking outside the clinic and are also instructed to park on one side of Merivale Lane only. The difficulty is that students often forget, ignore or choose to exercise their right to park where they please unless otherwise restricted by law. The school is commended on their efforts to attempt to mitigate the adverse effects of student parking; however, the situation is recurring and requires a change of tack.

- (c) Convert three spaces outside the Clinic to P60:

This option would significantly increase the availability of spaces outside the clinic by reducing the potential for students to occupy the spaces. Typically students will require a greater length of stay. Therefore restricting parking to 60 minutes maximum would dissuade the use of these spaces for students but would suit clients of the surgery.

Option C is the preferred solution to this problem.

CONSULTATION

10. A letter describing the proposal was generated by the Clinic and distributed to four neighbouring properties. These being one either side of the clinic and two properties opposite. As the proposed restriction only relates to three spaces, this is considered an appropriate number of properties to consult with. All four letters were returned indicating support for the proposal. In addition to this Rangī Ruru Girls’ School was contacted. Discussions were held with the Deputy Principal who indicated that the proposal would address a longstanding problem. Apparently, the clinic has approached the school in the past requesting that students be discouraged from parking outside the clinic.

DISCUSSION

11. The implementation of parking restrictions to balance the conflicting demands for kerbside parking space has proved successful in other locations throughout the city. The main concern is the issue of shifting the problem or “parking migration” as it is commonly referred to. It is unlikely that this will create any significant adverse effects in this instance as the number of student cars displaced by the proposed restriction amounts to a maximum of three. Those residents most likely to experience an increase in kerbside parking have consented to the proposal.

CONCLUSION

12. Some clients of the Clinic, particularly the elderly and less mobile would benefit from more readily available parking opportunities in close proximity. Currently this is not possible due to the spaces immediately outside the Clinic being occupied for many hours during the day by vehicles associated with students. A better balance in the management of the available kerbside spaces can be achieved by restricting three spaces to 60 minutes maximum for the period covering school activity.